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Reply To:

August 16, 1993

TO:

Harry L. Hufford

Chief Administrative Officer

Attention:

Beverly Campbell

FROM:

Areta Crowell, Ph.D. Com

Director of Mental Health

SUBJECT: DEPARTMENT HEAD GOALS FOR 1993-94

These goals are intended to improve the quality and quantity of services provided by the Department of Mental Health within limited resources, to enhance revenue generation capacity, and to meet the challenges of rapidly changing expectations for community systems.

DEPARTMENT HEAD GOALS

1. Enhance Systems of Care (EXCEEDS)

Enhance quality and quantity of Mental Health service delivery through program changes and improvements.

- A) Fully implement Coordinated Services/Rehabilitation Plan throughout the Department in both County and Contract operated Mental Health Centers.
- B) Fully operationalize the new Integrated Services Agency programs (PARTNERS).
- C) Follow-up on the Self-Assessment program findings and implement necessary changes.
- D) Follow-up on the Total Quality Management (Baldridge) Assessment findings and implement highest priority changes.
- E) Develop plans to increase bilingual/bicultural services.

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2. <u>Joint DMH/Harbor UCLA/Metropolitan State Hospital Program (FAR EXCEEDS)</u>

Working with the Department of Health Services and the State Department of Mental Health, finalize new Harbor UCLA/Metropolitan State Hospital Program.

- A) Finalize staffing patterns and Services and Supplies budget.
- B) Working with ISD finalize lease for Metropolitan State Hospital space.
- C) Obtain approval for Medi-Cal Certification from HCFA.

3. Children's System of Care Grant (EXCEEDS)

Accept and implement the State Grant for Children's System of Care Programs.

- A) Develop the scope of Work Plan (Performance Contract) for submission to the State.
- B) Obtain necessary Board of Supervisor approvals and implement program:
 - 1. Implement program for 1993-94 and complete planning for 1994-95.
 - 2. Hire and train staff.

4. Incarcerated Mentally Ill Task Force Recommendations (EXCEEDS)

In concert with other affected departments, develop plans to implement the recommendations of the Incarcerated Mentally Ill Task Force.

- A) Implement recommendations within existing resources to the extent possible, as identified in report to the Board of Supervisors.
- B) Develop detailed plans and analysis of resource needs for recommendations which cannot be implemented within existing resources.

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- C) Evaluate merit of MET and SMART for continued funding.
- D) CAO and Board of Supervisors approval of additional resources as necessary and feasible.

5. Mental Health Medi-Cal Managed Care (FAR EXCEEDS)

Complete first phase of three-year planning and implementation process for developing a Medi-Cal Mental Health capitated managed care service delivery system.

- A) Submit local planning process and commitment to State Department of Mental Health by October 30, 1993.
- B) Through the management of various committees, task forces, etc., develop designs for managed care systems of care, benefit services, fiscal and administrative operations.
- C) Work with State to establish Fee-For-Service cost allocation and consolidation of Fee-For-Service and Short-Doyle funds allocation methodology and establish standards and procedures for transition to managed care.
- D) Develop interface with Managed Care Health Planning Council and Governing Board in transforming Medi-Cal and indigent care health services to managed care delivery system.

6. Implement Enhanced Training Program (FULLY MEETS)

Implement enhanced training program including extension of focus of training to non-clinical skills.

- A) Cultural Competence training to be given to all levels of staff.
- B) Training in quality improvement approach to be offered to clinical and non-clinical staff.
- C) Supervisory skill training to be offered to all supervisors.
- D) Training to support Total Quality approach.

AC:bjj