

MARIN COUNTY
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY MENTAL HEALTH SERVICES
MHSA IMPLEMENTATION COMMITTEE
MEETING # 8 – TUESDAY September 23, 2008

Meeting Notes

Welcome and introductions of Implementation Committee Members were done by Bobbie Wunsch.

Public Comment: Carol Kerr thanked the MHSA Implementation Committee for authorizing funding from the MHSA to provide stipends for CMHS interns. She reported 22 interns for FY 08-09. They got 6 social work interns; 3 Spanish speaking and 2 African-American who are working at Youth & Family Services.

Update from CMHS Director Bruce Gurganus: He thanked people who have been involved in the various subcommittees.

State Budget Update – The state is going through the worst financial crisis in memory. The Governor will sign the budget shortly and CMHS will have another \$800,000 loss which will damage the STAR Program. There will be \$822,000 in County general fund reductions to CMHS. He reminded the committee that they had approved CSS funding for the Odyssey Program after the AB2034 veto last year. The state requires that counties have a prudent reserve that is supposed to be half of the annual CSS allocation. \$3.7 million is the CSS total for Marin, so by July 2010 CMHS should have \$1.855 million in reserve. We will not quiet make it by July 2010, but will make it by July 2011 without reducing existing programs.

Margaret Hallett from the Family Service Agency handed out a summary that also was sent via email to the MHSA Implementation Committee. She was at the meeting representing four of Marin's outpatient community based mental health providers and to talk about the MAPS Program collaboration that started some years ago. She came to ask support from the Implementation Committee to maintain services for uninsured medication clients. She asked for \$50,000 for the uninsured and underinsured adults who receive medication, evaluation, follow-up and psychotherapy with one of their four organizations. This is a quality program that has really good outcomes. Last year MAPS served 165 adults with serious mental illness and almost 40% were uninsured. If MAPS would not exist some of these people would end up in a hospital. The cost is \$1,000 per person a year for this service. 59 would lose access to the

MAPS psychiatrist due to loss of the grant from the CA Endowment. The MAPS Program grant pays for a psychiatrist to provide services to adults at all the agencies. To date they have raised some private funding. Also, the Mental Health Board passed a resolution suggesting CMHS find the money for MAPS.

Bruce said that he talked to Dr. Lanes and the doctors at the CMHS Med Clinic are willing to take over the MAPS clients who have serious and persistent mental illnesses. The committee took a vote on the proposed budget presented by staff. Bruce announced that Joe Costa sent an email supporting the MAPS Program funding. They will count his email as a proxy vote for MAPS.

Supported staff recommended CSS budget vote = 12

Opposed to staff recommended CSS budget vote = 5

Approval of Workforce Education and Training (WET) Plan – Hutton thanked members of the sub-committee for their participation on putting together the WET Pan. He talked on how the plan was developed. They had feedback from a group of stakeholders representing education, consumers, family members, CBO's, Psychotherapists, and CMHS staff. Hutton and Kathy Kipp held consumer focus groups and family member focus groups, and attended several meetings in Sacramento to learn about other county WET activities. The plan outlines three years of expenditures from 2006 through June 2009. There is an emphasis upon consumer training, family member training, cultural diversity training, and transformative strategies. The plan also outlines workforce development including strategies for recruiting people of color, family members, Nurse Practitioners, internship stipends, and scholarships for families and consumers.

The committee met 8 times, they reviewed the results of the survey and found that there were significant differences in the cultural composition of the workforce population that CMHS serves. Paul Gibson, WET consultant described how the WET Budget is divided and emphasized the recommendation from the Committee to hire a WET Coordinator in the first two years of operation to establish a framework for the implementation of internships, scholarships, peer consultation, and other WET strategies. The MHSA Implementation Committee approved the Recommendation of the WET Plan by a vote of 17-0.

Approval of Prevention Early Intervention (PEI) Plan – Kristen Gardner, the Consultant for the PEI Committee talked about how the plan was developed. They did about 10 Focus Groups with over 100 community members. Over 40 agencies participated in the process. The PEI Committee developed work groups by age: 0-5, 6-15, Transitional Age Youth, and Adult/Older Adults. Within the different age groups they discussed need, target populations and program models. The entire PEI Committee prioritized potential programs. The following programs came out as recommendations of the PEI Committee:

Early Childhood Mental Health (ECMH) Consultation & Screening
Parenting Education and Support (Triple P - Positive Parenting Program)
Student Assistance Program (SAP)
TAY Screening & Brief Intervention

Community-based Screening & Brief Intervention – Canal District Screening & Brief Intervention
in Physical Health Care Setting
Screening & Brief Intervention through Home Delivered Meal Services
Suicide Prevention
Mental Health Awareness
Stigma Reduction

After question and answer period the MHSA Implementation Committee approved the recommendation recommended by the PEI Committee by a 17-0 vote.

Additional Public Comment:

- Hutton Taylor – noted Planning and Early Intervention outreach may overlap with the Workforce Education and Training Plan so there could be some collaboration between the two funding sources.
- Sharon Turner -- thanked the PEI Committee for their work.
- Dr. Larry Lanes – told Margaret that they are trying to do the best to help the people of the MAPS Program get access to medications.

Next Steps & Adjourn:

- Bruce announced that the state is in the process of creating the Innovation guidelines, the last section of MHSA. If people who have very innovative ideas that have not been covered in PEI, CSS, or WET the innovators in the groups should take a close look at state requirements on innovation.
- Probably the next meeting of the Implementation Committee will focus on the integrated plan. The PEI Public Hearing is schedule for November 17th.

Meeting was adjourned at 11:58 a.m.