

## **MHSA SUPPORTED SERVICES AND ASSEMBLY BILL 1421 – LAURA’S LAW**

### **PURPOSE**

The purpose of this document is to provide a description of the Mental Health Service Act (MHSA) planning process that resulted in current available Sonoma County Mental Health outreach, engagement, and treatment services that match AB 1412 services, and a listing of Sonoma County Behavioral Health services that are similar to those outlined in Laura’s. AB 1421, known as “Laura’s Law”, which established the Assisted Outpatient Treatment (AOT) Demonstration Project Act of 2002 and became effective January 1, 2003.

With the November 2004 passage of Proposition 63, Sonoma County has significantly improved access to voluntary services. A broad range of intensive voluntary services have been implemented in Sonoma County under MHSA. Many of these new treatment services are geared specifically to individuals who resist seeking help or who have historically been underserved, including homeless mentally ill persons.

### **PLANNING**

Sonoma County Behavioral Health Division currently provides outreach, engagement, and treatment services that mirror the AOT outlined in AB 1421 as codified in Welfare and Institutions Code (W&I) 5348. Many of these mirror services are funded with MHSA dollars.

Furthermore, MHSA planning activities mirror planning requirements of AB 1412 as outlined in W&I 5348 which states in part:

“...a county that chooses to provide assisted outpatient treatment services pursuant to this article shall offer assisted outpatient treatment services including, but not limited to, all of the following:(2) A service planning and delivery process that includes the following: (A) Determination of the numbers of persons to be served and the programs and services that will be provided to meet their needs. The local director of mental health shall consult with the sheriff, the police chief, the probation officer, the mental health board, contract agencies, and family, client, ethnic, and citizen constituency groups as determined by the director.”

The Sonoma County MHSA planning process to determine treatment service models began in the Fall of 2004. The planning process actively involved broad community stakeholders groups (including those listed above in W&I 5348). In fact, the MHSA planning process took a further step to include community members on leadership groups including: the MHSA Planning Support Team, the MHSA Stakeholder Leadership Group, and the MHSA Steering Committee. NAMI – Sonoma County had a seat on each of these leadership groups.

In order to ensure broad community input to establish treatment service needs, Sonoma County Behavioral Health Division launched an extensive public awareness campaign that included:

- Distribution of over 2,500 postcards in English and Spanish
- Advertisement in various countywide and regional newspapers,
- Posting of notice on its website
- Broadcast through email blasts, and
- Circulation of numerous information flyers.

This public awareness campaign resulted in robust community participation. Participation utilized various input processes including focus groups, surveys, and 58 community meetings held throughout

the geographic areas of Sonoma County. Participants included mental health board members, independent and community-based providers, law enforcement representatives, health care and human services providers, housing advocates, and mental health consumers and family members.

Family members played a significant role in determining services and treatment models. In fact, 19% of the participants at community meetings identified as a family member to an adult consumer and 4% as a family member to a child consumer.

## **SERVICES**

Sonoma County Behavioral Health Division currently provides a significant number of services that mirror AOT services. Below is a chart that outlines how current Sonoma County Behavioral Health Services match AB 1421 services types, as codified by W&I code 5348.

MHSA Funded Full Service Partnership Programs:

- **Transition Age Youth (TAY)** services to seriously mentally ill young adults 25 years of age or younger who are homeless or at risk for homelessness and continuation of services so that eligibility not been terminated as a result of age.
- **Older Adult Intensive Team (OAIT)** provides services directed to meet the special needs of older adults.
- **Integrated Recover Team (IRT)** services are directed toward substance treatment which includes gender-specific trauma and abuse in the lives of persons with mental illness.
- **Forensic Assertive Community Treatment Team (FACT)** services are designed to divert those with serious mental illness involved in less serious criminal behavior, from the criminal justice system to the Mental health treatment system.

MHSA Funded Medium Intensity Specialty Mental Health Programs:

- **Community Mental Health Centers (CMHC), Integrated Health Team (IHT), and Older Adult Team (OAT)**

Services to consumers with an untreated severe mental illness for less than one year, and who do not require the full range of services, but are at risk of homelessness without support services. These clients shall be served in a manner that is designed to meet their needs.

Non-MHSA Funded Programs High Intensity Specialty Mental Health Program:

- **Telecare- Assertive Community Treatment Team (ACT)** services directed to people with severe and persistent mental illness with a history of numerous psychiatric hospitalization, incarcerations, sub acute facility admissions, homelessness, legal involvement, emergency room visits, exhibiting intensive services needs, and/or legal involvement.

MHSA Funded Family Support Services:

- NAMI
- Buckelew Programs Inc. Family Services Coordinator

MHSA Funded Outreach:

- Community Intervention Program
- Crisis Assessment, Prevention, and Education Team
- Mobile Support Team (Jan 2012)

MHSA Funded Consumer Driven Programs:

- Interlink Self Help Center
- Wellness and Advocacy Center
- Russian River Empowerment Services

#### Emergency Housing

- Opportunity House – Community Support Network

#### MHSA Funded Permanent Supportive Housing for Individuals and Families

- Vida Nueva – Rohnert Park
- Fife Creek Commons – Guerneville (under construction)
- McMinn Ave. – Santa Rosa (2012)
- Windsor Redwoods - Windsor

#### Supportive Housing Services

Buckelew Programs, Inc. - Independent Living Skills Program

#### Social Rehabilitation Programs

- E Street – Community Support Network
- A Step Up – Community Support Network

#### Vocational Rehabilitation

- Co-op
- Job Link

#### Training & Consultation:

- MHSA Funded Crisis Intervention Training for Law Enforcement
- 5150 Training

#### Consultation

MHSA Funded: Community Intervention Program

#### Hospitalization and Alternatives

##### Crisis Stabilization Unit:

- Short term (up to 23 hours) intensive psychiatric stabilization services for voluntary and involuntary consumers in acute crisis. Services include medication, meeting with extended family or significant others and referral to appropriate level of care.

##### Crisis Residential Services – Progress Foundation:

- Services for voluntary consumers who are in an acute psychiatric crisis and can be diverted from inpatient psychiatric hospitalization

##### Psychiatric In- patient Hospitalization – Signature Healthcare Services, LLC

- Aurora Behavioral Health - a 96-bed psychiatric hospital, providing inpatient psychiatric services to adolescents, adults and seniors opening in early 2012

For a complete description of all MHSA funded services please visit:

[www.sonoma-county.org/health/about/behavioralhealth.asp](http://www.sonoma-county.org/health/about/behavioralhealth.asp)

