



LOS ANGELES COUNTY  
**DEPARTMENT OF  
MENTAL HEALTH**  
hope. recovery. wellbeing.

# Navigating our Mental Health System: A Developmental Disabilities Perspective

- Los Angeles County Department of Mental Health ~ Countywide Regional Center Liaisons Coordinator
- Roybal Family Mental Health Center ~ Community, Child and Family Well-Being Program
- in Partnership with Eastern Los Angeles Regional Center (ELARC)



# Workshop Objectives

1. Understand behaviors related to mental health and developmental disabilities
2. Understand the differences and similarities of both
3. Increase knowledge of services available
4. Learn how to effectively navigate available DMH services



# Before We Begin, A Few Thoughts from a Wise Program Head...

- How does one determine which behaviors and moods are influenced by developmental factors vs. mental health factors?
- How does one advocate that an individual with developmental disabilities is able to respond to services as provided by DMH?
- How do mental health issues and developmental issues change throughout different life stages?

Steven Hendrickson, LCSW  
Roybal Family Mental Health Center Program Head, Retired

# Let's Continue by Asking

- How does one refer an individual with a developmental disability?
- What DMH policies would be helpful when accessing mental health services?
- How should professionals navigate the DMH system when they feel a person could benefit from mental health services?
- How may that intervention be delivered and communicated most effectively?

Steven Hendrickson, LCSW  
Roybal Family Mental Health Center Program Head, Retired

# Let's Learn Each Other's Lingo!

## Language, Terms and Equivalencies Between Systems

DMH Term	RC Term
Symptoms / Behaviors (Assessment)	Behaviors / Deficits (CDER)
Emotional Outbursts, Dysregulation	Tantrums, Aggression
Decompensation/ Deterioration	Regression
Frequency, Duration, Onset	Number of Incidents
Assessment	Report / Evaluation
IBHIS Notes	ID Notes
Multiple State and Federally Funded Programs (i.e. via Medi-Cal, MHSA, etc.)	Regional Center Funded Services VS. Generic Resource

# Let's Learn Each Other's Lingo!

## Language, Terms and Equivalencies Between Systems

DMH Term	RC Term
Staff: Liaison, Navigator, <b>Community Health Worker, Medical Case Worker, Psychiatric Social Worker</b> , Psychologists and MD	Staff: <b>Intake Coordinator</b> , Service Coordinator, Specialists
Day Rehabilitation	Day Program Independent Living Skills (ILS) Supported Living Skills (SLS)
Collateral	Circle of Support
Community Resource	Generic Resource
"FUNCTIONAL IMPAIRMENT"	"SUBSTANTIAL DISABILITY"



Not walking

Repetitive motions

REALLY hard to get her to calm down

Can't tie shoelaces

Not talking

I can't calm him down!

# What We See & Hear

Not catching on ... not getting it

Drools

Doesn't make friends

Hits, bites, kicks, pulls hair

Falls apart in new situations

Hates the sun and wind

Cries a lot

Hears voices

Won't pay attention to me

Gets upset over things easily

Has trouble calming down

Runs Away

Breaks stuff

Always fighting

## A series of black silhouettes on a white background showing the progression of human life. From left to right: a crawling baby, a toddler, a young child, a young adult, a middle-aged adult, and an elderly person using a cane. Each silhouette is reflected on the surface below it.

# Disabilities

An umbrella diagram with segments for Visual, Hearing, Learning, Autism, physical, Emotional, and Cognitive disabilities. The handle is labeled 'Speech or Language'.

[illegible]

# Mental Health



# Let's Try an Example!

A 16 y/o bi-racial DMH client presenting with the following symptoms all day everyday.

List of Symptoms / Presenting Problem:

- Isolates in Bedroom
- Always on the Computer
- Persistent Negative Thoughts
- Worries about Being Out in the Community
- Avoids People
- Low Mood
- Low Affect/ Flat Affect
- Passive Suicidal Ideation (No Plan, No Intent & No Means)

**Meet Bob**

# What Categories Do These Symptoms Go?

- Isolates in Bedroom
- Always on the Computer
- Persistent Negative Thoughts
- Worries about Being Out in the Community
- Avoids People
- Low Mood
- Low Affect/ Flat Affect
- Passive Suicidal Ideation (No Plan, No Intent & No Means)



## Age Appropriate Behavior



## Developmental Disabilities



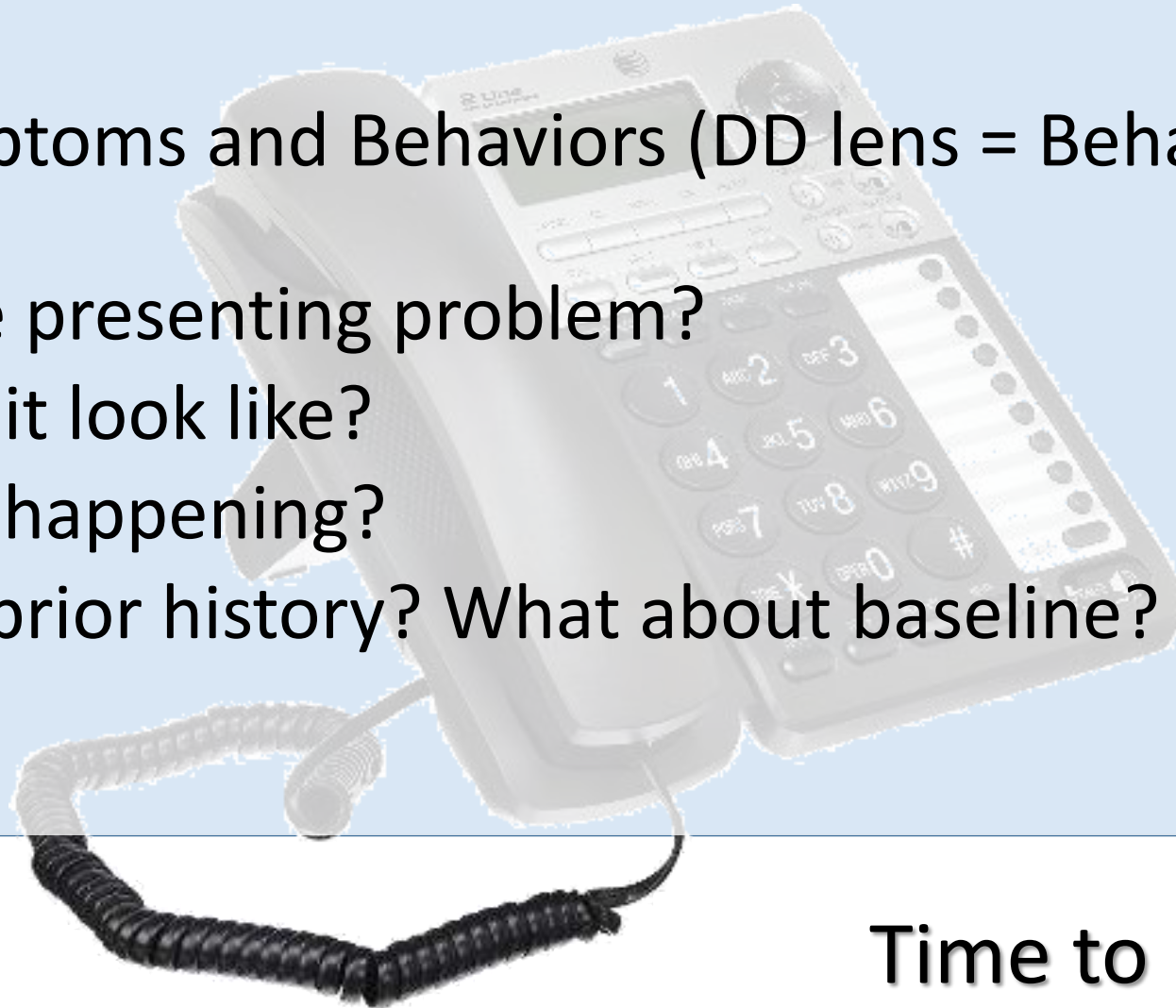
## Mental Health



# “Oh my Goodness...Sounds Like We Should Call!”

Identify Symptoms and Behaviors (DD lens = Behaviors and Deficits)

- What is the presenting problem?
- What does it look like?
- Where is it happening?
- Was there prior history? What about baseline?



Time to Refer to the Script

If screening indicates the request is appropriate for scheduling a routine appointment for intake, initial clinical appointment (and concurrent or subsequent medication appointment if indicated) times and dates shall be offered as close as possible to the date of the original initial request. In no instance shall the offered clinical appointment be more than **fifteen (15) business days** from the date of the request for services.

Triage/Screening  
(15 Business Days)

Financial/Clinical  
Assessment  
& MD Assessment

Treatment

If at the routine initial clinical appointment the potential client is determined to have medication needs that would normally qualify as concurrent medication needs, he/she shall be scheduled for an initial medication evaluation within five (5) business days from the initial clinical appointment unless no suitable resource is available at the provider.

[http://lacdmh.lacounty.gov/ContractorsPolicies/Documents/300/302\\_07.pdf](http://lacdmh.lacounty.gov/ContractorsPolicies/Documents/300/302_07.pdf)



# DMH Levels of Care



California Department of  
**State Hospitals**

Hospitals / Institutions (Developmental Centers,  
State Hospitals, IMD/Sub-Acute Facilities,  
Inpatient & Behavioral Health Units

Full Service Partnership (FSP)  
and Field Capable Services (FCCS)

Emergency Outreach and Triage Division  
(ACCESS, PMRT, START, SMART, HOME, CAMP,  
etc.)

Outpatient

Wellness Programs, Client-Run Services and  
Drop-in Centers



# Continuum of Care

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH  
PROGRAM SUPPORT BUREAU - MHSA IMPLEMENTATION AND OUTCOMES DIVISION

## MHSA CONTINUUM OF CARE

	Liaison to Community	Prevention & Early Intervention	Transition from Institution	Hospital/Institutional Diversion			Intensive Community Services and Supports					Wellness/Self Help/ Peer			
	Outreach & Engagement and Linkage Programs	Prevention and Early Intervention	IMD Step-Down	Justice Reintegration Programs	Mental Health Law Enforcement	SB 82	Alternative Crisis Services	Full Service Partnership (FSP)	Integrated Care Program	Housing	Field Based Clinical Services (FCCS)	Drop-In Centers	Supportive Services	Wellness Centers	Client Run Services
Funding Component	CSS INN	PEI	CSS	CSS PEI	CSS	CSS	CSS	CSS	CSS	CSS	CSS	CSS	CSS	CSS	CSS INN
Programs	<ul style="list-style-type: none"> <li>Promoters/Community Mental Health Workers</li> <li>Jail Linkage</li> <li>Service Area Navigation</li> <li>Housing specialists</li> <li>Culturally-specific outreach and engagement (Samoan)</li> <li>Health Neighborhoods</li> <li>Residential Bridging Program</li> <li>Homeless Outreach and Mobile Engagement Team (HOME)</li> </ul>	<ul style="list-style-type: none"> <li>Sulolde Prevention Programs</li> <li>Anti-Stigma Discrimination</li> <li>Early Start - School Mental Health Initiative</li> <li>School Based Services</li> <li>At Risk Family Services</li> <li>Trauma Recovery Services</li> <li>Primary Care &amp; Behavioral Health</li> <li>Early Care &amp; Support for TAY</li> <li>Early Care &amp; Support for Older Adults</li> <li>Improving Access for Underserved Populations</li> <li>American Indian Project</li> </ul>	<ul style="list-style-type: none"> <li>IMD Step-Down Facilities</li> <li>Project 50</li> </ul>	<ul style="list-style-type: none"> <li>Jail Linkage</li> <li>Men's Reintegration Program</li> <li>Women's Reintegration Program</li> <li>TAY Probation Camp Services</li> <li>Juvenile Justice Transition Aftercare Services</li> <li>Crossover Youth Multi-disciplinary Team Program</li> </ul>	<ul style="list-style-type: none"> <li>Mental Health Law Enforcement Team partnering with law enforcement officers providing field based crisis intervention services.</li> </ul>	<ul style="list-style-type: none"> <li>Youth Crisis Placement Stabilization Team</li> <li>DMH Mobile Triage Teams</li> <li>Forensic Outreach Teams</li> <li>Crisis Transition Specialist Teams</li> <li>Housing supportive services</li> <li>Client supportive services</li> </ul>	<ul style="list-style-type: none"> <li>Urgent Care Centers are located throughout the County.</li> <li>Crisis Residential Programs</li> </ul>	<ul style="list-style-type: none"> <li>FSP - Child (0-15)</li> <li>FSP - TAY (16-25)</li> <li>FSP - Adult (26-59)</li> <li>FSP - Older Adult (60+)</li> <li>Wraparound FSP: Intensive Care Coordination for Children and TAY</li> <li>Assisted Outpatient Treatment FSP: Justice Involved</li> <li>Integrated Mobile Health Team FSP: Chronically Homeless</li> <li>Intensive Care Coordination: Children and TAY identified as part of Katie A. Subclass members</li> <li>Forensic FSP: individuals with criminal justice histories at risk of re-incarceration</li> </ul>	<ul style="list-style-type: none"> <li>Integrated Care Clinic Model</li> <li>Community Designed Integrated Services Management Model</li> </ul>	<ul style="list-style-type: none"> <li>MHSA Housing Program</li> <li>Housing Trust Fund</li> <li>Client Supportive Services (flex) funds</li> <li>Enhanced Emergency Shelter Program for TAY</li> <li>TAY Housing Specialists</li> </ul>	<ul style="list-style-type: none"> <li>FCCS - Child (0-15)</li> <li>FCCS - TAY (16-25)</li> <li>FCCS - Adult (26-59)</li> <li>FCCS - Older Adult (60+)</li> <li>Skid Row FCCS: homeless or at risk of homelessness</li> <li>Mobile Interdisciplinary Teams (MITS)- Service Areas 2, 4, 6 and 8 (CGF funded)</li> <li>IFCCS -Child</li> </ul>	TAY Drop-in Centers located throughout the County.	<ul style="list-style-type: none"> <li>Self-Help Support Groups for TAY</li> <li>Self-Help Support Groups for Children</li> <li>Family Crisis Services: Respite Care Program</li> <li>Family Support Services</li> </ul>	<ul style="list-style-type: none"> <li>Wellness Centers are located throughout the County</li> <li>Family Wellness/Resource Centers</li> </ul>	<ul style="list-style-type: none"> <li>Client Run Centers located throughout the County</li> <li>Peer Run Integrated Services Management (PRISM)</li> <li>Peer Run Respite Care Home (PRRCH)</li> </ul>
Age Groups	All	All	Adults 18+	TAY & Adults	All	All	All, with emphasis on adults	All	All	All	All	TAY	Child and TAY	Adults 18+ Children and families	Adults 18+

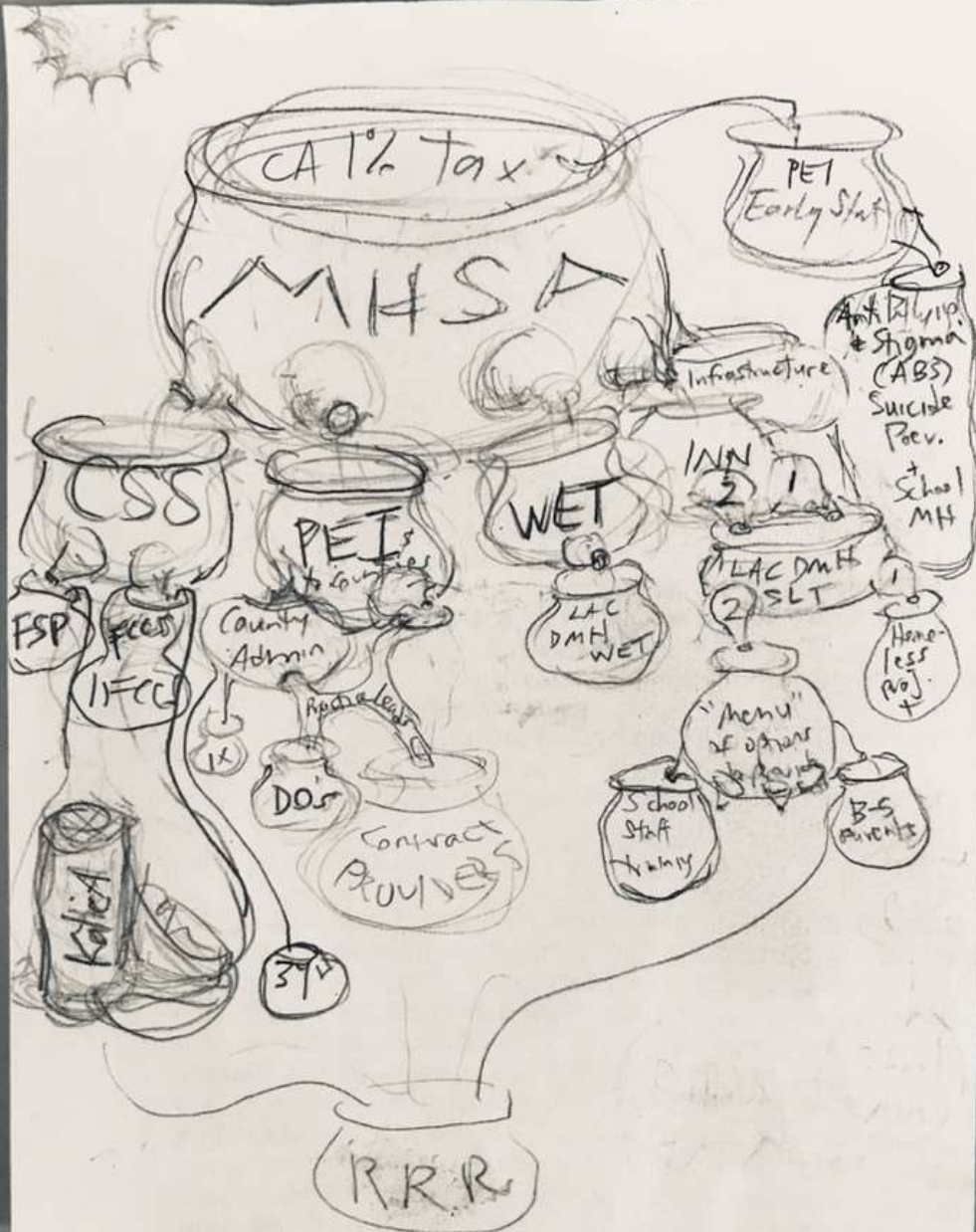
MHSA - Mental Health Services Act  
CSS - Community Services and Supports  
INN - Innovation  
PEI - Prevention and Early Intervention

[http://file.lacounty.gov/SDSInter/dmh/235754\\_MHSACONTINUUMOFCARE100715v3.pdf](http://file.lacounty.gov/SDSInter/dmh/235754_MHSACONTINUUMOFCARE100715v3.pdf)



# Useful Resources

- ACCESS is like 211 (you can ask, “where is the closest clinic? PMRT for 5150?”)
- Emergency Outreach Teams
- Crisis Response Project and Crisis Support Services
- LAC DMH Developmental Disabilities Resources  
<https://dmh.lacounty.gov/our-services/developmental-disabilities/>
- RC Liaisons:  
[http://file.lacounty.gov/SDSInter/dmh/1059744\\_DMHLiaisonstoRC.pdf](http://file.lacounty.gov/SDSInter/dmh/1059744_DMHLiaisonstoRC.pdf)
  - SA3: Stacey Fonseca – [stfoseca@dmh.lacounty.gov](mailto:stfoseca@dmh.lacounty.gov)
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  - SA7: Cheryl Lopez (Child Navigator) – [Calopez@dmh.lacounty.gov](mailto:Calopez@dmh.lacounty.gov)



## California's Proposition 63 - Mental Health Services Act (MHSA) aka "Millionaire's Tax"

The State has 5 categories of funding from which counties can apply with projects in mind, to receive:

1. **CSS** = Community Services and Supports
2. **PEI** = Prevention & Early Intervention
3. **WET** = Workforce Education & Training
4. **INN** = Innovations
5. **Infrastructure**

There's another PEI pot managed by Cal-MHSA, statewide "Early Start" projects :

1. Anti-Stigma and Bullying (ASB)
2. Suicide Prevention (SP)
3. School Mental Health (SMH)

# Tools to Support Continuity of Care

- ☐ Obtain Consent (DMH: Authorization for PHI Disclosure and RC: Consent Form to Obtain/Release Information)
- ☐ Consult (DMH RC Liaisons, Well-Being Program, Supervisor, Regional Center Mental Health Specialist)
- ☐ Language (Refer to Cheat Sheets of Terms, Scripts, etc.)
- ☐ Advocacy Across Systems
- ☐ Acknowledge Limitations and Ask for Help
  - Plan of Action (i.e. go to IEP w/TASK, Parents attend Support Group/Workshops)
  - Team and Collaborative Approach
- ☐ Family Resource Centers: <http://www.frcnca.org/frcnca-directory/>



# Thank you!

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