Mental Health Services System for Adults with Serious Mental Illness

Treatment Works - People Recover

Utilization Review/Quality Improvement
Ensures timely and appropriate access to
services and compliance with Federal/State
regulations; QI efforts; staff development;
and clinical program evaluation

Traditional - New Client Assessment and Limited Outpatient Services
Comprehensive assessment per medical necessity criteria for specialty MH services; limited services pending enrollment in MHSA programs

MHSA - Innovation (Closing the Gap through Community Capacity Building)
By 1) identifying communities of natural support, 2) strengthening the ability of communities to address members' behavioral health needs, and 3) building relationships between health services providers and communities of support to improve health and well-being

Adult with

Serious

Mental

Illness

MHSA - Supportive Components (benefitting entire system of care)

- Workforce Education & Training (local MH workforce needs)
- Capital Facilities & Technological Needs (technology infrastructure)
- Permanent Supportive Housing (via CalHFA approved projects)

MHSA - Prevention and Early Intervention Services
Services aimed at preventing mental illness from becoming severe and debilitating, including culturally specific outreach and engagement to Latino and Native American populations through contract providers, and other local services at various community locations; Statewide services are through the CalMHSA JPA

Traditional - Psych Emergency Services 24/7/365 services to respond to crises, provide referrals, and when required, detain and admit to psychiatric hospital

Traditional - Psychiatric Health Facility (PHF)
Licensed, locked, 10-bed, 24-hour adult residential
treatment facility, providing brief inpatient services for
persons requiring intensive psychiatric care, many of
whom are involuntarily hospitalized; although EDC
residents receive first priority for admissions, MH
contracts with other counties to provide their residents
with inpatient care on an as needed, as available basis

Health Facility (PHF)

Id, 24-hour adult residential ling brief inpatient services for sive psychiatric care, many of hospitalized; although EDC

MHSA - Safety Net Support Services

Outreach/engagement for persons with serious mental illness who need supportive services; includes drop-in group support, club house peer support, and assistance finding other resources

MHSA - Medications Plus Program
Medication mgmt; case mgmt; health
education; on-going assessment

MHSA - Wellness Services Program
Medication mgmt; case mgmt; groups; life skills training, possible counseling; limited supportive services; on-going assessment

<u>Traditional - Longer Term Residential Care Placements</u>
Licensed facilities, providing longer term residential care for persons requiring intensive, and sometimes involuntary, psychiatric care; these services are arranged through contracted facilities, some of which are subject to the Institutions for Mental Disorders (IMD) exclusion

Both serve as potential options for clients who are unable to return to lower level, community-based settings; MHSA FSP clients may also receive housing supports

MHSA - Crisis Residential Treatment (CRT) Program
Licensed 6-bed, 24-hour facility, providing brief (normally less than 30 days) crisis stabilization or resolution services on a voluntary basis; may include assessment, meds stabilization, individual, family, and group counseling, life skills training, and community integration activities while under 24/7 clinical supervision

MHSA - Full Service Partnership (FSP) Program Medication mgmt; intensive case mgmt; groups; life skills training and counseling as appropriate; increased supportive services; housing support as required; on-going assessment

Note: MHSA programs serve Behavioral Health Court clients

Potential (Unintended) Consequences of Insufficient Mental Health Services - Results in Cost Shifting

Decompensation of clients (symptom relapse, decreased functioning, suffering, death)

Increased ambulance service and emergency room use

Increased unemployment

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Increased placements in high-cost settings, such as hospitals and jails

Increased impact on law enforcement and criminal justice system

increased homelessness

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Mental Health Services System for Children with Serious Emotional Disturbance

Treatment Works - People Recover

Traditional - New Client Assessment Utilization Review/Quality Improvement Comprehensive assessment per Ensures timely and appropriate access to medical necessity criteria for services and compliance with Federal/State specialty mental health services regulations; QI efforts; staff development; and clinical program evaluation Traditional - Outpatient Services within System of Care Partnership Specialty Medi-Cal mental health services involving various therapeutic interventions and medication services as needed: includes Federally-mandated Early and Periodic Screening, Traditional - Psych Emergency Services Diagnostic and Treatment (EPSDT) services, as well as 24/7/365 services to respond to crises, Therapeutic Behavioral Services (TBS) as appropriate; intensive provide referrals, and when required, specialty mental health services may be provided for youth at high detain and admit to psych hospital risk of out-of-home placement (the prior SB 163 Wraparound Program has been discontinued, but local partners remain committed to collaborative services for high risk youth) Traditional - Locked Inpatient Placement Child with State hospitals or licensed, locked facilities, providing Traditional - Services in Juvenile Detention Facilities Serious longer term inpatient services for children requiring Required mental health services to children in WS **Emotional** intensive psychiatric care in a secure setting; these Juvenile Hall and SLT Juvenile Treatment Center services are arranged through contracted facilities **Disturbance** Serve as potential options for Traditional - AB 3632 GC Chapter 26.5 Services children who are unable to return to lower level of care Required mental health services to special-ed children identified as needing these services by their Individualized Education Plan (IEP); State mandate suspended Oct 2010, Traditional - Group Home Placement but services continue under contract to SELPAs Licensed, group homes, providing residential services for children requiring intensive psychiatric care; these services are arranged through contracted facilities MHSA - Youth and Family Strengthening Program Note: MHSA Innovation Wraparound services for youth at risk for out-of-home MHSA - Prevention and Early Intervention Services Projects and Supportive placement, plus programs/services employing Services aimed at early intervention to address Components (Workforce Evidence-Based Practices, such as Incredible Years, emotional disturbances and to promote social and Education and Training, Teaching Pro-Social Skills, and Trauma-Focused emotional well being; includes services at clinical Capital/Technological Cognitive Behavioral Therapy; also may include facilities, schools, and various community locations; Needs, and Permanent specialized transition services to high-risk youth about Statewide services are through the CalMHSA JPA Supportive Housing) also to be released from juvenile detention facilities enhance the system of care for children

Potential (Unintended) Consequences of Insufficient Mental Health Services - Results in Cost Shifting

Decompensation of child (symptom relapse, decreased functioning, suffering, death)

Increased ambulance service and emergency room use

Increased school failure/drop-out

Increased placements in high-cost settings, e.g., hospital, group home, or juvenile hall

Increased impact on law enforcement and criminal justice system

Increased out-of-home placements