



Draft 6 MHSA

Representative Stakeholder Steering Committee



Behavioral Health & Recovery Services
Mental Health Services Act

Planning Meeting

May 30, 2014

MHSA Representative Stakeholder Steering Committee



Welcome and Introductions



Today's Agenda

- Brief Review of MHSA/Community Planning Process
- Introduce MHSA Theory of Change Framework
- Process Theory of Change framework - CSS
- Review current CSS proposals
- Feedback
- PEI and Innovation to be discussed next meeting

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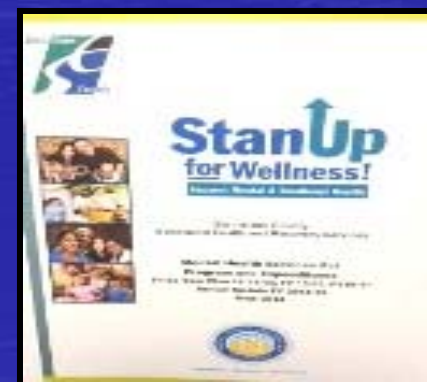
**You must be the
change you wish
to see in the
world.**

- Mahatma Gandhi

Recap of Meetings on March 17 and April 1, 2014



- Shared outcomes/highlights from MHSA funded programs for FY 2012-2013
- Reviewed MHSA Budget and 3-Year Expenditure Plan for Annual Update
- Approved 9 projects



MHSA Components



- Community Services and Supports (CSS)
- Prevention and Early Intervention (PEI)
- Workforce Education and Training (WE&T)
- Capital Facilities/ Technological Needs (CF/TN)
- Innovation



MHSA Values

- ❑ Community collaboration
- ❑ Cultural competence
- ❑ Client/family driven mental health system
- ❑ Wellness, recovery, and resiliency focus
- ❑ Integrated service experiences for clients and family

Community Planning Process (2005)

- Prescribed/Guided by MHSA Statute, State Guidelines, Community Planning
- Maintain commitment to service, support, assistance
- Increase access to services for unserved and underserved populations
- Develop strategies to overcome stigma and discrimination
- Reduce negative outcomes of untreated mental illness...suicide, incarceration, homelessness, school failure, prolonged suffering, unemployment



CSS Priority Target Populations



- Across age categories
 - Child/Youth, TAYA, Adult, Older Adult
- Unserved/Underserved
- Individuals with severe mental illness (SMI)
- Seriously emotionally disturbed (SED) children

"Would you tell me, please, which way I ought to go from here?"

"That depends a good deal on where you want to get to."

"I don't much care where."

"Then it doesn't much matter which way you go."



- Lewis Carroll
Alice in Wonderland

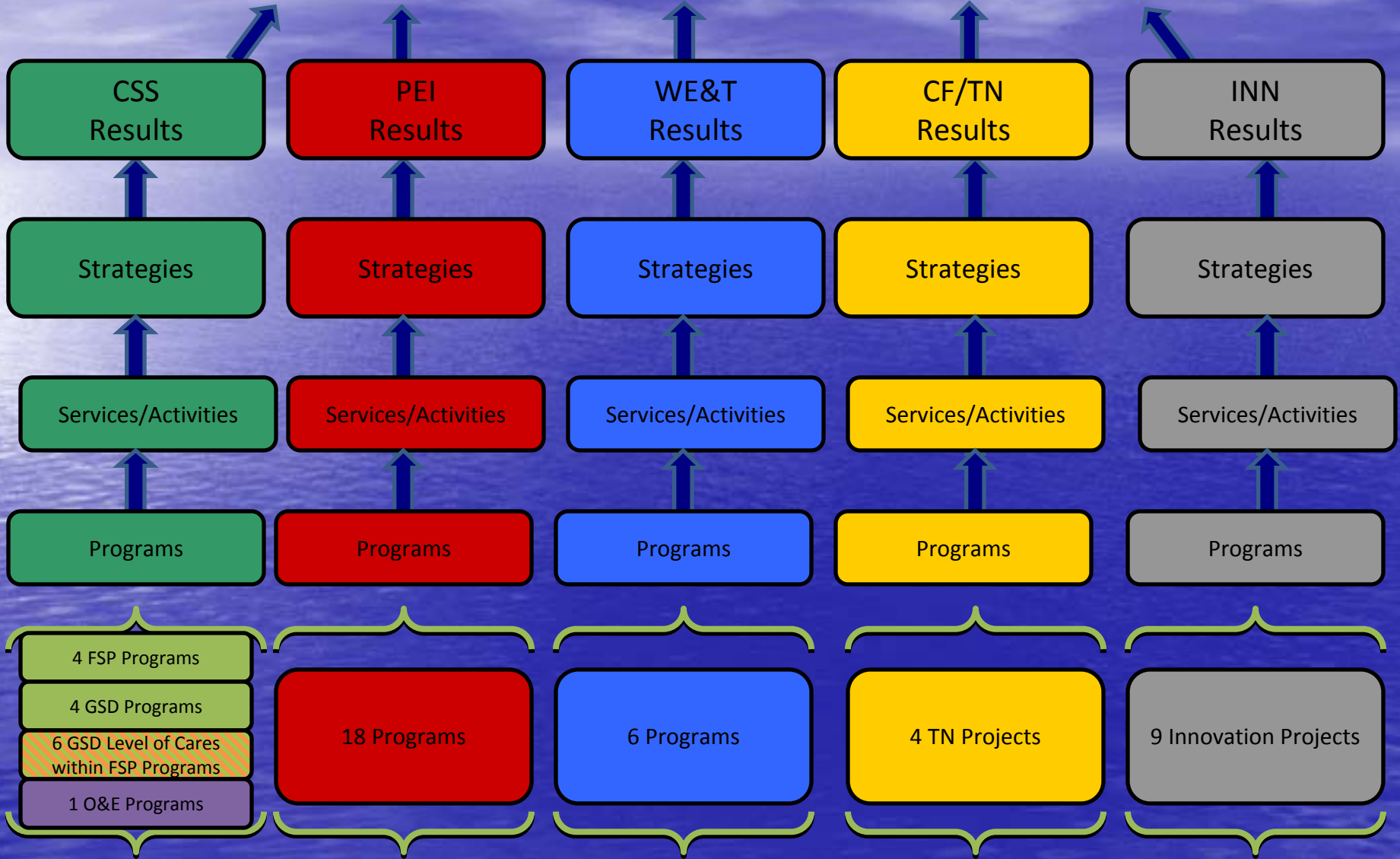




Theory of Change Framework

- Causal Framework of HOW and WHY a change process will occur
- Focus first on the result/outcome
- Strategies/interventions/activities are based on results
- Specifies assumptions and identifies rationales for strategies/interventions/activities
- Measurement is built in – basis for monitoring and evaluation
- Visual

MHSA Long-Term Result: Wellness, Recovery, & Resilience for Identified Populations



**MHSA Long-Term Result:
Wellness, Recovery, & Resilience for Identified Populations**

CSS Results:

Elimination of disparity in access

Improvement of mental health outcomes for racial/ethnic populations and other unserved and underserved populations

FSP Results:

- Decreased incarcerations
- Decreased psychiatric hospitalizations
- Decreased medical hospitalizations
- Decreased homelessness
- Increased employment

GSD Results:

- Decreased Stigma
- Increased self-care
- Increased access to community resources
- Decreased need for extensive and expensive services

O&E Results:

Diverse and underserved communities are reached

Strategies

FSP

GSD

O&E

Targeted Population

Targeted Population

Targeted Population

Services/Activities

Services/Activities

Services/Activities

Programs

Programs

Programs

- FSP-01 (Four FSP LOCs)
- FSP-02 (One FSP LOC)
- FSP-05 (One FSP LOC)
- FSP-06 (One FSP LOC)

- GSD-01 Fast TRAC & Wellness (FSP-01)
- GSD-02 ISS & Wellness (FSP-05)
- GSD-04 ISS & Wellness (FSP-06)
- GSD-05

O&E-02

Stakeholder Input

- Community-based peer support
- Expand and enhance the continuum of outpatient care for all ages
- Outreach to diverse underserved communities
- Expand full service partnership programs



Additional Input

- Building on prior success
- Personnel with lived experience for the PHF
- Increase family access to peer navigators
- Employment opportunities for peer group supporters in Mental Health
- Strengthen referral services for students/schools
- Youth Leadership
- Student Mental Health Initiative
- Build a family movement with Promotores as an example

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There is no power greater than a community discovering what it cares about.
- Margaret Wheatley, Author





BREAK



- Is the theory of change clear to you?
- What questions do you have about the theory of change you just heard?

Planning Regulations and Strategies

- 51% FSP- BHRS to adjust funding up or down in FSP's and/or GSD's to maintain mandated ratio
- Target 25% Reserve Level – Contingency in multi-year plans to adjust existing stakeholder approved projects up or down to reach targets

MHSA Long-Term Result:
Wellness, Recovery, & Resilience for Identified Populations

CSS Results:
Elimination of disparity in access
Improvement of mental health outcomes for racial/ethnic populations and other unserved and underserved populations

FSP Results:
•Decreased incarcerations
•Decreased psychiatric hospitalizations
•Decreased medical hospitalizations
•Decreased homelessness
•Increased employment

FSP Strategy

Proposed Services/Activities

Targeted Population:
TAYA with SMI

Targeted Population:
Individuals with SMI from diverse cultural/ethnic populations

Targeted Population:
Individuals with SMI currently placed, at-risk for, or exiting institutional settings.

Expand capacity to provide:
•Integrated intensive community services and supports
•24/7 availability

•Navigation supports for family, clients and community
•Community education & awareness of FSP, treatment services and peer supports

•ISA 24/7
•12:1
•Wraparound

Proposed Programs

FSP-01
Josie's TRAC
12 slots

FSP-01
FSP Access & Supports

FSP-07
TP-ISA

MHSA Long-Term Result:
Wellness, Recovery, & Resilience for Identified Populations

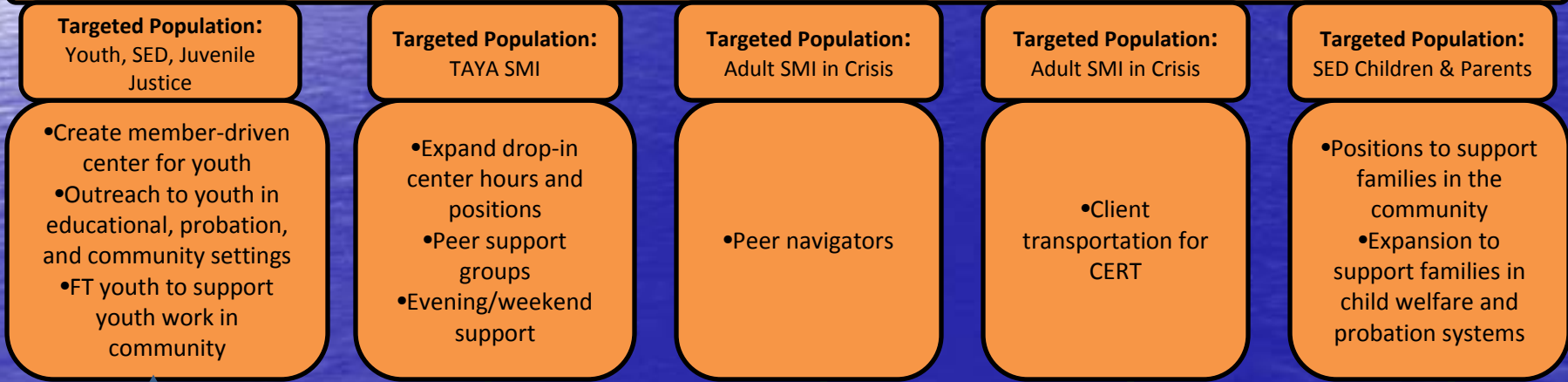
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GSD Results:

- Decreased Stigma
- Increased self-care
- Increased access to community resources
- Decreased need for extensive and expensive services

GSD Strategy

Proposed Services/Activities



Proposed Programs



MHSA Long-Term Result:
Wellness, Recovery, & Resilience for Identified Populations

CSS Results:
Elimination of disparity in access
Improvement of mental health outcomes for racial/ethnic populations and other underserved and underserved populations

O&E Results:
Diverse and underserved
communities are reached

O&E Strategy

Proposed Services/Activities

Targeted Population:
Adult Homeless SMI

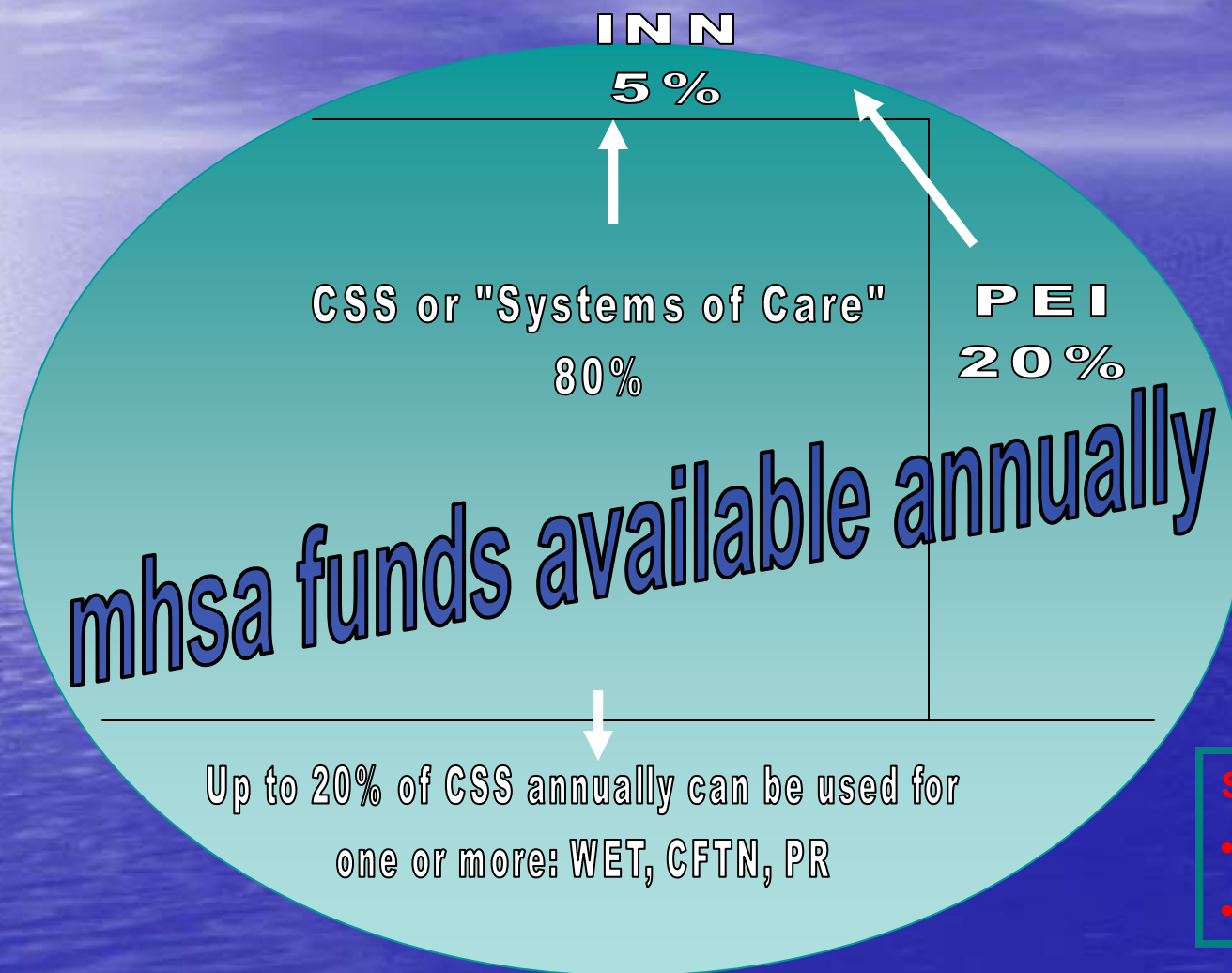
Housing center enhancements
to expand:
•Engagement through intensive
transitional support
•Connections/referrals

Proposed Programs

O&E-02
Garden Gate Respite Housing



MHSA Funding 101



Sustainable level

- CSS- \$12 M
- PEI- \$3 M



NEW BALLGAME

Prevention and Early Intervention (PEI)

Estimated Funding Available

- \$783,000 FY 2014-2015
- \$783,000 FY 2015-2016
- \$783,000 FY 2016-2017



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NEW BALLGAME

Innovation

Estimated Funding Available

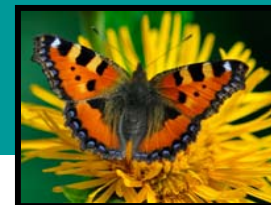
– \$1.3 million over two fiscal years

FY 2014-2015

FY 2015-2016



Current Proposed CSS Projects



Community Services & Support (CSS)	FY2014/15	FY2015/16	FY2016/17
Crisis Stabilization Unit (CSU) Design & Construction	\$ 944,000	\$ -	\$ -
CSU Operational Costs	\$ -	\$ 1,164,000	\$ 1,280,000
FSP-01 Josie TRAC	\$ 139,000	\$ 145,000	\$ 149,000
FSP-01 FSP Access and Supports	\$ 128,000	\$ 133,000	\$ 138,000
FSP-07 Turning Point ISA	\$ 628,000	\$ 652,000	\$ 675,000
O&E-02 Garden Gate Respite Housing	\$ 364,000	\$ 364,000	\$ 364,000
GSD-01 Josie Place	\$ 131,000	\$ 131,000	\$ 131,000
GSD-02 CERT/Warmline	\$ 321,000	\$ 321,000	\$ 321,000
GSD-04 Families Together	\$ 358,000	\$ 358,000	\$ 358,000
GSD-05 Consumer Empowerment Center	\$ 58,000	\$ 58,000	\$ 58,000
FSP-02 Juvenile Justice (GSD Funds)	\$ 226,000	\$ 235,000	\$ 243,000
Total Estimated CSS Funding	\$3,297,000	\$3,561,000	\$3,717,000

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- Allowing the department to $\pm 25\%$ CSS, PEI and WET programs that have been previously approved to meet changes in the targeted population, services/strategies.
- Funding operational costs not to exceed \$291,000 for the CSU in FY2014/2015 in the event the construction phase complete prior to July 1, 2015.
- Establish a 25% operational reserve based on current estimated annual MHSA funding allocation as noted in the table below:

	CSS	PEI	INN	Total
Estimated Funding Allocation	\$12,300,000	\$3,100,000	\$810,000	\$16,210,000
25% Contingency	\$ 3,075,000	\$ 775,000	\$202,500	\$ 4,052,500

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- Transferring CSS funding to WET and CFTN in FY 2015/16 & FY 2016/17 to fund ongoing operation costs as noted in the table below

	FY2015/16	FY2016/17
Workforce Education & Training (WET)	\$ 73,000	\$ 358,000
Capital Facilities & Technology Needs (CFTN)	\$ 324,000	\$ 915,000
Total Estimated Transfers to WET & CFTN	\$ 397,000	\$ 1,273,000

TOC Template

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Wellness, Recovery, & Resilience for Identified Populations

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- FSP Results:**
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FSP Strategy

Proposed Services/Activities

Targeted Population:

Targeted Population:

Targeted Population:

Services/Activities

- _____
- _____
- _____

Services/Activities

- _____
- _____
- _____

Services/Activities

- _____
- _____
- _____

Proposed Programs

Program:

Program:

Program:

Next Steps



Next Meeting – June 13, 2014
Sutter Health Education Center
1- 4 pm

- PEI
- Innovation

Next Steps

- Return Feedback Form
- Final Reflections/Questions?
- Stakeholder Meeting Schedule
 - Friday, June 13, 2014
 - Friday, June 20, 2014
 - Friday, July 18, 2014



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**Thank you for your
partnership!**