



Assisted Outpatient Treatment “AOT”

Laura’s Law

Orange County Health Care Agency
Behavioral Health Services



Who can request AOT?



- Immediate Adult family members
- Adults residing with the individual
- Director of treating agency, organization, facility or hospital
- Treating licensed mental health professional
- Peace officer, parole or probation officer supervising the individual

AOT Criteria



- County resident, minimum 18 years of age
- Person is suffering from a mental illness
- There has been a **clinical determination** that the person is unlikely to survive safely in the community without supervision

AOT Criteria



- The person has a history of lack of compliance with treatment for his or her mental illness, in that at least one of the following is true:
 - The person's mental illness has, at least twice within the last 36 months, been a substantial factor in necessitating hospitalization, or receipt of services in a forensic or other mental health unit of a state correctional facility or local correctional facility

OR

- The person's mental illness has resulted in one or more acts of serious and violent behavior toward himself or herself or another, or threats, or attempts to cause serious physical harm to himself or herself or another within the last 48 months

AOT Criteria



- The person has been offered an opportunity to participate in the development of their treatment plan for services and continues to fail to engage
- The person's condition is substantially deteriorating
- AOT would be least restrictive placement, that is appropriate and feasible, and necessary to ensure person's recovery and stability

AOT Criteria



- In view of the person's treatment history and current behavior, the person is in need of assisted outpatient treatment in order to prevent a relapse or deterioration that would be likely to result in grave disability or serious harm to himself or herself, or to others, as defined in Section 5150.



1-855-HCA-1421

To facilitate referral and criteria verification

Important Medical History Summary under WIC 5008.2 (AB 1424)*

Summary of Mental Illness of a loved one on NAMI website

Summary of Mental Health History for our family member:

This summary is provided by a family member, relative, or friend, who knows the person named below very well.

(Name) _____

Summary submitted on (date): _____

D.O.B. _____ Social Security Number: _____

Medical Insurance Company _____

Medical Record Number or ID# _____

Doctor or Care Coordinator: _____

Phone Number: _____

Medical Diagnosis: (Psychiatric diagnosis) _____

Medications Prescribed: _____

Medications presently taking: _____

Medications given in the past that were not tolerated well:

Adverse reactions: _____

History of medical condition starting with most recent past: (include the follow information)

- State whether loved one is or ever was a danger to self or others, and gravely disabled
- State any homelessness, hospitalizations, diagnosis, medications, incarcerations
- State what frightens and calms your loved one
- Keep it brief, concise and dramatic. Write no more than one page.
- State education, work history

End with information about yourself, spouse or other persons close to family member and describe the relationship with your loved one. Give names and contacts if applicable. State that you are a member of:

List health and religious organizations including National Alliance on Mental Illness Orange County and /or California Treatment and Advocacy Coalition.

Sign with names of self, spouse and other support persons mentioned above.

Summary reported and submitted by:

Name: _____ Phone: _____

Fax: _____ Cell: _____

Address: _____

E-mail: _____

(please print email very clearly)

AOT Screening



- County of Orange Assisted Outpatient Treatment Team includes:
 - Mental Health Specialist's, licensed clinicians, & psychologist
- AOT team will conduct all outreach, screening, and linkage to services if agreed to by client
- Psychologist will conduct clinical assessments prior to petition being filed to ensure need for AOT and will testify to findings and treatment recommendations in court

AOT Process



- AOT referrals will be screened face to face by County Outreach and Engagement Team
- The team will respond and make all efforts to engage referred candidate and offer voluntary services
- If services are accepted, referred candidate will be linked to appropriate provider and process will stop here

AOT Process continued



- If AOT candidate refuses services but is open to engagement, the team will continue to see client as they gather supporting evidence of criteria and continue to offer/facilitate linkage to services (building relationship)
- The AOT Outreach and engagement team will continue to engage candidate until such time that it is determined that candidate will not engage or accept services voluntarily, AOT is best course of action and that all criteria can be substantiated in court

Petition Process (Pre-Hearing)



- Petition will only be filed if criteria can be proven by clear and convincing evidence
- Petition filed with County Counsel
- County Counsel will file petition with court and notify Public Defender and Patients Rights
- Candidate will be offered settlement prior to proceedings

Petition Process (Pre-Hearing)



- If candidate refuses, “Court may order that the person consent to a clinical assessment”
- If person refuses, court may order person be taken to hospital for the assessment for up to 72 hrs
- Purpose of assessment is to determine if an individual meets AOT clinical necessity criteria
- An order for assessment under this section is not an order for treatment

AOT Hearing Process



- Subject of AOT Petition has a right to legal counsel
- Court hears testimony and recommendations
- If the court finds that the person meets the criteria for AOT, and there is no appropriate and feasible less restrictive alternative, the court may order AOT
- Hearing may be conducted in absence of the person ONLY if:
 - County has personally served a copy of the petition
 - Given written notice and can show that appropriate attempts to elicit the attendance of the person have failed

AOT Petition Granted



- If granted in court, the treatment plan developed may not exceed six (6) Months
- Candidate will be linked to Full Service Partnership Program for treatment plan implementation

AOT Granted (continued)



- If person refuses to comply with the ordered treatment, there is strong belief that criteria for AOT is still present and efforts were made for voluntary compliance, the treatment provider may request that the person be transported for assessment pursuant to WIC 5150
- However, if at any time the person is determined not to meet criteria for 5150, that person must be released, unless they voluntarily agree to stay in the hospital

AOT Granted (continued)



- Failure to comply with AOT order alone may not be grounds for involuntary commitment or hospitalization or a finding that the person ... is in contempt of court
- There are no civil or criminal penalties for violation of an AOT Order and treatment plan

AOT Implementation (continued)



- FSP Program Director files affidavit each 60 days that candidate continues to meet AOT criteria:
 - Candidate is entitled to a hearing every 60 days challenging the need for an AOT Order
 - Candidate also has a right to Habeas Corpus



- Recovery-focused, strength-based services
- Small case loads (10 to 1 ratio)
- Intensive case management/wrap-around-services
- Co-occurring disorder treatment
- 24/7 on-call staff response if needed
- Field-based services
- Peer-run activities
- Educational/Vocational assistance
- Housing specialist

AOT Treatment – Full Service Partnership Program



- All-encompassing continuum of services available just as in regular Full Service Partnership services
- Carefully tailored treatment plan
- Assistance with entitlements (Social Security, Medi-Cal)
- Integrated Person focus (substance use disorders, Psychiatric, Medical,
- Life Skills training
- Community integration

Annual AOT Report



- June 1 to May 31 of each year
- It is required that each county that operates an assisted outpatient treatment program provide data to the State Department of Health Care Services (DHCS) and must include, at a minimum, an evaluation on the effectiveness of the strategies employed by the and following data markers:
 - (1) Reducing homelessness and hospitalization of persons in the program and in
 - (2) Reducing involvement with local law enforcement by persons in the program

AOT Outcomes



The evaluation and report shall also include any other measures identified by the department regarding persons in the program and all of the following, based on information that is available:

- (3) The number of persons served by the program and, of those, the number who are able to maintain housing and the number who maintain contact with the treatment system
- (4) The number of persons in the program with contacts with local law enforcement, and the extent to which local and state incarceration of persons in the program has been reduced or avoided
- (5) The number of persons in the program participating in employment services programs, including competitive employment

AOT Outcomes



- (6) The days of hospitalization of persons in the program that have been reduced or avoided
- (7) Adherence to prescribed treatment by persons in the program
- (8) Other indicators of successful engagement, if any, by persons in the program
- (9) Victimization of persons in the program
- (10) Violent behavior of persons in the program
- (11) Substance abuse by persons in the program

AOT Outcomes



- (12) Type, intensity, and frequency of treatment of persons in the program
- (13) Extent to which enforcement mechanisms are used by the program, when applicable
- (14) Social functioning of persons in the program
- (15) Skills in independent living of persons in the program
- (16) Satisfaction with program services both by those receiving them and by their families, when relevant