

# BHRS-MHSA Newsletter

## BHRS Mission

In partnership with our community, our mission is to provide and manage effective prevention and behavioral health services that promote the community's capacity to achieve wellness, reliance, and recovery outcomes.

## MHSA Five Essential Elements

- Community Collaboration
- Cultural Competence
- Client/Family-Driven Mental Health Systems
- Wellness for Recovery & Resilience
- Integrated Service Experiences

**"We are excited about lessons learned and the future it will lead us to."**

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Any questions or suggestions regarding the newsletter, please forward them to Karen Hurley, [khurley@stanbhirs.org](mailto:khurley@stanbhirs.org) or Pete Duenas, [pduenas@stanbhirs.org](mailto:pduenas@stanbhirs.org)

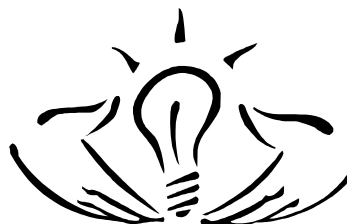
...a newsletter to share with you reflections about the four aspects of our long term change initiative: Community Capacity Building, Leadership Development, A Focus on Results, and Fiscal Sustainability...

**Stanislaus County Behavioral Health and Recovery Services**  
*A Mental Health, Alcohol and Drug Service Organization*

Volume 5, Issue 2

## INNOVATION AND TECHNOLOGICAL NEEDS

By Karen Hurley, MFT, MHSA Planning Coordinator



We are so pleased to announce that Innovation and Technological Needs (TN) Projects are moving along and now available for public review. As always, to develop these projects, BHRS has engaged stakeholders using outreach and other methods that sought to ensure diverse input.

These two components have expanded our scope and emphasized two unique opportunities; try something new that contributes to learning in the field of mental health with Innovation and, with Technological Needs, to develop projects that focus on modernizing and transforming information systems as well as improving consumer and family member access to computing resources including a personal health record. We are excited about lessons learned and the future it will lead us to.

These projects were developed consistent with the guidelines in California State Department of Mental Health (DMH) Information Notice #10-21, #09-02, and #08-09, the framework of BHRS Vision and Mission, MHSA Essential Elements (a.k.a. General Standards), and input from local stakeholders and agency partners. Over the course of six months, nine (9) new Innovation Projects, two (2) new and one (1) expanded Technological Needs Projects were developed. The draft is offered for 30-day public review and comment from June 24, 2011 to July 23, 2011. During the 30-day public review and comment period, an informational meeting will be conducted on July 19,

2011, 4:00–5:00 p.m., at Behavioral Health and Recovery Services, 800 Scenic Drive, Main Conference Room, Modesto, California, 95350.

All community stakeholders are urged and invited to participate by reading the proposed projects during the public review period and attend an informational meeting. All public comments will be considered and substantial comments included, as appropriate, prior to required submission to the State. Comments may be submitted through a Comment Form in English or Spanish attached to the document, at the informational meeting, via the Stanislaus County MHSA website [www.stanislausmhsa.com](http://www.stanislausmhsa.com), and via e-mail or by phone to the MHSA Planning Coordinator [khurley@stanbhirs.org](mailto:khurley@stanbhirs.org) or 209-525-6247.

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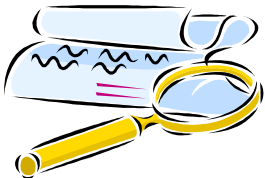
**“a Budget Trailer Bill  
that amends the  
Mental Health  
Services Act  
(MHSA) statute”**

**NEW NAME  
NEW LOCATION**

*High Risk Health &  
Senior Access,  
formerly SATT/  
SART and Health  
Mental Health  
Team, is now  
located at 303  
Downey Avenue,  
Modesto, CA 95354.  
Phone #'s: 525-  
4920 & 525-4938;  
interim fax #:  
558-4226.*



**“...participation in  
CSS programs is  
strongly associated  
with substantial  
reductions in  
homelessness and  
acute psychiatric  
hospitalizations...  
reductions in arrests  
and incarcerations”**



# BHRS-MHSA Newsletter



## Assembly Bill100 (AB100)

By Karen Hurley, MFT, MHSA Planning Coordinator

Effective March 24, 2011, Governor Brown signed Assembly Bill100 (AB100), a Budget Trailer Bill that amends the Mental Health Services Act (MHSA) statute. AB100 authorizes a one-time redirection of MHSA funds, deemed an emergency measure to preserve mental health service in counties, of MHSA funds to fund Specialty Mental Health Medi-Cal Managed Care, Early Periodic Screening, Diagnosis, and Treatment (EPSDT), and Educationally-Related Mental Health Services (AB3632). AB100 also makes some significant

changes to the parts of MHSA statute related to administrative functions. The effects and changes in procedures are still being sorted out at the State level, one aspect of the change is clear, briefly described here. Prior to the signing of AB100, counties were required to submit Component Plans (after 30 day local review) for approval by DMH and Oversight and Accountability Commission (OAC) prior to release of funds. As a result of AB100, DMH and OAC are no longer reviewing, commenting on or formally approving

plans or updates. The part of MHSA that addresses local planning processes are intact and stakeholder input is still required by MHSA statute and necessary for MHSA projects to be funded. AB100 amendments notwithstanding, BHRS continues to value its partnerships beyond the requirement to do so. Ongoing input and participation from diverse communities and agency partners will continue to be sought, included and honored as we go forward into these uncertain and confusing economic times.

## Statewide Evaluation News

By Karen Hurley, MFT, MHSA Planning Coordinator

On May 26, 2011, researchers from the University of California, Los Angeles (UCLA) presented findings on the first evaluation of statewide impacts regarding the positive outcomes associated with participation in Proposition 63 Community Services and Supports (CSS) programs to the California Mental Health Services Oversight and Accountability Commission (MHSAOAC). The report shows that participation in CSS programs is strongly associated with substantial reductions in homelessness and acute psychiatric hospitalizations. The UCLA findings also show

participation in CSS programs is associated with reductions in arrests and incarcerations for most age groups.

### Introduction of the Report :

One of the first tasks of the statewide evaluation of the Mental Health Services Act (MHSA) was to review, summarize, and synthesize existing evaluations and studies of Community Services and Supports (CSS) in terms of their impact on consumer outcomes. A summary and synthesis about the impact of CSS programs is timely because there has not been a statewide evaluation of the effort to date. This evaluation brief

begins with a summary of findings on seven key consumer outcomes. Findings are followed by recommendations to guide next steps in evaluation efforts.

Stanislaus County's data regarding CSS programs is included in these findings. To review the full 26 page report, go to the link below or email/call us we can assist with copies—Teresa Garibay 209-525-6247 or [tgairibay@stanbhhs.org](mailto:tgairibay@stanbhhs.org).

Link to full UCLA Report:  
[http://mhsoac.ca.gov/Meetings/docs/Meetings/2011/May/OAC\\_052611\\_Tab8\\_UCLAEvalBrief.pdf](http://mhsoac.ca.gov/Meetings/docs/Meetings/2011/May/OAC_052611_Tab8_UCLAEvalBrief.pdf)