OVERVIEW OF PRE-RELEASE PROCESS FOR LONG TERM INCARCERATED PERSONS IN THE DEVELOPMENTAL DISABILITIES PROGRAM

Presented by:
The CDCR Statewide Mental Health Pre-Release Program

For:
The Board of Parole Hearings

PURPOSE OF TODAY'S TRAINING

- Identify the purpose of Regional Centers (RCs) and services they provide
- Provide an overview of the collaboration between BPH , the Statewide Mental Health Pre-Release program and RCs
- Discuss other pre-release services that may be relevant for incarcerated persons in the Developmental Disabilities Program (DDP) who are granted release

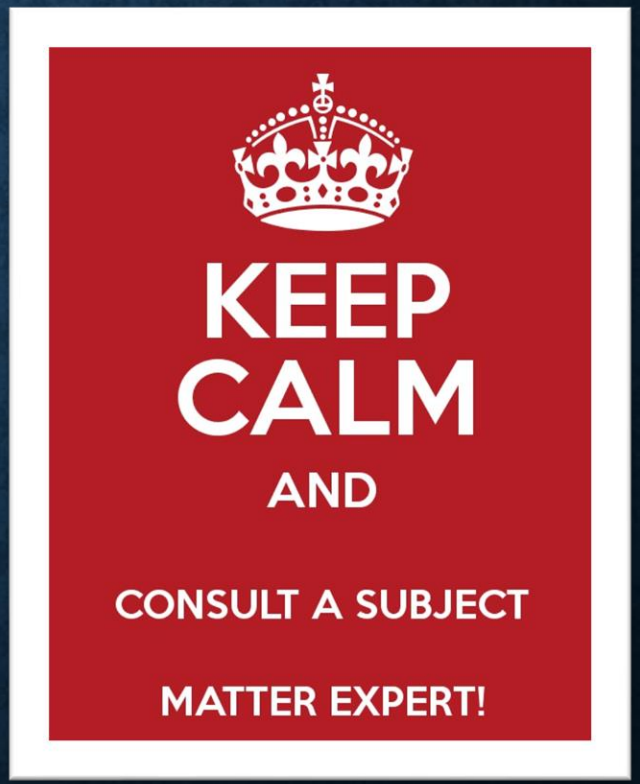
STATEWIDE MENTAL HEALTH PRE-RELEASE PROGRAM STAFF

Institutional Mental Health Pre-Release Coordinators (IMHPCs)

- Located at each institution
- Point of contact for local treatment teams
- Local subject matter expert on pre-release planning for patients in MHSDS to include those in the DDP
- Begin pre-release planning approximately 45-60 days prior to release

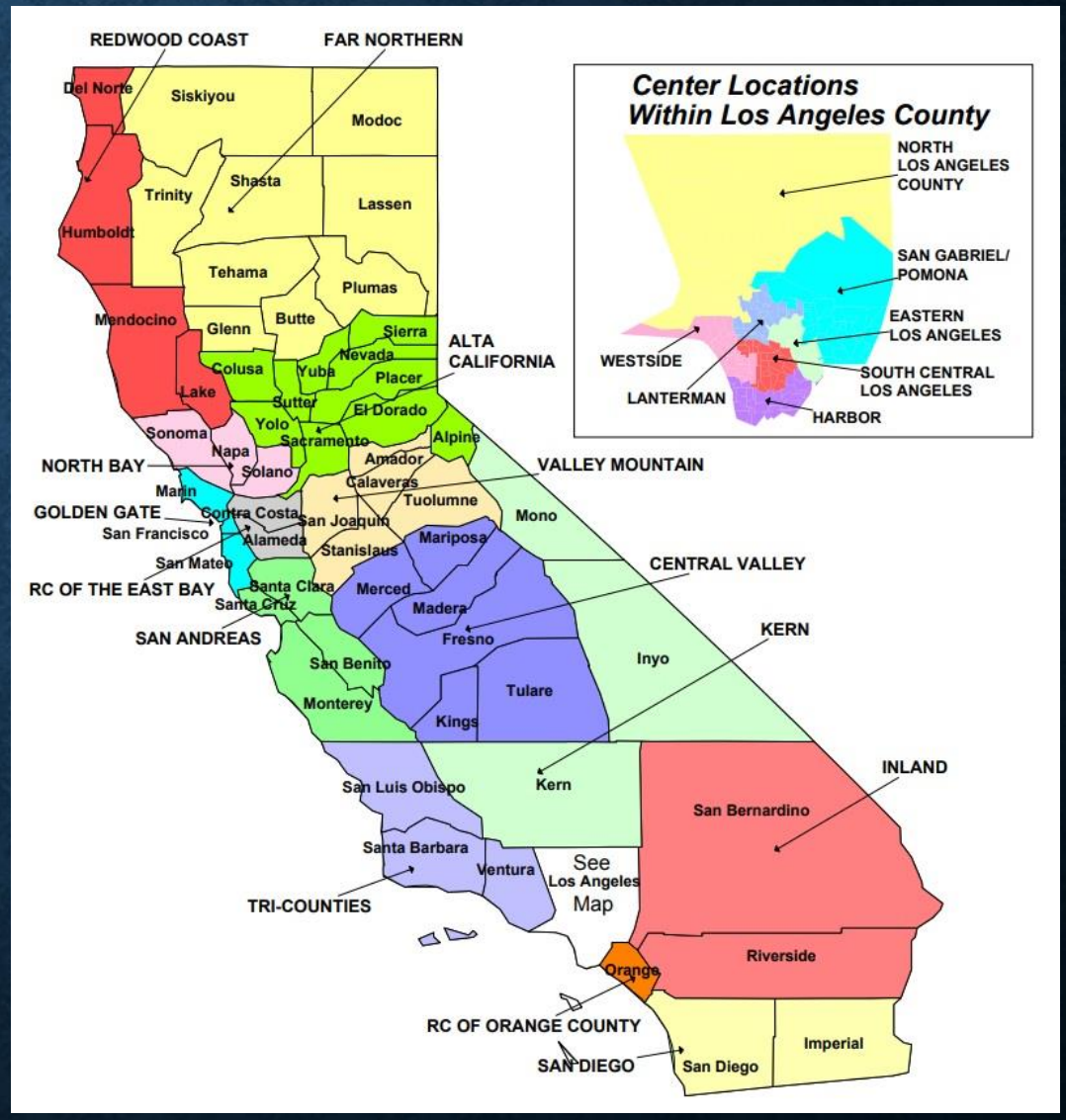
Statewide Mental Health Pre-Release Coordinators (SMHPCs)

- Headquarters subject matter expert on pre-release planning for patients in MHSDS to include those in the DDP
- Point of contact for IMHPCs
- Mental health pre-release liaison with other CDCR pre-release entities and community stakeholders



DEPARTMENT OF DEVELOPMENTAL SERVICES

Department of Developmental Services (DDS) oversees the coordination and delivery services for Californians with developmental disabilities through a statewide network of 21 community-based non-profit agencies known as regional centers



REGIONAL CENTERS

DEPARTMENT OF DEVELOPMENTAL SERVICES
Information on this slide taken from the following site:
HTTPS://WWW.DDS.CA.GOV/RC/

- Regional Centers provide diagnosis and assessment of eligibility and help plan, access, coordinate and monitor the services and supports that are needed because of a developmental disability. There is no charge for the diagnosis and eligibility assessment.

- Once eligibility is determined, a case manager or service coordinator is assigned to help develop a plan for services, tell you where services are available, and help you get the services. Most services and supports are free regardless of age or income.

- A person-centered planning approach is used to decide where a person with developmental disabilities will live and the kinds of services needed. Everyone who uses Regional Center services has a planning team that includes the individual using the services, family members, Regional Center staff and anyone else who is asked to be there by the individual. The team ensures that services support the individual's choices including where they live, how they spend the day, and their hopes and dreams for the future.

REGIONAL CENTERS

DEPARTMENT OF DEVELOPMENTAL SERVICES
Information on this slide taken from the following site:
HTTPS://WWW.DDS.CA.GOV/

Eligibility

- A person must have a disability that began before the individual's 18th birthday
- The disability is expected to continue indefinitely and present a substantial disability for the individual
- Qualifying conditions include intellectual disability, cerebral palsy, epilepsy, autism, and other disabling conditions defined in Section 4512(a)(1) of the California Welfare and Institutions Code.
- Eligibility is established through diagnosis and assessment performed by regional centers.
- If determined eligible for regional center services, those services will last forever. If a person moves to a different part of California and change regional centers, the person is still eligible.

DEPARTMENT OF DEVELOPMENTAL SERVICES
Information on this slide taken from the following site:
HTTPS://WWW.DDS.CA.GOV/

REGIONAL CENTERS

Some of the services and supports provided by the regional centers may include:

- ✓ Information and referral
- ✓ Assessment and diagnosis
- ✓ Counseling
- ✓ Lifelong individualized planning and service coordination
- ✓ Purchase of necessary services included in the individual program plan
- ✓ Resource development
- ✓ Outreach
- ✓ Assistance in finding and using community and other resources
- ✓ Advocacy for the protection of legal, civil and service rights
- ✓ Early intervention services for at risk infants and their families
- ✓ Genetic counseling
- ✓ Family support
- ✓ Planning, placement, and monitoring for 24-hour out-of-home care
- ✓ Training and educational opportunities for individuals and families
- ✓ Community education about developmental disabilities

DEPARTMENT OF DEVELOPMENTAL SERVICES
Information on this slide taken from the following site:
HTTPS://WWW.DDS.CA.GOV/

REGIONAL CENTERS

Supported Living Services

Supported Living Services (SLS) assist adults with intellectual/developmental disabilities establish and maintain a safe, stable, and independent life in homes they own or rent. SLS helps individuals make meaningful choices toward their personal goals in relationships and the community. SLS is offered for as long as needed and is flexible to a person's changing needs over time

SLS may include assistance with the following:

- ✓ Selecting a home
- ✓ Moving into a home
- ✓ Choosing personal attendants
- ✓ Choosing housemates
- ✓ Acquiring household furnishings
- ✓ Participating in daily living activities
- ✓ Preparing for emergencies
- ✓ Participating in community life
- ✓ Managing personal financial affairs

REGIONAL CENTERS

DEPARTMENT OF DEVELOPMENTAL SERVICES
Information on this slide taken from the following site:
HTTPS://WWW.DDS.CA.GOV/

Independent Living Skills

Independent Living Skills (ILS) services provide training and assistance for adults with intellectual/developmental disabilities to achieve greater independence while living with others or to acquire and maintain living independently.

ILS services mostly focus on basic self-help activities that may include any of the following:

- ✓ Money management
- ✓ Shopping
- ✓ Meal preparation
- ✓ Health/medical care
- ✓ Laundry
- ✓ Advocacy
- ✓ Psycho-social support

COLLABORATION BETWEEN SMHPC, BPH AND REGIONAL CENTERS

- SMHPC receives a list from BPH of patients who are included in the DDP and have a BPH suitability hearing date
- SMHPC consults with RC contact who has Statewide database access
- If the patient was a previous RC client:
  - SMHPC works with the IMHPC to ask the patient if they would like to receive RC services if they are released
  - SMHPC contacts the RC and requests a collaboration to coordinate services and establish a release plan
    - ✓ This may include having records sent to the RC
    - ✓ Scheduling a meeting between the patient and the RC
    - ✓ Receiving a letter of support from the RC

AFTER THE BPH SUITABILITY HEARING

- If a patient is granted released by BPH, SMHPC collaborates with the Reentry Coordination Program (RCP)
  - ✓ Informing them of the RC's support letter (if provided by RC)
  - ✓ Identifying the patient's needs
  - ✓ Request housing placement in an area that is serviced by the RC familiar with the patient
- Once housing is identified
  - ✓ SMHPC notifies the RC and will request a transfer of records if placement is in a different service area.

PATIENT EXAMPLE

- 56 year old male
- Incarcerated since 2004
- Participant in Mental Health Services Delivery System (MHSDS) at the Enhanced Outpatient Level of Care (EOP)
- Designated DD2
  - Use simple language
  - Assistance with reading and writing
  - One or two step instructions
  - Frequent reminders
  - At risk for victimization
- Works in the Fabric Shop 4 days a week
- No history of receiving rule violations
- Previous RC client

PATIENT EXAMPLE

- Patient's name was provided by BPH to SMHPC team to inquire about prior RC status.
- SMHPC team received confirmation from RC contact that patient is a prior RC client.
- SMHPC contacted Lanterman Regional Center to request collaboration to begin exploring services should the patient be released.
- Lanterman RC requested a virtual meeting with the patient to discuss with the patient their specific needs.
- Lanterman RC explained they would not have specific housing for the patient. However, they do provide a variety of supportive living resources.
- Lanterman RC provided a letter of support which was placed in the patient's chart so it could be reviewed during their BPH suitability hearing.
- Patient attended his BPH suitability hearing and was granted release.
- RCP was notified by BPH that the patient was found suitable for parole and RCP is currently seeking housing placement. RCP notified SMHPC of BPH grant due to patient's EOP and DD2 designation.
- SMHPC informed RCP that the patient can live independently and is a previous client of Lanterman RC. A request was made for placement in the Lanterman catchment area.
- In the event placement cannot be made in the Lanterman, the RC in respective housing program area, will be notified.
- As of today, this patient is still pending the Governor's office review.

COLLABORATION = SUCCESS

Collaborative Partners:

- Case Records
- Classification & Parole Representative's Office (C&PR)
- Community Transition Program (CTP)
- Division of Rehabilitative Programs (DRP)
- Transitional Case Management Program (TCMP)
- Integrated Substance Use Disorder Treatment Program (ISUDT)
- Utilization Management (UM)
- Re-Entry Coordination Program Unit (RCP)
- Division of Adult Parole Operations (DAPO)
- County Probation Department
- Behavioral Health Reintegration (BHR)
- County Behavioral Health Department (CBHD)
- Department of Developmental Services and Regional Centers

MENTAL HEALTH SERVICES UPON RELEASE

Behavioral Health Reintegration (BHR) – for patients releasing to parole

- ✓BHR clinicians are CDCR clinicians who work in CDCR parole offices
- ✓BHR clinicians include social workers, psychologists and psychiatrists
- ✓Have access to EHRS (CDCR medical record)
- ✓Clinical appointments to include medication appointments
- ✓Case management and referrals/linkages to community resources

Note: BHR was formerly titled Parole Outpatient Clinic (POC)

CALAIM

California Advancing and Innovating Medi-Cal (CalAIM) is a long-term commitment to transform and strengthen Medi-Cal, offering Californians a more equitable, coordinated, and person-centered approach to maximizing their health and life trajectory. CalAIM will offer Medi-Cal enrollees coordinated and equitable access to services that address their physical, behavioral, developmental, dental, and long-term care needs, throughout their lives, from birth to a dignified end of life.

Information related to CalAIM in this presentation was retrieved from the following sites:

https://www.dhcs.ca.gov/calaim

https://www.cdcr.ca.gov/ccjbh/wp-content/uploads/sites/172/2023/04/CCJBH-CalAIM-for-Justice-Partners-Cheat-Sheet_3-23-2023-ADA.pdf

CALAIM INITIATIVES
PRE-RELEASE BENEFITS

❖ **Provision of limited services 90 days prior to release from prison**

On January 26, 2023, the Centers for Medicare and Medicaid Services (CMS) approved CA's Section 1115 Demonstration Waiver, authorizing DHCS to provide limited Medi-Cal services for eligible individuals for 90 days prior to their release. Adults who are incarcerated must be enrolled in Medi-Cal and meet one or more of the following criteria: Mental illness, SUD, Chronic Disease/Significant Clinical Condition, Intellectual or Developmental Disability, TBI, HIV/AIDS, Pregnant/Postpartum

❖ **Behavioral Health Linkages**

The CalAIM justice-involved (JI) initiative supports JI individuals by enrolling them in Medi-Cal coverage prior to release, providing key services pre-release, and connecting them with behavioral health, social services, and other providers that can support their re-entry to the community. One key component of this initiative is implementing linkages to behavioral health providers to achieve behavioral health care initiation or continuity through warm hand-offs. Through CalAIM JI, DHCS will require state prisons, county jails, youth correctional facilities, county behavioral health departments, and Medi-Cal managed care plans to implement processes for facilitated referrals and linkages to continued behavioral health treatment in the community for individuals who receive behavioral health services while incarcerated.

CALAIM INITIATIVES
POST RELEASE BENEFITS

❖ **Enhanced Care Management (ECM)**

- New benefit within the Medi-Cal Managed Care delivery system
- Addresses the clinical and non-clinical needs of high need, high-cost Medi-Cal managed care members through systematic coordination of services and comprehensive care management.
- ECM care managers are community-based providers with experience and expertise providing intensive, in-person care management services for members in one or more of the ECM Populations of Focus.
- Each member receiving ECM will be assigned a Lead Care Manager, who can coordinate and help integrate care and services, bridging across delivery systems. ECM is the highest level of care coordination that MCPs offer.
- Enhanced Care Management is person-centered care management provided to the highest-need Medi-Cal enrollees, primarily through in-person engagement where enrollees live, seek care, and choose to access services.

CALAIM INITIATIVES
POST RELEASE BENEFITS CONT…

❖ **Community Supports**

DHCS received CMS approval for 14 Community Supports (listed below), which were launched statewide on January 1, 2022. According to federal Medicaid program rules, Community Supports are lower-cost alternative services that can substitute for, or reduce the use of, higher-cost health care services and/or settings such as inpatient hospital services and emergency department services. MCPs are encouraged, but not required, to offer Community Supports. Availability of Community Supports may vary by county.

- Housing Transition Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Short-Term Post-Hospitalization Housing
- Recuperative Care (Medical Respite)
- Respite Services
- Day Habilitation Programs
- Nursing Facility Transition/Diversion to Assisted Living Facilities
- Community Transition Services/Nursing Facility Transition to a Home
- Personal Care and Homemaker Services
- Environmental Accessibility Adaptations (Home Modifications)
- Medically Tailored Meals/Medically Supportive Foods
- Sobering Centers
- Asthma Remediation

Thank you!