

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
ARCADIA MENTAL HEALTH CENTER**

April 27, 2005 [Updated file: May 19, 2005-lt]

TO: Carlotta Childs-Seagle, Service Area III District Chief
FROM: Len Tower
SUBJECT: **FAMILY WELLNESS CENTER PROPOSAL DRAFT**

In an effort to anticipate the needs of the Department's transformation, Arcadia MH Center is in the process of developing a new way of "doing business." The first "change" proposal is the San Gabriel Valley Family Wellness Center (SGVFWC.)

In brief, the Family Wellness Center program will:

- be staffed by carving out personnel from the existing Arcadia MH operation, matched to Glendora NAMI and consumer volunteers;
- be supervised jointly by the Department, with Glendora NAMI;
- offer NAMI family support and education;
- focus self-help groups recovery services on a varied schedule;
- utilize client/member peer navigators to create a welcoming environment and facilitate enrollment, enabling new members to select recovery supports from a menu of wellness center activities and services; and,
- move members through a continuum leading to recovery and independence.

Where before there was a single program element, soon there may be three:

- an ACT program for intensive service recipients;
- continuing traditional services provided by the remaining current Arcadia MH Center program staff; and,
- the Family Wellness Center.

The overall transformation plan will eventually develop other program elements. Arcadia MH hopes to offer a pilot homeless outreach/pre-hospitalization intervention (5170) program for substance abusing mentally ill adult clients not currently receiving consistent services in the community.

Obvious problems face this daunting program transformation. Additional staffing will eventually be needed for each program. And, the issue of service to indigent clients must be addressed system-wide in Service Area III. Despite these considerable challenges, this initial step to develop the Family Wellness Center seems realistically achievable. Please review and offer any suggestions or directions. Thank you.

C: John Hatakeyama
Jim Allen
Arcadia MH Administrative Staff

**SAN GABRIEL VALLEY FAMILY WELLNESS CENTER
PROPOSAL DRAFT**

BACKGROUND: The passage of the California Mental Health Services Act dictates a transformation of the service delivery system. This effort is about breaking down barriers and building community support services which bridge existing gaps in the recovery continuum. This transformation proposal, intricately involving National Alliance for the Mentally Ill (NAMI) volunteers from the Glendora chapter and consumer participants, should facilitate access to a greater array of dependable recovery support options for the most stable service members. This major system change offers an opportunity to establish a solid link between traditional service providers, clients, families, and the community, while eliminating the "dead end" on the road to recovery.

While a combination of the members' wishes and needs drive the level of care, recovery and self-reliance remains the constant goal. Development of the Family Wellness Center (FWC) will enable the long established, traditional treatment center component to concentrate limited resources on delivery of intensive services [via a collaborative ACT-like program] to reach those who remain outside the traditional service system.

PROPOSAL: The existing service system is engulfed by overwhelming numbers of clients...many of whom are relatively stable and in search of the final steps to establishing recovery on a solid support base. The San Gabriel Valley Family Wellness Center will fill a longstanding gap in the service system by supporting relatively stable members with personalized socialization and relationship building, assistance with maintaining benefits, employment and educational opportunities, medication renewal services, community/NAMI family volunteers providing family educational support sessions, and a range of weekends, evenings, and holiday social activities. The ultimate goal is to reduce reliance on the mental health system and increase self-reliance by building a healthy network of support systems. This family/volunteer wellness center will also assist with money management activities as proposed by the Department's work group (client ATM card/bank account) to streamline members' empowerment opportunities.

The FW Center will be available during hours of the day or weekend when clients find themselves isolated or without healthy, supportive social activities. Programs will be offered by a staff of collaborators, including: members of the Glendora NAMI; Recovery, Inc.; Social Model Recovery Systems, Inc., substance abuse counselors; recovering client volunteers; Arcadia MH employment and rehabilitation staff and part-time psychiatrists. In addition to aiding clients to

achieve their final steps in recovery, the SG Family Wellness Center will be the primary site for Glendora National Alliance for the Mentally Ill (NAMI) weekly "Caring and Sharing" support meetings, and weekly Family-to-Family educational meetings. The facility, therefore, must possess the flexibility and configuration of a multi-service community center, with several small adjacent permanent offices for NAMI, member volunteers, and center workers.

TARGET POPULATION: Too often the needs of this relatively stabilized population are overlooked, while limited treatment staff correctly focus greater attention and effort on more severely ill target populations. However, the needs of these recovering citizens are worthy of attention and intervention if their ultimate goals are to be reached and the quality of their lives enhanced. Center members, with their families and loved ones, will participate in the FWC activities.

The initial consumer population, often receiving only medication evaluation and prescription services in the traditional treatment setting, will be referred to the Family Wellness Center from Arcadia MH and Glendora SGV NAMI. At the Center, these new members will be offered a range of personalized recovery and social development/support activities. Families who have served as the primary caregivers—sometimes over decades—can attend and participate in the NAMI caring and sharing support groups. This working relationship with professional staff will promote the much-needed collaboration between NAMI/family members and the professional community. These relatives and other NAMI members will team together to learn more about mental illness and the stabilization and recovery process; accessing and enrolling in services; medications and their impact, including possible side effects. While hopefully a rare event, NAMI staff and volunteers can also offer a specialized suicide coping and recovery group for parents and loved ones. NAMI members will maintain an office in the FWC and be able to provide timely outreach whenever needed. Often, NAMI community groups have no permanent location or office from which outreach and educational activities can be reliably offered in the community. The jointly operated Family Wellness Center solves this problem by having members of the Glendora NAMI directly involved in the planning, development, and operation of the wellness center.

PEER "NAVIGATOR" PROGRAM: A key element of the program is the engagement and support offered by recovered client/member volunteers. This portion of the Center's program will utilize two volunteers as "peer navigators" or partner providing assistance to one new client. These "partner/navigators" are

not case managers. Their job is to aid in accessing service and member "welcoming" to the Center. Upon enrollment in the Center, in step with self-directed service, the new member will choose from a menu of services offered at the Wellness Center, creating their own treatment plan. Clients will be paired with a navigator to assist in this process. This pairing of "peer navigators" with client/members will provide the support necessary to explain the programs, meet with the appropriate staff, express needs and rights, pursue SSI evaluations/reevaluations, apply for Section VIII housing, schedule discussions and set goals for employment or reengagement of educational goals.

SELF-HELP RECOVERY GROUPS: Substance abuse relapse prevention and recovery support groups will also be offered. These self-help groups will meet as often as necessary to provide the avenue for full recovery many members seek. Substance abuse recovery staff from Social Model Recovery Systems, Inc., a current County contract provider, may also be utilized. This portion of the program will offer an opportunity for agency staff to receive cross training with mental health staff, NAMI participants, and volunteers, along with substance abuse agency staff. The broadened involvement by various family and agency participants will hopefully serve to reduce stigma concerning treatment for co-occurring disorders. Over the course of an eight-week substance abuse recovery program, mental health, NAMI, volunteer Center staff, and staff from Social Model Recovery System will jointly conduct groups and provide immersion training. This mix of members and staff will learn recovery characteristics of substance abusing mentally ill clients. In this practical way, the barriers--which have historically existed and permitted the "ping-ponging" of clients between substance abuse and mental health program--will be eliminated.

Ongoing support following an educational program is important to maintaining sobriety. The SGV Wellness Center will offer ongoing 12-step groups geared towards helping members maintain their sobriety. Abstinence is the goal, although a "harm reduction" approach will also be utilized to meet specific member situations. Other community self-help groups will be invited to hold meetings at the SGV Wellness Center, such as Procovery Circle, Recovery Inc., Depressive/Manic Depressive Association, and, Mental Health Association's Project Return. This mix of supports and activities allows members an array of services with which to engage.

JOBS: The networking Center team, including a community job developer/employment specialist and recreational therapist, will work to establish greater employment opportunities and choices for members in the local community.

Greater emphasis will be placed on returning to work or school, eschewing much of the traditional "client readiness" approach, which studies by Boston University indicate, only delays development of establishing a work history and capability. This effort enables members to seek an outlet for developing social connections, personal confidence, and making a meaningful contribution to the community. Emphasis will be significantly placed on "what you (members) can give back or contribute to the community," as opposed to a member's continuing dependence on the support of the formal mental health system. Still relying on the "navigator team," clients will be assisted with applying for and retaining a job. The Center will also maintain four rotating items available for hiring recovering clients for periods of six months or longer. This "in house" employment offers members a readiness experience and pay for their work, as a step towards employment in the community. This and other work/educational opportunities will involve an interagency relationship between Center staff and the State Department of Rehabilitation. This service networking is particularly important for members seeking assistance in returning school. The comprehensive goal for this program element is to match members/job seekers to potential employers or to personalized educational paths upon which individuals can achieve success.

MEMBER COLLABORATION: The SGV Wellness Center will use a community model to make many of the decisions on service offerings. Community meetings will be held weekly for members, volunteer staff, and professional staff. Members can choose among the individuals to serve on a Center operations' board to make decisions. This collaborative board will steer services offered at the Center. The positions are short term, to maximize participation. All members will be encouraged to engage in this decision-making process.

RECREATION and HEALTH: An element of recovery is productive use of leisure time. Recreational therapists and volunteer staff will provide a variety of classes on use of leisure time and individual health, using the framework of the Healthy Living groups. Here, members will be encouraged to engage in creative activities and learn the basics to maintain a healthy lifestyle including exercise and nutrition. Instructional methods will consist of hands on practice, such as menu planning, shopping, and cooking. Exercise groups will do moderate physical activity, i.e. stretching, walking, to promote regular physical activity. Members will also be encouraged to engage in recreational activities outside the center.

SUMMARY: The San Gabriel Valley Family Wellness Center will provide the "bridge" services, which can complete the recovery for many stabilized clients...clients who have been neglected too long. The FWC will assist people in making the final step in their recovery.

