

MENTAL HEALTH SERVICES ACT (MHSA)

ANNUAL UPDATE

August 20, 2012

5:30 pm – 7:30 pm



MHSA / Prop 63

- Passed by California voters in 2004
- Tax of 1% on personal income over 1 million dollars
- Distributed to counties primarily based on poverty population
- Marin: \$5 to \$7.5 million per year so far

MHSA / Prop 63

Some funds managed by State for Statewide projects:

- Suicide Prevention
- Reducing Stigma & Discrimination
- Student Mental Health Initiative
- Reducing Disparities

MHSA's Purpose

- California's public mental health system has been chronically under-funded and only serves a portion of the people in need.
- MHSA aims to reduce the long-term adverse impact of untreated mental illness through providing the help people need when they need it.

MHSA Principles

- Recovery and wellness
- Easier and earlier access
- Effective, evidence-based services
- Consumer and family-member driven
- Local stakeholder priorities
- Serving un/underserved
- Culturally and linguistically appropriate services

Five (5) MHSA Components

- Community Services and Supports (CSS) (including Housing)
- Prevention and Early Intervention (PEI)
- Workforce Education and Training (WET)
- Capital Facilities and Technological Needs (CFTN)
- Innovation (INN)

Marin County MHSA Process

Stakeholder input



Draft Plan



30 day Public Comment period



Public Hearing at Mental Health Board
Mental Health Board recommendations



Board of Supervisors Approval

Marin County MHSA Stakeholder Process

- Original Component Plans
 - Focus Groups
 - Key Informant Interviews
 - Surveys
 - Stakeholder meetings
- Revisions to Existing Plans
 - Consistent with original Stakeholder priorities
 - Additional Stakeholder meetings as needed
 - MHSA Implementation Committee makes recommendations

Community Services and Supports

Target Population

- Un/Underserved adults with serious mental illness
- Un/Underserved youth with serious emotional disturbance

Programs began in 2007

What is CSS Providing?

- Wrap-around – “Whatever it takes”
- Intensive Case Management
- Multi-Disciplinary Team Approach
- Client-Centered Service Planning
- Supported Housing
- Employment Support
- Peer Provider / Family Partners
- Culturally and Linguistically Competent
- Outreach and Engagement

Who is CSS Serving?

- Over 540 served by Full Service Partnerships (FSP's) (over 4 years)
- Over 1,000 reached each year by Outreach and Engagement programs
- Latinos identified as most underserved population in Marin:
 - % of County Mental Health Clients that are Latino increased from 12.8% to 20.4% from 2005 to 2010

Who is CSS Serving?

- Older Adults identified as underserved in Marin:
 - % of County Mental Health Clients that are 60+ years old increased from 6.7% to 12.4% from 2005 to 2010
- Enterprise Resource Center CARE Team reached 194 homeless individuals in FY2010-11
- Southern Marin Services Site reached 675 individuals, including 375 African Americans, through clinical services, home visits, and school and community based services

What is CSS Achieving?

- Across all FSP's:
 - 66% Decrease in Homelessness
 - 24% Decrease in Psychiatric Hospitalizations
- Adult System of Care
 - 79% Decrease in Incarceration
 - 91% Decrease in Arrests
- Children's System of Care
 - 93% Decrease in School Suspensions
 - 56% Increase in School Grades

What is CSS Achieving?

- Approximately 80% of Southern Marin Services Site clients are showing improvement or stabilization in functioning
- 97% of clients employed through Enterprise Resource Center program (55) have retained their employment (FY10/11)

Enterprise Resource Center

Michael Payne
Barbara Coley

3270 Kerner Blvd., San Rafael
415.457.4554

www.camentalhealth.net

Prevention and Early Intervention

- Target Population
 - Un/Underserved individuals at risk for emotional or behavioral disorders
- Purpose
 - Reduce risk factors and promote skills to increase well-being

Programs began in 2009

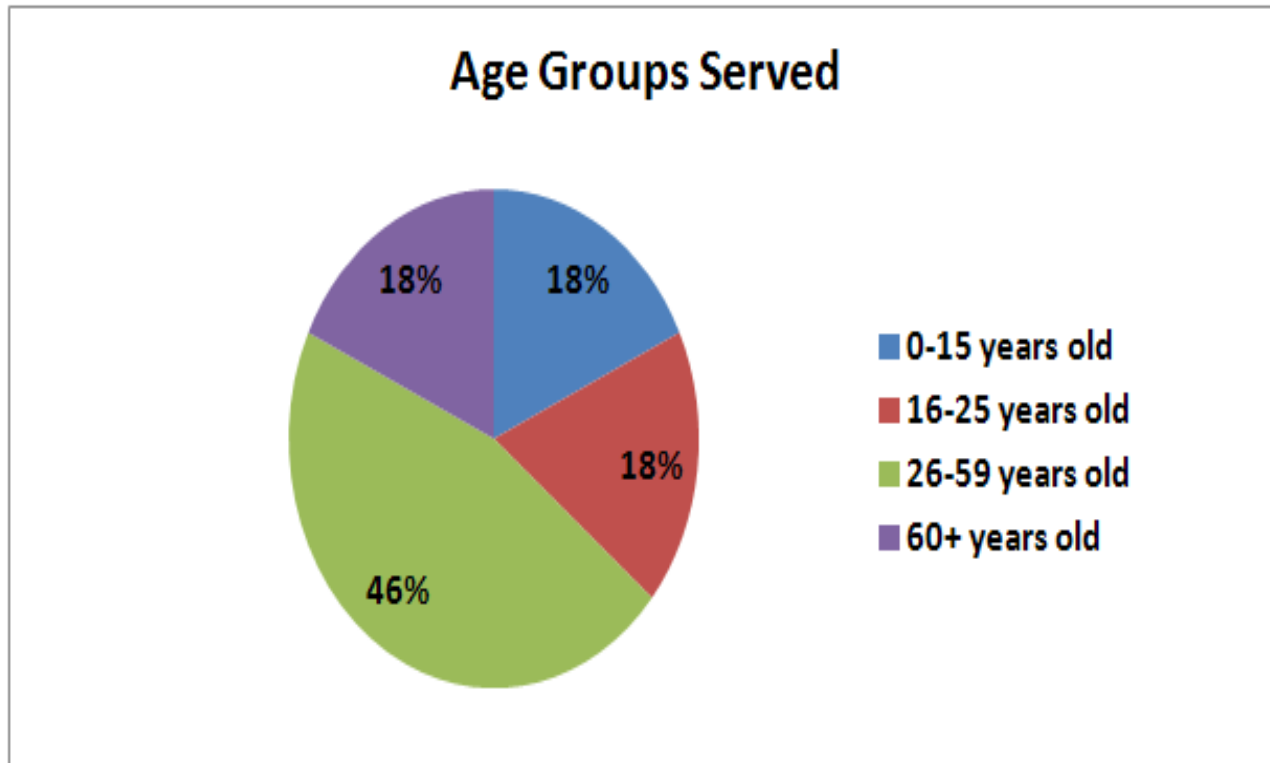
What is PEI Providing?

- Improving the Skills of Caregivers for Children
- Training for Providers to identify and respond
- Services within accessible Community Programs
- Evidence-based Interventions
- Culturally and Linguistically Competent Services

Who is PEI Serving?

Total Individuals Served: 6245

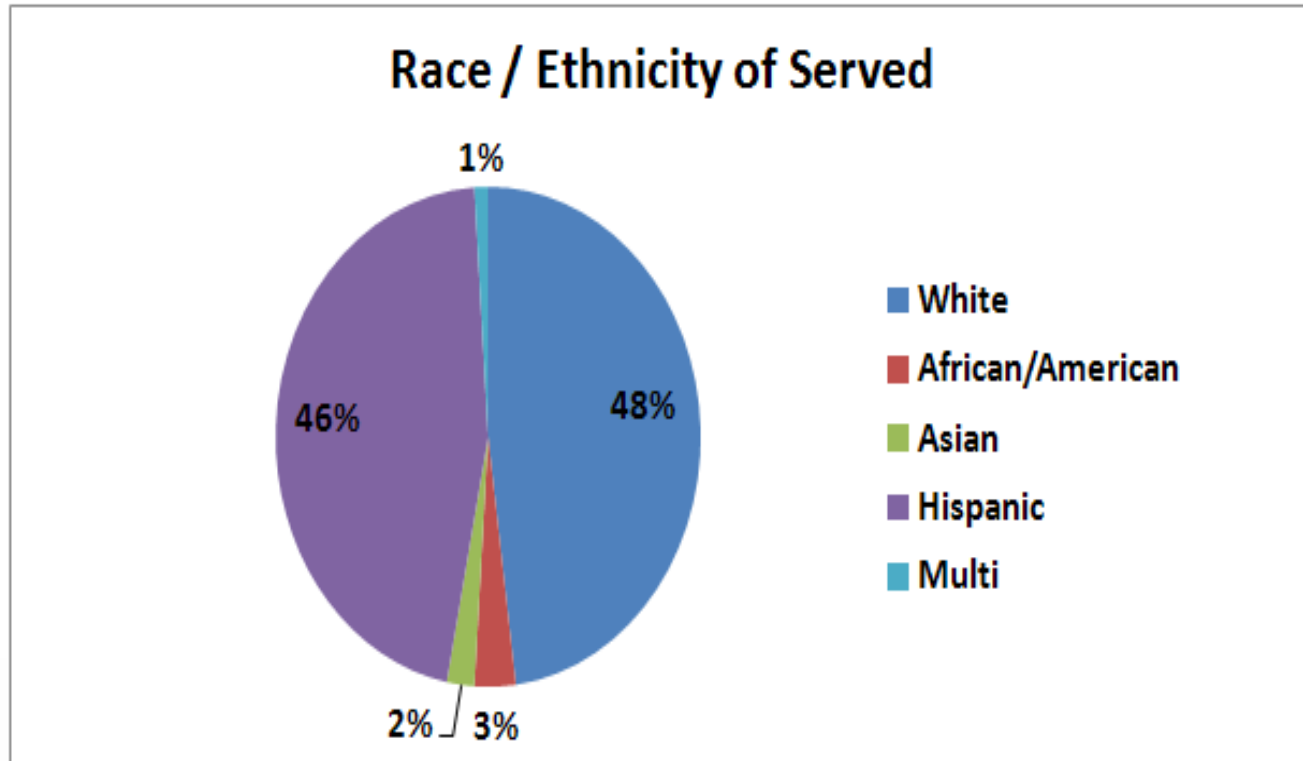
From July 1, 2010 to June 30, 2011



Who is PEI Serving?

Total Individuals Served: 6245

From July 1, 2010 to June 30, 2011



What is PEI Achieving?

- PEI Committee:
 - Increasing Provider Expertise in Mental Health Prevention
 - Increasing Collaboration
 - Developing a Mental Health System of Care
- Early Childhood Mental Health
 - Children retained in their Childcare/Preschools
 - Increase in Staff and Parent Skills
- Triple P (Positive Parenting Program)
 - Over 70 Providers Trained in Evidence-Based Practice

What is PEI Achieving?

- Across Ages
 - Mentoring Program in Development in Marin City
- Transition Age Youth PEI
- Canal Community-Based PEI
- Integrated Behavioral Health in Primary Care
- Older Adult PEI
 - Community Members engaging in Services
 - Improved Mental Health Status, Skills and Supports

New PEI Programs

Started July 1, 2012 for Two (2) Years:

- Vietnamese Community Connection
- Mental Health First Aid
- Teen Screen
- Community Coalitions
- Community Health Advocates

Transition Age Youth - PEI

Huckleberry Youth Programs Susan Quigley

Montecito Plaza, San Rafael
415.258.4944

www.huckleberryyouth.org

Novato Youth Center Kara Vernor

680 Wilson Avenue, Novato
415.892.1643

www.novatoyouthcenter.org

Workforce Education and Training

Purpose:

- Remedy the shortage of qualified individuals to provide services to address serious mental illness
- Promote inclusion and employment of clients and family members
- Increase diversity and cultural competency of workforce

What is WET Providing?

- Stipends for Consumers, Family Members and Interns
- Trainings
 - Group Therapy
 - Dual Diagnosis Training
 - Trauma
 - Cultural Competence

Upcoming WET Activities

- Evidence-Based Training
- Increase Family Member Trainings
- Strengthening the Co-occurring capacity of the current workforce

Innovation

State Guidelines says:

“Innovative Programs are novel, creative, and ingenious Mental Health approaches to difficult to solve issues we face in our community.”

Innovation

Marin Innovation Program is.....

Client Choice and Hospital Prevention Program

Innovation

We would like to learn.....

**How to move our crisis response system
further towards a Client Choice
approach and away from the most
restrictive approach**

Innovation

We will do this by.....

- Consumer driven Psychiatric Crisis Planning Services
- The Opening of a New Crisis Residential Program
- Further integration of Peer and Professional Staffing at all levels of the Crisis Continuum

Crisis Planning



CommunityActionMarin

Seth Friedrich

(415) 306-3289

Sfriedrich@marincounty.org

www.camarin.org

Upcoming MHSA Activities

FY2012/13 Funding

- Annual Update with Expansions will be posted
 - Early September/October 2012
- Public Hearing
 - At Mental Health Board Meeting in October or November 2012

Upcoming MHSA Activities

3 Year Integrated Plan

- Date Due to State is in Flux
- Starting Planning Process Now

Process to determine funding priorities going forward

- Review Original Community Priorities
- Evaluate Existing Programs
- Identify Gaps and Changes in Needs
- Determine strategies

MHSA Going Forward

**PLEASE SIGN UP IF YOU WANT TO
PARTICIPATE IN THE
UPCOMING PLANNING PROCESS**

Discussion Groups

1. *Introductions: Name, Affiliation, Participation in MH System of Care*
2. *What benefits have you seen from MHSA?*
3. *Going forward how can the MH system of care be improved?*
4. *What role can you play in making these improvements?*

Report Back: 3 highlights from discussion