

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL

June 15, 2005

TO: Jim Allen
Deputy Director

FROM: Charles Ellis, LCSW
Program Head

SUBJECT: **CLINIC TRANSFORMATION PROPOSAL**

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL

Key Elements of the New System

Hollywood Mental Health Center intends to transform the services and the culture of the clinic. The new system will embrace Recovery model principles and a wellness approach.

Initial Transformation Goals

- Embracing and promoting a wellness and recovery philosophy in the culture of the clinic.
- Developing an ACT-like program in the clinic.
- Developing an on-site Wellness Center.

Objectives for Initial Transformation Goals

- Incorporating quality of life elements into current and new programs being developed in the clinic.
- A new configuration of the clinic to support consumers moving through programs and eventually exiting the system.
- Involving consumers and family initially via a consumer council to address service planning.
- Involving specific multi-disciplinary staff to plan and implement initial transformation efforts, such as engagement strategies aimed to encourage consumers to participate in recovery-oriented programs.
- Encourage staff to attend trainings provided by DMH training and cultural Competency Bureau that focuses in the recovery philosophy.

Implementation

Hollywood Mental Health staff has allocated existing staff to the ACT program and the Wellness Center. The transformation committee is meeting weekly to discuss the various variables that need to be considered to successfully implement the initial transformation goals of having ACT and the Wellness Center start by July 2005. Both programs (ACT/Wellness) have ordered the specific equipment needed to accomplish the activities in both programs. In addition, new group programs fostering recovery principles are being developed by staff who are not directly involved with ACT or the Wellness Center. In all, Hollywood Mental Health Center will maintain a quality of life focus and not a symptom reduction focus.

Engaging Clients in a Recovery Model

The flow chart is designed to demonstrate how our clinic will transform and engage clients in a recovery model. (See Attachment I) Hollywood Mental Health operates as a 'walk-in' clinic where consumers may 'walk-in' and the clinic will make all attempts to service the client that same day including psychiatric medications. At intake, the treatment team will attempt to identify where the client is in terms of their stage of treatment. With this in mind the client may be in one of three levels: *Beginning, Intermediate and Advanced.*

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL

- The ACT program (Beginning level) is for clients that are in need of intensive case management and frequent contact. These clients will be assigned to the ACT treatment team.
- The clients that are considered too stable for ACT, but still have some case management issues (i.e. housing, occupational, etc.) are considered to have a medium level of need. These clients will be part of the 'body of the clinic' (Intermediate Level).
- The last group will include clients that are in need of low-level case management and are stable in terms of their basic needs. These clients generally have housing, income, and may currently be 'medication only clients.' These clients will be a part of the Wellness and Recovery Center (Advanced Level).

Ultimately our goal is to move all clients through the Wellness & Recovery Center and into our Community reintegration program to foster recovery. We would like to emphasize that we want our program to be flexible and 'Person Centered.' The services under each 'program umbrella' are services that we feel would be appropriate for the corresponding level of need. Although this may be true, ALL clients will have access to ALL services available at the clinic. If at any time during recovery the client's needs change we will work with that client to move in the necessary direction within the clinic. Eventually Hollywood Mental Health would like to accept referrals directly from the community for ACT and Wellness. The clinic is also working on outreach efforts to identify clients that may have difficulty coming into the clinic to access services.

Assertive Community Treatment-ACT

The clinic has developed an ACT team to address the needs of clients that are currently diagnosed with a severe mental illness and inappropriately discharged or dropped from services because of the complexity involved in engaging and finding effective interventions to achieve recovery. (National Program Standards for ACT teams, 06/2003) The ACT model urges a multidisciplinary team with a small client to staff ratio to ensure individually tailored services with each client through relationship building, individualized assessment and planning, active involvement with clients to enable each to find and live in their own residence, to find and maintain in community jobs, to better manage symptoms, to achieve individual goals and to maintain optimism and recover. (National Program Standards for ACT teams, 06/2003) This team consists of two social workers and a registered nurse and will utilize the clinic's 7 FTE psychiatrists. Currently service area four's gatekeeper for ACT programs is stationed at Hollywood Mental Health and will be consulting with the program regarding successful implementation. The gatekeeper has already identified a number of clients open to Hollywood MHC that will be appropriate for the ACT program. We will also be giving referral sheets and criteria information to all staff and will be taking referrals from staff. Lastly, Hollywood's ACT team plans to work closely with our in-house Fee-For-Service team, which currently visits the psychiatric hospitals and assist with the development of

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
 HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL

treatment plans for Los Angeles County's poorly engaged and underserved clients to ensure continuity of care.

Act is a WRAP –around services program. Clients will receive emergency and routine services including, but not limited to housing, educational goals, employment, and social relationship skills. The following in-house programs are just some of what will be available to all ACT clients:

- Housing: A housing liaison is available and ACT will work closely with them to assist in finding suitable housing for homeless ACT clients. We also have an Interim Funding program to assist with placing indigent clients in Board and Care's until benefits are established.
- Money Management-Representative Payee: This program will service ACT clients that need money management, a representative payee and/or budgeting skills.
- The Transition to Wellness—Co-occurring Disorder Program
 This Program embraces a structured model of treatment that integrates the stages of recovery. The goal of the program is to provide a comprehensive treatment model that focuses on psychoeducation, skill development, cognitive-behavioral & problem solving, support, and interpersonal process. During the initial phase of the program, treatment will address psychoeducation and self-evaluation to assess readiness for change and treatment. Consumers will transition to progressive modules and continue to foster their wellness by adding to their foundation of recovery. The program will be proactive in that participants will be responsible for their treatment and have measurable, definable and tangible goals. Upon completion of the program, consumers will be encouraged to transition to services provided under the umbrella of wellness and community integration.
- Social relationship Skills: Lastly, ACT intends to refer all appropriate ACT clients to our award winning Psych-Rehabilitation program that meets twice a week and discusses social skills, medications, symptoms management and other important social issues. Upon graduation from this program clients will then move to the socialization group which will prepare clients for reintegration into the community.

The ACT program will have telephone coverage 24hours/7 days a week for all ACT clients. This will ensure that the goal of preventing severe underserved clients from 'dropping out' of services is achieved. Staff will be elicited to rotate 'on-call' coverage. Each person will be on-call for one week every three months. If an after hours call comes in to the Department's ACCESS Center regarding an ACT client, the ACCESS Center staff will be instructed to call a emergency number to speak with the assigned on-call staff. The staff will then coordinate services for the evening and if a 5150 is to be done the PMRT will handle the call. The ACT team program coordinator will be notified the next business day via a log of after hour services that will be kept by each on-call staff person. This log will display the reason for the emergency call and it's disposition.

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL

Clinical Supervision will be available for all unlicensed on-call staff. The ACT team including the team leader and supervisor will meet daily to discuss all phone calls/field visits made to ACT clients the previous day/evening and discuss the plan for the day.

Body of the Clinic

The body of the clinic will be for clients with a medium level of need. These clients may not require 'intense services' offered by the ACT model nor fit into the Wellness model. That is they are not yet ready for recovery and community reintegration. These clients need a moderate level of case management which may include, short-term goal oriented therapy and medication education and support. The clinic will continue to work with these clients using a team approach. Currently the clinic's four on-duty multidisciplinary teams meet weekly to present and discuss on-going treatment concerns. This practice will continue as the clinic begins to move these clients towards Wellness, Community Reintegration, with ultimately Recovery. Each client will be offered groups and services that address their current needs, but will have access to all services available at the clinic.

The services that appear to be most appropriate for this population are outlined below:

Moderate case management, such as housing or eviction prevention, Section 8 assistance, employment, educational goals and budgeting.

The Transition to Wellness—Co-occurring Disorder Program

This Program embraces a structured model of treatment that integrates the stages of recovery. The goal of the program is to provide a comprehensive treatment model that focuses on psychoeducation, skill development, cognitive-behavioral & problem solving, support, and interpersonal process. During the initial phase of the program, treatment will address psychoeducation and self-evaluation to assess readiness for change and treatment. Consumers will transition through progressive modules and foster their wellness by building on their foundation of recovery. The program will be proactive in that participants will be responsible for their treatment and have measurable, definable and tangible goals. Upon completion of the program, consumers will be encouraged to transition to services provided under the umbrella of Wellness and Community Reintegration.

Medication support

Vocational rehabilitation We have a vocational rehabilitation specialist that will assist clients in achieving their employment/educational goals. Services will include assistance with resume building, development of interviewing skills and referrals to the Department of Rehabilitation if needed.

Money Management This program will service clients that need money management, a representative payee and/or budgeting skills.

We believe that in the first phase of the transformation the majority of our clinic will fall into this category in that they will not be appropriate for ACT but will need some support in terms of case management, therapy and psychiatric medications. As time goes on we

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL**

anticipate more clients being transitioned into the Wellness and Recovery Center and ultimately achieving the goal of recovery.

Wellness & Recovery

The Recovery Model is based on four principles. The first principle is **feeling hopeful**. Wellness activities will provide an opportunity for clients to share their personal stories, build relationships, believe in impossible dreams, and develop positive images of the future. The second principle is **feeling more powerful**. Clients need to access information, make their own choices, practice assertiveness, and build their self-esteem. **Taking responsibility for themselves** is the third principle. Clients need to take risks instead of avoiding stress. Clients need to be engaged in their treatment plan and not feel forced into it. They need to find those who will support their choices. Clients will be encouraged to try new things, to be more considerate of others and to stop blaming others for their unhappiness. Finally, **finding meaningful roles** is the fourth principle. Meaningful roles may be found in the form of work, family, spirituality, and love.

The Wellness Center's uniqueness lies in its emphasis on consumer-client run groups and activities. These activities will foster the Recovery Model principles. The Wellness Center will be designed to shift the focus from mental illness to a Recovery Model and Strength Based Approach. Groups will focus on taking responsibility for enhancing social networks; increase involvement in the community, and promoting physical health.

Hollywood Mental Health Center will initiate a transformation process in which it will create the recovery-oriented leadership and staff culture needed to actualize the transformation project.

Key Elements of Hollywood Mental Health Clinic:

The clinic will consist of four teams. Each team will have seven staff members consisting of: psychiatric social workers, medical caseworkers, nurses, a psychologist, and a MFT. Within these four multi-disciplinary teams one member from each team will be designated as the "wellness worker." These members will have caseloads consisting of those clients who have been identified as wellness candidates only within their team. "Wellness workers" will orient and encourage candidates to use peer support groups and self-help groups, the groups will be developed and located in the Hollywood Mental Health clinic's Wellness Center.

In addition, "wellness workers" from each team will meet to develop quality client led and co-led groups in the Wellness Center that promote Recovery Model Principles.

Hollywood Mental Health Center currently has 19 excellent groups that fall under the Recovery Model Principles and different stages of recovery, such as Project Return,

Psychosocial Rehabilitation, Healthy Living, Weight Loss, etc. It is proposed that these groups integrate into wellness activities, yet be categorized in 3 levels: Beginning level groups, intermediate level groups, and advance level groups.

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL.

Beginning Level Groups: (see attachment II)
Stage of Recovery- Pre-contemplation to early active treatment.
Clinical Risk- High risk.
Level of functioning- High degree of impairment.

Intermediate Level Groups: (see attachment II)
Stage of Recovery- Pre-contemplation to relapse prevention.

Clinical Risk- Moderate to high.
Level of functioning- Moderate to high degree of impairment

Advance Level Groups: (see attachment II)
Stages of Recovery-Contemplation to maintenance
Clinical Risk- Low to moderate risk
Level of functioning- low to moderate impairment

Community Reintegration program

The Community Reintegration Program takes a structured, psycho-educational approach to assisting those with chronic mental illness gain full and appropriate functioning in society. Milieu, behavioral and in-vivo interventions aim to increase symptom management ability, social functioning, and personal effectiveness for greater independence and quality of life.

Non-wellness staff workers will still have the ability to develop groups, especially for those in the intermediate level. "Wellness workers" will primarily focus on clients who are in advance level groups.

Source: A Road to Recovery, Mark Ragins, M.D., Medical Director, Village Integrated Agency, MHA, 2002.

Special Requests for Clinic Transformation

Staff- For this transformation process to be effective and successful, it is imperative to have psychiatric social work (Bilingual) items and clerical support items be allocated to Hollywood Mental Health Clinic. Currently, existing personnel has been used for the ACT and Wellness program. This effort has placed a burden on the entire clinic.

Petty Cash- The ACT and Wellness programs will need access to funds in order to purchase necessary miscellaneous items to meet the needs of ACT consumers and to facilitate group activities for the Wellness Program.

Transportation- ACT staff members will need access to County Vehicles to perform fieldwork with ACT consumers.

Hotel & Taxi Vouchers- ACT consumers will have a high level of service needs; therefore, it is necessary to have vouchers to meet urgent needs that ACT consumers may have.

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
HOLLYWOOD MENTAL HEALTH CENTER
ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL

Training- DMH training for staff and consumers (those who will be group facilitators) on the wellness and recovery philosophy.

Conclusion

The idea of recovery in Mental Health is a relatively new concept. Many of our clients think of a mental illness as a 'life sentence'. If we are able to foster hope and recovery in their lives this, in itself, will bring about change. In doing so we need to evaluate our current system and our current ways of thinking. This effort will require time and diligence as we work to achieve to get all employees to 'buy into' this new concept. A key part of making this transformation happen is working with our employees to ensure every one believes in "Recovery". In order to make this happen we can think of one word and that is consistency. If we consistently transform our ways of operating to embrace recovery our employees will embrace this concept and than be able to instill hope into the lives of our clients. Hollywood Mental Health has developed a proposal that not only works to transform clinical operations into a recovery model, but also attempts to get ALL employees involved in this change. We are linking all of our programs to this transformation and working with our staff to develop programs that fit a Recovery model. Our clients will have person centered treatment plans and services geared towards their specific needs. Our clients will be able to have hope that there is recovery from a mental illness and that eventually they will be in a 'space' that will allow them to give back to other clients.

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH HOLLYWOOD MENTAL HEALTH CENTER ADULT SYSTEMS TRANSFORMATION: A RECOVERY MODEL

COMMUNITY

Referred/Walk -in for Services
Assessed for Services, case opened and
Level of Severity determined

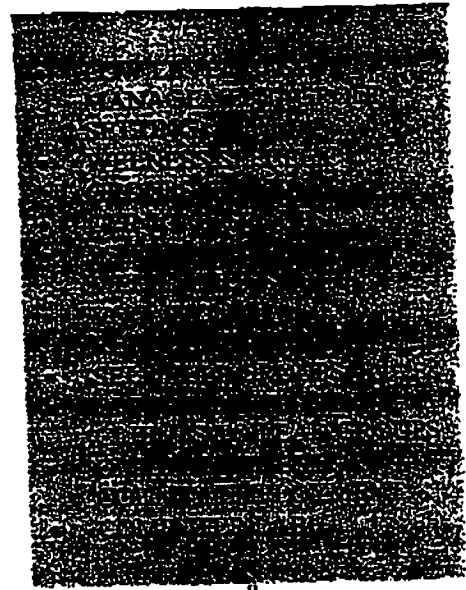
HIGH (ACT)

LOW (WELLNESS)

MEDIUM (BODY OF THE CLINIC)

- INTENSE CASE MANAGEMENT
- PSYCHOSOCIAL REHABILITATION
- CO-OCCURRING DISORDERS
- MONEY MANAGEMENT
- PSYCHIATRIC MEDICATIONS
- HOUSING
- BENEFITS ESTABLISHMENT
- VOCATIONAL REHABILITATION
- CLINICAL GROUPS

- MODERATE CASE MANAGEMENT
- SHORT-TERM THERAPY
- SOCIALIZATION
- CO-OCCURRING DISORDERS
- CLINICAL GROUPS
- PSYCHIATRIC MEDICATIONS
- VOCATIONAL REHABILITATION
- MONEY MANAGEMENT
- HOUSING
- BENEFITS ESTABLISHMENT



**COMMUNITY REINTEGRATION
RECOVERY**

Attachment II

Beginning Level Groups:

Peers are used in engagement and outreach and as role models. Self-help groups are also encouraged. At this stage, clients in the pre-contemplation and contemplation stage of recovery would provided each other with support to foster hope in clients.

Example of groups:

Peer Network Support Group among ACT clients
 Community Outreach Support Group with ACT clients.
 Money Management

Intermediate Level Groups:

Peers are used also in engagement and outreach. Peers are also used to develop a support system, role model hope and recovery. Self-help groups are also encouraged.

Example of groups:

Psychosocial Rehabilitation
 Psychosocial Community Re-Intergration
 Psychosocial Group
 Group Rehabilitation
 Co-Occurring Recovery Program
 HIV Group
 Gay Men's Psychotherapy Group
 Living in the Here & Now
 Anger Management

Advanced Level Groups:

Extensive use of peer supports as the primary component.

Example of Groups:

Spanish Speaking Support Group
 Spanish Speaking Anxiety Group
 Healthy Living
 Bipolar Group
 Depression Group
 Weight Loss
 Women's Empowerment Group
 Co-Occurring Recovery Program

Proposed Groups For Advanced Level:

Employment Peer Support Group

(Continuation of proposed groups)
Employment Preparation Peer Network
Relationship Building Peer Support Group
Co-Occurring Peer Support Group
Fitness Club
Case Management Support Group

(Note: All clients are encouraged to attend any group in these three levels. The system is fluid; however, clients do have a SFPR.)