

## Requesting Assisted Outpatient Treatment

In San Diego County, all referrals for the Assisted Outpatient Treatment (AOT) program are made through enrollment in IHOT.

AOT examinations will be conducted by a licensed clinician from the IHOT program. Only individuals enrolled in IHOT services and who meet the nine criteria as established under Laura's Law are eligible for referral to AOT.

1. At least 18 years of age.
2. Have a serious mental illness.
3. Determined unlikely to be safe in the community without supervision
4. History of non-compliance with treatment that has either: Been a factor in their hospitalization and/or incarceration at least twice in the last 36 months, OR resulted in one or more acts, attempts or threats of serious and violent behavior toward self or another within the last 48 months.
5. Has opportunity to voluntarily participate in mental health treatment but continues to fail to engage.
6. Condition is substantially deteriorating.
7. AOT is the least restrictive placement necessary to ensure recovery and stability.
8. Needs AOT to prevent a relapse or deterioration that would likely result in grave disability or serious harm to self or others.
9. Be likely to benefit from AOT.

Telecare is under contract with San Diego County Behavioral Health Services and is funded by the County of San Diego, Medi-Cal, and MHSA.

# In Home Outreach Team

## Family & Provider Information

1660 Hotel Circle North, Suite 314  
San Diego, CA 92108

619-961-2120 Main  
619-961-2138 Fax  
855-384-4468 Toll Free

Monday - Friday: 8:00 a.m. to 4:30 p.m.  
On-call staff available 24/7  
619-961-2120 After hours crisis line



# About IHOT

Telecare's In Home Outreach Team (IHOT) is a centralized program offering mobile teams to provide in home outreach services to adults with serious mental illness who are resistant or reluctant to receive mental health services. The Telecare IHOT program serves the entire county of San Diego. The IHOT program also provides support and education to family members. Program services include behavioral health screening, outreach and engagement, crisis management, transitional case management, support and educational services. Eligible individuals may have a co-occurring substance abuse diagnosis in addition to a diagnosis of a serious mental illness.

The IHOT staff include peer specialists, family coaches, case managers, and a licensed field team lead. The peer specialists and family coaches offer their own personal, lived experiences in their work with participants and family members.

All services are based in a strong recovery foundation focusing on person-centered services, strengths-based interventions, and non-coercive communication.

## What to Expect

Components used to support participants and their families towards mutually agreeable plans of action are:

**Behavioral Health Screening:** may include an inventory of participants' needs, strengths, life goals, mental health treatment and substance abuse histories, diagnoses, medical concerns, housing needs, etc.

**Outreach and Engagement:** IHOT team members meet with participants in homes, hospitals, jails, etc., essentially just about anywhere in the community in an effort to develop collaborative relationships steeped in trust and rapport.

**Transitional Case Management:** is typically short term in nature, approximately 90 days, or more, as needed. During this period, the team provides referrals to outpatient mental health services and other supports as necessary to extend community tenure and increase participant and family member satisfaction. Other linkages may include primary

healthcare, faith-based institutions, ethnic organizations, peer-run programs, eligibility assistance, housing services, social/recreational activities, employment services, educational resources, advocacy, legal services, co-occurring disorder services, and 12-step programs as dictated by the needs and stated wishes of the participant.

**Crisis Management:** IHOT team members will work with participants and families to identify, recognize and talk about soft-signs of symptoms before crisis occurs. Team members will model de-escalation techniques, and teach family members how to get help when needed, and what to expect afterwards. Staff will also be available to help respond to crises when they occur, including:

- 24 hours a day, 7 days a week availability
- Help in stabilizing the situation and understanding what options are available for continued stabilization and recovery
- Interventions include partnering with family members and/or others involved such as PERT and/or law enforcement representatives

**Support and Education:** consists of information and education about mental health services and community resources. To help decrease social isolation frequently experienced by families impacted by mental illness, we can link participants and family members to recovery and wellness-based groups which provide opportunities for learning, sharing of experiences and mutual support. The ultimate goal of the program will be to link participants with their stated goals and desires, to connect them to ongoing outpatient mental health and other supportive services as needed, and ideally to lead fulfilling, meaningful lives.

The teams will serve a combined 120-150 consumers per quarter (40-50 per team), or 480-600 per year (160-200 per team).

## Becoming a Member

Referrals to the IHOT program can be made by family members, PERT clinicians, hospital social workers, jail/corrections personnel, NAMI, APS and other community support providers.