

# MENTAL HEALTH SERVICES ACT PREVENTION AND EARLY INTERVENTION COMMITTEE

September 9, 2016 • 1:00-3:00 pm • Mtg #30

**NEXT MEETING: Friday December 9, 2016 1:00-3:00 pm 3240 Kerner, Room 110**

## Participants

Rashi Abramson, MHB Alyse Clayman, JFCS Celeste Farmer, Seneca Kristen Gardner, PEI Coord Alfa H Price, CAM/MAAP	Myra Levenson, Community Member Melanie Lopes, FSA Sandy Ponek, Canal Alliance Bonne Goltz Reiser, JFCS	Jasmine Stevenson, HYP Michael Tabb, MCCSD Pamela Taylor, BACR Kara Vernor, NYC
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## MHSA and MHSUS UPDATES

- MHSA Innovation: The INN TAY Advisory Council has started and has a launch meeting Sept 28. Diverse group of TAY.
- MHSA Three Year Planning: Internal meetings, focus groups and smaller meetings will happen this fall. Large community meetings will likely happen Jan/Feb. Draft Plan posted early May. Focus on reducing disparities. Two aspects that will most affect PEI:
  - Focus on increased outcome reporting: use of EBPs, validated tools, etc.
  - Effort to connect PEI to County services: In early planning processes the focus for PEI was on prevention and brief intervention. Less focus on moderate to severe services. That has left some significant gaps, such as lack of services in Spanish for uninsured. In filling in the moderate/severe gap it is unknown at this time how the prevention end of the spectrum will be affected.

## PEI REGULATIONS

- Context: Mental Health Services Oversight and Accountability Commission (OAC) wants counties to move forward, starting with an implementation plan, and recognizing that we will address problems that arise long the way.
- Reviewed Implementation Plan discussed in a working meeting August 30 with some PEI providers.
  - DUMI: **PEI Providers should start recording who they refer to Access Line:**
    - Name and other identifying information
    - Date of referral
    - Call Access to let them know referral was made
    - At end of year, turn in log of those referred so County can report required data to State
  - Demographic Data: Start collecting new data for EI clients as of July 2017. Have SOGI (Sexual Orientation/Gender Identity) data collection training FY16-17.
  - FY17-18: prepare for expanded data collection
  - July 2018: Expand collection of demographics, collect PEI referral data
- Feedback:
  - DUMI: Providers unsure about the understanding that ROIs are not needed. They would like that in writing, and some will still want to do ROIs. Is it the same for Teens?
  - Demographics: Not having Latino under Race is confusing for clients. Look at reorganizing Race/Ethnicity (see SF approach). Assigned Gender: Need Intersex. Sexual Orientation: Teens have other categories (ie mostly straight). Disability question likely to get a lot of people checking them even if do not meet criteria of limiting major life activity.

**Questions raised about connecting clients to services:**

- Beacon: not functioning well.
- Have Jenny Bates come to PEI Mtg
- Get intake form so know better who is likely to be eligible for County services

**Ethnicity Guidelines** (See SF document)

- Common understanding is race is biological and ethnicity is cultural, but SF and others recognize them all as socially constructed.