Families across Orange County are suffering in the face of increasing mental health and substance use disorders. For many families, these challenges have become devastating catastrophes.

265 Anita in the city of Orange is the first manifestation of systems change in Orange County.

265 Anita is a best-in-class regional treatment and wellness hub. It is a symbol of the strength and possibilities created when public and private partners strive together.
STAKEHOLDERS’ IDENTIFIED NEEDS

- Anita Street Wellness Hub (i.e., co-located services), is the result of County strategic and community planning discussions that began in 2016

- Funds were first approved as part of MHSA Annual Plan Update for FY 2018/19
  - CSS transfer to CF for renovation/construction of site
  - Services initially to be funded through MHSA, MediCal, Drug MediCal, SAPT

- Additional goals/elements were further developed through needs identified by participants in:
  - BHS Community Engagement Meetings (Summer 2018)
  - PEI Community Planning Meetings (August - Sept 2018)
  - Be Well Summit and Meetings (beginning July 2018)
NEEDS ADDRESSED BY WELLNESS HUBS

- Different locations across county with services tailored to meet needs of surrounding community

- Wellness Hubs would:
  - Increase access to behavioral health urgent care
  - Encourage and promote community partnerships and collaboration in the formation of Crisis Stabilization Units
  - Provide co-located services to promote crisis stabilization and sustained behavioral health recovery
  - Expand the role of peers in behavioral health in urgent care settings
  - Provide case management, resource referrals and family supports
  - Leverage technology to increase access to services and support
  - Map behavioral health assets
  - Establish/track data metrics to monitor program effectiveness
  - Align client need to appropriate level of care
## COMMUNITY NEED

**OC Emergency Department Volume, 2016, OSHPD**

<table>
<thead>
<tr>
<th>DIAGNOSES</th>
<th>TOTAL OC Market</th>
<th>5 Mile Radius of 265 Anita</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol-related disorders</td>
<td>10,645</td>
<td>2,773</td>
<td>26.1%</td>
</tr>
<tr>
<td>Substance-related disorders</td>
<td>6,388</td>
<td>1,984</td>
<td>31.1%</td>
</tr>
<tr>
<td>Mood disorders</td>
<td>5,695</td>
<td>1,890</td>
<td>33.2%</td>
</tr>
<tr>
<td>Suicide and intentional self-inflicted injury</td>
<td>4,498</td>
<td>1,306</td>
<td>29.0%</td>
</tr>
<tr>
<td>Schizophrenia and other psychotic disorders</td>
<td>4,067</td>
<td>1,477</td>
<td>36.3%</td>
</tr>
<tr>
<td>Delirium dementia, amnestic, other cognitive disorders</td>
<td>960</td>
<td>285</td>
<td>29.7%</td>
</tr>
<tr>
<td>Miscellaneous mental health disorders</td>
<td>888</td>
<td>322</td>
<td>36.7%</td>
</tr>
<tr>
<td>Attention-deficit, conduct, disruptive behavior disorders</td>
<td>484</td>
<td>174</td>
<td>35.3%</td>
</tr>
<tr>
<td>Screening / Hx of mental health substance abuse codes</td>
<td>252</td>
<td>66</td>
<td>26.4%</td>
</tr>
<tr>
<td>Personality disorders</td>
<td>105</td>
<td>41</td>
<td>39.0%</td>
</tr>
</tbody>
</table>

**Totals:**

|                  | 34,024 | 10,336 | 30.4% |

<table>
<thead>
<tr>
<th>Payer Mix</th>
<th>5 Mile Radius Payer Mix %</th>
<th>Total OC Market</th>
<th>5 Mile Radius of 265 Anita</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medi-Cal</td>
<td>52.9%</td>
<td>15,441</td>
<td>5,463</td>
</tr>
<tr>
<td>Commercial</td>
<td>23.0%</td>
<td>10,772</td>
<td>2,379</td>
</tr>
<tr>
<td>Self Pay</td>
<td>11.4%</td>
<td>3,823</td>
<td>1,176</td>
</tr>
<tr>
<td>Medicare</td>
<td>11.3%</td>
<td>3,464</td>
<td>1,172</td>
</tr>
<tr>
<td>Other</td>
<td>1.4%</td>
<td>525</td>
<td>147</td>
</tr>
</tbody>
</table>

**Totals:**

|                  | 34,024 | 10,336 | 100.0% |
ANITA STREET WELLNESS HUB

- **Residential Treatment < 90 Days**
  - **Mental Health Program**
    - Transitional Residential < 2 weeks
  - **Co-Occurring Disorders Program**
  - **SUD Program**
    - Withdrawal Management < 1 week
  - **Psychiatric Intake + Referral** < 1 day
  - **SUD Intake + Referral** < 1 day

**Triage**
ANITA STREET INNOVATION CONCEPT
ANITA STREET INN CONCEPT

- Introduce a new approach to improve the overall mental health system by:
  - Employing a collective impact model with strategies, approaches and outcomes aligned across sectors/agencies
  - Pooling fiscal resources across sectors:
    - County Public Mental Health
    - CalOptima
    - Hospital Community Benefit

33.3% 33.3% 33.3%
3 INTER-DEPENDENT INN PROJECTS

How do we leverage behavioral health dollars across sectors to serve an entire community effectively and efficiently, regardless of payer source?

1.0 Value-Based Contracting
OC Community EQRO

1.1 Cross-System Peer Navigation

1.2 Managed Behavioral Health Organization (MBHO)

Staggered Project Start Dates

Public-Private Funds Blended to Create a PAYER AGNOSTIC SYSTEM
1.0 VALUE-BASED CONTRACTING & OC COMMUNITY EQRO

**Description:**

- Value-Based Contracting (VBC)
  - Incentivize service quality and improve client outcomes
- Community External Quality Review Organization (EQRO):
  - Monitor performance of programs based on VBC terms

**Goals:**

- Drive quality across co-located services
- Create synergy among co-located programs
- Influence quality and standards across behavioral healthcare systems
1.1 CROSS-SYSTEM PEER NAVIGATION

Description:

- Offer 24/7 navigation assistance to clients by persons with lived experience, including parent partners:
  - Ombudspeers assist with efficient navigation of on-campus services
  - Community Care Navigators facilitate linkage to services upon discharge from Anita Street

- Create/maintain an online curated resource directory to assist navigation
  - Providers can update information without having to rely on a webmaster
  - Clients can opt to complete a social determinants profile to facilitate referral recommendations
  - Clients can post reviews that the EQRO can use to assess service quality

Goals:

- Improve access to appropriate/needed clinical services by facilitating linkages through (1) peer navigation and (2) technology-enhanced matching to services
1.2 MANAGED BH ORGANIZATION

Description:
- Create a network of behavioral health providers who will serve clients regardless of payer source
- Recruit qualified providers capable of addressing cultural needs currently unmet by existing systems/services
  - e.g., Veterans, ethnic communities, deaf and hard of hearing, LGBTQ, etc.
- Providers agree to a universal reimbursement rate established with MBHO in coordination with payer sources
- MBHO will credential and verify provider’s stated expertise/training

Goals:
- **Increase** and **equalize** access by need and not by payer type
- Improve ability to serve unserved and underserved communities
PROPOSED INN EVALUATION PLAN
OVERARCHING LEARNING OBJECTIVES

- Improve timely access to services
- Increase access to services, particularly among un- and underserved communities
- Improved engagement in outpatient behavioral health services
- Improved client outcomes as measured by:
  - decreased ED utilization due to behavioral health crises
  - decreased psychiatric hospitalization episodes and/or length of stay
NEXT STEPS: TARGET DATES

December 2018 – January 2019
- Community Planning Meetings
- MHSA Steering Committee Anita St INN Project/Budget Presentation

February 2019
- 30-day Public Comment

March 2019
- Mental Health Board Presentation

April 2019
- County Board of Supervisors Approval
- MHSOAC Presentation