OLIVE VIEW MEDICAL CENTER CAMPUS AND RESTORATIVE CARE VILLAGE

Presentation to the Los Angeles City Council Health Committee June 5, 2019



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LA COUNTY HEALTH AGONCY

SENATE BILL 1152 (SB 1152)

- Effective July 1, 2019, Senate Bill 1152 (SB 1152) is a new California law that specifies discharge documentation requirements for homeless patients. In compliance with SB 1152, all homeless patients must be identified and their post-discharge destination must be documented.
- State regulations mandate the coordination of support resources such as shelters, mental health providers, and other support services prior to discharge.
- Some of the requirements outlined in SB 1152 include:
 - Screening for appropriate diseases
 - Offering appropriate vaccinations
 - Offering food before discharge
 - Ensuring patient has weather-appropriate clothing
 - Documentation, Policy Development, Log (Report)

LA COUNTY DHS' RESPONSE TO SB 1152

- The LA County Department of Health Services has had policies and procedures in place related to discharge planning, including with those experiencing homelessness and/or unstably housed prior to the passage of SB 1152.
- Patients are screened at registration (ED/Inpatient) for homelessness.
 - If a patient is experiencing homelessness, a referral to social work will be initiated, and the communication to the care team is initiated (i.e., assessing for status and linkage to housing resources including referral to Housing for Health if appropriate, providing meal, prescriptions, clothes, etc.)
- In addition, the following were also created:
 - An addendum to Discharge Planning Policy to include specific requirements of SB 1152;
 - A form in the electronic medical record to document discharge planning for our patients experiencing homelessness
 - An electronic report (log) per SB 1152 requirements
 - A pathway for facilities to order weather appropriate clothing and keep it stocked.

The goal is to ensure patients safely return to the community with linkages to housing/adequate shelter and other community services and support.

OLIVE VIEW MEDICAL CENTER BACKGROUND

Olive View opened on October 27, 1920 as a sanatorium for Los Angeles County to relieve the overcrowding of tuberculosis patients at County General Hospital and later evolved into an acute care hospital.

Today, Olive View-UCLA Medical Center is a 355 bed teaching hospital affiliated with the David Geffen School of Medicine at UCLA.

The hospital also provides emergency and urgent care acute emergent and urgent services for both physical and mental health.

STATEMENT OF NEED

- Emergency rooms are overcrowded with approximately 30% of individuals in adult wards waiting to be transitioned to more appropriate care settings that would serve as a bridge back into the community.
- One in five adults live with a mental illness, which includes many different conditions that vary in degree of severity.
- The cumulative effect of these challenges, compounded by poverty and unemployment, make overcoming these problems an insurmountable task.
- Tackling the problems one at a time has not been effective. A comprehensive approach is needed.

RESTORATIVE CARE VILLAGES

Restorative Care Villages (RCVs) will be an innovative environment to provide Los Angeles County residents with access to a new, comprehensive, whole person approach to care and supportive services that will focus on the providing a continuum of care for our most vulnerable populations.

This continuum will ensure that the right care is provided at the right place and right time which will include:

robust care coordination and discharge planning processes that will link patients to resources and services for every step of their recovery.

emergency department decompression, thereby allowing for shorter wait times for patients and their families and law enforcement officers who accompany patients.

RCVs will be built on County healthcare campuses: LAC+USC (Boyle Heights), Olive View-UCLA (Sylmar), MLK (Willowbrook) and Rancho Los Amigos (Downey).

The RCV on the Olive View campus will be comprised of recuperative care and residential programs, as well as a Meridal Health Wellness Center and moving the Mental Health Urgent Care Center from its current location to the campus, adjacent to the Psychiatric Emergency Room.

The RCV will support integrated direct care services including physical health, mental health, social, and other wraparound services.

The focus will be on stabilization and linkage to recovery-oriented community-based resources through comprehensive care coordination and discharge planning.



MENTAL HEALTH WELLNESS CENTER



The Department of Mental Health (DMH) will provide an array of outpatient mental health and supportive services for clients who live with serious mental illness at the Mental Health Wellness Center.

The Recovery Model is the framework for all adult services provided and is based on the belief that adults diagnosed with a mental illness can lead productive lives by seeking and maintaining meaningful relationships through employment, education, or volunteer work, and participating fully in their community.

MENTAL HEALTH URGENT CARE CENTER





- DMH oversees Mental Health Urgent Care Centers (UCCs) that provide 24/7 rapid access to mental health evaluation and assessment, intervention and medication support.
- UCCs support Los Angeles County's efforts to decompress psychiatric emergency services, reduce unnecessary hospitalizations, thereby improving acress to mental health treatment and services. UCCs focus on stabilization and linkage to recovery-oriented community based

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RESIDENTIAL TREATMENT PROGRAM



DMH oversees Residential Treatment Programs (RTPs) which provide a short-term alternative to hospitalization to address mental health needs.

RTP services are designed to resolve the immediate needs and improve the level of functionality of the individuals so that they are able to return to a less intensive treatment environment via care coordination and discharge planning.

Residents participate in the development of recovery-oriented, individualized plans that promote the ultimate goal of becoming selfsufficient and going into permanent supportive housing.

RECUPERATIVE CARE CENTER



- Department of Health Services' Recuperative Care Centers (RCCs) provide short-term housing for individuals recovering from an acute illness or injury who no longer require hospital care, but do require time to further recuperate and heal.
 - RCCs provide medical and mental health, monitoring, meals, case management access to permanent housing opportunities linkages to supportive services, assistance with establishing or reinstating public benefits, and transportation.

DISCHARGE PLANNING SUMMARY

- Discharge planning begins upon client admission into the residential treatment program and the discharge plan continues to be updated during the course of the client's stay.
- Discharge planning is important in order to maintain gains achieved during the course of treatment the client has had in the residential treatment setting.
 - Discharge planning links clients to appropriate next step resources based on their needs and assists them with re-entry to community.
 - Clients may still be in need of continued therapy, as well as intensive case management monitoring and support.
 - A carefully developed discharge plan, produced in collaboration with the client, identifies and matches client needs with community resources, providing the support needed to sustain the progress achieved during treatment.

QUESTIONS?



Olive View-UCLA Medical Center FREQUENTLY ASKED QUESTIONS

What's the history of the Olive View-UCLA Medical Center? How were these facilities used prior to be becoming a County Hospital?

Olive View opened in 1920 as a sanitorium for Los Angeles County to relieve the overcrowding of tuberculosis patients at County General Hospital and later evolved into an acute care hospital.

What is the Olive View Restorative Care Village?

The Restorative Care Village will be comprised of facilities that can support integrated direct care services including physical health, behavioral health, housing, social and other wraparound services.

The focus will be on stabilization and linkages to recovery-oriented community-based resources including residential programs and a Mental Health Wellness Center.

Why is the County building this facility with these types of services at Olive View?

There is vast need throughout Los Angeles County for facilities and services that address mental health and associated housing challenges. After careful consideration by the County Board of Supervisors, the County's network of hospital campuses was determined to be the most suitable places to establish facilities and services that support integrated care and services.

What does Recuperative Care mean?

Recuperative Care provides short-term support for individuals recovering from an acute illness or injury who have conditions that still need additional supervision from skilled staff and social workers. Recuperative Care also offers ongoing medical and mental health monitoring, meals, case management and transportation.

What are the benefits of this facility to the existing hospital?

Oftentimes those experiencing mental health and associated housing challenges will utilize emergency room services for non-emergencies. By providing wraparound services on site for those experiencing mental health and housing challenges, emergency rooms are better able to provide faster assistance to medical emergencies and provide shorter wait times in emergency rooms and urgent care. There are also significant cost savings associated with eliminating the treatment of non-emergencies in emergency rooms and urgent care units.

What are the long-term benefits to the community?

The Restorative Care Village will allow for shorter emergency room and urgent care wait times for those in immediate need. It will also allow for the expansion of community-based resources, more health care services to Sylmar and surrounding communities and enhancements to the muchvalued horse trails and open spaces on the Olive View campus.



Who will be utilizing these facilities and services?

Individuals utilizing the Restorative Care Village will be community residents and discharged patients from the hospital in need of housing and other services.

How many patients will be housed at the Restorative Care Village and what's the expected length of their stay?

There will be 80 beds, 16 each in five separate buildings for residential treatment and one building with 48 beds for the recuperative care center.

What kind of treatment and care will be provided at the Restorative Care Village?

The Restorative Care Village will be comprised of several facilities that can support integrated direct care services including physical health, behavioral health, housing, social, and other wraparound services

It will be comprised of recuperative care and residential treatment programs, as well as a Mental Health Wellness Center and Mental Health Urgent Care Center.

The recuperative care center will provide short-term support for individuals recovering from an acute illness or injury or who have conditions that still need additional supervision from skilled nurses and social workers The residential treatment program also provides an alternative to hospitalization. Residents participate in the development of recoveryoriented, individualized plans that promote successful reintegration into the community, working toward the ultimate goal of becoming self-sufficient and going into permanent supportive housing.

The Mental Health Wellness Center will provide clients with an array of outpatient mental health and supportive services. The Recovery Model is the framework for all adult services and is based on the belief that adults diagnosed with a mental illness can lead productive lives by seeking and maintaining meaningful relationships through employment, education, or volunteer work, and participating fully in their community.

The Mental Health Urgent Care Center will continue to provide 24/7 rapid access to mental health evaluation and assessment, crisis intervention and medication support. It will also provide case management for individuals experiencing psychological distress and/or psychiatric crisis. The focus is on stabilization and linkage to recovery-oriented community-based resources.

What happens when these individuals are discharged from care?

In both the recuperative care center and residential treatment program, discharge planners work with patients and their families to ensure that there is a smooth transition back to home, to interim housing or permanent supportive housing. They are also connected to outpatient and other supportive services necessary to monitor and

