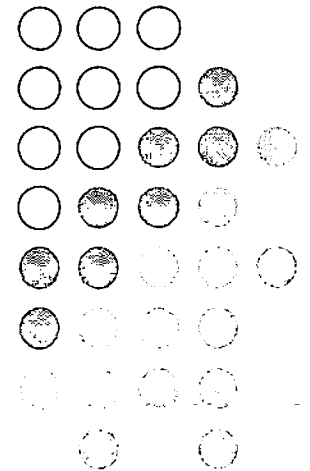


County of Los Angeles – Department of Mental Health

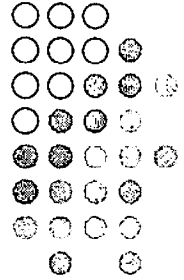
Our Future System

**Making Changes that Promote
Recovery and Resilience**



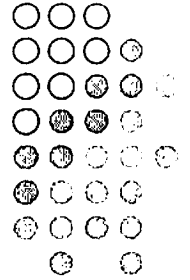
(January 25, 2007)

Where We Find Ourselves Today: Frustrated



- “I’m committed to trying to change because change is inevitable. I’m concerned because nobody has told us what the changes will be or when they will take place”.
- “Low staff morale should be expected if nobody is communicating with each other about changes that will alter job duties”.
- “It is hard to focus on your clients when there are so few resources. We don’t have enough workspace or computers”.
- “How can I focus on serving the high number of clients on my caseload when I have so much repetitive documentation to complete”.

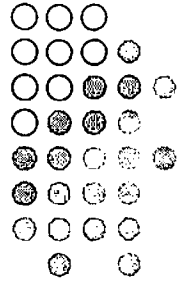
Where We Find Ourselves Today: Frustrated



- “It’s tough to embrace the *do whatever it takes* motto when we know that our system focuses on helping those in crisis first. How are we going to decide which clients get our energy with so many competing priorities?”
- “It is hard to be motivated to change when career advancement is limited and the opportunity to develop new skills through training nearly null and void”.
- “I want to do my best and provide high quality services to my clients, that is what is important. I’m so tired of not being able to make a difference because my hands are always tied.”

Paradoxes in the Workplace

Transitioning from Maintenance to Recovery and Resilience

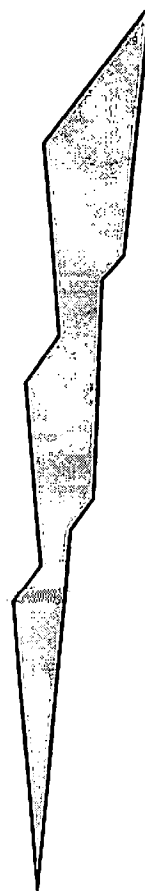


\$55 million deficit

Cutbacks in services

Do more with less

Paperwork reductions



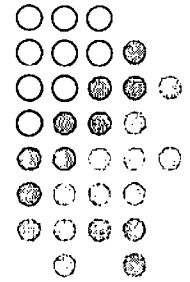
\$120 million influx

Expansion of services

Do whatever it takes

More data collection

Creative Resolutions to these Paradoxes



What are we doing differently ...

Full Service Partnerships and Wraparound

- Focus intensive services on the most needy,

DMH Transformation

- Redirect resources to support recovery and resilience,

Wellness Centers

- Graduate clients who can thrive with less intensive services,

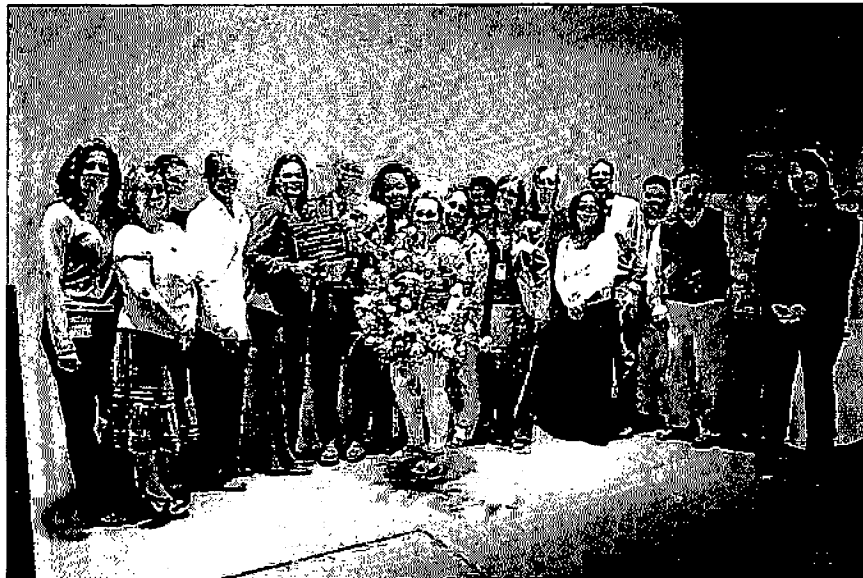
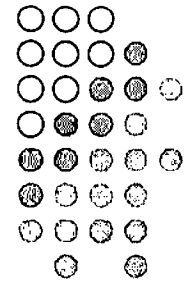
Outcome Application

- Use outcome data to determine what works best for each of our clients and their families,

Integrated Behavioral Health Information System (IBHIS)

- Use the latest technology to capture client, billing, and outcome information, with less paperwork,

We have the talent and the funding to make it happen!



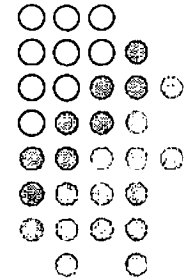
Our department is filled with thousands of committed and talented staff.

Proposition 63

The Mental Health Services Act passed in California in November 2004.

Our state cares about funding mental health and wants to improve lives

MHSA Supports Our On-going Transformation



*Step by Step We Can Transform Current Services
with the Recovery and Resilience Ideals in the
MHSA:*

We are committed to ...

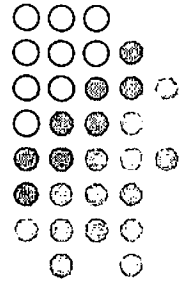
HOPE

COMMUNITY ENGAGEMENT

HEALING

AUTHORITY

Recovery and Resilience Principles for Transformation

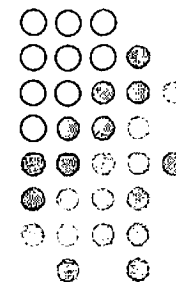


HOPE

Each individual, child, or family you help has the possibility of having a improved and more meaningful life.

We must increase our ability to listen to people and help them in ways they want to be helped

Recovery and Resilience Principles for Transformation



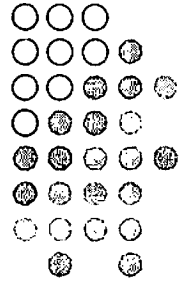
COMMUNITY ENGAGEMENT

Services to help people be more accepted, secure, and included in community life

Focus on community living goals like educational and employment achievements, housing, and physical health

Even with improved services and supports in place, capacity is still limited.

We must engage our communities and gain their support in our quest to better the lives of the people and families we serve.



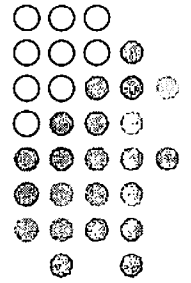
Recovery and Resilience

Principles for Transformation

HEALING

Many people we serve have faced years of stigma, broken relationships, and broken dreams that have caused hurt and pain

As we help those we serve, we can help people accept that it will take time to heal



Recovery and Resilience Principles for Transformation

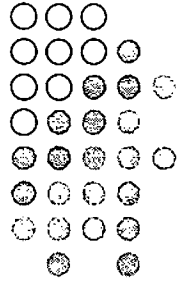
AUTHORITY

Authority is stronger and more effective when it is shared among providers, consumers and families

Shared authority is possible with a common vision

Our common vision of system transformation will be created through the strength and experience of the people we serve.

What Would these Services Look Like?



Welcoming and helpful attitudes in every encounter with consumers.

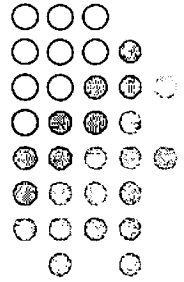
Engage consumers before a crisis.

Involve consumers in decisions about their treatment, as in "Nothing About Us, Without Us."

Provide whatever it takes to help consumers to live full and satisfying lives.

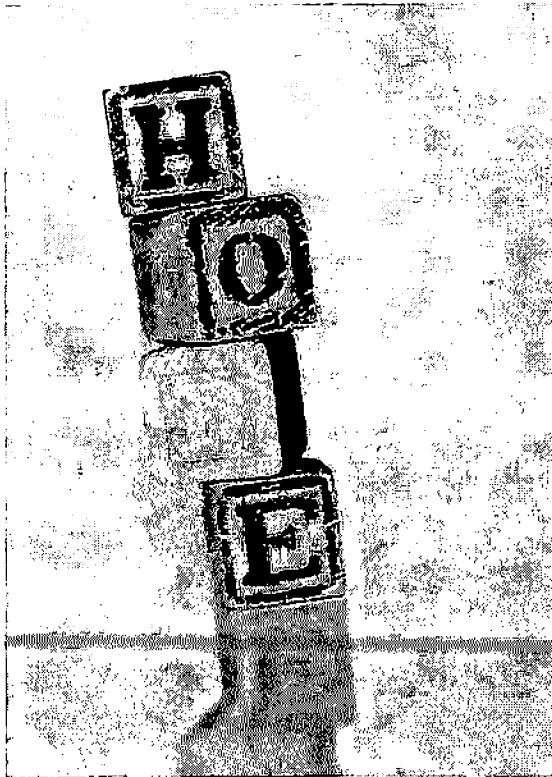
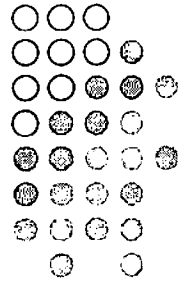
Graduate consumers and celebrate their wellness.

These Changes will also benefit DMH and its Workforce



- Work to establish trust which will open communication channels – both within the department and between staff and clients
- Provide career enhancing and promotional opportunities
- Provide and create opportunities to develop new skills through training and supervision
- Use data to assist clients' in achieving outcomes they find to be valuable
- Link clients to other resources that support their community integration, wellness, and self-sufficiency.
- Create a system that empowers, rather than hinders staff and consumers to make a positive change.

Comments and Questions



We are eager to implement changes that enable us to provide services that foster hope and help clients and families build happy and healthy lives.

Q & A