

# A Framework to Guide Full Service Partnerships for Adults

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# Definition of Full Service Partnerships

- Individuals within certain specified populations (called focal populations) enroll in FSP program
- Each enrollee participates in the development of a person centered plan that is focused on recovery and wellness
- Plan can include traditional mental health services as well as a wide array of other services and supports that are consistent with a commitment to do “whatever it takes”



# Definition of Full Service Partnerships

- Each enrollee has a single point of responsibility for the provision of services and supports – can be done through a team
- Team members have low enough caseloads to insure 24/7 availability
- Services and supports are provided in a manner that is culturally relevant
- Programs report regularly on outcomes achieved by the individuals



# Required Aspects and Commitments of Full Service Partnership Programs

- Commitment and capacity to deliver field-based (rather than clinic-based) or in-home services
- Multidisciplinary team availability 24 hours per day, 7 days per week for crisis intervention and assessment including availability of psychiatrist(s)
- Multiple strategies for helping individuals to develop ways to meaningfully engage their time



# Required Aspects and Commitments of Full Service Partnership Programs

- Ability to provide field-based crisis response through LPS designated staff
- Staff to client ratio not to exceed 1:15
- Commitment to incorporate peer support groups into the program and collaborate with community based self-help groups



# Required Aspects and Commitments of Full Service Partnership Programs

- Ability to immediately access housing so that clients do not remain homeless and are not discharged from higher levels of care into homelessness
- Utilization of integrated services with ethnic-specific community and faith-based organizations
- Hiring of ethnically and linguistically diverse staff that are reflective of the community to be served



# Required Aspects and Commitments of Full Service Partnership Programs

- Trauma-informed and trauma-specific treatment services, particularly for women with co-occurring disorders
- Services to address co-occurring mental health and substance abuse disorders
- Dedicated commitment to conduct outreach and engagement to focal populations including unserved and hard to reach ethnic minority populations and individuals in institutions



# Required Aspects and Commitments of Full Service Partnership Programs

- Commitment to assist clients in accessing all benefits to which they are entitled in a prompt and effective manner
- Capacity to immediately respond to referrals from institutional settings in order to prevent discharge without essential linkage to community based programs
- Capacity to accommodate individuals with multiple disabilities including physical health problems, developmental delays and substance abuse issues



# Required Aspects and Commitments of Full Service Partnership Programs

- Capacity to work effectively with the Public Guardian and private conservators
- Capacity to effectively collaborate with interagency partners
- Transportation services depending on the needs of the client



# Required Aspects and Commitments of Full Service Partnership Programs

- Dedication to do “whatever it takes” to maintain ongoing client engagement
- Commitment to a “no wrong door” approach
- Commitment to collect outcome data as required by the State and County and to use this data to assess the program and make midcourse program corrections as necessary



# Age Specific Aspects for Adult Full Service Partnership Programs

- Emphasis on employment as a desired outcome with provision of an array of supported employment services
- Emphasis on promoting access to an array of educational opportunities including supported education
- Ability to develop an array of housing options including immediate, temporary and permanent housing
- Ability to assist clients in developing self-directed care plans including the Wellness, Recovery Action Plan



# Age Specific Aspects for Adult Full Service Partnership Programs

- Emphasis on social integration as a desired outcome and provision of an array of community integration services
- Commitment to working with and educating families
- Ability to provide or arrange representative payee services when appropriate



# Additional Considerations

- Tracking of flex –funding
- Harm reduction model/ Recovery is a journey
- Moving through higher and lower levels of care
- Community collaboration / integration
- Interagency collaboration and the integrated service experience
- Housing that works for people



# Audience Questions

- What about rural coverage?
- What about after hours language capability / translation?
- What about staff safety on after hour calls?
- What about the uses or limits of peer / mentors?

