

Quality and Productivity Commission
28th Annual Productivity and Quality Awards Program
"Los Angeles County: Ahead of the Curve"

2014 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: HOPE ON THE HORIZON: COMMUNITY BASED PEI PROJECT

DATE OF IMPLEMENTATION/ADOPTION: APRIL 2012
 (Must have been implemented at least one year - on or before June 30, 2013)

PROJECT STATUS: _____ Ongoing One-time only

HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT? _____ Yes No

EXECUTIVE SUMMARY: Describe the project in 15 lines or less using Arial 12 point font. Summarize the problem, solution, and benefits of the project in a clear and direct manner. The Community Based Prevention and Early Intervention (CBPEI) Project was an 18 month collaborative project between the L.A. County Dept. of Mental Health (DMH) and L. A. County Dept. of Senior and Community Services (CSS) to improve access to mental health services for older adults throughout L.A. County. DMH provided Mental Health Services Act (MHSA) PEI funding to enable CSS to hire approximately ten temporary Neighborhood Workers to strengthen the process of identifying and referring older adults that might benefit from mental health services, to LAC DMH Providers. In addition to funding staff to support this effort, DMH paired each of its Older Adult PEI Providers with CSS Centers. This helped to strengthen working relationships and facilitated faster referrals to mental health providers when appropriate. This project entailed the cross training of both CSS and DMH staff; thereby, improving access to both systems. From April 2012 thru June 2013, this CBPEI Project outreached around 71,202 individuals, engaged (one-on-one) 5,936 individuals in the communities, and referred 957 seniors for mental health services. The co-location of mental health staff at the CSS centers was a helpful tool in improving access, reducing stigma and enhancing interdepartmental collaboration.

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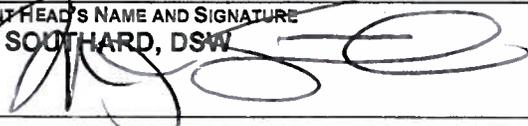
(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$	\$	\$ 0	<input checked="" type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS Department of Mental Health 550 S. Vermont Avenue, Room 601 Los Angeles, CA 90020	TELEPHONE NUMBER 213-738-4601
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PROGRAM MANAGER'S NAME Martin Jones, LCSW MH Clinical District Chief	TELEPHONE NUMBER (213) 639-6002 EMAIL mjones@dmh.lacounty.gov
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PRODUCTIVITY MANAGER'S NAME AND SIGNATURE <small>(PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME)</small> KUMAR MENON, MSPA 	DATE 7-11-2014	TELEPHONE NUMBER 213-738-4258 EMAIL kmenon@dmh.lacounty.gov
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DEPARTMENT HEAD'S NAME AND SIGNATURE MARVIN SOUTHARD, DSW 	DATE 7-11-2014	TELEPHONE NUMBER 213-738-4601
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1st FACT SHEET – LIMITED TO 3 PAGES ONLY: Describe the **Challenge, Solution, and Benefits** of the project.

CHALLENGE

The challenge that this project addressed was the fact that older adults are less likely to access and engage in mental health treatment, despite the need to do so. This may be in part due to the stigma related to accessing and receiving mental health care. There are also generational issues at play, misconceptions about aging and also distrust of mental health providers. Older adults are more likely to report concerns to their primary care physician, rather than access treatment services through the mental health system. Short-term mental health treatment is available to increase the quality of life that older adults experience and avoid escalation of symptoms.

SOLUTION

DMH collaborated with CSS to identify and link older adults who may need short-term mental health interventions to a DMH Older Adult PEI Provider. DMH mapped mental health providers to CSS Senior and/or Community Centers throughout Los Angeles County. DMH through a Departmental Service Order (DSO) allocated \$1,018,900.00 to CSS to implement this innovative program. Planning for this collaborative program began in January 2012 and the program was implemented in April 2012. Trainings, forums and meetings were convened to foster and build effective and responsive relationship between DMH providers and CSS CBPEI staff. A referral form and mechanism was developed and implemented. CSS staff were trained on a wide array of mental health issues that strengthen their ability to recognize older adults within the Senior Centers, that might benefit from PEI mental health services. Liaisons were identified and designated at each program, which enhanced the communication and referral process. Referrals were followed-up on in a timely manner. The collaboration improved access to mental health care. Older adults who were referred and linked to PEI mental health Providers, made a broad array of mental health Evidenced Based Practices (EBPs) available to participants, including the following: Problem Solving Therapy (PST), Crisis Oriented Recovery Services (CORS), Program to Encourage Active, Rewarding Lives for Seniors (PEARLS), Interpersonal Psychotherapy (IPT), and Seeking Safety (SS). The above EBPs are short-term and solution focused, which help to restore older adults to their previous level of functioning, improve problem solving skills and enhance coping strategies.

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BENEFITS

The CBPEI Project proved to be a good collaboration between DMH and CSS. Since CSS had no mental health component for their clients, the project served to enhance existing CSS programs.

During the entire period of the project from April 2012 through June 2013, this CBPEI Project outreached around 71,202 individuals of the local communities. They engaged (one-on-one) 5,936 individuals and referred 957 seniors for mental health services.

The CBPEI project had following benefits:

- Mapped CSS Centers to DMH Older Adult PEI Providers.
- Improved access to care.
- Improved expertise of both DMH and CSS staff.
- Decreased stigmatization in seeking assistance for daily life stressors among older adults.
- Continual collaborative meetings between providers and County staff to address client barriers, as well as share best practices.
- Improved the array of psycho-educational services available in the senior centers (Mental Wellness presentations for seniors).
- Established a uniform referral process that expedited care.
- Developed a process to communicate around referral follow up.
- Collaborated with CSS and completed joint community outreach.
- Sustained collaboration and partnership has continued after the conclusion of the project.

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LINKAGE TO THE COUNTY STRATEGIC PLAN (DETAIL IS REQUIRED FOR COUNTY DEPARTMENTS):

Goal II: Eliminate disparities in mental health services, especially those due to race, ethnicity and culture. (From the County of Los Angeles – Department of Mental Health Strategic Plan)

Strategy 2: Partner with underserved communities to implement mental health services in ways that reduce barriers to access and overcome impediments to mental health status based upon race, culture religion, language, age, disability, socioeconomics, and sexual orientation.

Los Angeles County Department of Mental Health partnered with Los Angeles County Department of Senior and Community Services to reduce barriers impacting older adults accessing mental health care through mapping mental health providers with CSS centers based on the specific geographic areas and cultural and linguistic needs of the older adults in the community. This enabled older adults to have access to mental health prevention and early intervention treatments in a natural and non-stigmatized setting. Also, this provided a seamless system of care where access to mental health services were expedited and increased the likelihood of older adults in need of mental health services in the community access to quality mental health care.

Strategy 3: Create, support, and enhance partnerships with community –based organizations in natural settings such as parks and recreational facilities to support the social and emotional well-being of communities.

Through this collaborative project DMH provided psycho-educational trainings to CSS staff and the community at large as a mechanism to reduce stigma, promote wellness, and increase awareness and access regarding available mental health resources and services in the community. These presentations also helped to promote prevention and early intervention prior to escalation of mental health issues.

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COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFIT): If you are claiming cost benefits, include a calculation on this page. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation.

Cost Avoidance: Costs that are eliminated or not incurred as a result of program outcomes.

Cost Savings: A reduction or lessening of expenditures as a result of program outcomes.

Revenue: Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

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FOR COLLABORATING DEPARTMENTS ONLY
(For single department submissions, do not include this page)

DEPARTMENT NO. 2 NAME AND COMPLETE ADDRESS COMMUNITY AND SENIOR SERVICES 3175 WEST 6TH STREET LOS ANGELES, CA 90010	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE STEPHANIE MAXBERRY 	DEPARTMENT HEAD'S NAME AND SIGNATURE CYNTHIA D. BANKS 
DEPARTMENT NO. 3 NAME AND COMPLETE ADDRESS	
PRODUCTIVITY MANAGER'S NAME AND SIGNATURE	DEPARTMENT HEAD'S NAME AND SIGNATURE
DEPARTMENT NO. 4 NAME AND COMPLETE ADDRESS	
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DEPARTMENT NO. 6 NAME AND COMPLETE ADDRESS	
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