



MHSA ANNUAL UPDATE

Fiscal Year 2023-24

WELLNESS • RECOVERY • RESILIENCE

Public Hearing
April 27, 2023



LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
hope. recovery. wellbeing.

Our mission is to optimize the hope, wellbeing and life trajectory of Los Angeles County's most vulnerable through access to care and resources that promote not only independence and personal recovery, but also connectedness and community reintegration.

MHSA Annual Update Presentation Overview

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- Purpose of the Annual Update
 - Overview of MHSA Components
 - MHSA Client Counts and Expenditures
 - Community Planning Process
 - MHSA Proposal Process
 - Proposed Changes
 - Next Steps and Timeline

MENTAL HEALTH SERVICES ACT AND THE PURPOSE OF THE ANNUAL UPDATE

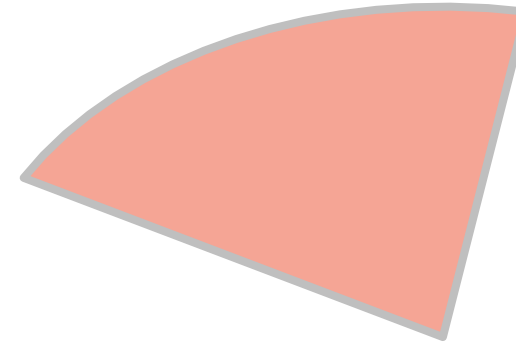


- In November 2004, California voters supported Proposition 63 and passed the Mental Health Services Act (MHSA) that imposes a 1% income tax on personal income in excess of \$1 million.
- The Act provides the significant funding to expand, improve and transform public mental health systems to improve the quality of life for individuals living with a mental illness.
- Welfare and Institutions Code (WIC) Section 5847 requires county mental health programs prepare and submit a Three-Year Program and Expenditure Plan followed by Annual Plan Updates for MHSA programs and expenditures.
- The Plan provides an opportunity for counties to
 - Review its existing MHSA programs and services to evaluate their effectiveness; and
 - Propose and incorporate any new programs from what was described in the MHSA Three-Year Program and Expenditure Plan
- It is through this Community Planning Process that important feedback is gathered from stakeholders.
- The MHSA Three-Year Plan for Fiscal Years 2021-2024 was adopted by the County Board of Supervisors on June 22, 2021.

FY 2021-22 Final Adopted Budget \$3.034 Billion Funding Sources

Primary Funding Sources:

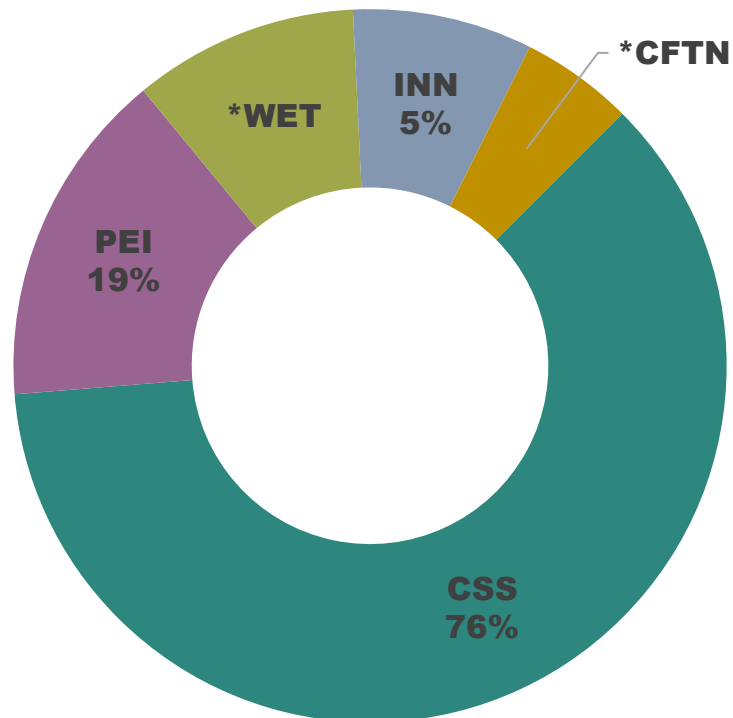
- **45% State and Federal Medi-Cal (\$1.36 Billion)**
Mandated specialty mental health services for eligible clients who meet medical necessity criteria for Medi-Cal
- **26% MHSA (\$801.6 Million)**
Outreach, engagement, prevention, outpatient services, housing, capital, technology, workforce enrichment, and projects for mental health innovations
- **20% Sales Tax Realignment (\$599.5 Million)**
Treatment services mainly in institutional settings, including Probation halls/camps; Short Term Residential Treatment Programs and Community Treatment Facilities for youth and locked mental health treatment beds for adults; and inpatient beds, specialty mental health services to uninsured clients and administration



MHSA OVERVIEW BY COMPONENTS



- CSS, PEI and INN percent of total annual MHSA allocations shown below
- *WET and CFTN allocations are funded by transfers from CSS



COMMUNITY SERVICES AND SUPPORTS (CSS)

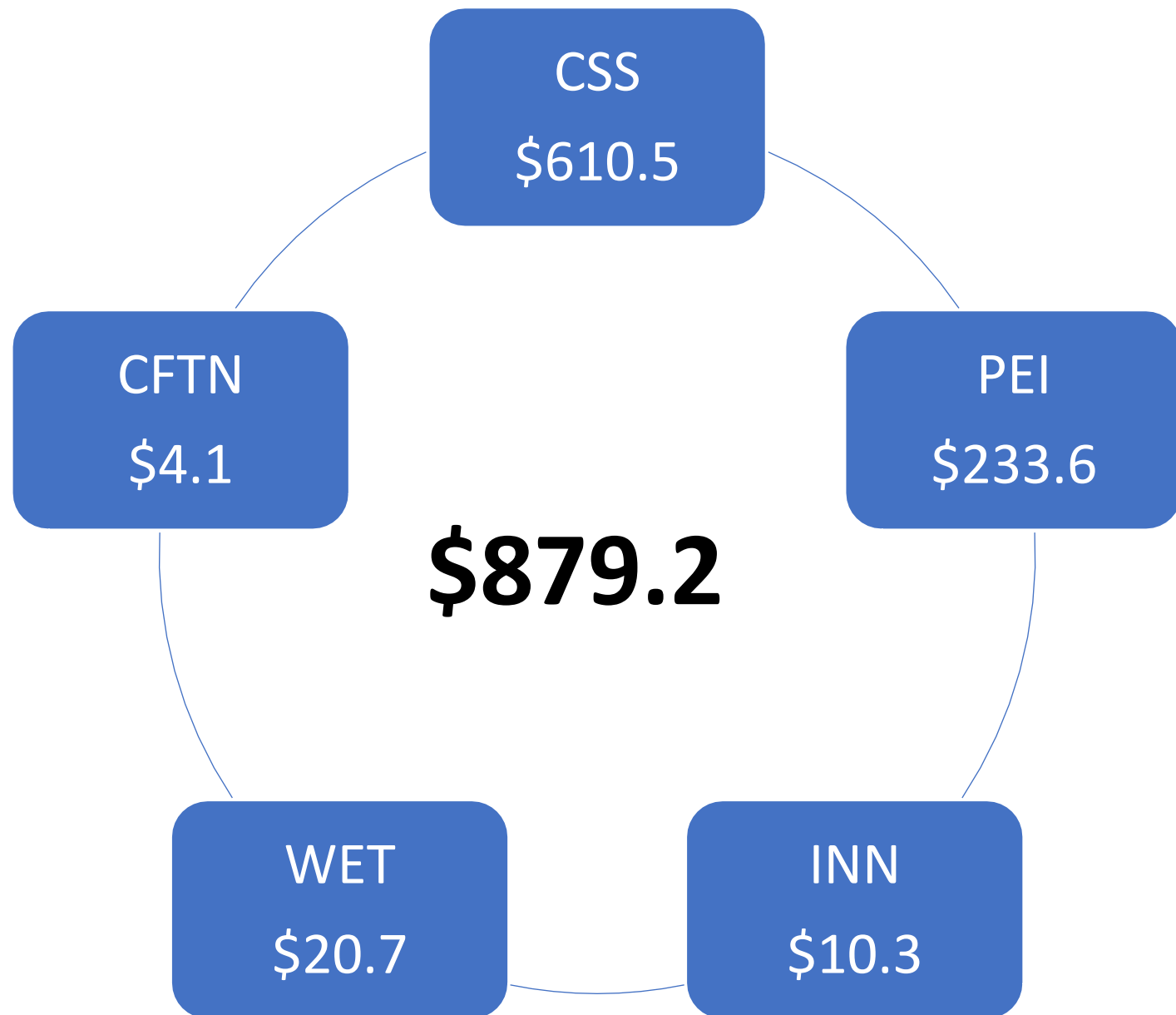
PREVENTION AND EARLY INTERVENTION (PEI)

WORKFORCE EDUCATION AND TRAINING (WET)

INNOVATIONS (INN)

CAPITAL FACILITIES AND TECHNOLOGICAL NEEDS (CFTN)

MHSA
FY 2022-23
BUDGET
(millions)



MHSA CLIENT COUNTS FISCAL YEAR 2021-22

Community Service and Supports (CSS)



- Largest MHSA component with 76% of the total MHSA allocation
- For clients with a diagnosed serious mental illness

CSS PROGRAMS:

- Full Service Partnership
- Outpatient Care Services
- Alternative Services Crisis
- Housing
- Linkage
- Planning, Outreach and Engagement

UNIQUE CLIENTS SERVED

147,143 unique clients received a direct service.

Ethnicity

- 36% Hispanic
- 20% African American
- 17% White
- 4% Asian/Pacific Islander
- 1% Native American

Primary Language

- 80% English
- 13% Spanish

NEW CLIENTS WITH NO PREVIOUS MHSA SERVICE

42,616 new clients were served with no previous MHSA service.

Ethnicity

- 37% Hispanic
- 15% African American
- 15% White
- 3% Asian/Pacific Islander
- 0.38% Native American

Primary Language

- 77% English
- 12% Spanish

CLIENT DATA BY SERVICE AREA

Service Area	Number of Clients Served	Number of New Clients
SA1 – Antelope Valley	10,969	2,852
SA2 – San Fernando Valley	21,809	5,574
SA3 – San Gabriel Valley	20,681	6,945
SA4 – Metro	29,471	8,331
SA5 – West	9,699	2,818
SA6 – South	26,269	6,159
SA7 – East	13,027	2,994
SA8 – South Bay	30,117	8,664

MHSA EXPENDITURES & ESTIMATES – APRIL 2023

Community Services and Supports (CSS)

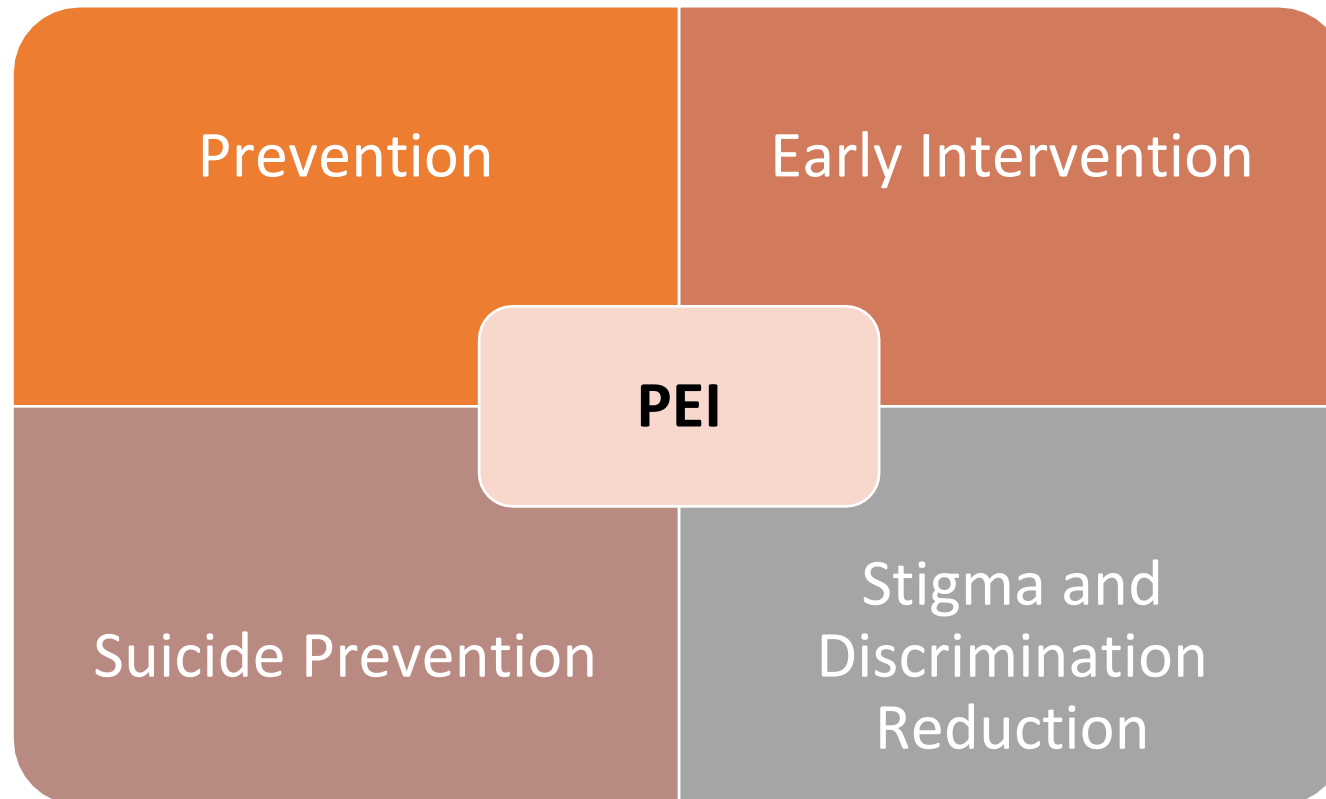
Program	FY 2023-24 Estimated Gross Expenditures	FY 2022-23 Estimated Gross Expenditures	FY 2021-22 Total Gross Expenditures
Full Service Partnership	\$163,545,000	\$115,915,000	\$95,397,000
Outpatient Care Services	\$234,019,000	\$192,090,000	\$182,950,000
Alternative Crisis Services	\$132,177,000	\$138,993,000	\$132,069,000
Housing	\$69,147,000	\$45,289,000	\$40,593,000
Linkage	\$50,878,000	\$44,479,000	\$34,545,000
Planning, Outreach, and Engagement	\$16,970,000	\$4,485,000	\$6,178,000
Grand Total	\$666,736,000	\$541,224,000	\$491,732,000

PREVENTION AND EARLY INTERVENTION (PEI)

Components



- Second largest MHSa component with 19% of the total MHSa allocation
- Focus on providing preventative and early intervention strategies, education, support and outreach to those at risk of developing mental illness or experiencing early symptoms.



PREVENTION AND EARLY INTERVENTION PROGRAMS

Prevention Services



Prevention activities and services are geared toward addressing, through awareness, education, training, outreach and/or navigation, the risk factors associated with the onset of mental illness or emotional disturbances, including a focus on enhancing protective factors such as social connectedness and support.

FISCAL YEAR 2021-22 PREVENTION SERVICES:

Community Partnership Programs	Number of Clients Surveyed
Antelope Valley Community Family Resource Centers (AV-CFRC)	83
Friends of the Children LA (FOTC-LA)	48
Incubation Academy	13,836
Los Angeles Unified School District (LAUSD)	32,841
My Health LA Behavioral Health Expansion Program	28,593
Nurse Family Partnership	149
Prevention and Aftercare	1,049
Prevent Homelessness Promote Health (PH ²)	171
Veterans Peer Access Network (VPAN)	15,824
Strategies for Enhancing Early Developmental Success (SEEDS) Trauma-Informed Care for Infants & Toddlers	317

PREVENTION AND EARLY INTERVENTION PROGRAMS

Early Intervention Services



Directed toward individuals and families for whom a short (usually less than one year), relatively low-intensity intervention is appropriate to measurably improve mental health problems and avoid the need for more extensive mental health treatment.

MHSA DIRECT SERVICE CLIENT COUNTS, FISCAL YEAR 2021-22:

UNIQUE CLIENTS SERVED

35,330 unique clients received a direct service.

Ethnicity

- 47% Hispanic
- 8% African American
- 9% White
- 1% Asian/Pacific Islander
- 0.29% Native American

Primary Language

- 76% English
- 21% Spanish

NEW CLIENTS WITH NO PREVIOUS MHSA

17,084 new clients were served with no previous MHSA service

Ethnicity

- 42% Hispanic
- 8% African American
- 9% White
- 2% Asian/Pacific Islander
- 0.64% Native American

Primary Language

- 75% English
- 21% Spanish

CLIENT DATA BY SERVICE AREA

Service Area	Number of Clients Served	Number of New Clients
SA1 – Antelope Valley	2,006	1,203
SA2 – San Fernando Valley	5,565	2,465
SA3 – San Gabriel Valley	5,968	3,225
SA4 – Metro	5,399	2,997
SA5 – West	1,280	739
SA6 – South	3,668	1,964
SA7 – East	4,501	2,303
SA8 – South Bay	6,202	3,078

PREVENTION AND EARLY INTERVENTION PROGRAMS

Suicide Prevention



The Suicide Prevention program provides services through multiple strategies by strengthening the capacity of existing community resources and creating new collaborative and comprehensive efforts at the individual, family, and community level.

FISCAL YEAR 2021-22 SUICIDE PREVENTION DATA AND OUTCOMES:

- The 24/7 Suicide Prevention Crisis Line responded to a total of **145,254 calls, chats, and texts** originating from Los Angeles County, including Spanish-language crisis hotline services to **13,087 callers**.
- Los Angeles County received **1,309 surveys** from its Suicide Prevention training and education services.

PREVENTION AND EARLY INTERVENTION PROGRAMS

Stigma and Discrimination Reduction (SDR)



The purpose of SDR is to reduce and eliminate barriers that prevent people from utilizing mental health services by prioritizing information and knowledge on early signs and symptoms of mental illness through client-focused, family support and education and community advocacy strategies. Los Angeles County's Department of Mental Health has implemented Stigma Discrimination Reduction (SDR) programs in the form of training and education.

FISCAL YEAR 2021-22 SDR DATA AND OUTCOMES: **16,572 SURVEYS**

COLLECTED

- The majority of participants agreed the training had a positive influence, with a high of 93% agreeing/strongly agreeing with the statement: "As a direct result of this training I am more willing to seek support from a mental health professional if I thought I needed it."
- Results showed the trainings had a positive influence, with a high of 87% agreeing/strongly agreeing with the statement: "anyone can have a mental health condition"
- A high of 97% agreed/strongly agreed with the statement: "The presenters demonstrated knowledge of the subject matter."
- A high of 97% agreed/strongly agreeing with the statement: "The presenters were respectful of my culture (i.e., race, ethnicity, gender, religion, etc.)."

MHSA EXPENDITURES & ESTIMATES – APRIL 2023

Prevention and Early *Intervention* (PEI)

Program	FY 2023-24 Estimated Gross Expenditures	FY 2022-23 Estimated Gross Expenditures	FY 2021-22 Total Gross Expenditures
Early Intervention	\$106,479,000	\$34,218,000	\$28,379,000
Prevention	\$132,105,000	\$85,010,000	\$63,021,000
Stigma and Discrimination	\$81,836,000	\$21,301,000	\$6,940,000
Suicide Prevention	\$6,146,000	\$5,682,000	\$5,638,000
Grand Total	\$326,566,000	\$146,211,000	\$103,978,000

COMMUNITY PLANNING PROCESS

Stakeholder Process

September 2022

- LACDMH held a two-day retreat (9/23/22 and 9/30/22) to revitalize its Community Planning Process and strengthen its collaborative relationships with stakeholders from the most vulnerable unserved, underserved, and under-represented populations across the County.
- Participants had an opportunity to examine the past stakeholder engagement processes and outcomes and acknowledge what worked well, what has not worked and identify what is needed in the future to create and sustain a strong collaborative relationship necessary for LACDMH to deliver effective and culturally congruent programs and services under MHSA.

November 2022

- LACDMH met with community stakeholders (11/1/22, 11/17/22, 11/18/22) and presented proposed timelines and processes for meaningful engagement and input on the review of MHSA funding requests for the Mid-Year Adjustment, the upcoming FY 2023-24 MHSA Annual Plan update and the MHSA Two Year Program and Expenditure Plan for FYs 2024-25 through 2025-26.

COMMUNITY PLANNING PROCESS

Stakeholder Process

December 2022

- LACDMH met with community stakeholders (12/22/22) and presented proposed timelines and processes for meaningful engagement and input on the review of MHSA funding requests for the Mid-Year Adjustment

January 2023

- LACDMH conducted an annual MHSA foundational training (1/2/23) to LACDMH staff, provider network staff, and community stakeholders on MHSA policies, the Department's MHSA funding request procedure, the MHSA Three Year Program and Expenditure and Annual Update development and submission process and timeline, and the client resolution process.
- LACDMH conducted two community stakeholder meetings (1/23/23, 1/31/23) focused on education participants on MHSA funding components, requirements and spending regulations.

February 2023

- LACDMH conducted two community stakeholder meetings (2/17/23, 2/21/23) focused on reviewing DMH and stakeholder proposals to be considered for inclusion in the FY 2023-24 MHSA Annual Update and building consensus on which proposals presented in January and February meetings would receive final stakeholder recommendation for inclusion in the Plan.

COMMUNITY PLANNING PROCESS

Stakeholder Process

March 2023

- LACDMH delivered a Provider MHSA 101 Training (3/23/23).
- LACDMH initiated a 30-day public review and comment period for its FY 2023-24 MHSA Annual Update(3/24/23).
- LACDMH conducted a community stakeholder meeting (3/30/23)with the objective of reviewing the draft FY 2023-24 MHSA Annual Update. Stakeholders received a presentation about all items included in the Update.

April 2023

- LACDMH 4/24/23-Completion of the 30-day public posting and comment period and collection of submitted feedback for inclusion in the draft Annual Update
- 4/27/23 (Today)-The Mental Health Commission will hold a public hearing to provide feedback and recommendations for revisions, if any.

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES:

- 1. The Commission and Stakeholders requested reporting on overall system budget, recruitment, and hiring status.**
 - DMH Finance provides and will continue to provide a quarterly update on the overall budget for the entire Department, including all funding streams.
The last update was provided at the Stakeholder community planning meeting on 01/23/23 (see overall DMH budget on Slide 17.
 - The Department will continue to explore strategies to provide budget expenditure by service area and supervisorial district and strategies for allocating funding based on an equity lens and unmet needs
 - Funding for all MHSA components was also reported on 01/23/23 and is reflected on Slide 18.
 - The DMH Director provides and will continue to provide a quarterly update on recruitment and hiring efforts to address the workforce shortage and collaboration with labor unions.

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES (cont.):

- 2. The Commission requested regular reporting, and side by side comparison of budget allocations, service utilization and trends, and funding utilization prior to, during and following the COVID pandemic. The comparison was requested to be reflected by geographic area, ethnic populations, and age group.**
 - *DMH has currently developed a data dashboard that provides service utilization data collected by fiscal year, geographic area, ethnic population and age groups. This data, along with budget allocation information will be used to create the side by side assessment for the pre, during and post COVID fiscal years. This data will be shared and incorporated into a community needs assessment to support the Community Planning Process with the Commission and stakeholders for the development of the upcoming Two-Year Program and Expenditure Plan.*

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES (cont.):

3. The Commission and Stakeholders requested updates on data and outcomes reporting:

- *DMH has developed a data dashboard that provides service utilization data collected by fiscal year, geographic area, ethnic population and age groups. It will be used to review services to specific target populations, including unserved and underserved ethnic populations, primary language, and gender to address service gaps and recommend service priorities for the upcoming Two-Year Plan Community Planning Process, as requested. This dashboard will also provide a more detailed breakout of race/ethnicity data to ensure representation for unserved or underserved cultural communities.*
- *DMH convened a Data Disparities Workgroup with the goal of focusing on underserved and unserved ethnic population data. Using the Anti-Racism Diversity and Inclusion (ARDI) equity mapping tool and service utilization data, this workgroup will be tasked with monitoring service equity metrics to inform program planning and monitoring for program improvements.*
- *Specific to the draft Annual Update, the client count data by ethnicity on slide 7 does not balance. The reason for this is the report only reflects client counts for the top 5 ethnicities. In addition, due to client choice or intake circumstances, the ethnicity for a large group of clients is not reported either. DMH is taking steps to improve reporting of ethnicity data.*
- *DMH reports on program outcomes and performance in the draft Annual Update. Program outcomes will be discussed as part of the upcoming Community Planning Process.*

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES (cont.):

4. The Commission and Stakeholders requested specific responses to items reflected in the draft Annual Update

- *DMH will add information on program expansion in the finalized draft of the Annual Update prior to Board review and hearing. Program expansions to be reflected in the Update are listed in this presentation. (Slides 39-40)*
- *Slide 11 on the draft Annual Update PowerPoint was reported as incorrect in the presentation to Mental Health Commission Executive Committee. The dates reflected in the slide were in fact accurate and will be reviewed during today's public hearing (4/27/23).*
- *In response to the inquiry on the expansion of Portland Identification and Early Referral (PIER) Program: The expansion adds new funding for PIER services in Service Areas 1 and 8 and increases the presence of PIER services in Service Area 6.*
- *In response to the inquiry of when Innovations proposals will be reviewed and considered for Board and State approval: Submitted Innovations proposals will undergo the review process during the upcoming Two-Year Plan Planning Process, pending available Innovations funding.*

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES (cont.):

5. The Commission and Stakeholders requested responses to other questions/concerns:

- *In response to the Commission's inquiry, when will the summary/overview outlining the shift of the May Mental Health Month campaign from We Rise to Take Action be provided: The summary/overview of the shift will be reflected in the upcoming Two-Year Plan.*

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES (cont.):

6. The Commission and Stakeholders requested updates on the Community Planning Process going forward:

- *The upcoming Community Planning Process will involve an expansion of stakeholder involvement to ensure greater participation of a more diverse group of stakeholders across LA County communities that is representative of peers and family members, ethnic/cultural populations, geographic areas, community based organizations, other county departments and stakeholders at large. The Community Planning Process will begin late May/early June 2023 and will begin with MHSA 101 training, stakeholder foundational training and a data and community needs assessment toward development of the Three-Year Plan.*
- *In response to the inquiry will the Mental Health Commission be considered a stakeholder group and be included earlier in the Community Planning Process and the MHSA Funding Request/Proposal submission and stakeholder process on behalf of the Board of Supervisors: Yes. The Mental Health Commission will be notified of the Community Planning Process and timelines for comment, feedback and for submission of MHSA Funding Proposal on behalf of the Board offices. The Mental Health Commission has a unique formal role as part of the Community Planning Process and holds the responsibility to ensure stakeholder voices are included in the process, while providing input in the process on behalf of the Board of Supervisors. DMH shared information with the Mental Health Commission during the Community Planning Process for the draft Annual Update in Fall 2022 in preparation for stakeholder engagement meetings. DMH will continue to share the process going forward.*

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES (cont.):

7. The Commission and Stakeholders requested updates and clarification on the MHSA Funding Request/Proposal Process

Responses to inquiries regarding the MHSA Funding Request/Proposal Process are listed below:

How do stakeholders and community members submit proposals?

- *Requests/Proposal can be submitted 24 hours a day/7 days per week through the MHSA Funding Request Portal using online electronic forms. CSS, PEI, WET funding requests should be submitted using the form located at: <https://forms.office.com/g/hFe6wc9LA2>. Innovation funding requests should be submitted using the form found at <https://forms.office.com/g/77BRkSWzUe>. Both portals will be available to receive new proposals for the upcoming Two-Year Planning process from mid May 2023 through January 15, 2024.*

How are proposers notified of the review, approval or rejection status of their submissions?

- *Proposers are informed of the status of their submission via a phone call or through an email.*

Can the source of proposals be shared/released?

- *Yes. The source of proposals (e.g. CBOs, County Entities, or Community Stakeholders) can be made available upon request and are also posted publicly on the DMH MHSA page.*

COMMUNITY PLANNING PROCESS

Stakeholder Process



STAKEHOLDER FEEDBACK THEMES, QUESTIONS AND RESPONSES (cont.):

8. The Commission and Stakeholders requested updates and clarification on the MHSA Funding Request/Proposal Process

Can the amount requested by proposers be shared?

- *Yes. The amount requested for proposals was shared with stakeholders during the Community Planning Process. This information is also available upon request. Amounts requested are estimated amounts and may change upon approval and during implementation based on actual confirmed costs and funded activities included in the proposal.*

Can the information on proposed target populations and geographic areas to be served be shared?

- *Yes. This information was shared with stakeholders during Community Planning Process. Upon Board approval and prior to actual implementation, the MHSA Administration Unit will consult with proposer to confirm proposed target populations and geographic areas. An analysis of each approved proposal will be conducted to ensure equity concerns and considerations are addressed and funding allocations support unmet needs for communities countywide.*

FORMAL PROCESS FOR REQUESTING MHSA FUNDING

1 MHSA Funding Request Submission	2 MHSA Admin Review (7-60 days)	3 Stakeholder Review & Recommendation (90 days)	4 DMH Executive Review & Approval (60 days)	5 Public Comment, Posting, & Hearing (30 days)	5 Board and OAC Approval (90 days)
<p>All requests for MHSA funding are submitted through the DMH portal.</p> <p>Submissions are categorized into the following three types:</p> <ul style="list-style-type: none"> • A new mental health program • A change/expansion to an existing MHSA mental health program • Request for additional funding for a legal entity 	<p>Submissions are initially reviewed by MHSA Administration to ensure MHSA regulation compliance and to verify all critical information pertaining to target populations, outcomes, etc. has been included.</p> <p>Submissions meeting MHSA regs are queued for Stakeholder Review and those that don't are forwarded to Financial Services Bureau to determine other potential funding sources.</p>	<p>MHSA Administration approved submissions are presented to Stakeholders to collect feedback.</p> <p>Feedback is reviewed and any changes deemed necessary are made to the proposal.</p>	<p>Approved, funded submissions are included in a 30 day Public Comment Posting.</p> <p>Submissions that are approved but not funding is available for are documented as an Unmet Need</p>	<p>All DMH approved submissions are included in a draft Three Year Plan, Annual Update or Mid Year Adjustment which is posted on the MHSA public facing website for 30 days for public viewing and comment.</p> <p>Upon completion of 30 day posting, any changes based on feedback are made, and a Mental Health Commission Public Hearing is held.</p>	<p>Final draft of the Three Year Plan and Annual Update is submitted to LA County Board of Supervisors for approval.</p> <p>Upon Board approval, Three Year Plan and Annual Update is submitted to the MHSA Oversight and Accountability Commission.</p>

MHSA Project Proposal Form link:

<https://forms.office.com/g/hFe6wc9LA2>

<https://forms.office.com/g/77BRkSWzUe>

PROPOSED CHANGES

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

Community Family Resource Center (CFRC)

Target Population: All Age Groups and Populations - Families

The CFRC is designed to create a coordinated, community owned and driven space where families and individuals can easily access the services they need to enhance their wellbeing. The CFRCs will create partnerships with trusted networks of care, individual community leaders, CBOs, and public and private entities to leverage the strengths and capacities of each to best respond to the needs of individuals and families in the community it serves.

Community Schools Initiative (CSI)

Target Population: Middle school and high school youth

CSI serves 15 high schools that serve as hubs for a range of support services for students, families, and school staff. The program provides each site with a Community Schools Specialist to assist with coordinating services and Educational Community Worker to support parent engagement. Services focus on prevention, helping caregivers and students access a variety of services to prevent stress and possible mental health concerns.

United Mental Health Promoters Network

Target Population: Underserved Cultural Populations

The Mental Health Promoters Network project is a community outreach effort, serving to strengthen communities and create career paths for those community members functioning under the umbrella of Mental Health Promoters.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

Friends of the Children (FOTC) - Los Angeles

Target Population: Children and youth under 18, starting at 4-6 years old

FOTC aims to prevent foster care entry and improve family stability and wellbeing for families identified by DCFS as being at highest risk of entering foster care. FOTC provides professional 1:1 mentorship to children for 12+ years; starting around the age of 4-6 years old. Mentors are trained to support caregivers, promote self-advocacy and create opportunities for culturally responsive community and peer-to-peer connections.

Medical Legal Services

Target Population: All Age Groups

Addresses clients' legal problems and increases awareness of their rights to which lessens undue stress and empowers them with the information. These legal services can eliminate barriers to sustaining stable income through employment

Home Visitation: Deepening Connections and Enhancing Services

Target Population: Parents and Caregivers with Children 0-to-5 Years Old

Healthy Families America (HFA) and Parents as Teachers (PAT) are evidence-based, research-proven, national home visiting programs that gather family information to tailor services to the whole family. The programs offer home visits delivered weekly or every two weeks to promote positive parent-child relationships and healthy attachment. This Home Visiting Program will prioritize areas where data indicates there is a high number of families involved with child protective services.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

New Parent Engagement: Welcome to the Library and the World

Target Population: New Parents and Caregivers

Public Libraries and DHS Women's Health will offer a Welcome to the Library and the World kit which will include information on the library Smart Start Early Literacy programs and services. The program will be offered at 45 locations twice a year, and through a virtual program every quarter.

Our SPOT Teen Program: Social Places & Opportunities for Teens After-School Program

Target Population: Children and Youth under 18

Our SPOT: Social Places and Opportunities for Teens is a comprehensive after-school teen program aimed at engaging and providing community youth with the support, life-skills and positive experiences that will empower them to create bright futures for themselves.

We Rise Parks at Sunset

Target Population: 24 years old and below - Families

We Rise a prevention program which creates access to self-care programming in 58 LA County parks and is offered during mental health awareness month. It provides repeated opportunities to access resources and information on mental health support including free mental well-being workshops.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

Parks after Dark Parks at Sunset

Target Population: 24 years old and below - Families

Designed for families and adults to participate in workshops and classes promoting self-care and healing, three evenings a week over 8-weeks. Activities include sports, fitness, arts and culture, movies and concerts and more.

DPR Safe Passages: Community Engagement and Safe Passages for Youth and Communities

Target Population: Children and Youth under 18

DPR Safe Passages Initiative utilizes trained gang interventionists and ambassadors to implement peace maintenance among gang neighborhoods to ensure safety to and from parks, and during park activities and provide crisis intervention services at the parks.

Triple P Parent/Caregiver Engagement

Target Population: Parents and Caregivers

Triple P is an effective evidence-based practice that gives parents and caregivers with simple and practical strategies to help them build strong, healthy relationships, confidently manage their children's behavior and prevent problems developing.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

Patient Health Navigation Services

Target Population: All Age Groups

This proposal will augment existing Patient Health Navigation Services by adding mental health prevention focused services, including assessment, referral and linkage to community supports and education that increase protective factors for individuals at-risk of a mental illness.

School Readiness

Target Population: 2 to 4 Year Old (Toddlers to Preschoolers)

An early literacy program designed for toddlers and preschoolers to help empower parents and guardians in supporting the education needs of their children. While enjoying books, songs, rhymes and fun, kids build early literacy skills, basic math skills, and social skills, and other essential school readiness competencies.

Creative Wellbeing: Arts, Schools, and Resilience

Target Population: 24 years old and Caregivers

A non-traditional, arts and culture-based approach for promoting mental health in young people and caregivers. The model offers non-traditional strategies for promoting mental health and wellness that include culturally relevant, healing-centered, arts-based workshops for youth, as well as professional development, coaching, and emotional support for the adults who work with them. Project activities support positive cognitive, social, and emotional development, and encourage a state of wellbeing.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

Abundant Birth Project

Target Population: Pregnant People and Parents with Children 0-18 Months Old

This program is a private-public partnership that seeks to provide support to a minimum of 400 pregnant people in LA County from marginalized populations most likely to experience the worst birth outcomes with a variety of supports for 18 months (i.e. mental health, financial coaching, wellness supports, housing assistance, education, etc. This would be a randomized control study to evaluate the effects of this type of support.

Credible Messenger Mentoring Model

Target Population: Transition Age Youth 18-25

This program consists of mentoring by peer youth to increase access to resources and services for young people of color disproportionately negatively impacted by traditional systems and services. Services are targeted to Youth 18-25 and include training of messenger peers, needs assessment of mentors, 1:1 mentorship by youth with lived experience, group activities, crisis intervention, family engagement, referral and resource linkage.

Youth Development Regions

Target Population: Transition Age Youth 18-25

This program will support youth by providing and/or referring to a range of youth development services based on an assessment of individual strengths, interests, and needs. The target population is youth 18-25 and is projected to serve approximately 6,500 youths annually. Services are provided through contracted CBOs and referral and linkage and will include school engagement, conflict resolution training, mentoring/peer support, educational support, employment/career services, arts/creative expression and social/emotional wellbeing resources.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



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A Local Approach to Preventing Homelessness

Target Population: Young adults exiting foster care and at risk for homelessness

The Long Beach Department of Health and Human Services will convene local partners to identify gaps in homeless prevention services and develop interventions strategies addressing short term housing, mobile and clinic services and supportive transition programs for young adults exiting the foster care system.

Laugh Therapy & Gratitude

Target Population: Older Adults - Latino

Enlighten the public on therapeutic alternatives that don't necessarily require the use of drugs to improve one's state of mind and the importance of embracing emotions rather than masking them.

Older Latino Adults & Caregivers

Target Population: Older Adults - Latino

Create opportunities for elderly Latino immigrants to prosper and grow independent by teaching them not fear technology but rather, use it as a helpful tool to stay connected to loved ones, learn new things, find entertainment, and use it as a tool for self improvement.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



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Search to Involve Pilipino Americans (SIPA)

Target Population: Youth

Provide strength based, youth-centered mental health support services to youth and underserved individuals in SPA 4, with a focus on Historic Filipinotown and adjacent areas

K-Mental Health Awareness & K-Hotline

Target Population: All Ager Groups - Korean

Seeks to normalize mental illness and treatment in the Korean community so individuals will seek therapy and services without shame or hesitation.

FosterALL WPW ReParenting Program

Target Population: Adults and Children Involved with Foster Care System

FosterAll's Wisdom Path Way Program addresses both the adults and children in foster care and provides positive outcomes to prevent additional trauma, stress and mental illness for both adults and children.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



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Cultural Reflections Newsletter

Target Population: LACDMH Consumers

Provide opportunities for peer produced mental health related content to be developed and shared throughout the County.

Hope & Healing: Mental Health Wellness Support to Victim Families & Relatives

Target Population: African American families who have suffered loss due to violence

Bring Faith and Mental Wellness together to normalize the conversation and consciousness of families to seek mental health services and eliminate common stigmas preventing many traumatized persons from getting the help they need.

TransPower Project

Target Population: Youth Trans* Population

Increase access and remove treatment barriers such as lack of resources, transportation needs and privacy concerns by offering specialized affirmative mental health services at no cost.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

Open Arms Community Health & Service Center

Target Population: All Age Groups

Provide quality health care, mental health support, housing, case management, employment referrals and supportive services such as food, clothing, hygiene kits, transportation anger management, substance use, sex trafficking, and parenting classes.

Consumer Empowerment Network

Target Population: LACDMH Consumers

Educate LACDMH consumers on the history of MHSA, the role of LACDMH consumers and consumers from through the state, components and required processes, county, and state stakeholder events and opportunities to make public comments, recommendations, and legislative process.

Innovation 2/Prevention and Early Intervention

Target Population: Transition Age Youth within Deaf, BIPOC, Disabled, LGBTQIA2S and Asian Pacific Islander communities

To help build trauma-informed communities and resilient families through Community Resource Specialists (CRSs) who work in-home with families to ensure that food, medical or housing crises don't destabilize families

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



Projects/concepts below were proposed by Stakeholders and other County Departments during the Stakeholder process from October 2022 through February 23, 2023. LACDMH is committed to working with proposers to finalize project details, budget and the ability to implement the program.

Mental Health Services for the Deaf & Hard of Hearing

Target Population: All Age Groups - Deaf & Hard of Hearing

Provide American Sign Language (ASL) interpreters who can translate mental health terms and concepts accurately and effectively to deaf and hard of hearing people.

Steven A. Cohen Military Family Clinic at VVSD, Los Angeles

Target Population: Veterans and Their Families

The Cohen Clinic offers personalized, evidence-based mental health care along with outreach and timely access to comprehensive case management support and referrals to address early intervention and suicide prevention, unemployment, finances, housing, and legal issues.

DBT Expansion

Target Population: Targets Workforce for All LACDMH Consumers

This project would provide support for the clinic's DBT program by providing dedicated funding for medical staff, direct therapy services staff, peer workers/support staff, and management/supervision staff to have paid time to be trained on DBT certification, practices, and implementation.

PROPOSED CHANGES (continued)

FISCAL YEAR 2023-24



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EXPANSION

FISCAL YEAR 2023-24



Programs below are existing MHSA programs previously approved by Stakeholders set to expand in Fiscal Year 2023-24.

Portland Identification and Early Referral Program (PIER)

PEI: Prevention

This will expand the number of sites and areas of availability of the program to SA 1 and 8, and expand services in SA 6. PIER is a Coordinated Specialty Care program for adolescents and young adults, ages 12-25 who are either at Clinical High Risk for psychosis or have had their first psychotic episode. Currently, referrals from ELAC STAND (UCLA) , NAMI Urban LA, schools and various outpatient programs are exceeding the capacity of the current service level.

Homeless Outreach and Mobile Engagement (HOME)

CSS: Planning Outreach and Engagement

The HOME program provides field-based outreach, engagement, support, and treatment to individuals with severe and persistent mental illness who are experiencing unsheltered homelessness.

The expansion will include a total of 94 full time positions, (6 new multidisciplinary teams and 1 Service Area Navigation team) will be added between FY 2022-23 and FY 2023-24. The expansion will bring a total number of 16 multidisciplinary teams Countywide and 1 Service Navigation team.

Crisis Residential Treatment Programs (CRTP)

CSS: Alternative Crisis Services

CRTPs are designed to provide short-term, intensive, and supportive services in a home-like environment through an active social rehabilitation program that is certified by the California Department of Health Services and licensed by the California Department of Social Services, Community Care Licensing Division.

Awarded a new legal entity contract to Bel Aire Health Services to provide services at 2 locations: Downey and Sylmar.

EXPANSION (continued)

FISCAL YEAR 2023-24



Programs below are existing MHSA programs previously approved by Stakeholders set to expand in Fiscal Year 2023-24.

TAY Drop-In Centers

PEI: Prevention
CSS: Outpatient Care Services

TAY Drop-In Centers are intended as entry points to the mental health system for homeless youth or youth in unstable living situations.

A total of 10 new sites will be added Countywide. Service Areas 2, 3, 4, 5, 7 and 8 will each receive one new site. Service Areas 1 and 6 will each receive two.

TAY Enhanced Emergency Shelter Program

CSS: Housing

The Enhanced Emergency Shelter Program (EESP) serves the urgent housing needs of the TAY population, ages 18-25, who are unhoused or at immediate risk with no alternative place to stay, no significant resources or income to pay for shelter, re experiencing mental health concerns, and are willing to accept the treatment we offer.

Additional funding was added to 5 sites.

Full Service Partnership (FSP)

CSS: Full Service Partnership

The expansion will add a total of 66 additional staff to FSP directly operated programs. Some of these additional items will staff two new half teams at Edelman Child and Youth and Valley Coordinated Child Services. Additional staff will help to form FSP teams at Santa Clarita Mental Health, Antelope Valley Mental Health and Arcadia Mental Health. Six FSP teams will also receive additional staff.

NEXT STEPS/TIMELINE



The following timeline outlines next steps to Board adoption of the FY 2023-24 MHSA Annual Update.

May 2023

- LACDMH will receive the Public Hearing feedback and recommendation on the FY 2023-24 Annual Update for inclusion in the final draft to be heard and adopted by the Board of Supervisors (5/15/23).
- LACDMH will initiate a Community Needs Assessment and Recommendation process to inform the Community Planning Process for the upcoming MHSA Two Year Program and Expenditure Plan for FYs 2024-25 through 2025-26.

June 2023

- LACDMH will present the draft FY 2023-24 MHSA Annual Update, including all stakeholder and Mental Health Commission's feedback and responses to the Board of Supervisors review, hearing, and adoption. (6/6/23)
- Adopted FY 2023-24 MHSA Annual Update will be presented to the Mental Health Oversight and Accountability Commission for approval and final execution to continue existing or begin implementation of programs and services within the Update. (6/30/23)



THANK YOU