

Mental Health Services Act (MHSA) FY 2017-20 Three Year Program and Expenditure Plan

Planning for the Community
Program Planning Process (CPPP)



What is Required?

- Ensure stakeholders have the opportunity to participate in all aspects of the Community Program Planning Process
- Identify community issues related to mental illness resulting from lack of services
- Analyze mental health needs
- Identify and re-evaluate priorities and strategies to meet those mental health needs

“Stakeholders” means individuals and entities with an interest in mental health services, including but not limited to consumers, family members, mental health providers, and providers of related services, to include primary care, alcohol and other drug services, homeless and other social services, educators and law enforcement.

What is the Timeline?

- **MAR/APR 2016** – Plan the Community Program Planning Process (CPPP)
- **MAY/DEC 2016** - Implement the CPPP
- **JAN 2017** - Write 1st Draft Three Year Plan
- **FEB 2017** – CPAW/MHC review, comment on draft plan
- **MAR 2017** - 30 day public comment period, public hearing
- **APR 2017** - Board of Supervisors (BOS) consider 2d draft
- **JUL 2017** – Start Three Year Plan

Highlights of MHSA Issues

FY 17-20 Three Year Plan

- Modest increase in MHSA revenue projections should be able to address increase in cost of doing business – not enough to add any significant new CSS, PEI programming.
- New PEI regulations require current programs to adapt to new PEI categories and reporting requirements
- Need to implement process to address four INN projects that sunset JUN 2017, and a process to address backfill.
- State funds allocated to WET component in 2008 will be spent by JUN 2017. Any current or new WET programs will need to be funded by unspent local MHSA funds from previous years.
- CF/TN component funds allocated from the local MHSA fund in 2011-12 will be spent by JUN 2017. Any current or new projects will need to be funded by unspent funds from previous years.

What Have We Accomplished So Far?

- A data driven needs assessment was accomplished in FY 05-06 (CSS), FY 07-08 (WET) and FY 09-10 (PEI) based upon 2000 census information, with accompanying community engagement processes. Programs and plan elements formulated from identified strategies
- Extensive community engagement process, to include focus groups, community forums accomplished FY 13-14. Identified community issues related to mental illness resulting from lack of services.
- Identified needs updated and prioritized in 2015.
- Outreach and inclusion of underserved populations accomplished for most recent CPPP.
- CPAW and related ongoing stakeholder committees and workgroups restructured in 2015.

Current Stakeholder Committees and Workgroups

- **CPAW**
 - Innovation
 - System of Care
- **Social Inclusion**
- **Housing**
- **Children, Teens and Young Adults**
- **Adults**
- **Older Adults**
- **Mental Health Commission**
 - Quality of Care
 - MHSA/Finance
 - Criminal Justice
- **Behavioral Health Care Partnership**
- **Training Advisory Committee**
- **Reducing Health Disparities**
- **Suicide Prevention**

Current CSS Programs

\$31.6 million to fund:

- 29 MHSA programs that provide services to approximately 2,000 consumers; children who are seriously emotionally disturbed, transition age youth (TAY), adults and older adults who are seriously mentally ill.
- Seven additional plan elements that support and enhance non-MHSA funded community mental health programs and clinics.
- Programs and plan elements include:
 - 9 Full Service Partnership programs (children, TAY, adults)
 - Assisted Outpatient Treatment Program
 - Miller Wellness Center (mental health)
 - Hope House (transitional residential center)
 - Housing Services (temporary, supported or permanent)
 - 3 Wellness and Recovery Centers
 - Older Adult Program
 - Clinic support
 - Administrative support

Current PEI Programs

- \$8 million to fund 28 MHSA programs that provide prevention and early intervention services designed to prevent mental illness from becoming severe and debilitating, and to provide outreach and engagement to underserved populations.
- Approximately 13,000 individuals served yearly.
- Programs and plan elements include:
 - 8 agencies outreaching to underserved communities
 - 5 agencies supporting at risk youth
 - 5 agencies supporting families with at risk children
 - 3 programs integrating primary and mental health care to adults, older adults
 - First Hope program to provide early intervention for first break psychosis
 - Putnam Clubhouse to assist in preventing relapse
 - Contra Costa Crisis Center and countywide suicide prevention efforts
 - Office for Consumer Empowerment

Current INN Projects

\$2 million in FY 2016-17 to fund new or different patterns of service that contribute to informing the mental health system of care as to best or promising practices that can be subsequently added or incorporated into the system.

- 7 projects are approved and will be in operation for FY 16-17:
 - Support for lesbian, gay, bi-sexual, transgender or questioning consumers
 - Addressing perinatal or post-partum depression
 - Post-traumatic stress disorder groups
 - Outreach to exploited youth
 - Vocational services for unserved consumer
 - Peer wellness coaches
 - Support for the frail, homebound older adult
- 1 project will receive MHSOAC approval and will be in operation during FY 16-17:
 - Overcoming transportation barriers to accessing services

Current WET Programs

\$640,000 annually from Contra Costa's MHSA Fund to recruit and retain a diverse, qualified workforce capable of providing consumer and family driven services that are compassionate, culturally and linguistically responsive, and promote wellness, recovery and resilience across healthcare systems and community based settings. Categories are:

- Workforce staffing support
- Training and technical assistance
- Mental health career pathway programs
- Internship programs
- Financial incentive programs

Current CF/TN Projects

This component enables counties to utilize MHSA funds on a one-time basis for major infrastructure costs necessary to implement MHSA services and supports, and to generally improve support to the County's community mental health service system.

- \$6 million to build and integrate Behavioral Health Services' Epic Tapestry electronic records system with the Epic system currently in use by the County's Health Services
 - \$850,000 estimated to be available for FY 16-17

Planning Questions

- Do we need an updated data driven Needs Assessment that utilizes valid benchmarks that matches mental health care needs with existing services, and broken out by level of care, age group, special needs, region and race/ethnicity/culture?
- Do we need a community engagement process, to include focus groups, community forums and outreach to underserved populations? What could we learn from this?
- Do we need to engage the existing ongoing stakeholder workgroups in considering issues specific to the five MHSA components and related categories, programs and plan elements?
- If the answer to any or all of the above is yes, how do we do this?

CPAW AGENDA ITEM

READINESS WORKSHEET

CPAW Meeting Date: March 3, 2016

Name of Committee: Membership

1. **Agenda Item Name:** Membership Committee Update
2. **Desired Outcome:** Update CPAW membership regarding composition, characteristics, affiliations and recruitment needs.
3. **Brief Summary:** The Membership Committee has asked MHSA staff to update and analyze the characteristics and affiliations of current members to assist in focused recruitment for current and upcoming CPAW vacancies.

Background: In 2015 the Board of Supervisors approved the recommendations of the Contra Costa Behavioral Health Services (CCBHS) Director regarding membership composition of CPAW (see attached). Currently three vacancies exist, namely individuals to represent community based organization (CBO) service providers, family members, and underserved populations. An upcoming vacancy will become available upon the retirement of a CCBHS Service Provider in March (John Hollender).

The following analysis of characteristics and affiliations is provided of the current membership:

- **11** individuals self-identify as mental health consumers
- **8** individuals self-identify as family members
- **68%** of CPAW membership self-identify as consumers, family members, or both
- **7** individuals currently work for Contra Costa Behavioral Health Services; four as Community Support Workers with lived experience as either a consumer or family member, one working in Vocational Services, one working in Homeless Services, and one working in Alcohol and Other Drug Services
- **4** individuals indicate they are active in NAMI – Contra Costa leadership
- **4** individuals are members of the Mental Health Commission
- **3** individuals work for a CBO service provider
- **7** individuals identify with the LBGTQ community
- **0** individuals identify themselves as currently providing clinical mental health care in the County

- **24%** of membership identify with the Western region of the County
- **60%** of membership identify with the Central region of the County
- **16%** of membership identify with the Eastern region of the County

- **21** individuals identify primarily as Caucasian
- **3** individuals identify primarily as African American
- **3** individuals identify primarily as Asian Pacific Islander
- **1** individual identifies primarily as Native American
- **0** individuals identify primarily as Latina/o

4. Specific Recommendation: Recruitment efforts should be focused on the following unrepresented/underrepresented characteristics and affiliations in order to achieve a fully diverse membership composition:

- Individuals who identify primarily as Latina/o
- An individual who currently provides clinical mental health care in the County
- Individuals who identify primarily with a non-Caucasian race/ethnicity
- Individuals who identify with the Eastern or Western region of the County

5. Anticipated Time Needed on Agenda: 5 minutes

6. Who will report on this item? Kathi McLaughlin

Consolidated Planning Advisory Workgroup (CPAW) Membership – February 2016

Designated Affiliation	Name	Phone Number	Email	Term Expires
Alcohol & Other Drug	Michelle Richardson	925-335-3322	Michelle.richardson@hsd.cccounty.us	SEP 2020
CBO Service Provider	Molly Hamaker	925-708-6488	molly@putnamclubhouse.org	FEB 2019
CBO Service Provider	Tom Gilbert	510-837-9386	tgbert55@yahoo.com	MAR 2019
CBO Service Provider	VACANT			
CCBHS Service Provider	John Hollender	510-691-5326	john.hollender@hsd.cccounty.us	AUG 2018
Consumer	Lisa Bruce	925-956-2242	lisalaiolobruce@gmail.com	MAY 2020
Consumer	Matt Wilson	925-457-3801	matt.anthony.wilson@gmail.com	APR 2020
Consumer	Karen Smith	925-752-5613	klurbancic@aol.com	NOV 2019
Consumer	Connie Steers	925-682-9629	conste925@astound.net	MAY 2019
Consumer	Ashley Baughman	925-812-4010	smashleybaughman14@att.net	OCT 2019
Consumer	Gina Swirsding	510-304-6162	gdm2win@aol.com	JAN 2020
Criminal Justice	Kimberly Martell	925-313-4154	kimberly.martell@prob.cccounty.us	SEP 2018
Education	Kathi McLaughlin	925-372-6886	kathimclaughlin@att.net	OCT 2018
Faith Based Leadership	Will McGarvey	925-597-9797	eye4cee@gmail.com	SEP 2019

Family Member	Sam Yoshioka	925-682-8889	samsyoshi@comcast.net	NOV 2018
Family Member	Ryan Nestman	925-726-9000	rnestman79@att.net	DEC 2018
Family Member	David Kahler	925-676-5771	dk122932@aol.com	JUN 2020
Family Member	Jackie Lerman	925-497-0128	Jackie_lerman@yahoo.com	AUG 2020
Family Member	Doug Dunn	925-706-2453	douglaswilldunn@sbcglobal.net	JUL 2019
Family Member	VACANT			
Family Partner - Juvenile	Jennifer Tuipulotu	925-521-5722	jennifer.tuipulotu@hsd.cccounty.us	MAR 2020
Family Partner - Adult	Kimberly Krisch	925-313-7940	kimberly.krisch@hsd.cccounty.us	AUG 2019
Homeless Programs	Jenny Robbins	925-313-7706	jenny.robbins@hsd.cccounty.us	SEP 2020
Mental Health Commission	Lauren Rettagliata	925-683-3299	rettagliata@sbcglobal.net	DEC 2016
Mental Health Commission	Duane Chapman	510-375-7257	duane.chapman@att.net	FEB 2017
Peer Provider - CCBHS	Susan Medlin	925-899-0612	susan.medlin@hsd.cccounty.us	JAN 2019
Peer Provider - CCBHS	Stephen Boyd	925-914-0174	stephen.boyd@hsd.cccounty.us	FEB 2020
Underserved Population	Courtney Cummings	510-672-9877	ccummings1102@yahoo.com	DEC 2019
Underserved Population	VACANT			
Underserved Population	Sheri Richards	925-825-4519	sheririchards@comcast.net	JUN 2020
Veterans Services	Maude DeVictor	510-222-5834	brown.lotus@att.net	JUN 2019

MHSA Innovation Planning Process – Milestones and Timeline

<u>Milestone</u>	<u>Timeline</u>
1. Develop draft planning process milestones and timeline, concept/proposal forms	DEC 2015
2. INN Committee/CPAW approve milestones and timeline, concept/proposal forms	JAN-FEB 2016
3. Brief CCBHS stakeholder bodies*, publish concept forms to community**	MAR-APR 2016
4. Solicit concept forms from the community	APR-JUN 2016
5. INN Committee/CPAW recommends to CCBHS Director concept forms for development	JUL 2016
6. Concept forms approved by CCBHS Director assigned to stakeholder bodies for proposal development	AUG 2016
7. Stakeholder bodies develop concepts and submit proposals forms	SEP-NOV 2016
8. INN Committee/CPAW present approved proposals to CCBHS Director for review	DEC 2016
9. Approved proposal descriptions included in DRAFT MHSA Three Year Plan	JAN 2017
10. BOS approves MHSA Three Year Plan	APR 2017
11. Proposal templates developed and sent to MHSOAC for approval	MAY-JUN 2017
12. Implement approved INN Projects	JUL 2017-JUN 2018

*Stakeholder bodies include, but are not limited to CCBHS sponsored age related committees, Systems of Care, Social Inclusion, Housing, AOD, Mental Health Commission, NAMI, Suicide Prevention, Health Disparities, Training Advisory, Behavioral Health Partnership.

**Concept forms may be submitted by any person in the community. Concept forms can also be submitted by CCBHS staff and/or programs, community based organizations and stakeholder bodies. Concept forms that are approved by the CCBHS Director will be assigned to a stakeholder body for support and development into a proposal.

MHSA = Mental Health Services Act; INN = Innovation Component; CPAW = Consolidated Planning Advisory Workgroup; CCBHS = Contra Costa Behavioral Health Services; BOS = Board of Supervisors; MHSOAC = Mental Health Services Oversight and Accountability Commission; AOD = Alcohol and Other Drug Services; NAMI = National Alliance on Mental Illness – Contra Costa Chapter



Contra Costa County
Mental Health Services Act (MHSA)

Innovative Concept Form
March 2016

Background Information

The Mental Health Services Act (MHSA) provides funding for the Innovation Component of the County's Three-Year Program and Expenditure Plan (Three-Year Plan). Within the Innovation Component are Innovative Projects that are time-limited (up to five years), and defined as doing **one or more of the following:**

- Introducing a mental health practice or approach that is new to the overall mental health system,
- Making a change to an existing practice in the field of mental health, including but not limited to application to a different population, or
- Applying to the mental health system a promising community-driven practice or approach that has been successful in non-mental health contexts or settings.

Some examples would include, but are not limited to, the following:

- Applying an existing service model and/or evidence-based practice and introducing it to a new population within our existing system (refer to the *Trauma Recovery Group* program description);
- Adding a Peer or Family Partner component (refer to the *Coaching to Wellness* or *Trauma Recovery Group* program descriptions); or
- Adapting a recognized model of service to build capacity to serve individuals diagnosed with or at risk of developing mental illness (refer to *Recovery Through Employment Readiness* program description)

An Innovation Project may affect virtually any aspect of behavioral health practices, to include Mental Health, Alcohol and Other Drug (AOD) and Homeless services, but not limited to new or changed:

- Services and interventions to address persistent mental health, AOD and housing challenges,
- Prevention and early intervention programs and services,
- Administrative, governance, and organizational practices, processes, or procedures,
- Education and training for services providers, including non-traditional mental health practitioners, (i.e., educators, faith-based leaders, consumer and family-run organizations)
- Community capacity building and public education efforts pertaining to mental health,
- Research, with capacity to expand on existing research or apply research findings to the public mental health system.

Contra Costa Behavioral Health Services (CCBHS) is developing the Innovation Component of the MHSA Three Year Program and Expenditure Plan for Fiscal Years 2017-19, and is asking for your help in developing innovative concepts into funded Innovative Projects.

Instructions for Submitting an Idea

If you have an innovative concept you wish to submit please complete the following form and submit it to the address, email or fax listed below.

To: MHSA Innovation Committee
1340 Arnold Drive, Suite 200
Martinez CA 94553
Email: mhsa@hsd.cccounty.us
Fax: 925-957-5156
Phone: 925-957-5150

It is highly recommended you review the existing programs and services described in the current MHSA Three Year Plan. The MHSA Three Year Plan can be located on our website at: <http://cchealth.org/mentalhealth/mhsa/>.

In particular, the chapter entitled, [*The Community Program Planning Process*](#), describes the County’s prioritized needs and the chapter entitled, *Innovation*, describes the County’s Innovative Projects. Reviewing the MHSA Three Year Plan will help you determine what currently exists, and what is needed.

Submitted concepts will be reviewed by a work group of representative MHSA stakeholders, who will make recommendations to the CCBHS Director about concepts to be developed into proposals. If your idea is selected for development into an Innovation Project proposal, you may be asked to participate on a designated stakeholder body to assist them in drafting the proposal.

Please feel free to call or email Michelle Nobori at (925) 957-5148 or Michelle.Nobori@hsd.cccounty.us with any questions or concerns you may have.

All submissions should be addressed to the address, email or fax listed below.

To: MHSA Innovation Committee
1340 Arnold Drive, Suite 200
Martinez CA 94553
Email: mhsa@hsd.cccounty.us
Fax: 925-957-5156
Phone: 925-957-5150

Idea Title: _____

Submitted By: _____ Organization (if applicable): _____

Date Submitted: _____ Email: _____ Phone Number: _____

Mailing Address: _____

1. Purpose of this Idea – The State **requires** all Innovative Projects correspond to one or more of the following purposes. Please select the purpose which most clearly relates to the purpose of your innovative concept (please check one box only):

- ___ Increase access to underserved groups
- ___ Increase the quality of services, including better outcomes
- ___ Promote interagency collaboration
- ___ Increase access to services

2. Problem Statement—(1 page maximum) Describe the problem, population or issue your innovative concept is addressing. Please explicitly state you intended target population.

3. Innovative Concept—(1 page maximum) Describe your innovative concept and how it addresses the problem defined above. Please include a description of how this innovative concept reflects the purpose and priorities you selected above, as well as how your concept *defines* being innovative. Please explain how this innovative concept relates to the requirements defined on the instruction page. Additionally, please explain how this innovative concept will leverage other resources/funding streams, given the time-limited nature of Innovation funding.

4. Implementation—(1 page maximum) - Provide a description of how your concept might be implemented, such as a description of how the project or service would work, who might provide the project/service (i.e. County-operated or Community Based Organization), where it would occur, and how would one know if it was successful.

5. Any Additional Comments (optional)

6. **What is Next?** We thank you for your interest in putting forth a concept that can lead to new and different ways to improve the public mental health system of care. Concepts that are approved by the CCBHS Director will be assigned to a stakeholder body for assistance in proposal development. Should your concept be selected you may be invited to participate in the stakeholder body to which it is assigned. In order to assist in selecting an appropriate stakeholder body, please indicate which stakeholder body(ies) you currently participate (check all that apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> MHSА Systems of Care | <input type="checkbox"/> Social Inclusion | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Alcohol and Other Drug Services | <input type="checkbox"/> Mental Health Commission | <input type="checkbox"/> NAMI Contra Costa |
| <input type="checkbox"/> Suicide Prevention | <input type="checkbox"/> Reducing Health Disparities Workgroup | <input type="checkbox"/> Training Advisory Committee |
| <input type="checkbox"/> Behavioral Healthcare Partnership | <input type="checkbox"/> Age-related Committee <i>(please circle: Children's / TAY / Adult / Older Adult)</i> | |
| <input type="checkbox"/> CCBHS employee | <input type="checkbox"/> Other – Please specify _____ | <input type="checkbox"/> None |



Stakeholder Meeting Calendar March 2016

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2 MH Commission: 4:30—6:30 pm 550 Ellinwood Way Pleasant Hill	3 CPAW: 3-6pm 2425 Bisso Ln Concord	4	5
6	7	8 Social Inclusion: 10am – 12pm 2425 Bisso Ln, Concord	9 Systems of Care: 10am—12 pm 1340 Arnold Dr, Ste 200, Martinez	10 Children's: 11:00—1:00pm, 1340 Arnold Dr, Ste 200, Martinez	11	12
13	14	15	16	17 MHSA Finance: 1-3 pm 1340 Arnold Dr, 112 Martinez Steering: 3-5 pm 2425 Bisso Ln, Concord	18	19
20	21 Membership: 3-5pm 1340 Arnold Dr, Ste 200, Martinez	22	23 Meetings are listed in the blue box to the right	24	25	26
27 	28 Innovation: 2:30—4:30pm 1350 Arnold Dr, Ste 103, Martinez	29	30	31	Behavioral Health Housing: 10am-12pm 2425 Bisso Ln, Lg Conf Room, Concord Aging and Older Adult: 2-3:30 pm 2425 Bisso Ln, Concord AOD Advisory Board : 4 –6:15pm 651 Pine St, Martinez	