



WELLNESS • RECOVERY • RESILIENCE

# MHSA Program Updates: Full Service Partnership & Outpatient Care Services

Fiscal Year 2023-24

**Community Planning Team Meeting**

**August 6, 2024**



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.



# PRESENTATION OVERVIEW

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# Full Service Partnership (FSP)

## Community Service and Supports

### Program Description

FSP programs provide a wide array of services and support, guided by a commitment by providers to do “whatever it takes within the resources available to help the highest acuity clients within defined populations make progress on their paths to recovery and wellness.



### Priority Population

- Children (ages 0-15)
- Transition Age Youth (TAY) (ages 16-25)
- Adult (ages 26-59)
- Older Adult (ages 60+)

### Services

FSP services are provided by multi-disciplinary teams of professional and paraprofessional and volunteer providers who have received specialized training preparing them to work effectively with children and young adults (ages 0-20) and adults (ages 21+).

FSP teams provide 24/7 crisis services and develop plans with the client to do whatever it takes within the resources available, and the recovery plan agreed between the client and the FSP provider team to help clients meet individualized recovery, resiliency, and development and/or recovery goals or treatment plan.

FSP teams are responsive and appropriate to the cultural and linguistic needs of the client and their families.

### Clinical Services

- 24/7 Crisis Response Services
- Counseling and Psychotherapy
- Field-Based Services
- Integrated Treatment for Co-Occurring Mental Health and Substance Abuse Disorder
- Case Management to provide linkages to services to employment, education, housing, and physical health care

### Key Activities

### Non-Clinical Services

- Peer and Parent Support Services
- Self-Help and Family Support Groups
- Wellness Centers
- Respite Care



### Intended Outcomes

1. Reduce serious mental health systems, homelessness, incarceration, and hospitalization.
2. Increase independent living and overall quality of life.

# MHSA CLIENT COUNTS FISCAL YEAR 2023-24

## Full Service Partnership (FSP)

### FSP Clients Served



**\*UNIQUE CLIENTS SERVED**

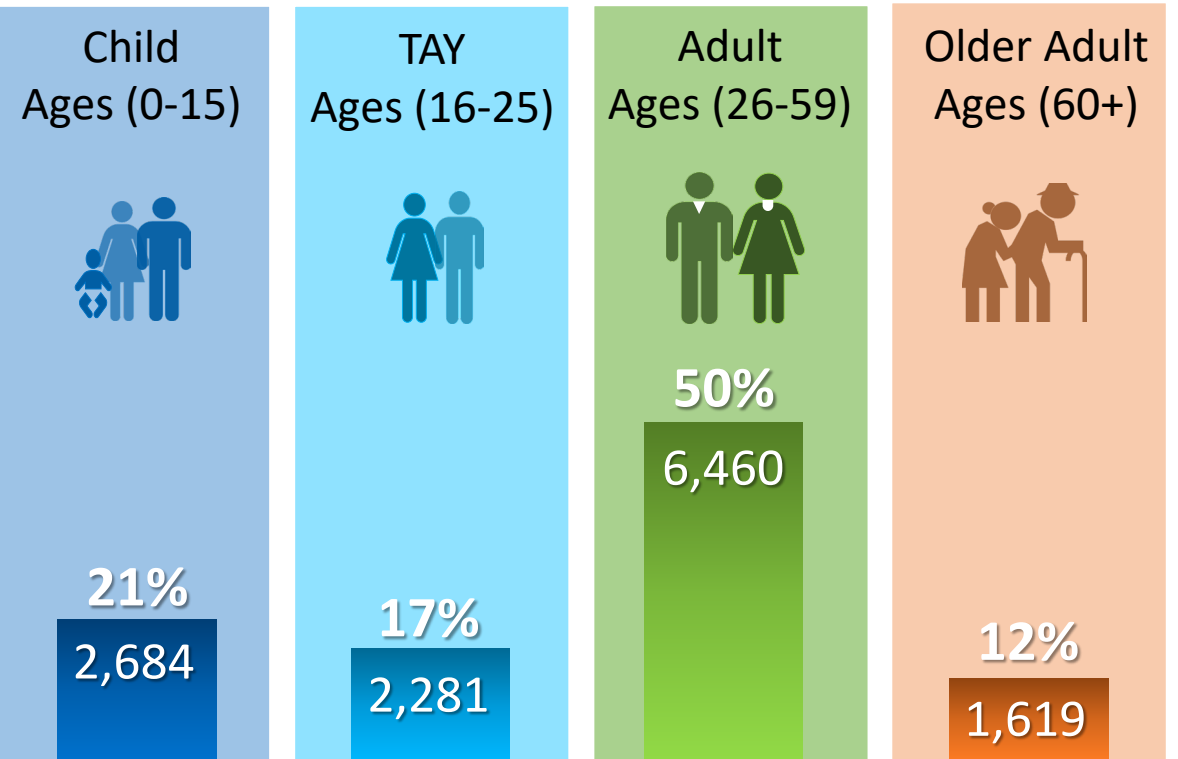
**12,585**  
unique clients received a direct service.



**\*NEW CLIENTS WITH NO PREVIOUS MHSA SERVICE**

**877**  
new clients were served with no previous MHSA service.

### FSP Clients Served by Age Group



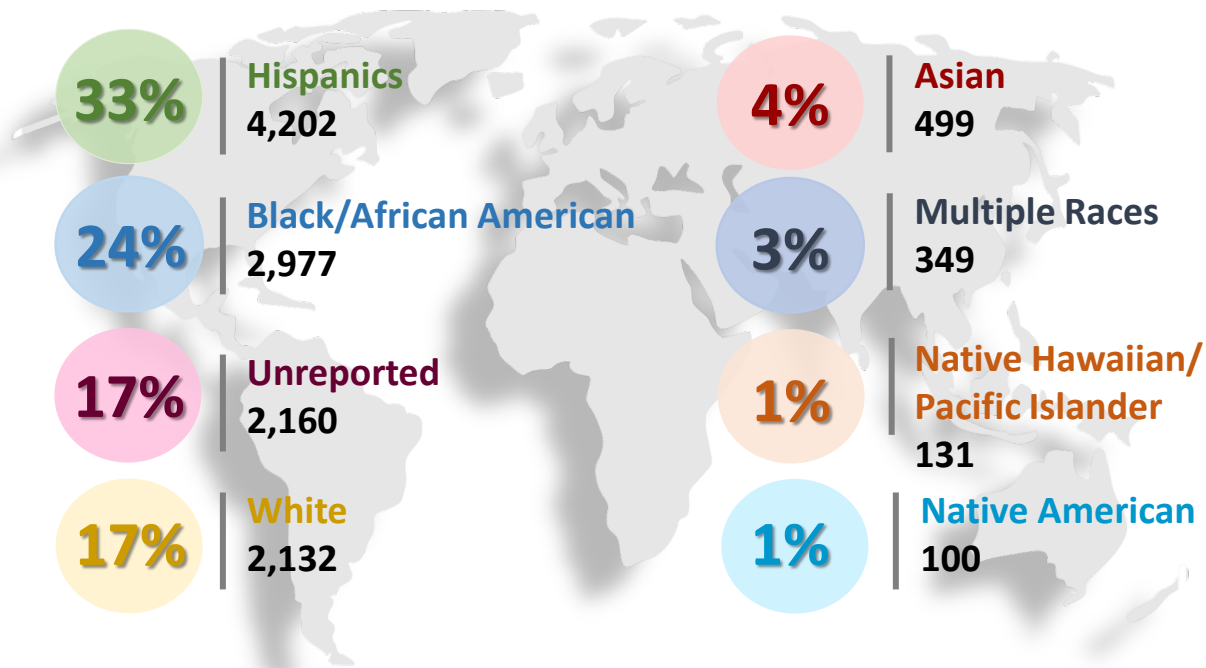
\*New Clients is a subset of Unique Clients Served

\*\*This data was gathered from the MHSA Client Demographic dashboard. Data was last updated on 7/7/24.

# MHSA CLIENT COUNTS FISCAL YEAR 2023-24

## Full Service Partnership (FSP)

### FSP Client Served by Race/Ethnicity Group



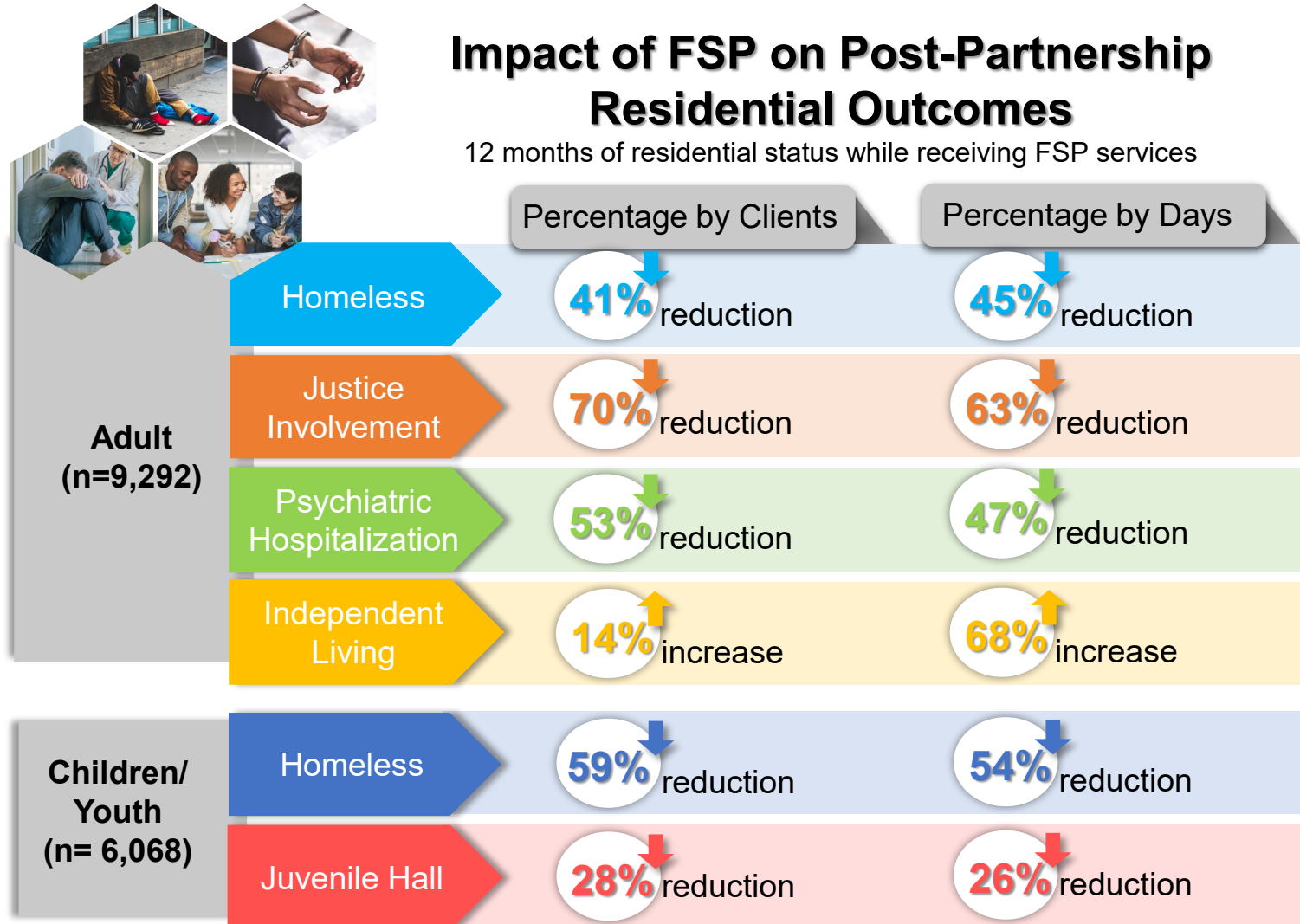
### Number of FSP Client Served by Service Area

Service Area	Number of Clients Served	*Number of New Clients
SA1 – Antelope Valley	858	51
SA2 – San Fernando Valley	1,397	94
SA3 – San Gabriel Valley	1,565	113
SA4 – Metro	2,410	152
SA5 – West	745	38
SA6 – South	2,435	212
SA7 – East	1,444	107
SA8 – South Bay	2,387	159

\*New Clients is a subset of Unique Clients Served

# COMMUNITY SERVICE AND SUPPORTS (CSS)

## Full Service Partnership (FSP) Outcomes

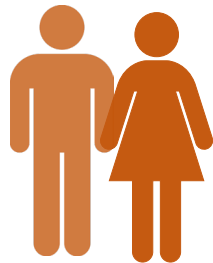


Outcome data for clients with open outcomes in FY 2023-24 with a data cut off of 6/30/2024. Clients had a baseline sometime before 6/30/2023 and no disenrollment Key Event Change before 7/1/23 unless they also had a reestablishment that was active during FY 2023-24. Figures represent cumulative changes, inclusive of all clients served in FY 2023-24.

# COMMUNITY SERVICE AND SUPPORTS (CSS)

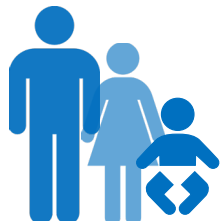
## Full Service Partnership (FSP) Outcomes

### Top 3 FSP Disenrollment Reasons



**Adult**  
(n=1,777)

- 32%** Successfully Met Goals
- 21%** Client decided to discontinue Full Service Partnership participation after Partnership established.
- 17%** After repeated attempts to contact Client, Client cannot be located.



**Child**  
(n=1,597)

- 54%** Successfully Met Goals
- 17%** Client decided to discontinue Full Service Partnership participation after Partnership established.
- 9%** Client moved to another county/service area.

# FULL SERVICE PARTNERSHIP UPDATE

Fiscal Year 22-23



1

During FY 2022-23, FSP prepared for the impact of CalAIM Behavioral Health Payment Reform which became effective as of July 1, 2023.

2

On October 1, 2023, Homeless FSP and the Integrated Mobile Health Team (IMHT) specialized FSP programs were merged with our general Adult FSP program which expanded the capacity to deliver services to our homeless population.

3

In addition, due to new initiatives and projects being implemented in the Fall/Winter of 2023, LACDMH is working to expand the Adult FSP program to account for the number of additional referrals anticipated in specific service areas. The following are three (3) projects that are in the works that would require FSP expansion:

1. Department of Health Services (DHS)- Office of Diversion and Reentry (ODR) Housing Program
2. The Community Assistance, Recovery, and Empowerment (CARE) Court
3. Intensive Care Division (ICD)/FSP Pilot Project



# FULL SERVICE PARTNERSHIP

## Fiscal Year 24-25 and 25-26 Plans



### FSP Programs and Services

As part of the Two-Year Plan, FSP programs and services were developed to provide comprehensive mental health services to clients requiring intensive treatment. Services are provided by a multi-disciplinary team based on a specific number of client slots.

- Adult FSP services aim to help clients who are enrolled in the program increase their ability to function at optimal levels, decrease homelessness and incarcerations, and reduce unnecessary medical and psychiatric urgent care and emergency room visits and hospitalizations.
- The intent of these services is to help clients and/or families increase their ability to function at optimal levels.

### Legal Entity and Adult FSP Re-solicitation

In FY 2024-25, Legal Entity (LE) contracts will be amended to extend contracts through the end of FY 2025-26.

In addition, LACDMH anticipates doing a re-solicitation process for Adult FSP that will align with the requirements set forth by the Department of Health Care Services (DHCS) and the Behavioral Health Transformation (BHT).

### Proposition 1

On March 5, 2024, California voters passed Proposition 1, which will modernize and reform the Mental Health Services Act (MHSA).

This will require counties to provide specific programs:

- Assertive Community Treatment (ACT)
- Forensic Assertive Community Treatment (FACT)
- High Fidelity Wraparound
- Individual Placement and Support (IPS)
- **Lower Levels of FSP**

# OUTPATIENT CARE SERVICES (OCS)

## Community Service and Supports



### Program Description

- OCS provides a broad array of integrated community-based, clinic and/or field-based services in a recovery-focused supportive system of care.
- OCS provides a full continuum of services to all age groups.
- OCS strives to provide culturally sensitive and linguistically appropriate services.



#### **Services Include:**

- Assessments
- Individual and/or Group therapy
- Crisis Intervention
- Case Management
- Housing
- Employment Support
- Peer Support
- Co-Occurring Disorders Treatment, Medication Support Services (MSS) and Medication Assisted Treatment (MAT)

The intensity, location (community/field or office/clinic) and duration of the service(s) depend on the individualized need of each client and will likely change over time.

### Priority Population

- **Child (ages 0-15):** Comprehensive services, specifically ages 0-5
- **Transition Age Youth (TAY) (ages 16-25):** Enhanced Emergency Shelter Program, Supported Employment Individual Placement and Support (SEIPS) and Drop-in Centers
- **Adult (ages 26-59):** Comprehensive services, Peer Run Respite Care Homes and Peer Resource Centers
- **Older Adult (ages 60+):** Geriatric Evaluation Networks Encompassing Services Intervention Support (GENESIS) program

#### Clinical Services

- Individual, Group, and Family Therapy
- Crisis Resolution/Intervention
- Evidence-Based Treatments
- Medication Support Services, including MAT
- Outreach and Engagement
- Co-Occurring Disorder Services
- Screenings and Assessments to determine level of care needs
- Case Management

#### Key Activities

#### Ancillary Services

- Peer Resource Centers
- Peer Support
- Family Education and Support Linkage to various resources housing services
- Vocational and Pre-Vocational Services

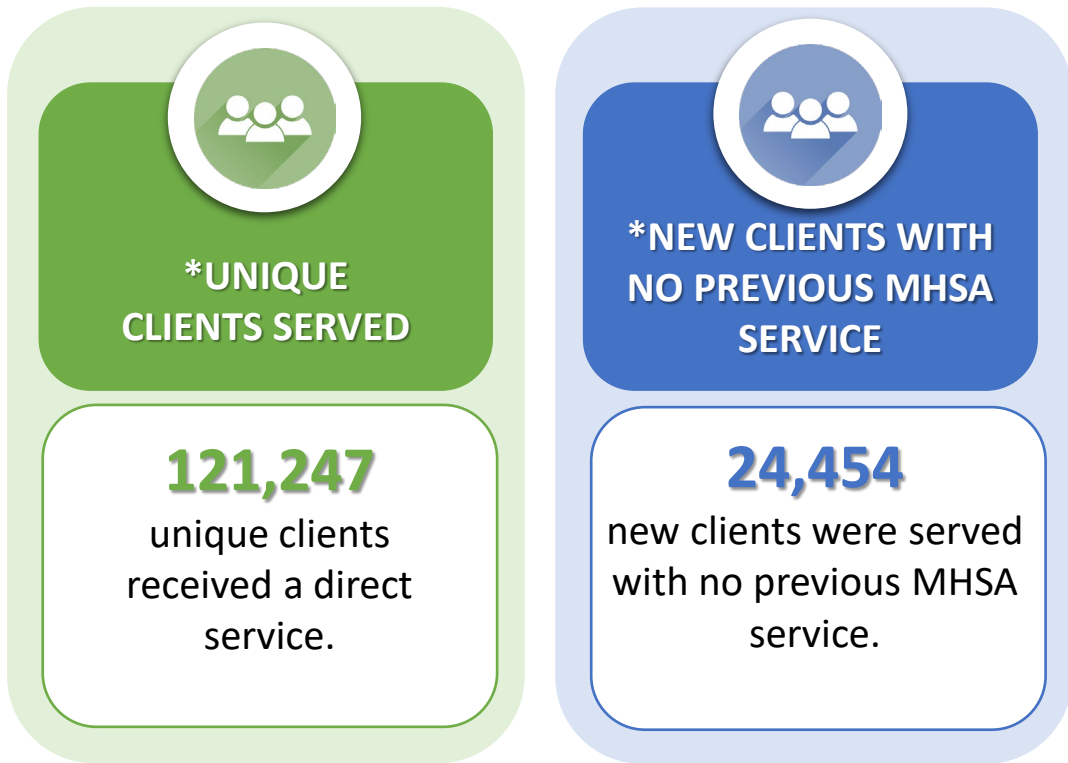


The primary goal of OCS is to engage individuals in active participation in their treatment journey toward recovery.

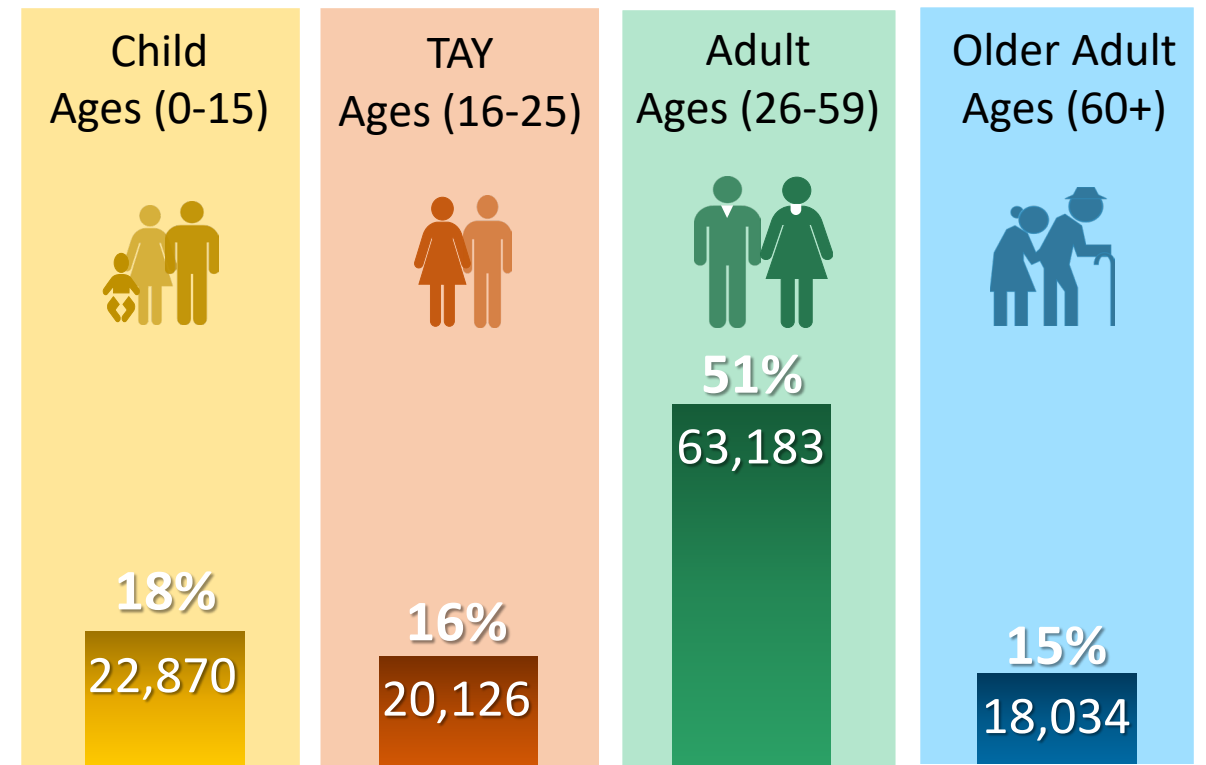
# MHSA CLIENT COUNTS FISCAL YEAR 2023-24

## Outpatient Care Services (OCS)

### OCS Clients Served



### OCS Clients Served by Age Group



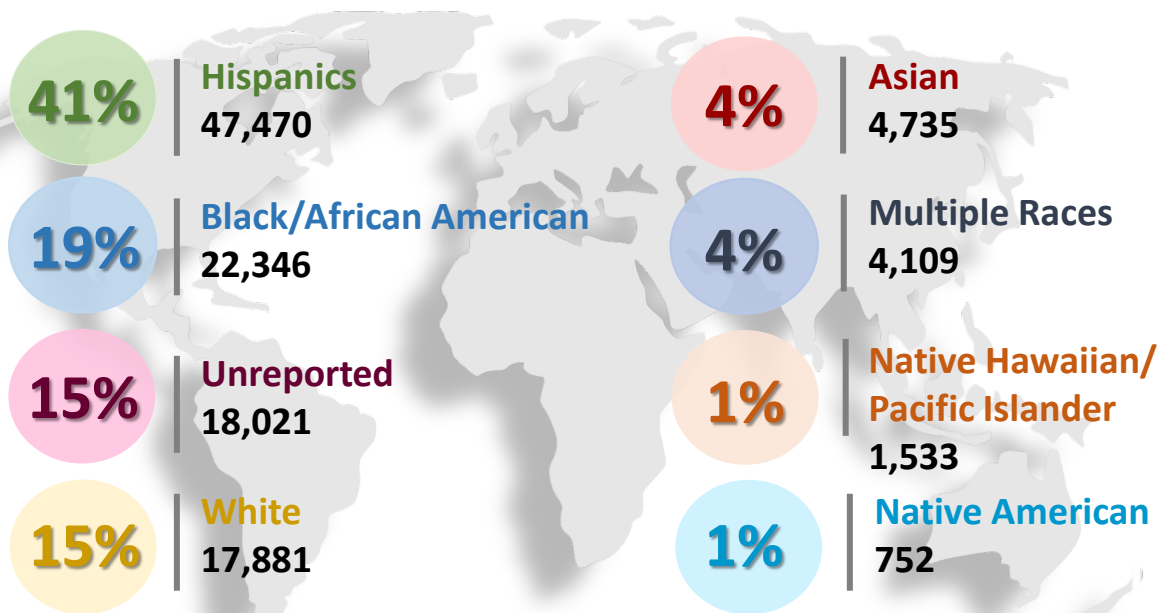
\*New Clients is a subset of Unique Clients Served

\*\*This data was gathered from the MHSA Client Demographic dashboard. Data was last updated on 7/7/24.

# MHSA CLIENT COUNTS FISCAL YEAR 2023-24

## Outpatient Care Services (OCS)

### OCS Client Served by Race/Ethnicity Group



### Number of OCS Client Served by Service Area

Service Area	Number of Clients Served	*Number of New Clients
SA1 – Antelope Valley	9,113	1,669
SA2 – San Fernando Valley	20,577	4,260
SA3 – San Gabriel Valley	15,010	2,905
SA4 – Metro	21,842	4,868
SA5 – West	6,971	1,247
SA6 – South	18,194	3,445
SA7 – East	11,388	2,140
SA8 – South Bay	22,228	4,450

\*New Clients is a subset of Unique Clients Served



# OUTPATIENT CARE SERVICES (OCS)

## Fiscal Year 25-26 Plans

### Level of Care Tool



The Department has adopted a level of care tool that will be implemented over the next 6 months across the entire system, directly operated and contracted providers. Over the next year, the Department will develop and implement lower levels of Full-Service Partnership (FSP) programs, which will align with the level of care tool, providing consumers with a fluid continuum of care trajectory.

### Age Group Specialization



The Department will focus on age group specialization that requires expertise in programming, engagement, and outreach. Age group leads will be identified to develop age-specific mental health treatment that offers therapeutic approaches and interventions tailored to address the unique psychological, emotional, and developmental needs of individuals at different stages of life.

### Telehealth



Due to best practices, OCS requires initial in person services to establish mental and physical health baselines. The Department continues to provide telehealth as an option per consumer choice for on-going services. Where possible, telework is used as both a retention and access to care strategy and staff morale booster.

### Specialty Mental Health Needs



OCS will continue to create and expand programming around specialty mental health needs, such as eating disorders, perinatal/maternal mental health, men's/fatherhood mental health, and co-occurring mental health and substance use disorders. To enhance these efforts, champions have been enlisted in the areas of men's/fatherhood mental health, perinatal/maternal mental health, and LGBTQIA2S+ mental health.



# Thank you



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