



**Behavioral Health Director  
Ryan Quist, PhD.**

# ASSISTED OUTPATIENT TREATMENT (AOT)

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[https://dhs.saccounty.gov/BHS/Pages/  
Laura's-Law-AOT-Community-  
Input.aspx](https://dhs.saccounty.gov/BHS/Pages/Laura's-Law-AOT-Community-Input.aspx)

# WHAT IS ASSISTED OUTPATIENT TREATMENT (AOT)?

California's state law that provides community-based, assisted outpatient treatment (AOT) to a small population of individuals who meet criteria and who – as a result of their mental illness – are unable to voluntarily access community mental health services.

# PROGRAM OBJECTIVES

Purpose:  
how you use your  
experiences, talents, and  
passions to better the lives  
of those around you

*l. peterson*

- Promote recovery and optimize community functioning through provision of supports at the appropriate level of care
- Elevate and improve client driven recovery-oriented culturally responsive, trauma informed approaches to address mental illness and any co-occurring substance use disorders.
- Advance and increase timely linkages to services through collaboration and coordination with various community partners—including Medi-Cal, Cal Fresh, SSI
- Further **CLIENT SELF-DETERMINATION** in the least restrictive setting with transitions to lower level of service intensity as appropriate
- Reduce emergency room visits, psychiatric hospitalizations, admissions to long term facilities, arrests, incarcerations, and homelessness.

# TWO COMPONENTS

Referral

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graph TD; A[Referral] --> B[1. Intensive engagement and screening provided by Sacramento County Referral and Engagement Team]; B --> C[2. AOT Intensive Outpatient Treatment provided by Telecare OASIS Full Service Partnership];
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1. Intensive engagement and screening provided by Sacramento County Referral and Engagement Team

2. AOT Intensive Outpatient Treatment provided by Telecare OASIS Full Service Partnership

# WHO CAN REFER INTO AOT? WIC 5346(B)(2)

**(2) A request may be made only by any of the following persons to the county mental health department for the filing of a petition to obtain an order authorizing assisted outpatient treatment:**

A person 18 years or older with whom the person who is the subject of the petition (referral) resides.

A person who is the parent, spouse, or sibling or child age 18 years of age or older of the person who is subject of the petition (referral)

The Director of a public or private agency, treatment facility, charitable organization, or licensed residential care facility providing mental health services to the person who is subject of the petition (referral) in whose institution the subject resides.

The director of a hospital in which the person who is subject to the petition (referral) is hospitalized.

A peace officer, parole officer, or probation officer assigned to supervise the person who is subject of the petition (referral)

A judge of superior court before whom the person who is subject of the petition.

# HOW DO YOU REFER TO AOT WIC 5346(B)

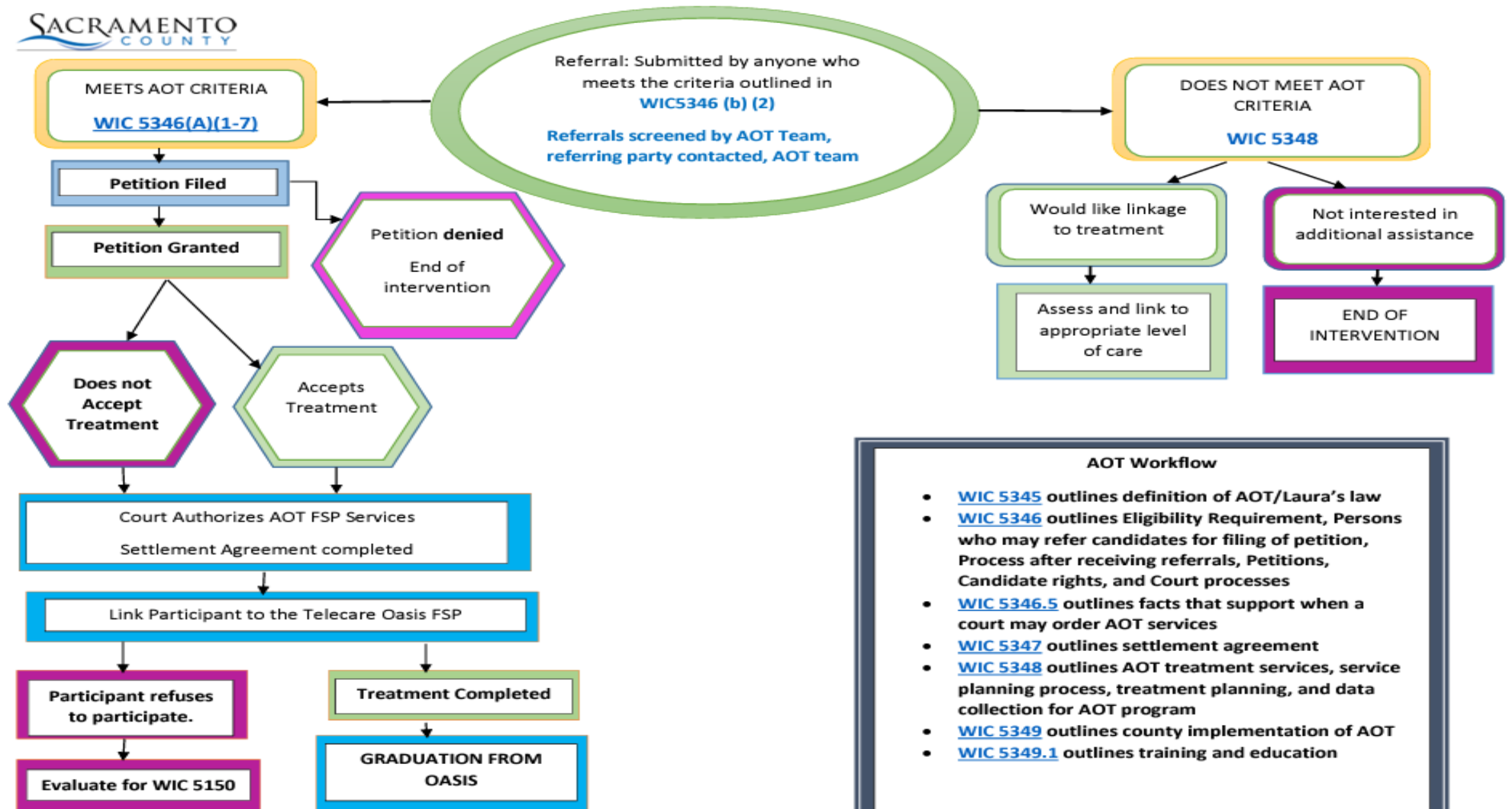
Assisted Outpatient County Website

<https://dhs.saccounty.gov/BHS/Pages/Laura's-Law-AOT-Community-Input.aspx>

Referral forms can be emailed to:

[DHS-MH-AOT@SacCounty.gov](mailto:DHS-MH-AOT@SacCounty.gov)

You can call and consult with a licensed clinician at  
916-875-6508



- AOT Workflow**
- [WIC 5345](#) outlines definition of AOT/Laura’s law
  - [WIC 5346](#) outlines Eligibility Requirement, Persons who may refer candidates for filing of petition, Process after receiving referrals, Petitions, Candidate rights, and Court processes
  - [WIC 5346.5](#) outlines facts that support when a court may order AOT services
  - [WIC 5347](#) outlines settlement agreement
  - [WIC 5348](#) outlines AOT treatment services, service planning process, treatment planning, and data collection for AOT program
  - [WIC 5349](#) outlines county implementation of AOT
  - [WIC 5349.1](#) outlines training and education

# ELIGIBILITY CRITERIA

Welfare and Institutions Code (WIC 5346(A)(1-7)) outlines the criteria for Assisted Outpatient Treatment eligibility.

18 Years of age or older

Referred person was offered participation in a treatment plan (WIC 5348)

Contending with severe mental illness

Referred person is in need of AOT in order to prevent relapse or deterioration that would likely result in grave disability or serious harm to self or others as defined in WIC 5150.

Clinically determined as unlikely to survive safely in the community without intervention/supervision

Participation in AOT would be the least restrictive placement necessary to ensure referred person's recovery and stability.

Referred person's condition is substantially deteriorating

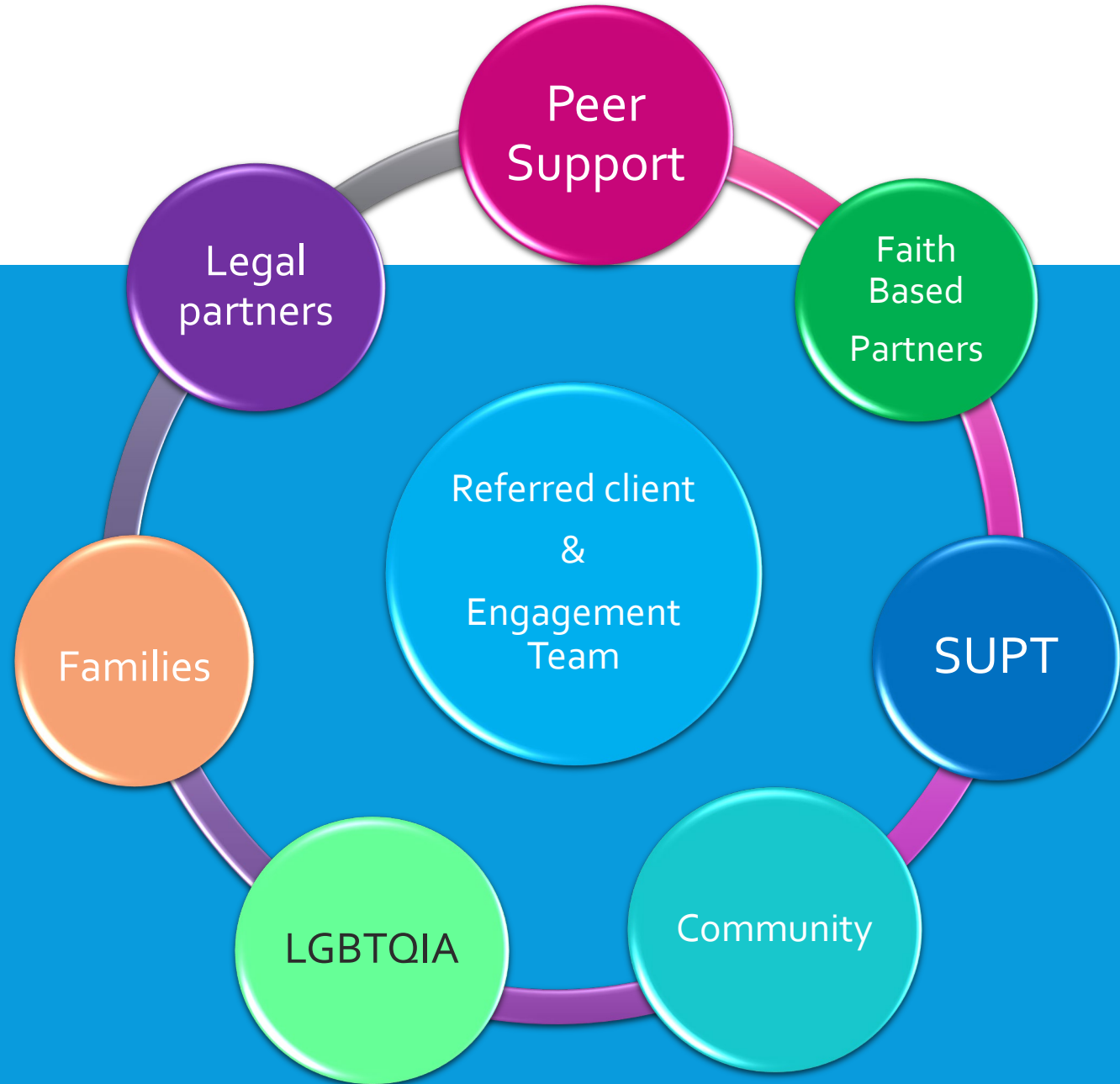
History of a lack of compliance with mental health treatment

- At least 2 hospitalizations in the last 36 months
- One or more acts of serious and violent behavior toward self or others or threats/attempts to cause serious harm to self or another within 48 months.



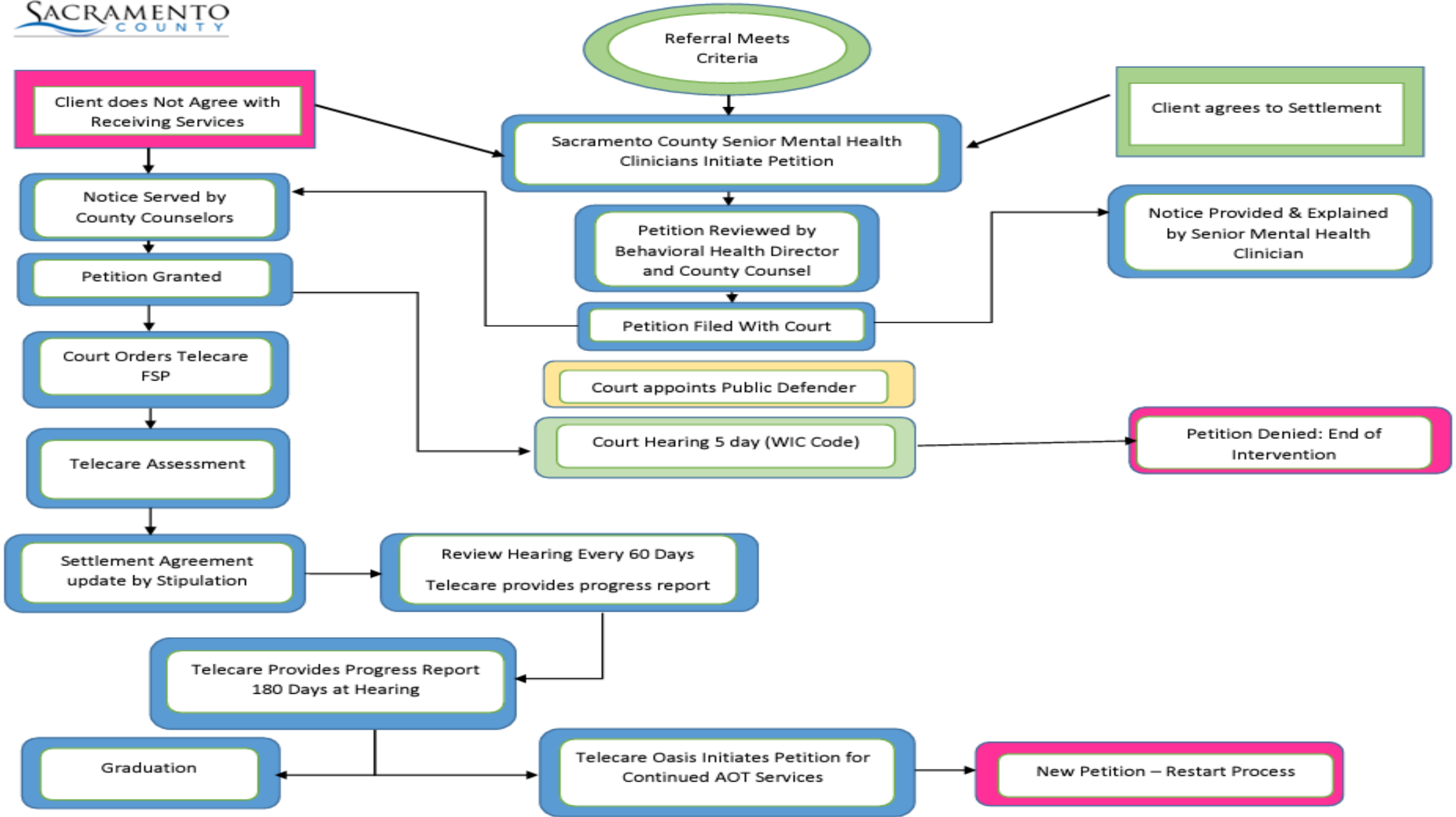
# ENGAGEMENT PROCESS

ONCE A REFERRAL IS RECEIVED, THE REFERRING PARTY IS CONTACTED FOR ADDITIONAL INFORMATION.



# COURT PROCESS

- Civil Court Process
- Petition
- Client may be “ordered” or settle pursuant to Welfare and Institution Code 5643 or 5347
- Judge may dismiss the case if criteria are not met
- Process empowers referred person to make choices that will improve overall health and wellness



# TWO TEAMS—WHAT ARE THEIR ROLES?

## Sacramento County Referral and Engagement Team

Receive referral/check eligibility criteria

Initial assessment with individual referred

Intense engagement and outreach

Create/conduct training and outreach to the community with OASIS Program

Create Court Petitions

Attend initial Court hearing

Quarterly oversight of all program aspects

# Roles And Responsibilities Behavioral Health AOT Team

- Provide clerical support to the AOT team
- Receive phone calls with referrals and questions from the public about the AOT program and supports
- Use a compassionate and professional tone when interacting with referrals and partners
- Manage resource list for team
- Manage email referral documents
- Create referral packet for PC that includes; referral form, EHR records (if any) on client, level of urgency

Administrative Staff (SOA)

Program Coordinator (PC)

CLIENT

Senior/Peer Specialist (SP/Peer)

Clinician (MHC, SMHC)

- Receive referral packet from SOA
- Determine AOT eligibility according to criteria
  - Assign referrals to SMHC and Peer Specialist teams
    - Manage workload
- Provide Supervision to support teams
  - Monitor documentation and data reporting
- Collaborate with key stakeholders to continue to ensure program is meeting the needs of consumers
  - Hire staff as needed/directed
  - Work with Program planner on innovation

- Provide outreach and engagement services to clients
- Work as a team with clinicians
- Support clients in recovery goals using lived experience to relate to their needs, challenges, and strengths
- highlight significance of the client's voice and choice
- Support clients from engagement to linkage

- Conduct clinical assessments
  - Work as a team with Peer Specialist
    - Develop diagnostic formulations
      - identify risks and needs
      - Provide crisis interventions
- Refer and link to appropriate level of care
- Maintain requirements for licensing credentials



The County team will contact the OASIS team and complete a warm hand off to services.

## Our Story

Telecare is a family- and employee-owned company that has been treating individuals with serious mental illness since 1965. We specialize in outcomes-driven services for individuals with complex needs who are at risk of crisis, hospitalization, or recidivism into the criminal justice system. Our programs are recovery-focused and clinically effective and are designed in partnership with local, county, state, and other behavioral health organizations. We provide services in multiple states and have more than 4,000 employees.



# TELECARE OASIS

*assisted outpatient services and integration support*

**Services** are comprehensive, intentional and are provided in the home, community, or office depending on client need using a harm reduction “whatever it takes” approach in order to assist clients in maintaining stability in the community.

**Our culture** is based on recovery. We believe in respect and non-judgment, and we celebrate individual uniqueness. We care about the interpersonal relationships we develop so we can foster a supportive program setting.

**Our staff** are passionate, resourceful, and motivated. We are our members’ partners in recovery.

**Our goal** is to be a place that helps our members thrive, despite any challenges they might face along the way. Our members are in the driver seat of their own recovery journey. We are here to help guide and support them along the way.

# Roles And Responsibilities Behavioral Health AOT Team

- Provide Administrator support to the AOT team
- Budgetary Oversight
- Maintain contractual obligations including staffing ratios
- Ancillary Support for Clinical Director.

Administrator  
Telecare  
AOT/FSP

Clinical  
Director  
Telecare AOT

- Oversees all clinical services and clinical quality provided to members
- Oversees Quality improvement initiatives
  - Maintains member care standards
- Provide Leadership, Coordination, and Supervision to AOT
  - Monitor documentation and data reporting
  - Collaborate with key stakeholders to ensure program is meeting the needs of consumers
    - Hire staff as needed/directed
- Work with Program planner on innovation

CLIENT

Team Lead  
Telecare AOT

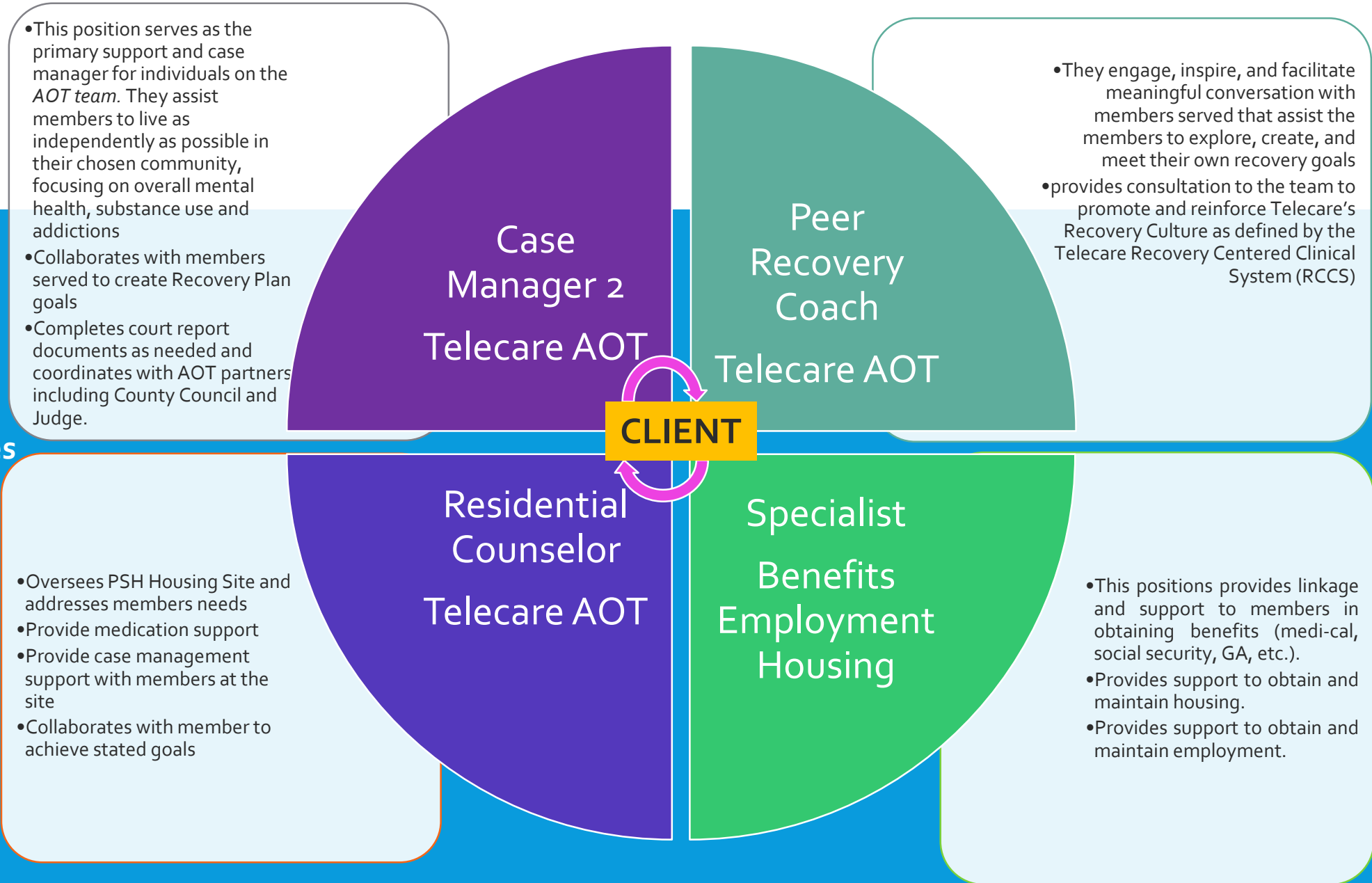
Clinician  
Telecare AOT

- Supervises AOT MDT, Coordinates Services Needs, Collaborates with Stakeholders
- Supports clinicians and clinical service
- Receives referral packet from County AOT and assigns
- Determine AOT eligibility according to criteria
- Back up for Clinical Assessments and Therapy

- Responsible to conduct intakes, clinical assessments, treatment planning, and crisis support
  - Work as a team with Peer Specialist
    - Identify Risks and Needs
    - Identify risks and needs
    - Provide crisis interventions
- Support clients from engagement to linkage.



# Roles And Responsibilities Behavioral Health AOT Team



# FULL SERVICE PARTNERSHIP

- To provide ongoing services and treatment to persons who are ordered to Assisted Outpatient Treatment
- Services can include but are not limited to

Case Management	Assessment	Housing
Crisis Intervention	Vocational/Employment	Support Daily Living Skills
Individual Psychotherapy	Educational Support	Medication Education/Support
Group Therapy	Collateral Support	Psychiatric Services (NP/MD)

# TREATMENT PLAN

## WIC 5346(E)



- Telecare Oasis FSP is responsible for ensuring the treatment plan outlines the services available and required to be provided.
- Includes CLIENT voice; is culturally appropriate; clearly outlines supports and person engaging in those supports
- A support person or family member is included in the process ONLY with expressed written permission by the AOT referred client

# Full Service Partnership TREATMENT PLAN DEVELOPMENT

What does it look like?

Foundational principles:

- Whatever it takes approach!
- Treatment plan created in partnership



Thank you

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