

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

F A C T S H E E T

**APPROVAL FOR HIRING AND SPENDING AUTHORITY TO FURTHER IMPLEMENT
THE MENTAL HEALTH SERVICES ACT –
COMMUNITY SERVICES AND SUPPORTS PLAN
FOR FULL SERVICE PARTNERSHIP PROGRAMS
AND
APPROVAL OF REQUEST FOR APPROPRIATION ADJUSTMENT
FOR FISCAL YEAR 2006-07
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)**

REQUEST

1. Authorize the Department of Mental Health (DMH) to further implement Full Service Partnerships (FSP) in a directly operated outpatient clinic at American Indian Counseling Center (AICC) in keeping with the Department's Mental Health Services Act (MHSA) Community Services and Supports (CSS) Plan, effective upon Board approval. The Fiscal Year (FY) 2006-07 cost of the AICC is \$309,803, consisting of \$230,480 in MHSA funding, \$60,250 in anticipated Federal Financial Participation (FFP) Medi-Cal revenue and \$19,073 in anticipated Early and Periodic Screening, Diagnosis, and Treatment – State General Funds (EPSDT-SGF). The FY 2007-08 estimated cost is \$711,756, consisting of \$473,787 in MHSA funding and \$180,750 in anticipated FFP Medi-Cal revenue and \$57,219 in EPSDT-SGF.
2. Authorize DMH to fill 9 ordinance positions/7.5 Full-Time Equivalent (FTE), in excess of what is provided in DMH's staffing ordinance, pursuant to Section 6.06.020 of the County Code and subject to allocation by the Chief Administrative Office (CAO).
3. Approve the Request for Appropriation Adjustment for FY 2006-07 in the amount of \$175,000 to provide spending authority for the implementation of the AICC FSP Program. The Appropriation will shift budgeted appropriation from Services and Supplies (S&S) in the amount of \$159,000 to Salaries and Employee Benefits (S&EB) and Fixed Assets in the amount of \$16,000.

PURPOSE/JUSTIFICATION

Board approval of the recommended actions will enable DMH to implement a directly operated Countywide AICC FSP Program, located in Service Area (SA) 4, as part of

the Department's overall transformation from traditional individually-oriented clinical services to a Recovery Model of community-based, client and family driven, recovery-oriented services and supports. The AICC FSP Program will serve American Indians Countywide by developing successful partnerships among clinicians, peer advocates, clients, their families, and the Indian Community. Staffing for the AICC FSP Program is required to provide intensive, multi-disciplinary, field-based services with a low client to staff ratio as required by the MHSA for FSP Program.

As noted in the CSS Plan, the goal of the FSP Program is to promote recovery and wellness for adults and older adults diagnosed with severe mental illness and promote resiliency for children and youth with serious emotional disorders and their families. Implementation of the AICC FSP Program will enhance the Department's ability to meet the needs of the American Indian unserved/underserved population and provide intensive services to eight (8) children, eight (8) transition age youth, 24 adults, and three (3) older adults.

FISCAL IMPACT

The FY 2006-07 cost of the AICC is \$309,803. This consists of \$230,480 in MHSA funding, \$60,250 in anticipated FFP Medi-Cal revenue and \$19,073 in anticipated EPSDT-SGF0. The FY 2007-08 estimated cost is \$711,756, consisting of \$473,787 in MHSA funding and \$180,750 in anticipated FFP Medi-Cal revenue and \$57,219 in EPSDT-SGF.

BACKGROUND/HISTORY

The focus of the State approved MHSA CSS Plan is on recovery-oriented services for adults who are diagnosed with severe and persistent mental illness and on resiliency for children and youth with serious emotional disorders and their families. Accordingly over 50 percent of Los Angeles County's CSS Plan funding is devoted to the provision of FSP Program for adults and older adults who are in a state of, or are at risk of, homelessness, incarceration, or placement in long-term locked mental health facilities because of their mental illnesses and for children and youth who are uninsured, under-insured or ineligible for Medi-Cal due to detainment in the juvenile justice system, and who are in a state of, or are at risk of, expulsion or suspension from school, homelessness or out-of-home placement due to severe emotional or psychotic disorders.

AICC was developed to serve the American Indian population specifically in 1987, with the addition of children's services in 1993. Since its inception, the program has provided mental health services with a focus on providing culturally relevant services to members of the 150 unique tribes Countywide. The traditional Indian values of respect

for the dignity and worth of individuals, their extended families, and their elders are at the heart of AICC service delivery.

IMPACT ON CURRENT SERVICES

AICC FSP will be centrally located in SA 4 to ensure accessibility of services to the highest concentration of American Indian populations in SA 4, 7, and 8. However, the program will serve individuals Countywide in the individual's community of choice.

AICC plans to hire 7.5 FTE staff in order to provide a full multi-disciplinary FSP team that will work in various areas of the County to provide specialized services to American Indian adults and older adults, youth, and children in need of intensive services. These positions will ensure that AICC FSP clients receive the full array of services specified in the MHSA, including mental health services; medication support; peer support and mentoring; assistance with achieving educational, employment, housing, and social/recreational goals; assistance with accessing preventative and remedial physical health care; and 24 hours per day/seven (7) days per week availability for emergencies and specialized programming.

Implementation of the AICC FSP Program is anticipated to improve the efficiency and effectiveness of mental health operations Countywide by serving the cultural needs of the American Indian population, thereby providing services to this unserved/underserved population. The program will support the Department's transformation to the Recovery Model and will promote development of recovery-oriented services that are based on clients' strengths and competencies.

CONTACT INFORMATION

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