



MENTAL HEALTH SERVICES ACT (MHSA) CLIENT DATA QUARTERLY REPORT

FOURTH QUARTER (APRIL-JUNE) FY 2023-24

Data as of 8/18/24



This quarterly report shows demographic data on clients receiving services funded by the Mental Health Services Act (MHSA) from the Los Angeles County Department of Mental Health (LACDMH). This data was gathered from the MHSA Client Demographic dashboard. Link to dashboard: <https://dmh.lacounty.gov/dashboards/mhsa-client-demographics/>

Introduction

In November 2004, the Mental Health Services Act (MHSA) was passed by Californian voters and became state law on January 1, 2005. The Act required a one percent (1%) tax on personal incomes above one million dollars (\$1M) to expand mental health services and programs serving all ages. Once MHSA was written into law, the Welfare and Institutions Code (WIC) Section 5847 required county mental health programs in California to prepare and submit a Three-Year Program and Expenditure Plan ("Three-Year Plan" or "Plan") followed by Annual Plan Updates for all MHSA programs and expenditures. In Los Angeles County, the Plan provides an opportunity for the Department of Mental Health (LACDMH) and its stakeholders to review its existing MHSA programs and services to evaluate their effectiveness. Through the Plan's required Community Planning Process (CPP), LACDMH engages a broad array of stakeholders that provide feedback and input on existing MHSA programs and services which allows LACDMH an opportunity to propose and incorporate new programs and services that meet the diverse needs of all communities served. Changes made to the Plan through the CPP must comply with MHSA regulations as well as relevant State requirements. **In preparation for the CPP, this quarterly report provides an update on the activities, achievements, challenges, and goals of the MHSA services.**

MHSA is made up of five components: Community Services & Support; Prevention & Early Intervention; Innovation; Capital Facilities & Technological Needs; and Workforce Education & Training.

1

Community Services & Support (CSS) is the largest component of the MHSA. The CSS component is focused on community collaboration, cultural competence, client- and family-driven services and systems, wellness focus, which includes concepts of recovery and resilience, integrated service experiences for clients and families as well as serving the unserved and underserved. Housing is also a large part of the CSS component. Services include: Full Service Partnership; Outpatient Care Services; Alternative Crisis Services (ACS); Housing Services; Linkage to County-Operated Functions/Programs (Linkage); and Planning, Outreach, and Engagement Services (POE).



2

The goal of the **Prevention & Early Intervention (PEI) component** of the MHSA is to help counties implement services that promote wellness, foster health, and prevent the suffering that can result from untreated mental illness. The PEI component requires collaboration with consumers and family members in the development of PEI projects and programs. The components are as follows: Early Intervention; Prevention; Stigma and Discrimination Reduction; and Suicide Prevention.



3

The **Innovation component** is designed to evaluate the effectiveness of new and/or changed practices or strategies in the field of mental health with a primary focus on learning and process change, rather than filling a program need or gap. As such, Innovation strives to change some aspect of the public behavioral health system that may include system or administrative modifications.



4

The **Capital Facilities and Technological Needs (CFTN) component** works toward the creation of facilities used for the delivery of MHSA services to mental health clients and their families or for administrative offices.



5

Workforce Education and Training (WET) funds are allocated to develop a diverse workforce. Clients and families/caregivers are given skills training to promote wellness and other positive mental health outcomes, deliver client- and family-driven services, and conduct outreach to unserved and underserved populations.



MHSA CLIENTS SERVED¹

119,727

Unique Clients
Served



25,726

New Clients
Served



Demographic Characterisitcs

Age Group

24% Child
16% TAY
47% Adult
14% Older Adult

Number of Clients Served by Service Area

Service Area (SA)

SA 1 - Antelope Valley
SA 2 - San Fernando Valley
SA 3 - San Gabriel Valley
SA 4 - Metro Los Angeles
SA 5 - West Los Angeles
SA 6 - South Los Angeles
SA 7 - East Los Angeles
SA 8 - South Bay

of Unique Clients Served

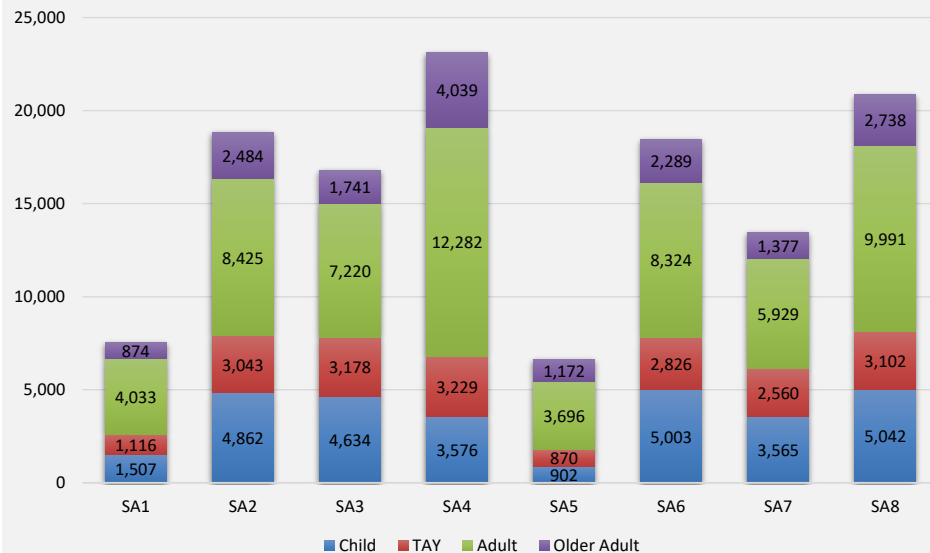
7,497
18,691
16,666
23,050
6,609
18,341
13,338
20,749

of New Clients Served

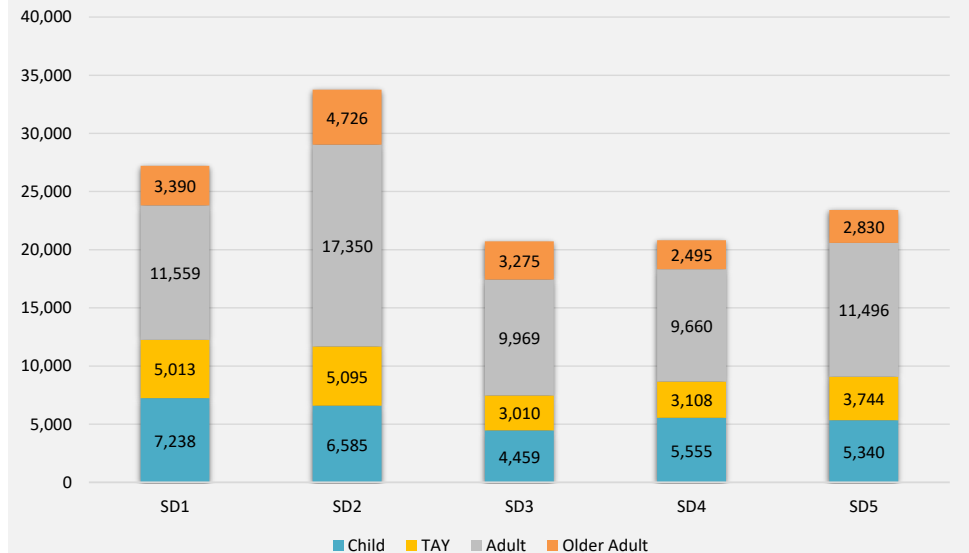
1,450
4,034
4,187
4,767
1,173
3,998
2,836
4,214

Number of Clients Served by Age Group

Age Group by Service Area



Age Group by Supervisorial District



¹Client counts are based on Mode 15 services, not inclusive of community outreach services or client supportive services.

COMMUNITY SERVICES AND SUPPORT (CSS)-CLIENTS SERVED¹

101,116

Total Unique CSS Clients Served

Outpatient Care Services (OCS)

Total OCS Clients Served		
81,793	12,254	
Number of OCS Unique Clients Served	Number of New OCS Clients Served	
Age Group	# of Unique Clients Served	# of New Clients Served
Child	15,382	5,114
TAY	12,362	2,176
Adult	41,408	4,412
Older Adult	13,120	616
Service Area (SA)	# of Unique Clients served	# of New Clients Served
SA1	5,335	699
SA2	13,763	2,019
SA3	9,783	1,858
SA4	14,362	2,268
SA5	4,495	502
SA6	12,204	1,762
SA7	8,529	1,299
SA8	13,946	1,931
Race/Ethnicity Group	Total	%
Hispanic/Latino	32,755	41%
Black/African American	14,719	18%
Unreported	12,632	16%
White	11,902	15%
Asian	3,428	4%
Multiple Races	2,746	3%
Native Hawaiian/Pacific Islander	1,111	1%
Native American	506	1%

Full Service Partnership (FSP)

Total FSP Clients Served		
9,456	631	
Number of FSP Unique Clients Served	Number of New FSP Clients Served	
Age Group	# of Unique Clients Served	# of New Clients Served
Child	1,838	298
TAY	1,570	122
Adult	4,885	198
Older Adult	1,274	24
Service Area (SA)	# of Unique Clients Served	# of New Client Served
SA1	620	42
SA2	1,025	64
SA3	1,141	88
SA4	1,818	110
SA5	579	22
SA6	1,699	150
SA7	1,054	76
SA8	1,683	106
Race/Ethnicity Group	Total	%
Hispanic/Latino	3,119	33%
Black/African American	2,199	23%
Unreported	1,727	18%
White	1,562	17%
Asian	398	4%
Multiple Races	253	3%
Native Hawaiian/Pacific Islander	107	1%
Native American	75	1%

Alternative Crisis Services (ACS)²

Total ACS Clients Served		
7,918	2,859	
Number of ACS Unique Clients Served	Number of New ACS Clients Served	
Age Group	# of Unique Clients Served	# of New Clients Served
Child	833	439
TAY	1,194	501
Adult	4,959	1,500
Older Adult	881	365
Service Area (SA)	# of Unique Clients Served	# of New Clients Served
SA1	277	118
SA2	920	362
SA3	1,534	627
SA4	2,529	790
SA5	529	200
SA6	621	202
SA7	951	322
SA8	1,295	423
Race/Ethnicity Group	Total	%
Hispanic/Latino	2,237	33%
White	1,387	21%
Black/African American	1,550	23%
Unreported	1,035	15%
Asian	254	4%
Multiple Races	170	3%
Native Hawaiian/Pacific Islander	72	1%
Native American	28	0%

¹Client counts are based on Mode 15 services, not inclusive of community outreach services or client supportive services.

²Alternative Crisis Services does not include Urgent Care Centers data.

PREVENTION AND EARLY INTERVENTION (PEI)-CLIENTS SERVED³

EARLY INTERVENTION SERVICE COMPONENT

18,031

Number of Unique
Clients Served

8,751

Number of New Clients
Served

57%

of PEI clients served are
Hispanic

Service Area 2

has the highest number
of clients served

Number of Clients Served by Age Group

Age Group	# of Unique Clients Served	# of New Clients Served
Child	11,816	6,504
TAY	3,744	1,382
Adult	2,159	820
Older Adult	457	110

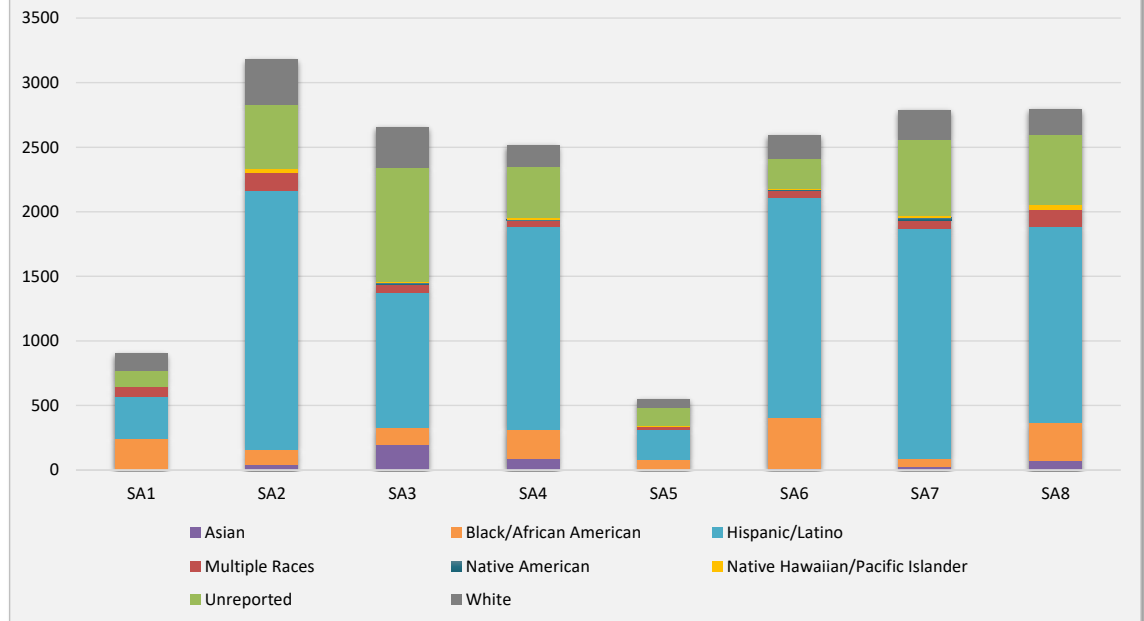
Number of Clients Served by Service Area

Service Area (SA)	# of Unique Clients Served	# of New Clients Served
SA 1	907	414
SA 2	3,202	1,667
SA 3	2,658	1,122
SA 4	2,535	1,177
SA 5	554	327
SA 6	2,595	1,532
SA 7	2,805	1,187
SA 8	2,815	1,369

Number of Clients Served by Race/Ethnicity Group

Race/Ethnicity Group	Total	%
Hispanic/Latino	10,193	57%
Unreported	3,390	19%
White	1,636	9%
Black/African American	1,525	9%
Multiple Races	585	3%
Asian	434	2%
Native Hawaiian/Pacific Islander	122	1%
Native American	55	0%

Race/Ethnicity by Service Area



Race/Ethnicity Group	Highest	Lowest
Asian	SA 3 (7%)	SA1 (0.11%)
Black/African American	SA 1 (27%)	SA 7 (2%)
Hispanic/Latino	SA 6 (66%)	SA 1 (36%)
Multiple Races	SA 1 (9%)	SA 4 (2%)
Native American	SA 7 (0.68%)	SA 5 (0%)
Native Hawaiian/Pacific Islander	SA 8 (1%)	SA 6 (0.39%)
Unreported	SA3 (33%)	SA 6 (9%)
White	SA 1 (15%)	SA 4 (7%)

³Client counts are based on Mode 15 services, not inclusive of community outreach services, client supportive services, or Community Prevention programs.

PROGRAM SPOTLIGHT

PILOT PROJECT: HOLLYWOOD 2.0



Project Overview

The Hollywood 2.0 (H2O) is a 5-year pilot project that aims to offer comprehensive, community-based care and services to people experiencing mental illness within the geographic boundaries of the Hollywood community.



Service Delivery

The service delivery format is based on the world-renowned mental health care model used in Trieste, Italy that uses a human-centered, hospitality-oriented approach to foster autonomy and a sense of purpose to support personal recovery.



Community Engagement

Hollywood 2.0 engages Hollywood stakeholders, employers, and organizations to expand clinical and field-based mental health services and resources and offers employment, permanent housing, recreation, and socialization opportunities needed for well-being.



FY 22-23 Highlights (Year 1)

1 Stakeholder Process



- DMH and H4WRD (4 Walls, a Roof, and a Door) convened three workgroups monthly.
- Each workgroup reflected the core mission of H2O, to support those experiencing mental illness and homelessness to find the three ingredients necessary for a whole life: **PEOPLE to love, PURPOSE to live, and PLACE to call home.**
- Through these workgroups, stakeholders identified the group's top ideas for DMH to pursue using Innovation funding. As a result of this process, the Hollywood 2.0 community map was created.



H2O Map Key Components

- A. Hollywood Respite and Recovery
- B. Employment
- C. Anew Dawn Board and Care
- D. Clubhouse
- E. Interim Housing (Mark Twain and Hollywood Walk of Fame)
- F. Local events and community meetings
- G. Hollywood Mental Health Cooperative Clinic **slated to become online Spring 2025*

2 Staffing



Increased staffing for new field-based teams which reduced response times noticeably and created easier access to treatment for those too vulnerable to access the clinic.

3 Treatment Team



Development of the **Hollywood Mental Health Cooperative** which is an innovative treatment team approach combining outpatient and intensive field services, in partnership with the community, that center around an individual's needs.

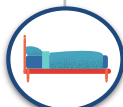
PROGRAM SPOTLIGHT

PILOT PROJECT: HOLLYWOOD 2.0

FY 23-24 Highlights (Year 2)



1,489 clients served by DMH's Hollywood Mental Health Cooperative.



First housing comes online - providing much-needed beds and more comprehensive, innovative care for clients.

Housing			
Type of Housing	Place	# of H2O Residents	Features
Interim Housing Designed to assist clients with transition to permanent housing	The Mark Twain Hotel	56	-Private rooms -On-site -24/7 clinical care -Working with residents to build out their community garden
	The Walk of Fame Hotel	44	-Private rooms -Families, couples, and pet's welcome
Board and Care Provides a higher level of care for clients needing assistance to remain stably housed	Anew Dawn	76	-Highly Enriched Residential Care Services -Provides enhanced staffing, daily groups, and community activities for residents



The Hollywood Clubhouse popup opens on Sunset Boulevard - meeting weekly with initial ambassador members—in anticipation of a wider launch in Year Three. Clubhouse members support LAHSA's 2024 Point In Time Homeless Count, for which H4WRD served as the Deployment Site Coordinator for Hollywood.



DMH and H4WRD hosts H2O community events - including ongoing H2O-pen Houses, and Health and Mental Healthcare (HMH) Provider Workgroups.



RAND contract executed and evaluation planning begins.



IDEO contract executed, and awareness campaign planning begins.

Client Successful Story

K is a 35-year-old African American, transgender female that the HMH Co-Op field-based team began engaging while on the streets in Hollywood. K was often found not wearing adequate clothing for the winter months, difficult to understand, with a large, infected wound on her arm. With patience and consistent visits from team members ranging from community health workers to the street psychiatrist the team slowly began building rapport and addressing her most immediate needs. The team learned that the wound on her arm was from a previous car accident that was never properly treated as her mental health symptoms interfered with her ability to obtain proper treatment. We were able to partner with Saban Street Medicine to ensure she received proper care and treatment. K was hesitant about going into housing, and "liked her freedom" living outside, she was also concerned about leaving her partner who she shared a tent with. Although K was not initially interested in medication services our psychiatrist often visited her to bring her food and clothing and focused on understanding her day-to-day struggles. After some time, she eventually agreed to psychiatric medications to abate some of the psychotic symptoms for her methamphetamine use. Once she began treatment and rapport with the team strengthened, she was more agreeable to housing and agreed to tour the Mark Twain with her partner. She began meeting with our substance abuse counselor and both she and her partner moved into housing at the Mark Twain. We were able to connect her to gender affirming care and bought her wigs to help her regain confidence she reported to have lost during her time on the streets. Once she settled in at Mark Twain, she started attending onsite groups, community outings, and became more and more committed to her sobriety. K continues to grow her sense of community and is now a greeter at the Hollywood Clubhouse with goals to pursue permanent housing and employment.

**Name has been changed to protect confidentiality.*