

Definition of Adult Target Population and Scope of Services

February 5, 2010

San Diego County Adult / Older Adult Outpatient Mental Health provides recovery oriented services to promote both clinical improvement and self-sufficiency, with the goal of ultimately freeing clients of the need for our services. By definition, clients eligible for our specialty Mental Health System services are those that cannot be appropriately treated within a primary care environment, or by a primary care physician. Every effort will be made to serve clients within the Recovery oriented Mental Health System until they are either stabilized (able to function safely without Mental Health resources), or until they no longer require complex biopsychosocial services in order to maintain stability.

Individuals we serve include:

1. Individuals with a serious psychiatric illness that threatens personal or community safety, or that places the individual at significant risk of grave disability due to functional impairment.
2. People with a serious, persistent psychiatric illness who, in order to sustain illness stabilization, require complex psychosocial services, case management and / or who require unusually complex medication regimens. Required psychosocial services may include illness management; or skill development to sustain housing, social, vocational and educational goals.

Individuals we may serve, to the extent resources allow, but who otherwise may be referred to other medical providers, include:

1. Individuals with serious psychiatric illness that may be adequately addressed in a primary care practice, either by a primary care practitioner or an affiliated mental health professional within a primary care practice setting, when the acute symptoms do not place the individual at risk of danger to self or others, and do not threaten the individual's ability to sustain independent functioning and housing within the community.
2. Individuals with lesser psychiatric illness, such as adjustment reactions, anxiety and depressive syndromes that do not cause significant, functional impairment that could be addressed within the context of a primary care setting or other community resources.

Such individuals may also have their needs addressed, either alone or in combination with medication prescribed within their primary care practice, through community supports such as supportive therapy, peer and other support groups, or self-help and educational groups. When co-occurring substance abuse is a factor, Co-occurring Disorders programs might also constitute an alternative resource.

The specialty Mental Health System will provide expedited evaluation and/or access for clients who are being maintained in the community with other resources, at such time as their condition destabilizes and they meet one of the criteria for inclusion, above. We will also provide support for the primary care community for those clients referred to primary care for maintenance in the primary care system. In order to accomplish these goals, the specialty Mental Health System will make every effort to provide:

1. Crisis screening services for individuals with acute symptoms, to provide triage to appropriate services within the specialty Mental Health System when needed.
2. Psychiatric consultation, as needed, to primary care providers for clients referred to primary care for chronic disease management after treatment in the Mental Health System.