

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

F A C T S H E E T

APPROVAL FOR HIRING AND SPENDING AUTHORITY TO IMPLEMENT THE MENTAL HEALTH SERVICES ACT-COMMUNITY SERVICES AND SUPPORTS PLAN FOR THE HOMELESS OUTREACH AND ENGAGEMENT TEAM AND APPROVAL OF REQUEST FOR APPROPRIATION ADJUSTMENT (ALL SUPERVISORAL DISTRICTS)

(4 VOTES)

REQUEST

1. Authorize the Department of Mental Health (DMH) to implement a Homeless Outreach and Engagement Team (HOET) 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 HOET is \$510,235, consisting of \$470,235 in MHSA funding and \$40,000 in anticipated Federal Financial Participation (FFP) Medi-Cal revenue. The FY 2007-08 estimated cost of the HOET is \$1,043,627, consisting of \$923,627 in MHSA funding and \$120,000 in anticipated FFP Medi-Cal revenue.
2. Authorize DMH to fill 11 ordinance positions/11 Full-Time Equivalent (FTEs) for HOET, in excess of what is provided for 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 \$510,000 to increase Services and Supplies (S&S) in the amount of \$111,000, Fixed Assets in the amount of \$112,000, and Salaries and Employee Benefits (S&EB) in the amount of \$287,000 to provide spending authority for the implementation of a directly operated HOET program. The Appropriation Adjustment is fully funded with FY 2005-06 unexpended MHSA funding in the amount of \$470,000 and additional FFP Medi-Cal revenue in the amount of \$40,000.

PURPOSE/JUSTIFICATION

Board approval of the recommended actions will enable DMH to implement a Countywide HOET to provide field-based outreach and engagement services to

unserved/underserved individuals with mental illness who are homeless, living in homeless encampments, or are at risk of homelessness, incarceration, or involuntary treatment. This program is consistent with the Countywide Homeless Prevention

Initiation recommendations approved by your Board on April 7, 2006 to develop services and resources that address the needs of the homeless population, many of whom are mentally ill. In addition, the program will provide outreach and linkage to community services for homeless or runaway youth with/or without mental illness. HOET will collaborate with local law enforcement, community groups, social service programs, and other stakeholders to identify target areas in need of comprehensive outreach and engagement services and provide immediate access to shelter and appropriate social services. The program is part of the Department's commitment to providing a network of community-based mental health services and support in accordance with the CSS Plan, including services for individuals who are not currently connected to the system of care.

The program will be fully funded with FY 2005-06 unexpended MHPA funding for FY 2006-07. The FY 2007-08 estimated cost will be funded by MHPA and will be included in the FY 2007-08 budget request. Funding beyond FY 2007-08 will be included in the Department's next three-year plan.

BACKGROUND/HISTORY

The focus of the State approved MHPA – CSS Plan is on recovery-oriented services for people who are diagnosed with severe and persistent mental illness and linkage to ongoing community services and supports. The Plan is designed to reduce or prevent homelessness, unnecessary hospitalization, and incarceration. In July 2005, DMH began an over-all transformation from traditional individually-oriented clinical services to a model of community-based, client and family driven, recovery-oriented services and support.

HOET will provide outreach and engagement services that employ recovery-based strategies to empower individuals to develop their goals, become self-sufficient, and successfully transition to stable community living. The program will ensure coordination and linkage to services and support, including housing, mental health services, medication support, access to physical healthcare, benefits establishment, peer support and mentoring, and educational/vocational services for individuals who are homeless residing in Skid Row, freeway underpasses, County park facilities, and other locations where outreach is not readily available or provided in a concentrated effort. In addition, HOET will serve individuals who enter the city and County system through contact with fire departments, law enforcement, paramedics, Psychiatric Mobile Response Teams, or the 911 system. The goal of the program is to link individuals with local service providers and secure housing and employment opportunities in the individual's community of choice.

A multidisciplinary team of 11 professional and paraprofessional staff experienced in field work will provide dedicated outreach and engagement services, intensive crisis services, advocacy, transportation services, and short-term intensive case management support for TAY, adults, and older adults living in non-traditional settings in order to

ensure coordination and linkage with appropriate levels and types of mental health and supportive services, including Urgent Care Centers for short-term (less than 23 hours) stabilization, Full Service Partnerships, residential, substance abuse, peer support services, and other specialized programs.

IMPACT ON CURRENT SERVICES

Data indicates that the homeless mentally ill population is located throughout Los Angeles County with highest concentrations in Service Area (SA) 4, 6, and 2. HOET, planned for implementation in April 2007, will work with planning and service groups in order to ensure that outreach and engagement services are provided in each of the eight (8) SA's. The program will target the most difficult, hard-to-reach homeless populations, including those residing in Skid Row, freeway underpasses, county park facilities, and other locations where outreach is not readily available or conducted in a concentrated and consistent manner.

HOET will be centrally located in Supervisorial District 1, SA 4 at an undetermined site to ensure rapid accessibility to the highest concentrations of homeless persons. The program will serve persons Countywide through the development of an outreach schedule designed to serve an identified area at regular or fixed intervals, including daily contact as indicated. The goal will be to link the homeless with local service providers who will secure housing and work opportunities in the individual's community of choice. The program is expected to reduce homelessness and incarceration of the homeless mentally ill.

DMH Emergency Outreach Bureau will manage and coordinate the HOET program. The program will be staffed by multi-disciplinary professionals and paraprofessionals experienced in field work with the most difficult to reach homeless persons. Staffing will include eleven full-time positions; one supervising psychiatric social worker, three (3) mental health registered nurses, three psychiatric social workers, three medical case workers, and one intermediate typist clerk.

See the attached program description for further details on the HOET program.

CONTACT INFORMATION

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Attachment (1)

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
EMERGENCY OUTREACH BUREAU**

**HOMELESS OUTREACH AND ENGAGEMENT TEAM
PROGRAM DESCRIPTION**

The Department of Mental Health will establish a countywide Homeless Outreach and Engagement Team (HOET) through the Department's Mental Health Services Act Community Services and Supports Plan effective upon Board approval. HOET will provide field-based outreach and engagement services to unserved or underserved individuals with mental illness who are homeless, living in homeless encampments, or at risk of homelessness. In addition, HOET will outreach to homeless or runaway youth or those living in unstable housing situations.

HOET will use a "whatever it takes" philosophy to identify, assess, and link disconnected or disenfranchised homeless mentally ill persons to the full range of Community Services and Supports (CSS) services, including Full Service Partnerships (FSP), Wellness Centers, Urgent Care Centers (UCC) and emergency or permanent housing. HOET will target the most difficult to reach homeless populations, including those residing in skid row, freeway underpasses, county park facilities, and other locations where outreach is not readily available or conducted in a concentrated and consistent manner.

The primary difference between HOET and other or existing outreach programs will be its focus on consumers who are not connected to the current system of care. HOET will collaborate with local law enforcement, community groups, social service programs, and other stakeholders to identify target areas, saturate the area with a sustained and comprehensive engagement effort, and provide immediate access to shelter and appropriate of social services when necessary. HOET will provide advocacy, transportation, case management, and follow-up services to ensure that the consumer enters the appropriate system of care required to end homelessness and begin recovery. HOET will collaborate with DMH Systems Navigators and Impact Units until the consumer is successfully linked to CSS programs. HOET will also provide follow-up and outreach services to consumers who were previously homeless and dropped out of the mental health system of care without a stable living arrangement. The program will partner with peer support programs in situations where a peer-to-peer approach is needed.

HOET will be a multi-disciplinary, dedicated team of professional and paraprofessional staff experienced in field work dealing with the most difficult to reach persons living in non-traditional settings. Staffing will include eleven full-time positions:

- One (1) Supervising Psychiatric Social Worker
- Three (3) Mental Health Counselor Registered Nurses
- Three (3) Psychiatric Social Workers
- Three (3) Medical Case Workers
- One (1) Intermediate Typist Clerk

DMH Emergency Outreach Bureau will manage and coordinate the HOET program.

HOET Operations

HOET will meet regularly with DMH Service Area Advisory Committees and other stakeholders to identify specific areas of need. These areas may include new or established encampments, parks, bus stations, rail yards, rural or underdeveloped locations in LA County, or sites experiencing an increased concentration of homeless individuals.

HOET will develop an outreach schedule designed to serve an identified area at regular or fixed intervals, including daily contact as indicated. Upon an initial assessment of the homeless persons in a particular location, HOET will coordinate outreach efforts with local human service providers to maximize outreach and engagement. A specific location might be frequented several times per week to facilitate engagement and establish rapport over time. Initial on-site services may include the distribution of informational material, hygiene kits, bus tokens, food vouchers, blankets, health screening, benefits assistance, and same-day or scheduled appointments for shelter and other services. Local agencies will be identified and encouraged to outreach with HOET to deliver health, dental, substance abuse, benefits, and housing services. Community peer support programs will also be used during the engagement and linkage process. The goal will be to link the person with local service providers and ultimately secure housing and work opportunities in the individual's community of choice.

HOET will deploy one field supervisor and three teams per site. The remaining staff will provide follow-up or specialized services to individuals or locations previously identified and served that will enhance coordination and linkage to services that support the consumer in the recovery process. Program staff will provide consultation, education, and training for community agencies and programs to share resources and information, and to promote development of programs to serve the needs of this hard-to-reach population.

This program supports the CSS Plan's commitment to recovery and wellness. HOET will provide outreach and engagement services that employ recovery-based strategies to empower consumers to develop their goals, become self-sufficient, and successfully transition to stable community living. Implementation of HOET is anticipated to reduce demand for medical and psychiatric emergency services, hospitalization, and incarceration while strengthening linkage to community services and supports included in the MHSA.