



County of Orange Health Care Agency

## MENTAL HEALTH SERVICES ACT (MHSA) PROFILE January 2013



WELLNESS • RECOVERY • RESILIENCE

### COMMUNITY SERVICES AND SUPPORTS (CSS)

**COMMUNITY SERVICE AND SUPPORTS** funding provides new and expanded services that have the goal of improving access to the underserved populations, bringing recovery approaches to the current systems and providing “whatever it takes” services to those most in need. Programs such as the Full Service Partnerships offered under CSS, are integrated recovery-oriented mental health treatment and offer case-management and linkage to essential services such as housing, vocational support, and self-help. CSS programs have created an expanded continuum of care in Orange County allowing clients to be served at the level most appropriate to meet their needs. Services are offered for each age group and are culturally responsive to the language and cultural needs of clients.

#### FSP PROGRAM FOR CHILDREN

**Children’s Full Service/Wraparound Program:** Serves Seriously Emotionally Disturbed and Severely Mentally Ill (SED/SMI) children ages birth to 18. The FSP program assists enrolled families by linking them to a wide range of culturally and linguistically appropriate community resources, including mental health, medical care, education, employment support, housing, youth and parent mentoring, transportation, benefit acquisition, respite care, and co-occurring disorder services.

#### FSP PROGRAM FOR TRANSITIONAL AGE YOUTH (TAY)

**TAY Full Service/Wraparound Program:** Serves Seriously Emotionally Disturbed and Severely Mentally Ill (SED/SMI) TAY between the ages of 16-25 who qualify for participation in FSPs. A “whatever it takes” approach is used in assisting the TAY with gradually moving toward self-sufficiency. Linkage to extensive services, including mental health, medical care, education, employment, and housing allow TAY to avoid the “chronically disabled and unemployable” role so common in their older, similarly-diagnosed counterparts.

#### FSP PROGRAMS FOR ADULTS

**Adult Full Service Partnership Program:** Provides full array of services from outreach and engagement to potential clients, and, for those enrolled in the program, psychiatric services (including medication); case management; housing, education; employment support; and community integration activities. Adult FSPs primarily serve members from 18 to 59 years of age. The target population is the chronic mentally ill who are homeless or at risk of homelessness and may also be diagnosed with co-occurring substance abuse or dependence disorder.

#### FSP PROGRAM FOR OLDER ADULTS

**Older Adult Support and Intervention (OASIS):** Serves members 59 years of age and older with chronic and persistent mental illness, including those with co-occurring substance abuse disorder who are homeless or at risk of homelessness, including those living in temporary residences, such as hotels. At OASIS members are provided with outreach and engagement services. Members are provided intensive case management/wraparound services, community based outpatient

services, peer mentoring, housing, assistance, meal services, links to transportation services, benefit acquisition, supported employment/ education, and links to medical services, as well as 24 hour access to provider staff.

### **CHILDREN'S PROGRAMS (NON-FSP):**

**Children and Family Outreach & Engagement Program:** Identifies, contacts, and engages seriously emotionally disturbed (SED) children and their family members with mental illness that have historically been unserved and underserved in the traditional mental health system. Most of these individuals and families are homeless or at risk of being homeless. In addition to traditional outreach, the focus has also been on community health clinics and school partners to encourage the engagement of individuals in ethnically and linguistically diverse communities who are unfamiliar with service delivery in traditional mental health settings.

**Children's In-Home Crisis Stabilization:** To serve those youth at risk of psychiatric hospitalization, there are currently six clinicians and three family support staff who provide services on a 24-hour per day, seven day per week basis for families in crisis. The CAT links the prospective youth and their family to the Family Support Team, who may meet the family at the emergency room or in the community and provide ongoing support to the family until stable community support services are in place.

**Children's Crisis Residential Program:** Provides an alternative to psychiatric inpatient hospitalization and is a step down before returning home for adolescents who no longer meet hospitalization criteria, but whose homes are not ready for them to return. This six-bed residential program provides assessment, treatment, case management, and crisis intervention. The targeted age group is 11-17.

**Mentoring Program for Children:** This is a community-based, culturally and linguistically-competent, and individual and family-centered program. The Mentoring Program recruits, trains and supervises diverse, responsible adults (age 21 and up) to serve as positive role models and mentors to SED children and youth who are receiving services through any Children and Youth Services (CYS) county-operated or contract program, including the Full Service/Wraparound population.

**Children's Centralized Assessment Team (CAT):** Crisis intervention services are offered 24 hours per day/7 days per week. There is a focus on reducing unnecessary inpatient hospitalizations and reducing reliance on hospital emergency rooms for children up to their 18<sup>th</sup> birthday. Staff provides crisis intervention for hospital diversions, evaluations for involuntary hospitalizations, and assists police, fire, and social service agencies in responding to psychiatric emergencies.

**Dual Diagnosis Residential Treatment:** Offers a strength-based treatment continuum that will implement evidence-based, emerging, and promising service models and interventions that incorporate the principles of recovery-oriented treatment for youth and their families. The target population for this program is culturally/linguistically diverse Seriously Emotionally Disturbed (SED) children and youth ages 12 to 18, who are dually diagnosed with serious mental illness and substance abuse (Co-Occurring Disorders) and are not participating in a Full Service Partnership.

## **TRANSITIONAL AGE YOUTH PROGRAMS (NON-FSP):**

**TAY Outreach & Engagement Program:** Identifies and engages Seriously Emotionally Disturbed/Seriously Mentally Ill (SED/SMI) Transitional Age Youth (TAY) who have historically been unserved and underserved in the traditional mental health system. In addition to traditional outreach, the focus has also been on co-occurring disorders, community health clinics, and community partners to encourage the engagement of individuals in ethnically and linguistically diverse communities who are unfamiliar with service delivery in traditional mental health settings.

**TAY Crisis Residential Program:** Fosters resiliency in Seriously Mentally Ill (SMI) Transitional Age Youth (TAY) in crisis by providing them and their families (if applicable) with a short-term, temporary residential resource. This program provides respite for families and also facilitates the teaching of coping strategies that reduce at-risk behaviors, peer and family problems, homelessness, and involvement with the justice system. The target population is youth between the ages of 18 and 25 who have been considered for inpatient psychiatric hospitalization but do not meet hospital admission criteria.

**Mentoring Program for Transitional Age Youth:** Provides mentoring services for serious emotional disturbance (SED) in children and youth and serious mental illness (SMI) in transitional age youth who are receiving mental health treatment services through the County of Orange Health Care Agency, Children & Youth Services (CYS) operated or contracted programs. Mentor services are initiated by the child's CYS or CYS contract agency clinician.

**TAY Centralized Assessment Team (CAT):** Provides mobile response, including mental health evaluations/assessment, for adults aged 18-25 years of age who are experiencing a mental health crisis. The focus of the program is to reduce inpatient hospitalization, avoid unnecessary incarceration, and reduce reliance on hospital emergency rooms.

**TAY Program of Assertive Community Treatment (PACT):** The program serves individuals 18-25 years of age, who have unique psychosocial needs which have not been addressed in traditional Children's or Adult Outpatient programs. The program provides medication services, individual, group, substance abuse, and family therapy as it is clinically indicated.

## **ADULT PROGRAMS (NON-FSP):**

**Centralized Assessment Team and Psychiatric Evaluation and Response Team (CAT/PERT):** This program includes two types of services. The first is a Centralized Assessment Team (CAT) that provides mobile response, including mental health evaluations/assessment for Adults aged 18 years or older who are experiencing a mental health crisis. The focus of the program is to avoid unnecessary inpatient hospitalization or incarceration, and reduce reliance on hospital emergency rooms. The program also provides resource referral and follow-up services to ensure linkage to ongoing services. The second service, a Psychiatric Evaluation and Response Team (PERT), is a partnership with law enforcement, which includes designated police officers and mental health staff that respond to calls from officers in the field. Mental health consultations are provided for individuals in an apparent mental health crisis.

**Adult Crisis Residential Services:** The program emulates a home-like environment in which intensive and structured psychosocial recovery services are offered on a voluntary basis 24-hours a day, 7 days a week. Services include crisis intervention therapy, group rehabilitation treatment, assistance with self-administration of medications, case management, and discharge planning.

**Supportive Employment Services for SMI:** This program is designed for clients who are at the stage of their recovery where they are ready and able to return to the workforce. It provides education and support to diverse adults with mental illness who require long-term job supports to obtain and maintain competitive employment.

**Adult Outreach & Engagement Services:** This program serves adults (age 18 or older) with serious mental illness and co-occurring disorders in historically unserved and underserved populations. Clients are homeless or at high-risk for homelessness and either have not already linked to services or have stopped being engaged in services. The outreach team may link a potential client to numerous services, such as benefits, counseling, medical care, dental care, and food banks, while continuing to develop trust.

**Program of Assertive Community Treatment (PACT):** Serves clients who are high-risk, high-acuity, and difficult to engage in treatment. The program provides medication services, individual, group, substance abuse, and family therapy as it is clinically indicated. The target population is chronically mentally ill consumers 18 years and older, who have a history of multiple psychiatric hospitalizations and/or incarcerations.

**Wellness Center:** Supports clients who have achieved recovery by offering a program that is culturally and linguistically appropriate, while focusing on personalized socialization, relationship building, assistance maintaining benefits, setting employment goals, and providing educational opportunities. It is grounded in the recovery model and provides services to a diverse client base.

**Adult Recovery Center Program:** Provides a lower level of care for consumers who no longer need traditional outpatient treatment, yet need to continue receiving medication and episodic case management support. This program allows diverse consumers to receive distinct, mostly self-directed services that focus on consumer-community reintegration and linkage to health care. The ultimate goal of this program is to reduce reliance on the mental health system and increase and maintain self-reliance by building a healthy network support system.

**Adult Peer Mentoring:** Focuses on the hiring process to develop a multi-cultural and multi-linguistic team. Training protocols are being developed to create a team capable of providing culturally respectful field based services to the diverse unserved and underserved adult population in Orange County.

#### **OLDER ADULT PROGRAMS (NON-FSP):**

**Expanded Older Adult Recovery Services:** include medication management, nursing assessment and collaboration with primary care providers, substance abuse services, individual and family mental health services, intensive case management services, benefits acquisition, and linkage to community support services.

**Older Adult Program of Assertive Community Treatment (PACT):** services include medication management; nursing assessment; and collaboration with primary care providers, substance abuse services, individual and family mental health services, intensive case management services, benefits acquisition, linkage to community support services; and collaboration with family or significant others.

**Older Adult Peer Mentoring:** program targets some of the most common reasons for

decompensation and hospitalization, including interruption of medications, substance abuse-related problems, isolation, depression, and having no place to live. The program pairs qualified, culturally/linguistically competent peer consumers with individuals in certain clinical circumstances, including hospitalizations, and assists them in successfully transitioning to community living.

## **PREVENTION AND EARLY INTERVENTION (PEI)**

**PREVENTION AND EARLY INTERVENTION** funding has been used to establish a wide range of programs designed to reduce the financial burden and suffering caused by untreated mental illness. Approximately 70% of the PEI funding is spent on programs that target Children and Transitional Age Youth.

**Children's Support and Parenting Program (CSPP):** Serves a wide range of families whose stressors make children more vulnerable to developing behavioral health problems. Program services focus on families that have a parental history of substance abuse and/or mental illness; children living in families impacted by divorce, domestic violence, trauma, unemployment, and homelessness; children of families with active duty military family members or family members who are Veterans returning; and children living with a family member who has developmental or physical disabilities. This program focuses on reducing the risk factors for children and youth and increasing protective factors through parent training and family strengthening activities.

**Connect the Tots:** Serves families with young children, age 0-6, to promote wellness and reduce risk factors for emotional problems in children as they prepare for school. Supportive services are provided to the entire family with the goal of promoting healthy coping skills and strengthening the family's ability to meet the emotional needs of their children.

**Crisis/Suicide Prevention Hotline:** A 24-hour, toll-free suicide prevention service available to any Orange County resident, who is or knows of someone experiencing a crisis or suicidal thoughts and would like to receive immediate, confidential, culturally and linguistically appropriate, and accredited over-the-phone assistance either for themselves or someone they know. Callers who are not experiencing a crisis will be triaged and offered access to a Warm Line or other appropriate resources.

**Family Support Services:** Provides support groups, educational workshops, and family matching services to families or individuals dealing with family members of any age with behavioral health issues. Participants are matched to peer mentors and volunteer family mentors to assist them in navigating the behavioral health system in support of their family member. Parenting classes are also provided for parents/caregivers of children ages 13 and above.

**Orange County Center for Resiliency, Education and Wellness (OC CREW):** Provides multidisciplinary services to young people ages 14 to 25, who are experiencing their first episode of psychosis. The intent of this program is to reduce the duration of untreated psychosis (DUP) for young people with Schizophrenia or Schizophreniform Disorders to improve long-term prognosis.

**Orange County Post-Partum Wellness (OCPW):** Provides early intervention services and short-term mental health treatment for new mothers in Orange County, up to one (1) year postnatal, experiencing mild to moderate postpartum depression.

**Outreach and Engagement Collaborative:** Provides mental health preventative services to the unserved and underserved mentally ill population. It is designed for those people who have had life

experiences that may make them vulnerable to mental health problems, but who are hard to reach in traditional ways because of cultural or linguistic barriers.

**Parent Education and Support Services:** Provides parent education classes using the Community Parent Education Training (COPE) model aimed at improving parenting skills for parents/caregivers of children ages 0-12 years old. It is designed to address the needs of children and parents dealing with academic failure, mental health impairments, and behavioral instability. Services are provided at schools, resource centers, and community locations.

**Positive Behavioral Intervention Supports (PBIS-OCDE):** A national evidence-based program that offers a school-wide systems approach for preventing problem behaviors including, but not limited to: truancy, pervasive violence, acting out in class, negative behaviors due to limited cognitive development, and emotional stress for youth who are overwhelmed and may be experiencing anxiety or evidence of Post-Traumatic Stress Disorder (PTSD). The target population is children K – 12<sup>th</sup> grade.

**Positive Behavioral Intervention Supports (PBIS-UCI):** The University of California, Irvine – Child Development Center offers a program for children K-6 on Positive Behavioral Interventions services that include academic support, social skills development, parent training and academic transitional support services.

**ReConnect–Socialization Program:** Serves adults and older adults who may be isolated but are experiencing the onset of serious psychiatric illness, particularly of those appearing later in life, including depression. The program brings trained, friendly culturally/linguistically competent visitors to the homes of isolated adults and older adults with the task of decreasing the sense of isolation those individuals may feel and increasing opportunities for them to socialize with others.

**Risk Reduction, Education and Community Health (REACH) – Outreach and Engagement Team:** Provides mental health and wellness activities to adults in Orange County who are homeless/at risk for homelessness/in transitional housing, and who are at risk of mental illness and/or behavioral health problems. The primary goal is to introduce and/or enhance healthy coping skills and support access to all community services.

**Stigma Reduction:** A community-based program in which performance arts are used as a medium to reach out to community members at r community sites for the purposes of increasing community (a) awareness about the prevalence of mental illness; (b) knowledge of adaptive help-seeking behavior; (c) awareness of mental health resources in the community; and (d) tolerance and compassion toward persons with a mental illness.

**Stop the Cycle:** Serves a broad range of families from different backgrounds whose family members' actual or potential involvement in the juvenile justice system makes them more vulnerable to behavioral health programs. This collaborative program with probation focuses on reducing the risk factors for children and youth and increasing protective factors through parent training and family strengthening activities.

**Stress Free Families:** This program works collaboratively with Social Services Agency by providing resources and early mental health interventions to address risk factors for social and emotional problems in “stressed families” who have been investigated for child abuse/neglect. Families are referred directly from the Social Services Agency.

**Survivor Support:** This program provides support for those who have lost a loved one to suicide and educates the community on suicide prevention and intervention. These services include outreach, crisis support, bereavement groups, individual support, and training.

**Training in Physical Fitness and Nutrition:** This program provides individualized fitness programs to address the physical needs of participants. Education classes/workshops on nutrition and wellness topics are offered to enhance fitness goals.

**Transitions:** A classroom-based educational series consisting of interactive educational classes, based on curriculum that has been shown to be successful in strengthening students' healthy coping skills while reducing risk behaviors. "Transitions" is designed to help teenagers successfully meet the challenges taking place as they transition into high school and to help prevent school failure, behavioral problems, violence, and high risk behaviors among at-risk students entering high school.

#### **Veterans Services:**

- Court Services Programs provide screening, assessment, and case management to court-assigned veterans who are in need of professional behavioral health support. Veterans are connected to the Veteran Administration resources for claims, or health care, and to the Veterans Centers. Referrals and linkages are made to community resources that provide services and treatment to military veterans and their families.
- Drop Zone: is a collaborative set of services that has been paired with Santiago Community College and the Prevention & Intervention Division of Orange County Health Care Agency (OCHCA)-Behavioral Health Services (BHS). Some of the direct interventions available include screening, assessment, case management, and veterans' groups. Participants may be case managed and are referred and linked to appropriate community resources.

**Violence Prevention Education (VPE):** This program reduces children's exposure to violence in the school, community, home and/or peer group. VPE is integrated into the curriculum to mitigate a student's risk of development of mental illness and school failure.

**Warm-line Network Services:** Consists of non-crisis, peer support services for individuals and family members. The network operates evenings and weekends, providing confidential, culturally competent emotional support, mostly via telephone, to teens, seniors, parents, and other populations with special needs.

**Youth as Parents:** A program designed to enhance the health, social, economic, and educational well-being of pregnant and parenting adolescents and their children. Built on a comprehensive case management model, the program works to assess client strengths and to link clients to services in an effort to promote positive pregnancy outcomes, effective parenting, and socio-economic independence.

## **WORKFORCE, EDUCATION AND TRAINING (WET)**

The WET programs continue to provide a variety of trainings to the community, including, but not limited to: Cyber-bullying, Complex PTSD, Sexting, Transformed Supervision, Crisis Intervention for Law Enforcement, Maintaining Healthy Boundaries—A Clinical Guideline, Adolescent Brain Development, Child Abuse, Elder Adult Abuse, Understanding Co-Occurring Disorders and ASAM Placements, Back to work on SSI/SSDI, Trauma-Focused Cognitive Behavior Therapy, Gender Competency: Working with Young Men, Health and Wellness plus Smoking Cessation Training,

Grief and Acceptance Training, Immersion training, Residential care issues, Integration of Spirituality and Behavioral Health trainings and conference, Poverty 101 training, Human Trafficking, Eliminating Disparities and Disproportionality in Health and Human Services, Mental Health First Aid, Clinical Supervision, and Law and Ethics.

The WET program hosts and/or is a sponsor to a number of conferences throughout the year, including Raise Foundation's 18th Annual Meeting of the Minds Conference, Crisis Intervention Training (CIT) Conference, Institute for Peer Services Conference, 4th Annual Transitional Age Youth Conference, 2nd Annual Eliminating Racial Disparity & Disproportionality Conference, Veterans Conference, and Integrating Spirituality and Behavioral Health Conference.

The WET program serves as a supervision coordinator for Marriage and Family Therapist interns, Social Worker interns, Psychology interns, Psychiatric residents, Child Psychology fellows, in addition to the Neurobehavioral Testing Unit.

WET also continues to coordinate a tuition reimbursement program for already employed Behavioral Health Services team members to earn an Associate's degree, Bachelor's degree, and/or a Master's within the field of behavioral health care.

## **INNOVATION**

**INNOVATION** funding has been used for nine pilot programs. These programs are designed as research projects to evaluate new programs and administrative arrangements for providing services. The overarching theme in the Innovation programs is to evaluate the use of peers in providing services. Some of these programs are operational and some are still in development. During the planning process for FY 13/14 eight additional Innovation Projects were identified as possible programs to be implemented with new Innovation funding, but have not yet been approved. The previously approved projects are listed below.

**Project 1 Integrated Community Services (ICS):** Provides mental health care at primary medical care community clinics and psychiatric consultation to primary care physicians on prescribing medication. ICS provides two different approaches to integrating physical health, mental health and alcohol/substance abuse treatments.

**Project 2 Collective Solutions:** This project is designed to provide support and assist families in learning, as soon as possible, about the support services that are available to families that have a loved one with mental illness.

**Project 3 Volunteer to Work:** This project is a community-based, consumer-run program that uses trained consumer mentors to support, role-model, and assist individuals in finding volunteer opportunities that match their unique skills and goals and that are likely to lead to employment.

**Project 4 OC Acceptance through Compassionate Care, Empowerment, and Positive Transformation (O.C. ACCEPT):** The program assists LGBTQI youth and their families who are in need of mental health services. Peers provide home visits to engage and assist in obtaining services for isolated high-risk individuals from the LGBTQI community in Orange County.

**Project 5 OC 4 Vets:** Provides one centralized contact/place for community providers to collaboratively interact to educate each other and to maximize access to services needed by veterans.

**Project 6 Community Cares Project:** Has established a network of private mental health providers

that offers pro-bono services to individuals that suffer from mild to moderate symptoms of anxiety or depression and can't afford to pay for mental health services. The program uses trained consumers and family members to provide outreach services to make this system available to those in need.

**Project 7 Project Life Coach:** This is a program for underserved individuals, with a focus on those who are monolingual or Limited English Proficiency Latino, Iranian, and Asian/Pacific Islanders with mental illness. The goal is to help such mental health consumers to gain employment at local ethnic businesses as a method of maintaining or developing their integration within the community in which they live.

**Project 8 Training to Meet the Mental Health Needs of the Deaf Community:**

This project utilizes an existing accredited mental health worker certificate training program to train individual consumers and family members from the deaf community using ASL as the primary language. An expected outcome is to increase the number of Deaf and Hard of Hearing clients accessing care and improve the quality of existing services.

**Project 9 Brighter Futures:** This project provides brief behavioral intervention services to families of children ages 6 to 12, master's level therapists trained paraprofessional consumers and family members. Using paraprofessionals to provide linkages and services, and to intervene earlier in the diagnostic process is expected to improve treatment outcomes, reduce disparities, and increase access to services.

## HOUSING

### **Built or in Pre-Construction** **Built or in Pre-Construction**

The following apartment buildings have been constructed or are in pre-construction stages/activities using MHSA Housing Program funding, along with other types of funds.

- **Diamond Apartment Homes:**  
25 unit apartment building, 24 MHSA one and two bedroom apartments; located in Anaheim; Adults
- **Doria Apartment Homes:**  
10 MHSA units within a 60-unit apartment development; located in Irvine; Construction completed and units leased September, 2011; Adults
- **Avenida Villas Apartments:**  
29-unit apartment building; located in Anaheim (unincorporated); Adults  
Construction began early 2012; leasing almost completed, January 2013.
- **San Clemente Seniors:**  
15 MHSA units within a 76-unit apartment building in San Clemente; Older Adults

### **Projects Under Review**

- **Shared Housing:**  
1 to 3 MHSA shared housing dwellings in Orange, Anaheim, and a location TBD; TAY and Adults

- **Cerritos Family Apartments:**  
19 one bedroom units within a 60-unit family low income apartment building in Anaheim; TAY and Adults
- **Harper's Point Senior Apartments:**  
15 one bedroom units within a 53-unit senior apartment building in Costa Mesa; Older Adults
- **Doria II Apartment**  
10 units within a 74 unit apartment building in Irvine
- **Anesi Apartments**  
11 units within a 104 unit apartment building in Irvine

## **CAPITAL FACILITIES AND INFORMATION TECHNOLOGY (CF/IT)**

**CAPITAL FACILITIES** funding has been used to construct a three building campus in the City of Orange at 401 Tustin Street. The project includes approximately three acres of site improvements including surface parking, underground utilities, sidewalks, landscaping, landscape irrigation, fire lanes, recreation areas, area lighting, building security, signage, and perimeter fencing.

### **Programs located at the 401 S. Tustin Street Facility:**

- **Wellness/Peer Support Center:** facilitates and promotes recovery and empowerment in mental health consumers. Recovery interventions will be client-directed and embedded within the array of services to include: individualized wellness recovery action plans, peer supports, social outings, and recreational activities.
- **Crisis Residential:** provides a therapeutic environment and mental health services for persons with a serious mental illness who are at risk of hospitalization or in crisis.
- **Education and Training Center:** workshop-type classes are presented on topics related to daily living skills and work or education preparation skills. Examples include workshops on illness management, medication knowledge, study skills, computer literacy, communication skills, managing personal finances, dressing for success, etc.

## **INFORMATION TECHNOLOGY**

The main focus of the Technological Needs funding is to develop an electronic health records system as mandated by both state and federal law.

### **Electronic Health Record (EHR):**

- **Phase I:** this project included upgrading the infrastructure to the current release of Cerner Millennium application; acquiring new servers with enhanced operating system and the newest version of Oracle database; obtaining supporting storage and other related hardware and network equipment; and securing current support applications to better utilize and manage the system.
- **Phase II:** is the development of the enhancements needed to support capturing clinical work in the EHR. These enhancements would include the core clinical documentation management system with clinical decision support; medication and prescription management; mobile access to the EHR; a Personal Health Record (PHR) with consumer access via a portal; and kiosks in selected locations to afford increased consumer/family access to computers and the internet.