FMHAC LAURA'S LAW: **□** TWO COUNTIES **□** TWO PERSPECTIVES ONE GOAL ONE GOAL ■ PERSONAL PERSPECTIVE □ LAURA'S LAW CONCERNS ■ SAN DIEGO COUNTY ☐ LPS TOOLBOX IN SAN DIEGO COUNTY ☐ FSP □ PERT ☐ IHOT □ COMPARISION OF IHOT & LAURA'S LAW ■ SAN DIEGO COUNTY INITIATIVES □ SUMMARY **TODAY'S PRESENTATION** ONE GOAL **TODAY'S PRESENTATION**

How can we outreach, engage and treat	
individuals with SMI who are resistant or refusing treatment before they are a danger to	
themselves or others?	
ONE GOAL	-
✓ ONE GOAL □ PERSONAL PERSPECTIVE	
FERSONAL PERSPECTIVE	
TODAY'S PRESENTATION	
□ Earliest intervention possible	
Lamest intervention possible	
☐ Quality medical treatment and meds	
□ Comprehensive community services	
Comprehensive community services	
☐ Strongest possible family support or, in the absence	
of family, the strongest possible community support	
☐ Robust public awareness campaign of community	
programs	
PERSONAL PERSPECTIVE	
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✓ ONE GOAL	
✓ PERSONAL PERSPECTIVE	
□ LAURA'S LAW CONCERNS	
TODAY'S PRESENTATION	
TODAL STRESHITATION	
 One size fits all legislation does not match realities of different counties 	
of different counties	
☐ Does not address issues at an early stage	
_ 2000 not dudition to dust all outly orage	
☐ Glacial in dealing with a deteriorating person or	
exigent situation	
LALIDA'S LAW CONCERNS	
LAURA'S LAW CONCERNS	
LAURA'S LAW CONCERNS	
LAURA'S LAW CONCERNS	
LAURA'S LAW CONCERNS	
□ People that meet criteria are already in the revolving door, savvy to the system and well down	
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□ People that meet criteria are already in the revolving door, savvy to the system and well down the path	_
☐ People that meet criteria are already in the revolving door, savvy to the system and well down the path ☐ Reliant on unsubstantiated "black robe" effect	_
□ People that meet criteria are already in the revolving door, savvy to the system and well down the path □ Reliant on unsubstantiated "black robe" effect □ No enforcement mechanism to backup a judge's "or	
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□ People that meet criteria are already in the revolving door, savvy to the system and well down the path □ Reliant on unsubstantiated "black robe" effect □ No enforcement mechanism to backup a judge's "or else" admonition □ Noncompliance may only be addressed with further deterioration under W&I Section 5150	
□ People that meet criteria are already in the revolving door, savvy to the system and well down the path □ Reliant on unsubstantiated "black robe" effect □ No enforcement mechanism to backup a judge's "or	

✓ ONE GOAL ✓ PERSONAL PERSPECTIVE	
✓ LAURA'S LAW CONCERNS □ SAN DIEGO COUNTY	
TODAY'S PRESENTATION	
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 4,261 square miles – size of Delaware, Rhode Island and District of Columbia combined and second largest in California 	
□ 3.6 million residents by 2020	
□ Population with some form of mental illness estimated to be 1 in 5 children and 1 in 4 adults	
□ 21 cities served by 9 law enforcement agencies and the County Sheriff	
County jail population of over 5,600 inmates – a third have diagnosis	
SAN DIEGO COUNTY	
☐ Third largest homeless population in the U. S over 10,000 individuals, 25% are chronic homeless	
☐ Homeless include 1,700 veterans, many with PTSD	
☐ Third of AB109 post release offenders struggling with SMI, 1,000 individuals	
□ 15 County funded walk-in clinics	
CAN DIECO COUNTY control	
SAN DIEGO COUNTY cont'd	

□ Variety of community service programs –FSP, PERT, IHOT and many more	
 On-going public information, stigma busting County program called Its Up 2 Us 	
☐ Drug Court, Veterans Court, Mental Health and Superior Court Department 25 all handle mental health matters	
□ \$384M/year Behavioral Health Services budget	
SAN DIEGO COUNTY cont'd	
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✓ ONE GOAL	
✓ PERSONAL PERSPECTIVE ✓ LAURA'S LAW CONCERNS	
✓ SAN DIEGO COUNTY	
LPS TOOLBOX IN SAN DIEGO COUNTY	
TODAY'S PRESENTATION	
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□ W&I Section 5150 −16,000 PERT call-outs alone:	
resulted in 2,600 holds in 2013	
□ W&I Section 5200 – Involuntary evaluations: five to	
ten years ago averaged 2 per day, only 4 total in 2013	
■ W&I Section 5250 –14 day hold after 5150 or 5200 hold: 2,200 hearings, 90% met criteria in 2013	
■ W&I Section 5260 – Additional 14 day hold for threat to own life or another's: no data	
LDC TOOLDOV IN CAN DIFOC COURTY	
LPS TOOLBOX IN SAN DIEGO COUNTY	

■ W&I Section 5270 – 30 day hold: not adopted, County task force may recommend BOS adopt this year		
task force may recommend BOO adopt this year		
□ W&I Section 5300 – 180 day hold: no data		
□ W&I Section 5332 – 475 Reise hearings: 418		
involuntarily medicated in 2013		
■ W&I Section 5345 – Laura's Law: not adopted		
□ W&I Section 5350 – Conservatorships: 900 public and		
175 family in 2013		
LPS TOOLBOX IN SAN DIEGO COUNTY cont'd		
✓ ONE GOAL		
✓ PERSONAL PERSPECTIVE		
✓ LAURA'S LAW CONCERNS	_	
✓ SAN DIEGO COUNTY		
✓ LPS TOOLBOX IN SAN DIEGO COUNTY		
□ FSP		
TODAY/C DDCCCNTATION		
TODAY'S PRESENTATION		
FSP		
FSP E2B		

☐ Assertive community treatment model	
☐ Outreach, engagement, treatment, intensive case	
management and supportive services	
☐ Intensive multi-disciplinary treatment team that uses a	
"whatever it takes" approach	
☐ Provides 24/7 intensive, integrated services and support	
FULL CEDWICE DADTHIEDCUIDC	
FULL SERVICE PARTNERSHIPS	
✓ ONE GOAL	
✓ PERSONAL PERSPECTIVE ✓ LAURA'S LAW CONCERNS	
✓ SAN DIEGO COUNTY	
✓ LPS TOOLBOX IN SAN DIEGO COUNTY ✓ FSP	
□ PERT	
TODAY'S PRESENTATION	
TODAL STRESENTATION	
DEDT	
PERT	
PERT	
PSYCHIATRIC EMERGENCY RESPONSE	

☐ Emergency assessment and referral for individuals with mental illness who come to the attention of law	
enforcement through phone calls from community members or in-field law enforcement requests for emergency assistance	
☐ Assistance to all County law enforcement agencies plus CHP, Border Patrol, Harbor Police and campus	
and military police	
□ 16,000 PERT call-outs resulted in 2,600 W&I Section 5150 holds in 2013	
PERT	
	-
□ PERT Academy training 3 days, 8 hours each day	
☐ 23 licensed mental health officers teamed with PERT trained law enforcement officers/deputies throughout the	-
County	
☐ Operate three shifts – two staffed with licensed mental health officers	
□ Need 16 more licensed mental health officers	
a Need to more idensed mental health officers	
DEDT could	
PERT cont'd	.
✓ ONE GOAL	
✓ PERSONAL PERSPECTIVE ✓ LAURA'S LAW CONCERNS	
✓ SAN DIEGO COUNTY	
✓ LPS TOOLBOX IN SAN DIEGO COUNTY ✓ FSP	-
✓ PERT □ IHOT	
TODAY'S PRESENTATION	-

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IHOT	
IHOT	
IN-HOME OUTREACH TEAM	
☐ February 2011 – After extensive community involvement, Mental Health Board recommended to BOS that Laura's Law be implemented	
☐ February 2011 – County HHSA opposed implementation of Laura's Law because of:	
 Financial and clinical concerns Cost to county and courts is great No conclusive evidence that approach is beneficial 	
Instead, proposed IHOT as an alternative to Laura's Law	
IHOT HISTORY IN SAN DIEGO	
☐ September 2011 – BOS approved 3-year IHOT pilot project for one-half of County and Mental Health Board concurred	
☐ January 2012 – IHOT pilot program began	
☐ July 2013 – BOD voted to support IHOT county-wide expansion for 7 year program and Mental Health Board concurred	
☐ July 2014 – County-wide 7 year IHOT program to begin	
IHOT HISTORY IN SAN DIEGO cont'd	

☐ Goal to connect individuals to mental health services, community support services and other	
services, community support services and other	
controve, community support controve and other	
needed services	
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D. D. Camala and de la Camila and de la	
☐ Referrals made by family members, jails, PERT clinicians, hospitals and other mental health	
clinicians, nospitals and other mental nealth	
providers	
☐ IHOT has a strong family support component	
☐ No prescribed time limits on services	
Two prescribed time limits on services	
□ No cost to participant	
IHOT PROGRAM MISSION	
☐ Program staffing consists of:	_
 Licensed Program Administrator 	
Licensed Clinical Director	
Licensed Field Team Lead	
D Each IHOT Toom is composed of:	
□ Each IHOT Team is composed of:	
 Personal Service Coordinator (case manager) 	
 Family Coach 	
Peer support Specialist.	
- 1 dei support opedialist.	
IHOT ENGAGEMENT TEAM	
INOT ENGAGEINIENT TEAIN	
□ Adults 18 years and older	
□ Adults 18 years and older	
□ Presence of serious mental illness and declines to	
☐ Presence of serious mental illness and declines to seek mental health services	
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□ Presence of serious mental illness and declines to seek mental health services	
□ Presence of serious mental illness and declines to seek mental health services	
☐ May have had sporadic contact with outpatient mental health or fee for service program but has not engaged in ongoing treatment or has discontinued recommended treatment	
□ Presence of serious mental illness and declines to seek mental health services □ May have had sporadic contact with outpatient	
 □ Presence of serious mental illness and declines to seek mental health services □ May have had sporadic contact with outpatient mental health or fee for service program but has not engaged in ongoing treatment or has discontinued recommended treatment 	

☐ Had 1 or more previous episodes in past year of:	
 Psychiatric hospitalization 	
■ ER visit	
 Police/PERT involvement 	
 Incarceration 	
☐ Presence of serious mental health symptoms	
contributing to functional impairment in daily living, social relations and housing	
☐ Individual may also have history of co-occurring	
disorders	
IHOT ELIGIBILITY CRITERIA cont'd	
	7
☐ Family member	
□ PERT/Law enforcement	
☐ Central, Vista jails and Women's Detention Center	
☐ LPS hospitals	
☐ All hospital ER departments	
☐ Mental health programs	
□ APS	
☐ MHA, NAMI and other advocacy agencies	
☐ Optum Access and Crisis Line	
- optam recess and ensis zane	
IHOT REFERRAL SOURCES	
☐ Outreach and engagement	
□ Support and empathic listening	
□ Short term intensive case management	
Needs assessment	
Needs assessment Service planning and coordination	
Service planning and coordination	
Individual and family goal planning	
Individual and family goal planning Pafarrals and linkage to community resources, benefits and	
 Referrals and linkage to community resources, benefits and 	· · · · · · · · · · · · · · · · · · ·
 Referrals and linkage to community resources, benefits and entitlements 	
 Referrals and linkage to community resources, benefits and entitlements Psychoeducation 	
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□ Support, guidance, empathic listening	
□ Psychoeducation on mental illness and mental health resources	
□ Referrals to other supportive community resources	
□ Family support planning	
☐ Educational and supportive crisis intervention and proactive safety planning	
□ Coaching on improving boundary setting and communication	
□ Family support groups	
a railing support groups	
IHOT FAMILY SERVICES	
□ Referral – Entry point into the program when referral is	
■ Referral – Entry point into the program when referral is received, further information gathered and criteria assessment made	
assessment made	
■ Not Accepted – Participant does not meet criteria and	
referred out to other mental health agencies, programs, resources, etc.	
□ Accepted – Participant meets criteria, goes to Outreach	
□ Outreach – Services to family begin and attempts made	
to engage participant	
□ Engagement – Participant agrees to receive services	
IHOT PROGRAM DEFINITIONS	
IIIOT F ROOKAW DEI INTTIONS	
✓ Referral – Entry point into the program when	
referral is received, further information gathered and	
criteria assessment made	
 761 Referrals received 	
	-
IHOT PARTICIPATION DATA (1/1/12 – 12/31/13)	

✓ Referral – Entry point into the program when referral is received, further information gathered and eligibility assessment made	
761 Referrals received	
■ Not Accepted – Participant does not meet criteria and referred out to other mental health agencies,	
programs, resources, etc. 476 Referrals not accepted, referred out	
IHOT PARTICIPATION DATA (1/1/12 – 12/31/13)	
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✓ Not Accepted – Participant does not meet criteria and referred out to other mental health agencies,	
programs, resources, etc. 476 Referrals not accepted, referred out	
□ Accepted – Participant meets criteria	
 285 Referrals accepted and transitioned to Outreach 	
IHOT PARTICIPATION DATA (1/1/12 – 12/31/13)	
	1
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received, further information gathered and eligibility assessment made	
■ 761 Referrals received ✓ Not Accepted – Participant does not meet criteria and	
referred out to other mental health agencies, programs, resources, etc.	
■ 476 Referrals not accepted, referred out ✓ Accepted — Participant meets criteria	
 285 Referrals accepted and transitioned to Outreach Outreach – Services to family begin and attempts made to 	
engage participant 113 Transitioned to Engagement	
 45 Still active in Outreach 18 Closed, linked to community support services 	
109 Closed, ineligible, moved, declined, unavailable	
IHOT PARTICIPATION DATA (1/1/12 – 12/31/13)	

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further information gathered and eligibility assessment made 761 Referrals received	
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 285 Referrals accepted and transitioned to Outreach 	
 ✓ Outreach – Services to family begin and attempts made to engage participant 	
 113 Transitioned to Engagement 45 Still active in Outreach 	
18 Closed, linked to community support services 109 Closed, ineligible, moved, declined, unavailable	-
■ Engagement – Participant agrees to receive services	
 39 Still active or completed 35 Closed, linked to community support services 	
39 Closed, ineligible, moved, declined, unavailable	
IHOT PARTICIPATION DATA (1/1/12 – 12/31/13)	
The County common referrals were for in	
☐ The 6 most common referrals were for, in descending order:	
Housing assistance	
Mental health support groups (e.g., NAMI)	
Mental health outpatient services	
■ Employment assistance	
Entitlement assistance	
Medical care	
IHOT REFERRALS FOR ADDITIONAL	
SERVICES	
<u> </u>	
■ Successful outcomes during Outreach and	
Engagement for participants and their families:	
Access and maintain treatment and medication	
Reconnect with family or social supports	-
Obtain safe, stable housing	
 Obtain employment assistance, medical care and benefits 	
■ Enhance boundary and limit setting	
 Improve family communication skills 	
Connect to family support services (i.e. NAMI)	
■ Enhance knowledge and ability to access	
emergency services (i.e. PERT)	
HIOT ADDITIONAL CHACECOES	
IHOT ADDITIONAL SUCCESSES	-
	<i></i>

✓ ONE GOAL			
✓ PERSONAL PERSPECTIVE			
✓ LAURA'S LAW CONCERNS			
✓ SAN DIEGO COUNTY			
✓ LPS TOOLBOX IN SAN	DIEGO COUNTY		
✓ FSP ✓ PERT			
✓ IHOT		<u> </u>	
□ COMPARISION OF IHO	T & LAURA'S LAW		
TODAY'S PRESENTATION			
TODAL OT RECEIVATION			
IHOT	LAURA'S LAW	-	
■ 18 years or older	☐ 18 years or older		
■ Has serious mental illness	☐ Suffering from mental illness	<u></u>	
and declines to seek mental			
health services Had 1 or more episodes in	☐ History of non-compliance:	<u> </u>	
past year of any following	 Significant factor in being in hospital, 		
event: • Psychiatric hospitalization	prison or jail at least twice w/in last 36 months, or		
ER visit	 Resulted in one or more acts, attempts, threats of serious violent 		
	behavior toward self or others w/in		
Police/PERT involvement Incarceration	last 48 months		
Police/PERT involvementIncarceration		-	
Police/PERT involvement Incarceration COMPARISION OF IHOT & La			
Police/PERT involvementIncarceration			
Police/PERT involvement Incarceration COMPARISION OF IHOT & La			
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Police/PERT involvement Incarceration COMPARISION OF IHOT & La CRITERIA IHOT Had sporadic contact with outpatient mental health or fee	LAURA'S LAW Cifered opportunity to voluntarily participate in local mental health treatment plan but falls to		
Police/PERT involvement Incarceration COMPARISION OF IHOT & Li CRITERIA IHOT Had sporadic contact with outpatient mental health or fee for service program, but has not engaged in ongoing treatment or tengaged in ongoing	LAURA'S LAW Clifered opportunity to voluntarily participate in local mental health		
Police/PERT involvement Incarceration COMPARISION OF IHOT & Li CRITERIA IHOT Had sporadic contact with outpatient mental health or fee for service program, but has not	LAURA'S LAW Offered opportunity to voluntarily participate in local mental health treatment plan but falls to engage Substantially deteriorating Unlikely to survive safely wout		
Police/PERT involvement Incarceration COMPARISION OF IHOT & Li CRITERIA IHOT Had sporadic contact with outpatient mental health or fee for service program, but has not engaged in ongoing treatment or has discontinued recommended treatment services Presence of serious mental	LAURA'S LAW Offered opportunity to voluntarily participate in local mental health treatment plan but fails to engage Substantially deteriorating Unlikely to survive safely w/out supervision In view of treatment history and		
Police/PERT involvement Incarceration COMPARISION OF IHOT & Li CRITERIA IHOT Had sporadic contact with outpatient mental health or fee for service program, but has not engaged in ongoing treatment or has discontinued recommended treatment services Presence of serious mental health symptoms contributing to serious functional impairment in	LAURA'S LAW Offered opportunity to voluntarily participate in local mental health treatment plan but falls to engage Substantially deteriorating Unlikely to survive safely w/out supervision In view of treatment history and current behavior, in need of AOT to prevent relapse or deterioration that would likely		
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Police/PERT involvement Incarceration COMPARISION OF IHOT & Li CRITERIA IHOT Had sporadic contact with outpatient mental health or fee for service program, but has not engaged in ongoing treatment or has discontinued recommended treatment services Presence of serious mental health symptoms contributing to serious functional impairment in daily living, social relations and/or housing activities Individual may also have history	LAURA'S LAW Offered opportunity to voluntarily participate in local mental health treatment plan but fails to engage Substantially deteriorating Unlikely to survive safely w/out supervision In view of treatment history and current behavior, in need of AOT to prevent relapse or deterioration that would likely result in serious harm to self or others or be gravely disabled Likely to benefit from AOT AOT is least restrictive		
Police/PERT involvement Incarceration COMPARISION OF IHOT & Li CRITERIA IHOT Had sporadic contact with outpatient mental health or fee for service program, but has not engaged in ongoing treatment or has discontinued recommended treatment services Presence of serious mental health symptoms contributing to serious functional impairment in daily living, social relations and/or housing activities	LAURA'S LAW Offered opportunity to voluntarily participate in local mental health treatment plan but fails to engage Substantially deteriorating Unlikely to survive safely w/out superv/sion In view of treatment history and current behavior, in need of AOT to prevent relapse or deterioration that would likely result in serious harm to self or others or be gravely disabled Likely to benefit from AOT		
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Outreach Participants Meet Laura's Law criteria -- 59 of 285 participants ■ Meet IHOT criteria -- 226 of 285 participants ■ Engaged Participants Meet Laura's Law criteria -- 24 of 113 participants • Meet IHOT criteria -- 89 of 113 participants ☐ Still Active or Completed IHOT Program **Participants** Meet Laura's Law criteria -- 7 of 39 participants Meet IHOT criteria -- 32 of 39 participants **COMPARISION OF IHOT & LAURA'S LAW PARTICIPANTS IN IHOT PROGRAM** ☐ IHOT -- \$10,600 per person, including expanded FSP and Conservatorship services ■ Laura's Law -- \$34,000 per person, not including judicial costs or IHOT program ☐ Current IHOT program = \$1.4 million ☐ IHOT program expansion = \$2.3M ☐ Total expanded IHOT program = \$3.7M ■ Estimated cost avoidance Incarcerations: \$31 to \$78/day Hospitalizations: \$600 to \$1,100/day SWAT response: \$10,000+/incident **COMPARISION OF IHOT & LAURA'S LAW** COSTS ✓ ONE GOAL ✓ PERSONAL PERSPECTIVE ✓ LAURA'S LAW CONCERNS ✓ SAN DIEGO COUNTY ✓ LPS TOOLBOX IN SAN DIEGO COUNTY ✓ FSP ✓ PERT ✓ IHOT ✓ COMPARISION OF IHOT & LAURA'S LAW ☐ SAN DIEGO COUNTY INITIATIVES

TODAY'S PRESENTATION

□ Adopt W&I Section 4270 regarding 30 day hold	
■ Seek legislative changes to Laura's Law to provide enforcement mechanism	
☐ Conduct a national convention in 2015 in San Diego regarding Assisted Outpatient Treatment best practices	
SAN DIEGO COUNTY INITIATIVES	
✓ ONE GOAL	
✓ PERSONAL PERSPECTIVE	
✓ LAURA'S LAW CONCERNS	
✓ SAN DIEGO COUNTY	
✓ LPS TOOLBOX IN SAN DIEGO COUNTY ✓ FSP	
✓ PERT	
✓ IHOT ✓ SAN DIEGO INITIATIVES	
□ SUMMARY	
SUMMARI	-
TODAY'S PRESENTATION	
□ NEED:	
Earliest intervention possible	
 Quality medical treatment and meds 	
Quality medical treatment and meds Comprehensive community services Strongest possible family support or, in the absence of	
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 Quality medical treatment and meds Comprehensive community services Strongest possible family support or, in the absence of family, the strongest possible community support Robust public awareness campaign of community programs CONTINUE support of IHOT OPEN up the LPS toolbox and use all tools, including 	

"How far you go in life depends on your being tender with the young, compassionate with the aged, sympathetic with the striving and tolerant of the weak and the strong. Because someday in life you will have been all of these."

- GEORGE WASHINGTON CARVER -

