

MENTAL HEALTH, MHSA AND RECOVERY GLOSSARY

Revised May 2011

1370: Mentally incompetent to stand trial.

5150: Provision of the California Welfare and Institutions Code defining standards for the involuntary treatment, typically for inpatient psychiatric hospitalization, of persons with mental illness.

5250: Provision of the California Welfare & Institutions code that places a 14-day intensive treatment limit on persons held involuntarily on a 5150.

5350: Provision of the California Welfare and Institutions Code providing for appointment of a conservator for any person who is gravely disabled as a result of mental disorder or impairment by chronic alcoholism.

5355: Provision of the California Welfare & Institutions Code providing for appointment of a Conservator.

AAP: American Academy of Pediatricians

AB 100: The California Assembly Bill signed into law on March 24, 2011. It ends the requirement that the California Department of Mental Health (DMH) and the Mental Health Services Oversight and Accountability Commission (MHSOAC) annually review and approve county MHSA plans and updates. A.B. 100 also states that counties are not required to annually update the three-year MHSA plan, and that MHSOAC, instead of DMH, may offer technical assistance to counties as needed. The State, rather than DMH, will administer the Mental Health Services Fund. A.B. 100 also authorizes the one-time transfer of \$862 million in MHSA funding to other areas of mental health services, including special education pupils, EPSDT, and Medi-Cal Specialty Health Managed Care. In addition, A.B. 100 states that the Legislature expects the State to consult with MHSOAC to devise an effective means of ensuring that counties comply with MHSA.

AB 1421: Laura's Law is a California law passed in 2002 that allows for court-ordered assisted outpatient treatment for individuals who have a serious mental illness and recent history of psychiatric hospitalizations, incarcerations or threats or attempts of serious violent behavior toward self or others. Each county has the option as to whether to implement Laura's Law. Santa Barbara County has not implemented Laura's Law, but in 2011 created a voluntary pilot program as an alternative. (See ACTOE)

AB 2034: The California Assembly Bill that amended the California Welfare and Institutions Code and provides funding to address the issues of the homeless and their unmet needs. Counties and cities that operate independent public mental health programs provide health services and outreach to mentally ill adults who are homeless or at risk of becoming homeless. Many of the clients receiving services provided under the mandates of AB 2034 and AB 34 (passed in 1999) reside in housing arrangements that do not require licensure by Com-

munity Care Licensing. Funding for AB 2034 was discontinued by Governor Schwarzenegger in 2008.

AB 34: The California Assembly Bill that, beginning on November 1, 1999, provided \$10 million to provide services to homeless mentally ill individuals and mentally ill individuals at risk of incarceration in the three counties of Los Angeles, Sacramento, and Stanislaus. In 2000, based on the early results demonstrated by this program, the legislature provided an additional \$55 million to expand these services to include 31 more counties and 40 additional providers throughout the state of California.

Access: The extent to which an individual who needs care and services is able to receive them. Access is more than having insurance coverage or the ability to pay for services. It is also determined by the availability of services, acceptability of services, cultural appropriateness, location, hours of operation, transportation needs, and cost.

Accessible Services: Services that are affordable, located nearby, and open during evenings and weekends. Staff is sensitive to and incorporates individual and cultural values. Staff is also sensitive to barriers that may keep a person from getting help. For example, an adolescent may be more willing to attend a support group meeting in a church or club near home than to travel to a mental health center. An accessible service can handle consumer demand without placing people on a long waiting list.

Access Team: A service of the Santa Barbara County Department of Alcohol, Drug and Mental Health Services that conducts telephone screenings for persons requesting mental health services and that links these individuals to appropriate mental health resources. The Access Team is part of the ADMHS CARES (Crisis and Recovery Emergency Services) program.

ACSW: Academy of Certified Social Workers

ACT: Assertive Community Treatment, sometimes referred to as Program of Assertive Community Treatment (PACT). A team-based approach to the provision of treatment, rehabilitation, and support services. ACT/PACT models of treatment are built around a self-contained multidisciplinary team that serves as the fixed point of responsibility for all patient care for a fixed group of patients. In this approach, normally used with clients with severe and persistent mental illness, the treatment team typically provides all patient services using a highly integrated approach to care. Hallmark features include 24/7/365 availability, a "whatever it takes" approach to problem-solving, a low client-staff ratio, and services brought to clients where they reside.

ACTOE (Assertive Community Treatment, Outreach and Engagement) is a pilot program created and imple-

mented by ADMHS in 2011 as a voluntary alternative to Laura's Law. It opened five ACT slots in each region of the County to persons who would have qualified for services under Laura's Law.

ADMHS: Santa Barbara County Department of Alcohol, Drug & Mental Health Services.

Admin Days: Time spent by a hospitalized patient waiting for transfer to another facility.

Administrative Costs: Costs of operating and managing programs. These costs cannot be tied to the provision of specific services.

ADP: Alcohol & Drug Program, a division of the Santa Barbara County Department of Alcohol, Drug and Mental Health Services.

Advisory Board on Alcohol & Drug Problems: The Advisory Board on Alcohol and Drug Problems for Santa Barbara County is a body established by California law to advise the Alcohol and Drug Program Administrator regarding the expenditure of public funds for services. The board provides a means for citizens to offer input for planning efforts for the prevention and treatment of alcohol and other drug problems. The board is made up of Santa Barbara County residents who have either a personal or professional commitment to alleviating problems related to drug use and inappropriate alcohol use in their community. The law specifies that membership shall include representatives from various economic, social, and occupational groups and shall be broadly representative of the demographic characteristics of the county. Persons who have received or rehabilitation services for their alcohol and drug problem are encouraged to serve on the Board. Members are appointed to a three-year term by the Board of Supervisors. The total membership is limited to twenty persons, no more than four per supervisorial district.

Advocate: a person who pleads another's cause, a person who speaks or writes in support of something.

AMR: American Medical Response, the company that provided MHAT services for ADMHS until CARES Mobile Crisis took over mobile crisis responsibilities.

Appropriate Services: Services designed to meet the specific needs of each individual and family.

APS: Adult Protective Services

ARMS: At Risk Mental State

ASO: Administrative Services Organization. In 1998 the California Mental Health Directors Association identified an organization to manage the provision of mental health services for minors eligible for full scope Medi-Cal benefits placed out-of-county.

Assessment: A professional review and evaluation of an individual's mental health needs and conditions to determine the most appropriate course of treatment, if indicated, and may ascertain eligibility for specific entitlement or mandated programs.

At Risk Mental State: The condition of individuals who are at risk for developing a psychotic illness and are experiencing signs or symptoms indicative of high risk for psychotic illness. These individuals have not yet been diagnosed with a psychotic illness.

Best Practice: An effective method of treatment as established by a body of knowledge that may include scientific, practical or anecdotal elements.

Board and Care Home: (Also called adult care home or group home.) Residence which offers housing and personal care services for 3 to 16 residents. Services such as meals, supervision, and transportation are usually provided by the owner or manager. May be single family home. (Licensed as adult family home or adult group home.)

Assessment: A professional review of child and family needs that is done when services are first sought from a *caregiver*. The assessment of the child includes a review of physical and mental health, intelligence, school performance, family situation, and behavior in the community. The assessment identifies the strengths of the child and family. Together, the *caregiver* and family decide what kind of treatment and supports, if any, are needed.

Behavioral Healthcare: Continuum of services for individuals at risk of, or suffering from, mental, addictive, or other behavioral health disorders.

Behavioral Therapy: Focus on behavior-changing unwanted behaviors through rewards, reinforcements, and desensitization. Desensitization, or Exposure Therapy, is a process of confronting something that arouses anxiety, discomfort, or fear and overcoming the unwanted responses. Behavioral therapy often involves the cooperation of others, especially family and close friends, to reinforce a desired behavior.

Beneficiary: A client covered by Medi-Cal.

Biopsychosocial Model of Care: both a philosophy of clinical care and a practical clinical guide. Philosophically, it is a way of understanding how suffering, disease, and illness are affected by multiple levels of organization, from the societal to the molecular. At the practical level, it is a way of understanding the individual's subjective experience as an essential contributor to accurate diagnosis, health outcomes, and humane care.

BOS: Santa Barbara County Board of Supervisors.

Budget: Estimate of proposed expenditures prior to actually incurring the expenditures. May or may not reflect actual expenditures. Should be developed using the best information available at the time the budget is developed.

CAC: Community Action Committee of Santa Barbara

CADA: Council on Alcoholism and Drug Abuse

CAIT: Client Accounting Implementation Team or Client Accountability Implementation Team

CALM: Child Abuse Listening and Mediation

CalWorks: California Work Opportunity and Responsibility to Kids, a program that provides cash aid and services to eligible California families.

Capital Facilities/Technological Needs: One of the five funding components of the Mental Health Services Act.

Care Coordinator: A person who ensures that patients receive all needed health care services. Within governmental programs, care coordinators also help patients remove barriers to access, and help link patients to other needed services in the community (such as financial

assistance, housing, social services, etc.). Sometimes plans or insurance companies use the term care coordinator for a case manager who is also concerned with controlling health care costs

Caregiver: A person who has special training to help people with mental health problems. Caregivers include family members of adults and older adults, as well as family members of children.

CARES: Crisis and Recovery Emergency Services, a program of Santa Barbara County ADMHS based in Santa Barbara and Santa Maria.

CARF: Commission on Accreditation of Rehabilitation Services

Case Manager: An individual who organizes and coordinates services and supports for individuals with mental illness and their families.

CATCH: Community Access to Child Health, a program of the American Academy of Pediatrics.

CBO: Community-based organization including, but not limited to, nonprofit organizations contracted by ADMHS to provide programs and services to individuals with mental illness and/or addiction.

CCP: Coordinated Care Plan

CCR: California Code of Regulations

CDSS: California Department of Social Services.

Certified Peer Specialist: a designation earned by consumers who provide services in the mental health system.

CF/TN: (See Capital Facilities/Technological Needs)

CID: Critical Incident Debriefing

CIMH: California Institute for Mental Health

CIT: (See Crisis Intervention Training)

Client: An individual who receives alcohol, drug, and/or mental health services.

CMHDA: California Mental Health Directors Association.

CMS: Centers for Medicare and Medicaid Services (formerly HCFA)

CNMHC: California Network of Mental Health Clients.

COD: Co-Occurring Disorder

COHS: County Operated Health System

Community Clinic: A clinic operated by a tax-exempt nonprofit corporation that is supported in whole or part by donations, grants, government funds, gifts, bequests, or contributions. Charges to the patient are based on the ability to pay using a sliding fee scale. These clinics provide essential services to primarily uninsured and underserved individuals.

Community-Defined Evidence: Practices that have a community-defined evidence base for effectiveness in achieving mental health outcomes for underserved communities. It also defines a process underway that will develop specific criteria for by which effectiveness may be documented using community-defined evidence that will eventual give the procedure equal standing with current evidence-based practices.

Community Health Center: A nonprofit organization that provides primary and preventive health care services for uninsured and underserved individuals in collaboration with other community providers.

Community Services and Supports: (1) A general reference to community-based mental health services and support programs, which includes a variety of services, a wide range of intensities and purpose. This term often refers to a continuous 'system of care' model able to respond to a variety of user needs. (2) A specific funding "stream" or component of the Mental Health Services Act administered by the California Department of Mental Health.

Complaint: In the Medi-Cal grievance procedure, an oral expression of dissatisfaction with services.

Compliance: Accurately following the government's rules on billing system requirements and other federal and/or state regulations.

Compliance Program: A self-monitoring system of checks and balances to ensure compliance with applicable laws relating to an organization's business practices.

Conservatorship: See "LPS Conservatorship" and "Probate Conservatorship."

Consumer: Any individual who does receive or could receive mental health, alcohol, drug and other care services to improve the quality of his or her life.

Consumer-Driven: A client-centered system of mental health care tailored to an individual's needs, preferences, and timetables that views providers and family as partners, not controlling partners.

Consumer-Run Services: Mental health treatment or support services that are provided by current or former mental health consumers. Includes social clubs, peer-support groups, and other peer-organized or consumer-run activities.

Continuum of Care: A term that implies a progression of services that a child moves through, usually one service at a time. More recently, it has come to mean comprehensive services.

Co-Occurring Conditions/Disorder: Two or more disorders present in one individual simultaneously. Often refers to an individual with both a mental health condition and a substance abuse disorder (alcohol and/or drug dependence or abuse). May also refer to other combinations of disorders.

Coordinated Services: A multi-agency approach to providing care for children incorporating a *plan of care* that typically involves organizations such as mental health, education, juvenile justice, and child welfare. *Case management* is used to coordinate services.

Cost Report: An annual document prepared by each county that shows the actual costs of various services and programs using accepted accounting methods. The cost report is used as the basis for determining the amount of Medi-Cal funding to which a county is entitled. Also referred to as Short-Doyle/Medi-Cal cost report.

County Executive Office: Administrative Office of the executive branch of Santa Barbara County government headed by Michael F. Brown, County Executive Officer.

CPS: Certified Peer Specialist

CPT: Current Procedural Terminology, a system for coding physician procedures developed by the AMA to file claims with Medicare.

Crisis Intervention Training: Established in Memphis in 1987, Crisis Intervention Training (CIT) programs educate and prepare law enforcement professionals who come into contact with people with severe mental illnesses. CIT helps in identifying the signs and symptoms of these illnesses and in responding effectively and appropriately to people who are experiencing a psychiatric crisis. Because law enforcement officers are often the first responders in these incidents, it is essential that they know how critical periods of mental illness alter behaviors and perceptions, assess what is needed in the moment and bring understanding and compassion to bear when handling difficult situations.

Crisis Residential Treatment Services: Short-term, round-the-clock help provided in a non-hospital setting during a crisis.

CSI: Client and Service Information System

CSOC: Children's System of Care, developed in Santa Barbara County in FY 94-95 with a federal SAMSHA grant that supported development of the MISC program.

CSP: Client Service Plan

CSS: Community Services and Supports

Cultural Competence/Multi-Culturalist: The practice of continuous self-assessment and community awareness on the part of service providers to ensure a focus on the cultural, linguistic, socio-economic, educational and spiritual experiences of consumers and their families/support systems relative to their care.

CWS: Child Welfare Services, a program run by the Santa Barbara County Department of Social Services.

CY: Calendar Year

DA: District Attorney

Day Treatment: Treatment that includes special education, counseling, parent training, vocational training, skill building, crisis intervention, and recreational therapy lasting at least four hours per day.

Direct Service Costs: Costs of providing services to clients.

DMH: California Department of Mental Health

DO: Danger to others

DR: California Department of Rehabilitation.

Drop-in Center: A social club offering peer support and flexible schedule of activities; may operate on evenings and/ weekends.

DS: Danger to self

DSM-IV/DSM-IV-TR- Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition/Text Revision.

DSS: Santa Barbara County Department of Social Services.

Dual Diagnosis: Often used to indicate the co-occurrence of mental health disorders and substance abuse disorders (alcohol and/or drug dependence or abuse), although may also refer to other combinations of disorders.

Early Intervention: Usually joined in phrase with the term Prevention, it means providing services or treatment early on at the onset of an illness with the goal of reducing the duration and severity of the disorder.

ECMHC: Early Childhood Mental Health Collaborative

EDS: Electronic Data Systems, responsible for reimbursing Medi-Medi claims in Santa Barbara County.

Emerging Best Practices: Those treatments and services with a promising, but less thoroughly documented, evidentiary base.

EMS: Emergency Medical Services

EMT: Emergency Medical Technician

EPS: Emergency Psychiatric Services (Cottage Hospital). Provides assessment and crisis intervention for psychiatric and chemically dependent patients; in-patient and out-patient programs. Currently does not accept Medi-Cal.

EPSDT: The Early and Periodic Screening, Diagnostic, and Treatment service is Medicaid's comprehensive and preventive child health program for individuals under the age of 21. EPSDT was defined by law as part of the Omnibus Budget Reconciliation Act of 1989 (OBRA 89) legislation and includes periodic screening, vision, dental and hearing services. In addition, section 1905(r)(5) of the Social Security Act (the Act) requires that any medically necessary health care service listed at section 1905 (a) of the Act be provided to an EPSDT recipient even if the service is not available under the state's Medicaid plan to the rest of the Medicaid population.

EQRO (see External Quality Review Organization)

Evidence-Based Practices: Services supported by research or suggested by other evidence that are typically person-centered, individualized, and congruent with the recovery model of care.

Expand: Increase in the kind or amount of services offered or increase in the number of people served or increase in the capacity to provide extended or new services.

Expenditure: An actual incurred cost.

External quality review organizations examine health plans to determine compliance with Centers for Medicare and Medicaid Services (CMS) requirements and provide quality assurance oversight. APS Healthcare works with state Medicaid programs to conduct administrative, clinical and information technology reviews to ensure that Medicaid recipients are receiving appropriate services.

Face sheet: printout of client history with ADMHS services, including contracted providers.

FAMI: Family Alliance for the Mentally Ill

Family-Centered Services: Help designed to meet the specific needs of each individual child and family.

Family-Driven: A system of care that involves the family of a youth/consumer in the process of assessment, identifying treatment options and developing a treatment plan that is based on and adapted to the youth/consumer's individual needs.

Family Member: An individual who is now or was in the past, either the primary caregiver or a concerned and involved person who provides a significant level of support to a person who is living with a mental illness.

Family Partnership Program: Activities conducted by family members that include strategies to engage racially and ethnically diverse families and include activities such

as training, information, and referral, outreach, support groups, individual advocacy, direct services self-help support and empowerment and program oversight.

Family/Consumer Involvement: One of the five major guiding principles of the MHSA that calls for client- and family- driven mental health system for older adults, adults, and transition-age youth and a family-driven system of care for children and youth.

Family Support Services: Help designed to keep the family together while coping with mental health problems that affect them. Examples include consumer information workshops, in-home supports, family therapy, parenting training, and crisis services and respite care.

FFP: Federal Financial Participation

First Onset/Break: The first time an individual meets DSM-IV criteria for a psychotic illness.

FSA: Family Service Agency

Full Service Partnership: One of three categories of MHSA Community Services and Supports (CSS) denoting funds that provides all necessary services and supports for designated populations to be served in the first three years. Counties are required to request the majority of their total CSS funding for Full Service Partnerships, in order to begin to provide full service to as many individuals/families as possible. Services funded from General System Development or Outreach and Engagement funds provided to individuals who have Full Service Partnerships may be counted in meeting this requirement.

Full-Time Equivalents (FTEs): The number of staff positions calculated assuming a full fiscal year (2,080 hours) after allowing for vacation time, sick leave, holidays, etc.

Fully Served: People who have been diagnosed with serious mental illness and children who have been diagnosed with serious emotional disorders, and their families, who are receiving mental health services through an individual service plan in which both the client and service provider agree that they are obtaining all of the services they want and need to achieve their wellness/recovery goals.

FY: Fiscal Year. The County of Santa Barbara's fiscal year is July 1 through June 30.

GAP: Geriatric Assessment Program, Santa Barbara County Public Health

GD: Gravely disabled

General System Development: one of three categories of MHSA funding denoting funds used to improve programs, services and supports for the identified initial full service populations and for other clients consistent with the populations described in the proposal.

Grievance: Any written communication of dissatisfaction.

Health-Based Intervention: Mental health programs and interventions designed to be used within a healthcare setting to assisted trained healthcare providers in identifying, screening, assessing and treating or referring individuals with, or at risk for, mental health problems.

Historical/Intergenerational Trauma: Memories

passed from one generation to the next.

HMO: Health maintenance organization; an entity that provides, offers or arranges for coverage of designated health services needed by members for a fixed, prepaid premium. HMOs offer prepaid, comprehensive health coverage for both hospital and physician services. The HMO is paid monthly premiums or capitated rates by the payers, which include employers, insurance companies, government agencies, and other groups representing covered lives.

Home-Based Services (In-Home Supports): Help provided in a family's home either for a defined period of time or for as long as it takes to deal with a mental health problem. Examples include parent training, counseling, and working with family members to identify, find, or provide other necessary help. The goal is to prevent the child from being placed outside of the home.

Housing Services: Assistance to clients/patients in finding and maintaining appropriate housing arrangements.

HRSA: U.S. Health Resources and Services Administration, an agency of the US Department of Health and Human Services that directs national health programs to ensure quality health care to underserved, vulnerable, and special-need populations and promote appropriate health professions workforce capacity and practice, particularly in primary care and public health.

ICD-9: International Classification of Diseases, 9th Edition

IEP: Individualized Education Plan

ILP: Individual Learning Plan

IMD (Institutes for Mental Disease): A designation of the Federal Government to distinguish skilled nursing facilities (SNF) that primarily care for people with psychiatric diagnoses from those that provide care for people with primarily medical illnesses. Any SNF with 51% or more of its population with a psychiatric diagnosis is considered to be an IMD.

Independent Living Services: Assistance, skills training and supportive services designed to maximize the client's ability to function in the community.

Indicators: Measures that help quantify the achievement of an outcome.

Individual Service Plan: Person-directed plan of care developed with the assistance of the interdisciplinary team to prevent institutionalization and facilitate an individual's ability to fully participate in the community, taking into account the individual's preferences.

Innovation: New and creative approaches and programs that increase access, quality of services and/or collaboration.

Integrated Services: The range of community and supportive services available to a consumer that are coordinated, centered on the person being served rather than a particular problem, program or service site, reflective of common values and focused on the delivery of services.

IOM: Institute of Medicine

IPA: Independent Practice Association; An organized form of prepaid medical practice in which participating

physicians remain in their independent office settings, seeing both enrollees of the IPA and private-pay patients.

ISP (See Individualized Service Plan)

Juvenile Justice Involvement: Children and youth with signs of behavioral/emotional problems at risk of or having had contact with any part of the juvenile justice system and cannot be appropriately served with MHSA Community Services and Supports programs.

LGBT: Lesbian, Gay, Bisexual and Transgender.

LCSW: Licensed Clinical Social Worker.

Little Hoover Commission: An independent and bipartisan state oversight agency that investigates California state government operations and, through its reports, makes regulatory and legislative recommendations on a wide variety of issues.

LPS (Mental Health) Conservatorship: A legal arrangement making one adult (called the conservator) responsible for a mentally ill adult (called the conservatee). These conservatorships are only for adults with mental illnesses listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM).

Maintenance of Effort: A required contribution in order to receive funding. In the case of the MHSA, the maintenance of effort is based on a prior level of funding used for mental health services.

Medicaid: A joint federal and state program that helps with medical costs for some people with low incomes and limited resources. In California, Medicaid is called "Medi-Cal."

Medi-Cal: California's Medicaid program. It provides health care coverage for more than six million low-income children and families as well as elderly, blind, or disabled individuals. Medi-Cal is jointly funded by the state and federal government and administered by the California Department of Health Services. People enroll in Medi-Cal through their county social services department.

Medical Model: An approach to service delivery that focuses on symptom management rather than recovery.

Medicare: The federal health insurance program for people 65 years of age or older, certain younger people with disabilities; e.g., those receiving SSDI, and people with End-Stage Renal Disease (permanent kidney failure with dialysis or a transplant, sometimes called ESRD).

Medi-Medi: An individual who is enrolled in both Medi-Cal and Medicare.

Medically Necessary: A service or treatment that is appropriate for a client's diagnosis and which, if not rendered, would have an adverse affect on the client's condition.

Mental Health: How a person thinks, feels, and acts when faced with life's situations. *Mental health* is how people look at themselves, their lives, and the other people in their lives; evaluate their challenges and problems; and explore choices.

Mental Health Commission: Established pursuant to Mental Health Services Act, §5604 of Welfare and Institutions Code. In Santa Barbara County, the 11-member commission's responsibilities include reviewing and

evaluating the community's mental health needs, services, facilities and problems; reviewing the County Short-Doyle Plan; advising the Board of Supervisors and Mental Health Director on any aspect of local mental health programs; and submitting an annual report to the Board of Supervisors.

Mental Health Disorder: A diagnosable illness that significantly interferes with an individual's cognitive, emotional or social abilities.

Mental Health Integration: The combining of mental health prevention, assessment, intervention, treatment and referral into the primary health care system to prevent the development of serious emotional disorders and mental illness and to increase access to mental health services for underserved populations.

Mental Health Plan: California Welfare & Institutions Code Section 5775: "the State Department of Mental Health shall implement managed mental health care for Medi-Cal beneficiaries through fee-for-service or capitated rate contracts with mental health plans, including individual counties, counties acting jointly, any qualified individual or organization, or a nongovernmental entity.

Mental Health Problem: Diminished cognitive, emotional or social abilities, but not to the extent that the criteria for a mental disorder are met.

Mental Health Services Oversight and Accountability Commission: (See MHSOAC)

Mental Health Treatment Court: program funded by the state through a four year grant that began in 1999.

MFT: Marriage and Family Therapist.

MHA: Mental Health Association

MHAT: Mental Health Assessment Team, a unit that was run by American Medical Response (AMR) that assessed people undergoing mental health crises in Santa Barbara County. It was replaced by the CARES Mobile Crisis Unit.

MHP: Mental Health Plan or Mental Health Professional

MHSA: Mental Health Services Act. It became law in California on January 1, 2005. It is designed to provide new resources for the expansion of mental health services, without reductions of current State allocation or cost/risk share agreements. The MHSA is intended to transform mental health care by mandating all services be: outcome-driven and based on consumer and family involvement; developed and monitored with a collaborative of community partners; delivered with cultural competency focused on eliminating ethnic and racial disparities in services.

MHSOAC: Mental Health Services Oversight and Accountability Commission. In November 2004, California voters passed Proposition 63, the Mental Health Services Act. The law calls for the establishment of the Mental Health Services Oversight and Accountability Commission (MHSOAC). Section 10 of the MHSA (Welfare and Institutions Code Section 5845) established the Mental Health Services Oversight and Accountability Commission (MHSOAC) and defined the creation and composition of the Commission. The MHSOAC oversees the Adults and Older Adults Systems of Care Act; Hu-

man Resources; Innovative Programs; Prevention & Early Intervention Programs; and the Children's Mental Health Services Act. The Commission replaced the advisory committee which had been established pursuant to Welfare and Institutions Code Section 5814.

MHTC: Mental Health Treatment Court

MIA: Medically Indigent Adults program for people who are uninsured and who are not eligible for other health care coverage. MIA does not cover mental health care.

MISC: Multi-agency Integrated System of Care, the children's mental health services program based at the Santa Barbara County Department of Alcohol, Drug and Mental Health Services. Established with a five-year federal grant in 1994, MISC strove for family involvement at all levels, a continuum of traditional and non-traditional services, prevention of more restrictive placements, collocation of staff from all partner agencies, strength-based service delivery and individualized service planning, use of accessible and culturally appropriate resources and home and community-based services. MISC partners include Santa Barbara County Probation, Social Services, Public Health, Alcohol, Drug and Mental Health Services; schools and community-based organizations. It is no longer the model for children's service delivery.

Mobile Crisis Services: A crisis service that is delivered where and when the crisis occurs, ensuring that persons in psychiatric crisis are served by mental health professionals whenever possible.

MOU: Memorandum of Understanding

NAMI: National Alliance on Mental Illness

Natural Supports: Supports that occur within the larger community not part of mental health services; e.g., church, AA clubs.

New Freedom Mental Health Commission: Established by President George W. Bush in April 2002 to recommend ways to eliminate inequality for Americans with disabilities. The final report is available at www.mentalhealthcommission.gov/reports/reports.htm.

NIMH: National Institute of Mental Health.

NOA: Notice of Action to inform Medi-Cal beneficiaries that services have been denied or modified.

Non-Traditional Mental Health Setting: Systems and organizations that are not traditionally defined as mental health providers, such as school and early childhood settings, primary health care systems, and community settings serving ethnically diverse and underserved or unserved communities.

OAC: Mental Health Services Oversight and Accountability Commission

OLPN: Online Progress Note

Online Progress Notes: documentation about client visits entered into a computer database.

Onset: The beginning of a serious psychiatric illness that may be diagnosed by using DSM-IV.

Outcomes: Conditions of well-being for children, youth, adults, families and/or communities. County MHSA CSS plans will be evaluated for their contribution to meeting specific outcomes for the individuals served including: meaningful use of time and capabilities, including things

such as employment, vocational training, education, and social and community activities; safe and adequate housing, including safe living environments with family for children and youth; reduction in homelessness; a network of supportive relationships; timely access to needed help, including times of crisis; reduction in incarceration in jails and juvenile halls, and reduction in involuntary services, reduction in institutionalization, and reduction in out-of-home placements.

Outcomes research: Studies that measure the effects of care or services.

Outreach: The act of extending services or assistance to those in the community who may benefit from care but who have not, or have not been able to, come forth to seek it.

Outreach and Engagement: One of three categories of MHSA Community Service and Supports (CSS) denoting funds used for outreach and engagement of populations currently receiving little or no service.

PACE: Personal Assistance in Community Existence, an alternative model to PACT/ACT developed by Dr. Daniel Fisher and Laurie Ahern.

PACT: Program of Assertive Community Treatment is a team-based approach to the provision of treatment, rehabilitation, and support services. ACT/PACT models of treatment are built around a self-contained multidisciplinary team that serves as the fixed point of responsibility for all patient care for a fixed group of patients. In this approach, normally used with clients with severe and persistent mental illness, the treatment team typically provides all patient services using a highly integrated approach to care.

PAL: Public Assistance Liaison; training program developed at UCLA to teach mental health clients a series of basic living skills. Maintains a consistent training protocol for a variety of skills modules.

PART: Professional Assault Response Training

PART A Medicare: Medical Hospital Insurance (HI) under Part A of Title XVIII of the Social Security Act, which covers beneficiaries for inpatient hospital, home health, hospice and limited skilled nursing facility services. Beneficiaries are responsible for deductibles and copayments.

Part B Medicare: Medicare Supplementary Insurance (SMI) under Part B of Title XVII of the Social Security Act, which covers Medicare beneficiaries for physician services, medical supplies and other outpatient treatment. Beneficiaries are responsible for monthly premiums, copayments, deductibles and balance billing.

Pastoral Counseling: Pastoral counselors are counselors working within traditional faith communities to incorporate psychotherapy, and/or medication, with prayer and spirituality to effectively help some people with mental disorders. Some people prefer to seek help for mental health problems from their pastor, rabbi, or priest, rather than from therapists who are not affiliated with a religious community.

Patients' Rights Advocate: California law requires each county to assign a Patients' Rights Advocate to promote

and represent clients' rights and interests. These aims are accomplished through direct assistance to practices of mental health programs and facilities and through training of mental health staff about the rights of mental health consumers.

The California Welfare & Institutions Code Chapter 6.2 Mental Health Advocacy, Article 1 General Provisions, Section 5500.

PCP: Primary care provider; health care providers capable of rendering a wide variety of basic health services.

PD: Public Defender

Peer: Typically means a consumer of alcohol, drug and/or mental health services.

Peer Center: A Medicaid category of program providership, frequently providing peer support services. Staffed and run by consumers.

Peer Services: 1 a category of approved Medicaid reimbursable services 2 a generic reference to any service that is provided by a consumer.

Peer Specialist: see Certified Peer Specialist, also a consumer who is working in the mental health system who has not earned certification.

Peer Support: see Peer Services

Peer Support Center: a category of program providing Peer Services.

Performance Measures: Measures of how well our strategies are working.

PHF: Psychiatric Health Facility run by the Santa Barbara County Department of Alcohol, Drug & Mental Health Services. It is a 16-bed, acute adult inpatient unit that accepts patients hospitalized involuntarily.

Planning Estimate: A calculated maximum amount of funding available to each county for expanded mental health services under the MHSA.

Posttraumatic Stress Disorder: An anxiety disorder that develops as a result of witnessing or experiencing a traumatic occurrence, especially life-threatening events.

PPO: Preferred Provider Organization; a corporation that receives health insurance premiums from enrolled members and contracts with independent doctors or group practices to provide care. Doctors are not prepaid, but they offer a discount from normal fee-for-service charges.

Pre-Implementation Funding: Funds available to counties for continued planning efforts while their Community Services and Supports Program and Expenditure Plan is reviewed by the State.

President's New Freedom Mental Health Commission: See "New Freedom Mental Health Commission."

Prevention: Services using interventions that reduce the likelihood of an onset of a serious illness or disorder.

Primary Care: Integrated, accessible health care services by clinicians accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community.

Priority Population: A specific group defined by the OAC as a population who should receive priority consideration by counties when determining who will receive

MHSA funds.

Probate Conservatorship: A probate conservatorship is a court proceeding in which a judge appoints a responsible person (called a conservator) to care for another adult who cannot care for him/herself or his/her finances (called a conservatee).

Prodrome/Prodromal Syndrome: The period in the course of a disorder when some signs and symptoms are present but the full-blown criteria have not been met. Typically, the prodrome may be defined only retrospectively, after the individual has met the full criteria for the disorder.

Program: One or more services used in an organized manner to provide strategies for services and supports to an individual to achieve positive outcomes.

Progress Notes: Provider comments about client presentation, interventions, etc.

Promising Practice: A practice that incorporates the philosophy, values, characteristics, and indicators of other positive/effective public health interventions. A promising practice is based on guidelines, protocols, standards, or preferred practice patterns that have been proven to lead to effective outcomes. It also incorporates a process of continual quality improvement that has an evaluation component/plan in place to move towards demonstration of effectiveness. However, a promising practice does not yet have evaluation data available to demonstrate positive outcomes.

Proposed Budget per Member per Month: A calculation that shows the budgeted amount estimated to be spent on each participant per month based on the best information available at the time the budget was prepared. This does not represent a case rate, which is a pre-determined payment amount per client.

Proposition (Prop) 63: A California ballot initiative that called for an additional tax of one percent be imposed on taxpayers' personal income over \$1 million to provide dedicated funding for the expansion of mental health services and programs. After passing with 53.4% of the vote, in November 2004 Proposition 63 became the Mental Health Services Act (MHSA).

Provider network: Mental health professionals who accept Medi-Cal and are recommended by ADMHS to clients determined not to require clinic services.

PSC: Personal Service Coordinator.

PSR: Psychosocial Rehabilitation

Psychiatric Rehabilitation: a model of program that operates from guidelines established by IAPSRs; aka Psychosocial Rehab (PSR).

QA (see Quality Assurance)

QIC (see Quality Improvement Committee)

QM: Quality Management

Quality Assurance: Activities and programs intended to ensure or improve the quality of care in a health care setting or program. The concept includes the assessment or evaluation of the quality of care; identification of problems or shortcomings in the delivery of care; designing activities to overcome these deficiencies; and follow-up monitoring to ensure effectiveness of corrective steps.

Quality Improvement Committee: Each County in California that has a Mental Health Plan (MHP) is required to establish a committee to monitor the quality of specialty mental health services provided to beneficiaries of the MHP.

QM: Quality Management

Quality Management: an organized plan and approaches for the continuous measurement, evaluation and improvement of processes or functions of care for individuals, groups and/or the organization.

Realignment: In 1991, California enacted the Bronzan-McCorquodale Act, referred to as "Realignment", in response to the State's \$14.3 budget deficit. In the areas of mental health, social services, and health, realignment transferred program responsibilities from the State to the counties' control, altered program cost-sharing ratios, and provided counties with dedicated tax to pay for these changes. The realignment plan was intended to provide expanded discretion and flexibility to counties to expend State funding. Local mental health programs were given much greater autonomy and flexibility in how they designed their mental health systems of care. With funds allocated directly to local governments to provide mental health services, both inpatient and outpatient services increased measurably for patients with severe diagnoses, but declined for those with mild diagnoses. Service design shifted significantly toward case management and rehabilitative services that permit seriously mentally ill persons to maintain their recovery.

Recovery: A process in which mental health clients learn how to self-direct their lives and mental health, regain hope and optimism and reclaim positive social experiences beyond the mental health system.

Recovery Model: model based on the belief that people can and do recover from mental illness.

Referral: The process of sending an individual from one practitioner to another for health care, mental health, or other services and supports.

Rehabilitation: Services that provide a balance of supports and skills, including supported education, employment, skills training and community integration.

Reserve: An amount set aside and not spent to ensure sufficient funding in years where there is a decline in MHSA revenues.

Residential Treatment Centers (for emotionally disturbed children): An organization, not licensed as a psychiatric hospital, the primary purpose of which is the provision of individually planned programs of mental health treatment services in conjunction with residential care for its patients/clients.

Resilience: The enduring ability of someone to recover from assaults to their person, whether physical, mental or emotional and, in the midst of that, maintain a sense of spirit and hope.

Respite Services: Services that provide a break for parents who have a child with a serious emotional disturbance. Respite services may also include adults and older adults.

Restorative Policing Program: In Santa Barbara, a

collaboration of the Santa Barbara Police Department, Santa Barbara County Department of Alcohol, Drug and Mental Health Services, Probation, Social Services, Public Health, and numerous other agencies and CBOs with the goal of providing treatment, rather than incarceration, for nonviolent mentally ill individuals who have frequent encounters with law enforcement.

ROI: Return on Investment

RPM: Recurring Performance Measure

RPP: See Restorative Policing Program

RU: Reporting Unit, a program or component of ADMHS that bill Medi-Cal, such as an individual clinic.

SAMHSA: Substance Abuse and Mental Health, the US Federal agency charged with improving the quality and availability of prevention, treatment, and rehabilitative services in order to reduce illness, death, disability, and cost to society resulting from substance abuse and mental illnesses. The Substance Abuse and Mental Health Services Administration (SAMHSA) is a branch of the United States Department of Health and Human Services.

SART: Sexual Abuse Response Team

SB 163: Legislation signed by California Governor Wilson In 1998 creating a five-year pilot for flexible use of RCL 12-14 foster care funding statewide. Wraparound, an approach to implementing individualized, comprehensive services for youth with complicated multi-dimensional problems, was authorized throughout California. In August 2000, Gov. Gray Davis signed AB 2706 to expand the group of children eligible (RCL 10-14) for Wraparound services as an alternative to institutional care. In August 2001, Gov. Davis signed AB 429 that removed the sunset on SB 163 and made Wraparound a permanent program in California.

SBECMHC: Santa Barbara Early Childhood Mental Health Collaborative

Screening: The process used to identify individuals with an increased risk of having mental health disorders that warrant immediate attention, intervention, or more comprehensive review.

SD/MC: Short Doyle/Medi-Cal

SED: Serious Emotional Disturbance

Self-directed Recovery: consumers lead their treatment and recovery.

Serious Emotional Disturbance (SED): Diagnosable disorders in children and adolescents that severely disrupt their daily functioning at home, school, or community.

Service Capacity: An organization's ability to identify and provide a given service or services to its target community or population.

Severe Mental Illness (SMI): Pursuant to section 1912 (c) of the Public Health Service Act, adults with serious mental illness SMI are persons: (1) age 18 and over and (2) who currently have, or at any time during the past year had a diagnosable mental behavioral or emotional disorder of sufficient duration to meet diagnostic criteria specified within DSM-IV or their ICD-9-CM equivalent (and subsequent revisions) with the exception of DSM-IV

"V" codes, substance use disorders, and developmental disorders, which are excluded, unless they co-occur with another diagnosable serious mental illness. (3) That has resulted in functional impairment, which substantially interferes with or limits one or more major life activities. Federal Register Volume 58 No. 96 published Thursday May 20, 1993 pages 29422 through 29425.

SHIA: Supportive Housing Initiative Act. In response to the growing number of homeless people in California, SHIA (AB 2780, Chapter 310, Statutes of 1998) was passed into law. The SHIA initiative targets very low income adults having one or more disabilities, including mental illness, HIV or AIDS, substance abuse, or other chronic health conditions, and individuals with developmental disabilities, and may include families with children, elderly persons, young adults aging out of the foster care system, individuals exiting institutional settings, homeless people and veterans.

Short/Doyle Medi-Cal or SD/MC: Federal Medicaid funding in California used for the "public" mental health treatment services. This source of funding has typically been "capped", with 51% of the costs reimbursed from the Feds (referred to as Federal Financial Participation or FFP) with a mandated 49% match from state allocations to county mental health.

SMI: Severe Mental Illness.

SNF: Skilled Nursing Facility.

SOC: Share of Cost or System of Care

SSC: Special Services for Children

SSDI: Social Security Disability Insurance.

SSI/SSP: Supplemental Security Income/State Supplementary Program.

Stabilization: to make firm, to keep from fluctuating; as in symptom stabilization.

Stakeholder: (a) A person or group of people who impacts or is impacted by mental health services; (b) A person who represents others' interests relative to mental health services.

State Audit: A detailed review by the State Department of Mental Health of each county's financial records. Audit primarily focuses on allowability of expenditures and allocation of costs between programs and accounting for revenue off-sets. Audit typically conducted four to five years after the end of the fiscal year.

State Fair Hearing: Clients may request a state fair hearing for any Mental Health Plan related reason at any time before, during, or after the complaint resolution process has started.

Strategies: Coherent collections of actions that have a reasoned chance of improving our outcomes.

Stigma: A mark or token of infamy, disgrace, or reproach. Stigmatization of people with mental disorders has persisted throughout history, manifested by bias, distrust, stereotyping, fear, embarrassment, anger and/or avoidance.

Surgeon General's Report: Published in December 1999 by the US Department of Health & Human Services, the first Surgeon's General's report on mental health focused on effective treatments for mental health

disorders, the connection between mental health and physical health, barriers to receiving mental health treatment, and the specific mental health issues of children, adults and the elderly. Available online from: www.surgeongeneral.gov/library/mentalhealth/home.html.

Supplant: Literally means to take the place of and serve as a substitute for. MHSA funds are not to take the place of and serve as a substitute for (or replace) existing state or county funds utilized to provide mental health services.

Supported Employment: Supportive services that include assisting individuals in finding work; assessing individuals' skills, attitudes, behaviors, and interest relevant to work; providing vocational rehabilitation and/or other training; and providing work opportunities. Includes transitional and supported employment services.

Supported Housing: Permanent affordable housing with combined supports for independent living.

Supported Residential Services: Moderately staffed housing arrangements for clients/patients. Includes supervised apartments, satellite facilities, group homes, halfway houses, mental health shelter-care facilities, and other facilities.

Symptom: any condition accompanying or resulting from an illness or disease and serving as an aid in diagnosis.

System Development Funds: One of three categories of MHSA funding used to improve services and infrastructure for the identified initial full service populations and for other clients.

System of Care: A multi-disciplinary, multi-agency delivery system of services that supports a consumer through a continuum of care and that uses a "person first" approach to build on the strengths of the person being served and his or her support system.

TAPP: Teen Age Parenting Program

TAR: Treatment Authorization Request. A request submitted to Medi-Cal seeking authorization and payment for services that are medically necessary, but that are either more extensive or different than are usually covered by Medi-Cal. E.g. Additional visits, new medication not yet on their pharmaceutical formulary, etc.

TAY: Transition-Age Youth (16-25).

Team-Building: If a team is a group of people working towards a common goal, 'team building' is the process of enabling that group of people to reach their goal.

Telecare: company contracted by ADMHS to provides services and supports to individuals with serious mental illness who are homeless or at risk of becoming homeless; also operates the CARES second floor residential crisis center in Santa Maria.

Therapeutic Justice System: A program in which courts offer nonviolent drug offenders reduced sentences in return for entering treatment programs.

Threshold Language: A term used by the state of California to denote a language spoken by 3,000 beneficiaries or 5% of the Medi-Cal population, whichever is lower, whose primary language is not English.

TIP: (See Transition to Independence Process)

Title 9: Section of California Code of Regulations pertaining to standards for the State Department of Mental Health.

TJS: Therapeutic Justice System.

Transform: To wholly change the mental health services system in appearance, structure, nature or function.

Transition Age Youth (TAY): Transition age youth between the ages of 16 and 25, who have serious emotional disorders/severe mental illness. They may be at risk for homelessness or involuntary hospitalization, and/or aging out of children's mental health, child welfare and/or juvenile justice systems. Transition-age youth who have experienced a first episode of major mental illness are also included.

Transition to Independence Process: An evidence-based approach that stresses the importance of providing access to community-based outreach and support, engages transition-age youth in shaping their own future planning process, and uses a focus on each individual's strengths., engages transition-age youth in shaping their own future planning process, and uses a focus on each individual's strengths.

Trauma: A psychological or emotional reaction to an event or to an enduring condition in which the individual's emotional experience is overwhelming, or the individual experiences a perceived threat to life, bodily integrity or sanity.

Treatment Planning: a strategic course of action that directs appropriate services and ensures recovery.

Treatment Team: the composition of people who facilitate Recovery; the consumer, doctor, certified peer specialist, Case Manager and/or others who are specified in the Treatment Plan.

TSAC: Tobacco Settlement Advisory Committee

Uniform Method of Determining Ability to Pay (UMDAP): Sliding fee scale used by counties to calculate the amount charged to a client for services. Calculated as an annual amount based on a client's income and assets.

UB 92: Uniform Billing Code of 1992. Federal code and

billing form requiring hospitals to follow specific procedures.

Un-served Populations: Individuals who have received no services or are receiving inadequate services to meet their needs.

Under-served/inappropriately served: Individuals who have been diagnosed with serious mental illness and children who have been diagnosed with serious emotional disorders, and their families, who are receiving some service, but whose services do not provide the necessary opportunities to move forward and pursue their wellness/recovery goals.

UR: (see Utilization Review)

Utilization Review: a process to ensure a consumer is served appropriately.

Value Options: A company contracted by ASO; Value Options is the largest privately held behavioral health managed care company in the U.S.

Welcoming: The initial and ongoing activities that encourage feelings of belonging and result in a willingness to engage with the group.

W&I Code: Welfare and Institutions Code

WRAP (Wellness Recovery Action Plan): Plans authored by consumers to draw on their strengths, advance wellness, prevent escalation of symptoms, and promote successful recovery from crises. Consumers work in collaboration with trusted peers to create and use their unique WRAPs.

Wraparound: A family centered, community-oriented, strengths-based, highly individualized planning process aimed at helping people achieve important outcomes by meeting their unmet needs both within and outside of formal human services systems while they remain in their neighborhoods and homes, whenever possible.

WTP: Work Training Programs.

Please send corrections or suggestions for additional terms to Eric Baizer, ebaizer@co.santa-barbara.ca.us.

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