Mental Health Services Act–Work Plan Description (EXHIBIT D)

County Name El Dorado

Work Plan Title

Work plan #2: Adult Wellness and Recovery Services – page 2

Population to Be Served

Adults, including older adults, and transition age youth (18-25) who are homeless or at risk of homelessness, at-risk of institutionalization, and those who are institutionalized (jails, IMDs and psychiatric hospitals) due to untreated mental illness and in the process of under-going communitybased placement. The population also includes those who have been significantly under-served in out of county Board and Care homes. In this consolidated Work plan, older adults who are at risk of homelessness and institutionalization due to untreated mental illness are also included.

Locally, adults with co-occurring disorders, the Latino and Native American populations, women, and older adults are all among the under-served populations. Work Plan Description

CIMMUNITT SERVICES AND SUFFORTS	COMMUNITY SERVICES AND SUPPORTS
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Annual Number of Clients to Be Served ____488___ Total

Number of Clients By Funding Category

____40__ Full Service Partnerships

____348___ System Development

___148_ Outreach & Engagement

PREVENTION AND EARLY INTERVENTION

Annual Number to Be Served ______ Total Number of Clients By Type of Prevention ______ Early Intervention ______ Indicated/Selected Universal

Program Description

The Adult Wellness and Recovery Services program will serve as the umbrella for this program. Outreach and engagement services will be a component of this program, as well as FSP services (utilizing the ACT model) for appropriate clients.

Resource Management Services (General Systems Development)

Managers, supervisors or designees, as assigned, will develop key relationships and build access to resources for the consumers and families served (e.g., housing, vocational, educational, benefits eligibility and substance abuse treatment). As indicated in the approved FY 07-08 Expansion Proposal, we will also utilize MHSA-funded psychiatry time to serve uninsured MHSA clients and engage in general systems development planning to improve access and service delivery. The psychiatry time will be used to evaluate and re-design psychiatry services to be effective within our Wellness and Recovery Programs. These individuals will also provide program evaluation and quality improvement oversight for the CSS programs. Funding needs include training in data management and program evaluation skills and the supplies and equipment necessary to administer and score the psychological test batteries. Food, services, equipment and supplies may be purchased, as well.

Outreach and Engagement Services (Outreach and Engagement funding - 100 clients/year)

Mental health professionals, in concert with peer counselors, will provide outreach and engagement services for individuals with serious mental illness who are homeless, in the jails, receiving services in primary care (new development), and who require outreach to their homes – in order to reach the at-risk adult population.

Community outreach and education will continue to be made available regarding the identification of older adults in need of mental health services (Heroes Program).

Supports such as food, transportation assistance, and emergency shelter may be purchased. This component anticipates serving 100 unique clients per year.

Assertive Community Treatment (ACT) - (Full Service Partnership (FSP) funding - 40 clients/year)

A highly individualized and community-based level of intensive case management will be provided via Assertive Community Treatment (ACT) for seriously mentally ill individuals who are at risk of criminal justice involvement, homelessness and/or institutionalization. Some of these individuals will be eligible for the limited transitional housing beds and/or housing subsidies available for Full Service Partners (FSPs). Access to a supervised transition house for older adults who are at risk of institutionalization or homelessness is also available on a limited basis for FSPs.

In a new component of this FSP Work plan, the ACT model will be used with severely mentally ill El Dorado County adults who are underserved (in out-of- county Board and Care homes) and/or institutionalized in Institutes of Mental Disease (IMDs) upon readiness for community placement. This new component seeks to consolidate dedicated partnerships between clients, family members, the public guardian, courts and housing providers to facilitate recovery and progress toward the least restrictive level of care. This component anticipates serving 40 FSPs a year. Food, household supplies, activities and transportation may be funded.