|  |  |  |  |
| --- | --- | --- | --- |
| **Program/****Target Population** | **Program Description** | **Access/Referrals** | **Goals** |
| **Older Adult Recovery*** Older Adult population ages 60+ who have a serious and persistent mental illness and may have co-occurring substance abuse issues
* Impairment in their ability to function in the community is significant
* Also have specific issues related to aging and are therefore difficult to serve in traditional outpatient clinics
 | * Traditional and intensive Recovery-oriented mental health services
* Mostly field-based services
* Mental health treatment, case management and medication support.
* Community linkage and knowledge of resources for the older adult population
* Community education and advocacy for services for older adults
* Emphasis on integration between physical and mental health care
 | * The Older Adult recovery clinic is an open access point, referrals come from hospitals, jails, community, family members, outpatient clinics, walk-in/self-referral, etc.
* Individuals can access services by coming in for an assessment with intake counselors
* Assessment for services is available Monday through Friday via appointment or walk-in.
* Intake counselors will assist with referrals and appropriate linkage if OAR is not the appropriate provider
 | * Provide Mental Health Services to all eligible older adults 60+ in OC who cannot be served in more traditional settings
* Help improve level of functioning in the community, quality of life, move forward in recovery from behavioral health issues, and decrease stigma related to Mental Illness
* Provide integrated care with Mental Health, Substance Abuse, and primary care treatment
* Decrease hospitalization and other emergency services related to behavioral health disorders and issues related to aging
 |
| **PACT Teams*** Adults, ages 18 and up, who have a serious and persistent mental illness and may have co-occurring substance abuse issues
* Impairment in their ability to function in the community is significant and they have not been able to achieve stability in treatment at a traditional outpatient mental health clinic
 | * Services provided in seven (7) locations (Anaheim, Fullerton, Santa Ana, Santa Ana Older Adults, Westminster, Costa Mesa and Aliso Viejo).
* Three specialized PACT teams working with, transitional age youth (TAY), older adults (OA), and pacific islander and Asian population (PAU)
* Highest level of Adult Mental Health outpatient clinic care
* Field-based Intensive Recovery oriented services
* Mental health treatment, case management and medication support
* Maximum caseload of 20 consumers per clinician
* Based on the national ACT model of treatment
* Provides services based on a “whatever it takes” approach to helping individuals move forward in their recovery
 | * Referrals come from Traditional Outpatient Clinics
* Individuals are assessed by the clinic intake counselor and referred for PACT level of treatment if they qualify for services
* For admission, they must have a history of 2 or more hospitalizations and/or incarcerations due to their mental illness within the last 12 months leading up to referral
* For TAY, ages 18-25 and can substitute out of state placement for hospitalization criteria
* For OA, ages 60+ and can substitute multiple 911 calls and ER visits for hospitalization
 | * Reduction in hospitalization
* Reduction in incarceration
* Reduction in homelessness
* Increase employment and/or education
* Integrated care with Mental Health, Substance Abuse, and primary care treatment
* Help improve level of functioning in the community, quality of life, move forward in recovery from behavioral health issues, and decrease stigma related to Mental Illness
 |

| **Program/****Target Population** | **Program Description** | **Access/Referrals** | **Goals** |
| --- | --- | --- | --- |
| **Recovery Center Services*** Target Population: Recovery Center consumers are adults, ages 18 and older who are experiencing a mental illness, may have a co-occurring substance use or medical disorder, and require less intensive services than other Adult and Older Adult programs.
* They are no longer in acute crisis, remain engaged in services, and may still be experiencing moderate to intermittent disruption in their lives.
 | * The Recovery Centers provide a forum that supports a person’s continuing efforts towards recovery in a staff and peer run outpatient environment with an ultimate goal of community reintegration.
* The program is designed to serve individuals having been treated in another more intensive outpatient program and who are ready to pursue the next steps in recovery.
* Workshops are offered to assist with skills building to help prepare clients for transitioning to independent community care.
* Staff and peer members provide supportive mental health services designed to be less intensive services than other Adult and Older Adult programs.
* Services include, and are not limited to, peer and staff run workshops and group activities; cultural and linguistic services - specialty services are available to serve the Hispanic and the Pacific Asian populations; medication services; counseling support; case management services and crisis intervention; assistance with linking to ongoing community care.
 | * Consumers are referred from other county Adult and Older Adult outpatient programs.
* Consumers can be seen at any location that is most accessible to them.
* College Community Services: 1901 Center St., Anaheim
* College Community Services: Camino Nuevo, 1200 N. Main St., Santa Ana
* Mental Health Association: 420 W. 19th St., Suite B, Costa Mesa
* Mental Health Association: 12755 Brookhurst St., Ste. 116, Garden Grove
* Mental Health Association: 22471 Aspan St., Ste 103, Lake Forest
 | * To assist consumers to achieve community reintegration and greater independence as evidenced by movement of 60% of total discharged to a lower level of care
* To maintain an average monthly rate of under one percent of hospitalizations
* To assist 10% of the monthly average total population served to obtain employment and/or volunteer work.
 |
| **Adult Supported Employment Services*** Orange County adults, 18 years or older
* Who have a serious and persistent mental illness and who may also have a co-occurring substance abuse disorder.
 | * The Program is known as “Employment WORKS”. Supported Employment Services include, but are not limited to: Job Seeking and Survival Skills Training wherein individual employment plans are developed with each client; Vocational services that encourage clients to participate in job training, consider volunteer work, part-time work; supported employment or education services, participate in General Education Degree (GED) preparation, and participate in other education-related activities such as linkage to colleges, vocational, and adult schools; Interviewing and job search strategies and techniques; Life skills and interpersonal communication skills; Job preparation, job placement, and on-the-job support; and Graduation after successful placement of 90+ days in competitive employment.
* Services are offered to clients countywide, with facility locations in both North and South Orange County. North County has 125 slots available, and South County has 70 slots available.
 | Referrals to the program come from:* County-operated adult outpatient clinics
* County-operated and contract provider Adult Recovery Centers
* Contract provider Adult Full Service Partnerships.
 | * A minimum of 35% of participants enrolled in the program are placed into competitive employment
* Maintain an average time-to-placement in a job at 16 weeks after enrollment into the program
 |
| **Program/****Target Population** | **Program Description** | **Access/Referrals** | **Goals** |
| **Peer Support and Wellness Center*** Orange County adults, 18 years or older
* Who have been diagnosed with a serious mental illness and who may have a co-occurring disorder, and who are relatively stable
* Who are working on their recovery, but require a support system to assist them in maintaining their stability while continuing to progress in their personal growth and development.
 | * The Wellness Center is a consumer-run program, with staff being consumers of mental health services, or those with lived experience, and is committed to providing peer-to-peer promotion and community integration of emotional, physical, spiritual and social domains. The program supports members who have achieved recovery by focusing on personalized socialization, relationship building, assistance maintaining benefits, setting employment goals, and providing educational opportunities, and the mission is to provide a safe and nurturing environment for each individual to achieve his or her vision of recovery while providing acceptance, dignity and social inclusion.
* The program is based upon a model of peer-to-peer support in a non-judgmental environment, and offers a wide variety of weekend, evening, and holiday social activities for members to increase socialization and encourage integration into the community. The ultimate goal is to reduce reliance on the mental health system and to increase self-reliance by building a healthy network of support, which may involve the member’s family, friends, and significant others.
* The Wellness Center uses a Member Advisory Board, a community town hall model, and member satisfaction survey results to make many of their decisions on programming and activities, and facilitates over 100 groups weekly, including social outings, and has a growing number of members volunteering in the community as their way of giving back. Recovery interventions are member-directed and embedded within the following array of services, including: individualized wellness recovery action plans, peer supports, social outings, and recreational activities.
 | Referrals may come from:* Community or County clinics
* Recovery Centers and full service partnerships
* Friends or family members of individuals with a serious mental illness
* Individuals may access the program if they meet the target population criteria
 | * Monthly participation by 30 or more members in community integration activities
* Monthly participation by active members in 2 or more groups/activities at the Center or in the community
* Annual member employment, paid or volunteer, of a minimum of 100 members
* Annual enrollment of a minimum of 50 members in education classes at local colleges or the Tustin Education Center
* Annual participation of a minimum of 50 members facilitating community meetings
 |

| Program/Target Population | Program Description | Access/Referrals | Goals |
| --- | --- | --- | --- |
| **OK - Full Service Partnership (FSP)*** OK serves a minimum of 150 Orange County residents annually
* Ages 18-60 who have a serious, severe and chronic mental illness
* A history of incarceration and or experience recidivism in the legal correction system
* They may be homeless or at risk of homelessness in Orange County, CA
 | The Opportunity Knocks Program (OK) provides recovery oriented services to adults who have:* A severe and chronic mental illness
* A history of incarceration
* Are homeless or at risk of homelessness.

The program’s multi-disciplinary staff collaborates with participants to offer a full array of mental health and case management services which are provided in the field, at the office, in people’s homes, or whatever location is convenient for the participant. The program provides participants with additional opportunities beyond the individualized care each participant receives such as the ability to attend various groups for skill building, development of community resources, mental health symptom reduction, substance abuse harm reduction, employment readiness and exploration and housing assistance, as well as groups including the opportunity for socialization, relationship building, and interaction with other participants in the program. | Referrals come from Correctional Mental Health, hospitals, county recommendations, and walk-ins.OK12800 Garden Grove Blvd.Ste. F & GGarden Grove, CA 92843 | Opportunity Knocks uses a Recovery Model and works with each member individually to determine treatment goals. As a program, Opportunity Knocks is dedicated to the following outcomes:* Reducing homelessness
* Reducing incarceration and recidivism
* Decreasing psychiatric hospitalizations
* Decreasing medical hospitalizations
* Increasing education and employment
 |
| **OASIS – Full Service Partnership (FSP)*** 150 member OASIS - serves Orange County residents older adults
* 60 years of age or older
* Who are homeless or at risk of homelessness
* Unserved and/or underserved
* Who are significantly impaired in their life functioning due to a mental illness
 | The Older Adult Support and Intervention program (OASIS) focuses on helping members attain maximum independence in the community. Services follow the Wellness and Recovery Model - focusing on members’ strengths, self-identified goals and objectives. Individuals from all ethnicities and cultures are served with an emphasis on member/family/caregiver – driven mental health services. Services include intensive case management, mental health rehabilitation services, money management, crisis services, support groups, benefits assistance, medication support, individualized treatment planning, bilingual services, transportation services, culturally competent care and community integration. | Referrals can be made directly to the program at 714.399.3480 please ask to speak to the Officer of the day. OASIS 1855 W. Katella Ave., #150 Orange, CA 92867714. 399.3480 | Oasis uses a Recovery Model and works with each member individually to determine treatment goals. As a program. OASIS is dedicated to the following outcomes:* Increase successful graduation rates for members to 10% of total unduplicated members per fiscal year.
* Offer a minimum of two member-run groups per week along with increasing staff led groups to four times per week, with a focus on Evidenced-based practices. i.e., Seeking Safety and PEARLS.
 |
| **TAO and TAO South is a Full Service Partnership (FSP)*** TAO serves 220 members and TAO South serves 100 members
* Serves Orange County residents ages 18-59
* Who have a serious and persistent mental illness and co-occurring disorders
* May be homeless or at risk of homelessness
* Unserved; and at risk for hospitalization and/or institutionalization.
* Who have not been successful with traditional mental health care.
 | The Telecare and Orange (TAO) and TAO South program uses a Recovery Centered Clinical System based on a belief that recovery can happen for everyone. Services follow a “Whatever It Takes” model utilizing Evidenced- based programs and practices. The multidisciplinary team, which includes a psychiatrist, nurse, Housing Specialist, Master’s prepared staff and Personal Service Coordinators provide: Outreach and engagement, community-based wraparound services, intensive case management, medication services, money management/representative payee services, housing support, and vocational and educational support, transportations services and assistance with establishing benefits.  | Referrals can be made directly to the program.TAO2531 W. Woodland Dr.Anaheim, CA 92801714 226.9888TAO South275 E. Baker St.Costa Mesa, CA 92626Contact Team Leads Ron or Christina 714 361.6760 | As a program, TAO is dedicated to providing services meaningful to people in recovery by establishing a culture that nurtures and enlivens the journey of recovery. TAO is dedicated to improving services and has outlined the following goals: * Homelessness – exploring strategies for reducing the amount of homeless days among members.
* Missed psychiatric appointments – determine patterns of missed appointments among individual members, and discuss strategies for increasing compliance with psychiatric appointments.
 |
| **Telecare STEPS - Full Service Partnership (FSP)*** 105 members
* 80 members are referred from residential/locked facilities
* 25 members are refereed from the forensic system
* Serves Orange County resident’s ages 18-59
* Who have a persistent mental illness and who may have a co-occurring substance abuse disorder.
 | The Striving Towards Enhanced Partnerships program (STEPS) provides services that are recovery focused and clinically effective. Services follow the core concept of “person first” meaning identifying strengths and capabilities of each member. Individuals from all ethnicities and cultures are served with an emphasis on individualized recovery focused goals. The focus is on the underserved including those in the Institute for Mental Disease (IMD) who could return home to their communities with family support and community linkages as well as addressing the needs of members being released from jail who are homeless and unserved. Services are provided by a multidisciplinary team of clinicians, psychiatry, nursing and drug and alcohol certified staff. Services include 24 hour a day, seven days a week intensive case management/wraparound services, a peer-to-peer line, community based outpatient services, supported education/employment services, transportation services, housing, benefits acquisition, and co-occurring disorder treatment.  | Referrals to this program come from LPS and through the Public Defender’s office.STEPS 2100 BroadwaySanta Ana, CA 92706714.245-6881 | The STEPS program promotes wellness and recovery practices in all aspects to achieve a meaningful life.STEPS is dedicated to the following outcomes:* Success in community of clients previously in IMD and/or on Conservatorship
* Reducing hospitalization visits
* Reducing incarceration and recidivism
* Increasing Education and Employment
 |
| **Telecare Whatever It Takes (WIT) is a Full Service Partnership (FSP)*** Serves a minimum of 100 Orange County residents annually
* Persons diagnosed with a serious and persistent mental illness
* Who are referred by a specific community court program.
 | The Telecare Whatever It Takes program (WIT) provides services that are recovery focused and clinically effective. Services follow a “Whatever It Takes” model that refers to the approach in supporting members in the community promote wellness and recovery and avoid re-incarceration, hospitalization and homelessness. The program’s multi-disciplinary staff collaborates with officials from probation department, district attorney’s and public defenders’ offices as well as mental health professionals and members themselves to develop and implement treatment plans. WIT’s multidisciplinary team supervised by the program administrator, which includes a psychiatrist, nurse practitioner, nursing staff, a licensed clinical director, clinician and personal service coordinators. Services and supports include * Outreach and engagement
* Community based wraparound services
* Intensive case Management
* Money Management/representative payee
* 24/7 staff availability
* Housing support, transportation services
* Medication support and education
* Vocational and Educational services
 | Referrals to this program come from the WIT court through the Public Defender’s office.  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Program/****Target Population** | **Program Description** | **Access/Referrals** | **Goals** |
| * MHSA Housing -Adults
 | * New permanent supportive housing units for SPMI adults who are homeless or at risk of homelessness
 | * Residential Care and Housing Office for Eligibility Certif.
* Referrals from FSPs, County Behavioral Health Services Programs. Housing Authority Section 8 list.
 | * Permanent Supportive Housing
* Goal: 135 units
* Completed to date: 72
* Pipeline: 63
 |
| * MHSA Housing – Older Adults
 | * New permanent supportive housing units for SPMI older adults who are homeless or at risk of homelessness
 | * Residential Care and Housing Office for Eligibility Certif.
* Referrals from FSPs, County Behavioral Health Services Programs. Housing Authority Section 8 list.
 | * Permanent Supportive Housing
* Goal: 25
* Completed to date: 15
* Pipeline: 10
 |
| * MHSA Housing - TAY
 | * New permanent supportive shared housing units for SPMI Transitional Age Youth (TAY) who are homeless or at risk of homelessness
 | * Residential Care and Housing Office for Eligibility Certif.
* Referrals from FSPs, County Behavioral Health Services Programs.
 | * Permanent Supportive Shared Housing
* Goal 14
* Completed to date: 0
* Pipeline 14
 |