Mental Health Services	
Act Steering Committee	
Meeting	
July 1, 2013	
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Welcome	
Sharon Browning,	
Facilitator	
	_
Local MHSA UPDATE	
LUCAI MINSA UPDATE	
Bonnie Birnbaum, MPH	
MHSA Coordinator	

State MHSA update	
State Willish apaate	
Mary Hale,	
Behavioral Health Director	
	· ·
MHSA Subcommittee	
Updates	
1. Helen Cameron and Patti	
Pettit 2. Daria Waetjen	
<ol><li>William Gonzalez and Denise Cuellar</li></ol>	
<b>Community Action</b>	-
Advisory Committee	
Update	
Denise Cuellar	



What is AB 109?	
<ul> <li>Public Safety Realignment Act of 2011</li> </ul>	
State responsibility for:	
▶ Incarceration	
► Treatment	
<ul> <li>Supervision transferred to Counties for non-serious, non-violent, non-</li> </ul>	
sex offenders	
10	
What is AB 109?	
<ul><li>Two populations</li></ul>	
<ul> <li>Post-release Community Supervision (PCS)</li> <li>Released from State prison</li> </ul>	
Would otherwise have been placed on parole	
Mandatory Supervision	
<ul> <li>Released from County jail</li> <li>Otherwise would have served time in State prison &amp; released onto parole</li> </ul>	
Both populations supervised by Probation Department	
Individuals are not on probation	
11	
AB 109 Funding	
AB 109 Funding	
Controller of College London London	
<ul> <li>County allocation of funding based on formula</li> <li>Orange County allocation:</li> </ul>	
• 2011-12 - \$25,734,096	
► HCA BH post-custody services - \$2,077,055	-
• 2012-13 - \$56,302,998	
► HCA BH post-custody - \$5,067,270	
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### **AB 109 Treatment Services**

 Services Include Continuum of Care for Mental Health Disorders and Substance Use Disorders



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## Assessment AB 109 Treatment Services

- Assessment
  - Upon release from custody, Probation refers individuals to HCA for assessment
- Assessment Team Co-located at Probation
  - Assesses for mental health and substance use disorder needs
  - Refers and links to appropriate behavioral health services
  - Four clinical staff
- Since November 2011, staff have conducted 2,611 assessments
  - April 2013, staff conducted 279 assessments

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## Mental Health AB 109 Treatment Services

- Outpatient mental health treatment for SPMI
- Shelter beds
- Full Service Partnership (FSP)
- Short-term psychiatric care for non-SPMI provided on site at Probation
  - Medication prescriptions
  - Linkage to medications

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## **Substance Use Disorder AB 109 Treatment Services**

- Detox
  - Medical and social model
  - Methadone detox
- Residential treatment
- Outpatient treatment
- Methadone Maintenance
- Sober living beds (must concurrently be in treatment)
- Bed capacity for 2013-14
  - Treatment 97
  - Sober living 56

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## Case Worker AB 109 Treatment Services

- Meets with inmates prior to release
- Informs inmates of available BH services and how to access them
- Follows inmates after release to link to services
- Provides post-custody support in accessing services
- Provides support to onsite psychiatrist at Probation
  - Case manages
  - Helps clients access medication

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### **Resources**

Orange County Probation

http://ocgov.com/gov/probation/prcs

Health Care Agency Behavioral Health Services

www.ochealthinfo.com/bhs



### **Boundary Spanner Concept**

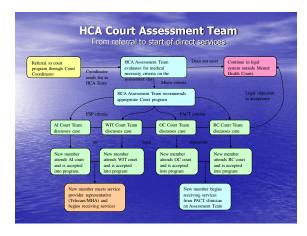
- A person who links two or more systems whose goals and expectations are at least partially conflicting
- Can greatly assist in both the identification and solution off key justice-mental health interactions

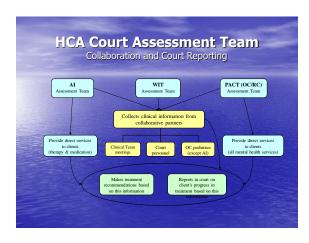
Steadman, H. J. (1992). Boundary spanners: A key component for the effective interactions of the justice and mental health systems. Law and Human Behavior 16 (1) p..75

## Court Programs We Serve

- "Whatever it Takes" Court (WIT)
- Opportunity Court (OC)
- Recovery Court (RC)
- Assisted Intervention Court (AI)

Services Provided by the Team
<ul> <li>Assessment</li> <li>Linkage</li> <li>Treatment Recommendations/</li> <li>Reporting</li> <li>Direct Member Services</li> </ul>





## **Telecare Corporation**

Presentation to
MHSA Steering Committee:
WIT Program

Presented by: Lisa Steele, Ph.D.

July 1, 2013



### Our Recovery Philosophy

- Telecare was founded on the belief that rehabilitation and recovery from serious mental illness are possible, and that people can recover their hopes, dreams and life roles. We have consolidated our learning and experience into the Recovery Centered Clinical System (RCCS), a richly personal, holistic, comprehensive approach to recovery.
- The Recovery-Centered Clinical System (RCCS) is based on a belief that recovery can happen. RCCS creates an environment that supports recovery by concentrating on two distinct but complementary areas: culture and conversations.





- This FSP program serves 100 Individuals with a Severe Mental Illness (and History of Accessing OCHCA services), a Co-Occurring Substance Use Disorder, and a Felony History
- The Criminal Case is transferred from Superior Court to Judge Lindley's Community Court
- The Collaborative Team is comprised of the Judge, The District Attorney, Public Defender, Probation Department, OCHCA's Assessment Team, and Telecare WIT Treatment Team
- Services include: Case Management, Individual and Group Therapy, Education/Skill Building Groups, Psychiatric and Nursing Services, Education/Employment Assistance, Housing Assistance, Financial Assistance/Rep-Payee Services, Healthcare Linkage and Support, and Co-Occurring Substance Abuse Treatment Services. The office is open 8:30-5 Monday through Saturday, and by phone 24/7.

## How the Court Collaborative Functions



- OCHCA Assessors meet with the prospective member
- Assessment and Criminal History are reviewed in the Judges Chambers weekly with all collaborative partners present
- If appropriate, member signs plea agreement including all the court and probation requirements, and is then released to WIT
- The collaborative team (all but the Judge) meets weekly to discuss cases on the Court Calendar, and discuss member progress in the program

## WIT Member Demographics (July 2012-June 1, 2013)

- Members Served: 131
- **Gender:** Male- 55%, Female:44%, Transgender-1%
- Age: 18-24=20%; 25-45=46%; 45-65=34%
- Ethnicity: White: 67%; Hispanic/Mexican: 17%; Black/African American: 6%; Asian/PI: 4%; Not Responded; 6%
- Axis 1Diagnosis:Bipolar Dx (40%);
   Schizoaffective/ Schizophrenia Dx (48%); Major Depressive Dx (6%):Psychotic Dx (6%)
- · Average Length of Accessing Mental Health: 20 years

### WIT Program Design

- 18-24 month program
- 4 phases of the program ranging from
   5 days/week for 6 hours/day on site, decreasing in frequency through each stage to once weekly
- Psychiatric services including visit with Doctor and/or Nurse Practioner every 3 weeks and LVN/LPT as needed
- Daily Education and Skill Building Groups and Individual Case Management, and Therapy

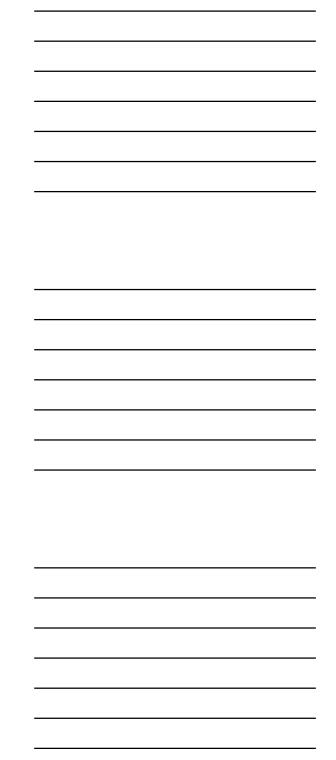
### It's All In The Details... Program Components

- Education/Employment Assessment & Support
- · Housing Placement and Assistance
- Individual and Group Therapy with Licensed Clinicians
- Intensive Co-Occurring Substance Abuse Treatment Track (voluntary and court ordered)
- Community Reintegration Outings
- Field Visits for support to members In their natural setting



### **Unique Services**

- Groups focus on overall Recovery
  - Stages of Readiness, 16 week Recovery Treatment Group
  - Intensive Outpatient Co-Occurring Recovery Treatment
  - Personal Medicine/ "Feeling Good Series"
  - Physical Health and Wellness Groups
  - Medication Education groups led by NP & LPT
  - Music for Recovery- purchased guitars, drums and keyboards to allow members to express themselves; WIT Band
  - On-site 12 Step Meetings



### **Program Successes**



#### As of June 1, 2013:

- Psychiatric Hospitalizations at 6%
- Homeless Days since Admission- 0%
- Employed- 14%
- In School- 19%
- Re-offended while in the program-0%
- Members independence with medication adherence- 97%
- Members able to manage own finances (not requiring rep/payee): 92%

### Please Come Visit and Tour!



Telecare WIT 1910 N. Bush Street Santa Ana, CA. 92706 714. 361-7950

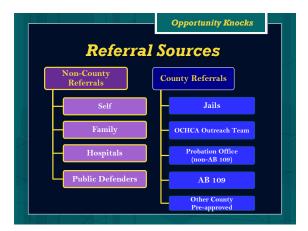
### **CCS Opportunity Knocks**



Serving adults with mental illness involved in the crimina justice system since 2006

June 2013



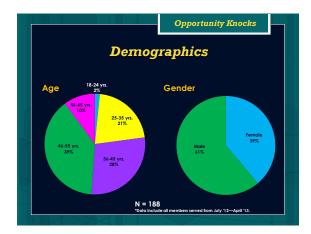


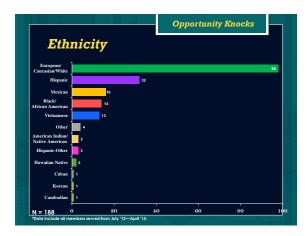


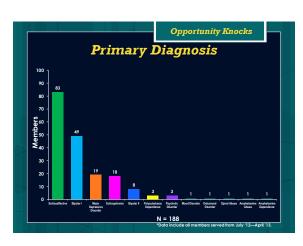












ı	Opportunity Knocks	
	Special Project	
	Transformational Care Planning	
	<ul> <li>Person-centered care framework that places the self-identified needs of clients at the core of treatment.</li> </ul>	
	Four Modules     Conceptual Review     Assessment     Understanding the Client's Story & Creating a Narrative Summary     Developing the Transformational Care Plan	

	Opportunity Knocks
For More Inf	ormation
roi more ini	ormanon
<ul> <li>Jane Gibb, Progran</li> </ul>	n Director
<ul> <li>Jane Porphir, Clinica</li> </ul>	
Opportunity Kr	nocks
12800 Garden Grove I	
Garden Grove, CA 92	843
<b>Phone</b> : 714-620-8131	

# Committee Members Comments

Sharon Browning, Facilitator

Members	of	the	<b>Public</b>
Comment	S		

Sharon Browning, Facilitator

Meeting Adjourned

Next Meeting: Monday, August 5, 2013