



MHSA

Representative Stakeholder Steering Committee

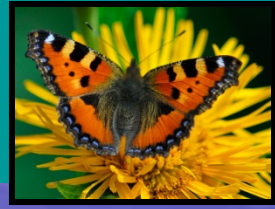
Behavioral Health & Recovery Services
Mental Health Services Act



Planning Meeting

June 20, 2014

MHSA Representative Stakeholder Steering Committee



Welcome and Introductions

MHSA Representative Stakeholder Steering Committee



Today's Agenda

- Recap of June 13 Meeting
- Review Role of MHSA Representative Stakeholders
- Prevention and Early Intervention (PEI) Theory of Change
- Hear PEI Proposals/Ideas
- Roundtable Discussions

Break

- Innovation (INN) Theory of Change
- Hear INN Proposals/Ideas
- Roundtable Discussions
- Representative Stakeholder Consultation
- Group Activity on Priorities
- Next Steps/Close

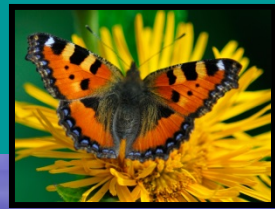
Recap of Meeting on June 13, 2014



- Reviewed Prevention and Early Intervention (PEI) and Innovation (INN) components and Theory of Change framework
- Heard about 2 CSS Proposals/1 BHRS PEI Proposal
- Shared information on estimated funding and proposal process/RFPs



MHSA Components/Funding Areas



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

MHSA Representative Stakeholder Steering Committee Meeting

MHSA Values

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

About the MHSA Representative Stakeholder Steering Committee

BACKGROUND

- Stakeholder input is a requirement of MHSA
- Committee is broad representative group of Stanislaus County stakeholders



About the MHSA Representative Stakeholder Steering Committee

RESPONSIBILITIES

- Provide guidance in establishing initial priorities for component plans of MHSA
- Provide input to BHRIS
- Appointed by BHRIS Director
- Serve various communities/are the voice of their respective communities
- Representatives have alternates to represent their community's interests
- Community members always welcomed but representatives have specific responsibilities to gather/report community input



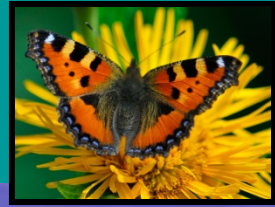
About the MHSA Representative Stakeholder Steering Committee

WHO MAKES UP THE COMMITTEE?

Representatives from various communities include:

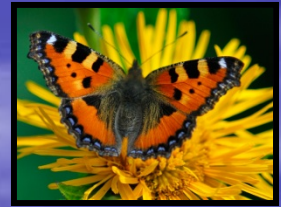
- Education
- Health Care
- Social Services
- Senior Services
- Consumer Partners
- Family Member Partners
- BHRS Staff
- Health Care: Public/Private
- Regional Areas
- CEO's office
- Contract Providers of Public Mental Health Services
- Courts
- Private/Public Housing
- Diverse communities
- Law Enforcement
- Probation
- Public Mental Health Labor Organization

MHSA Planning



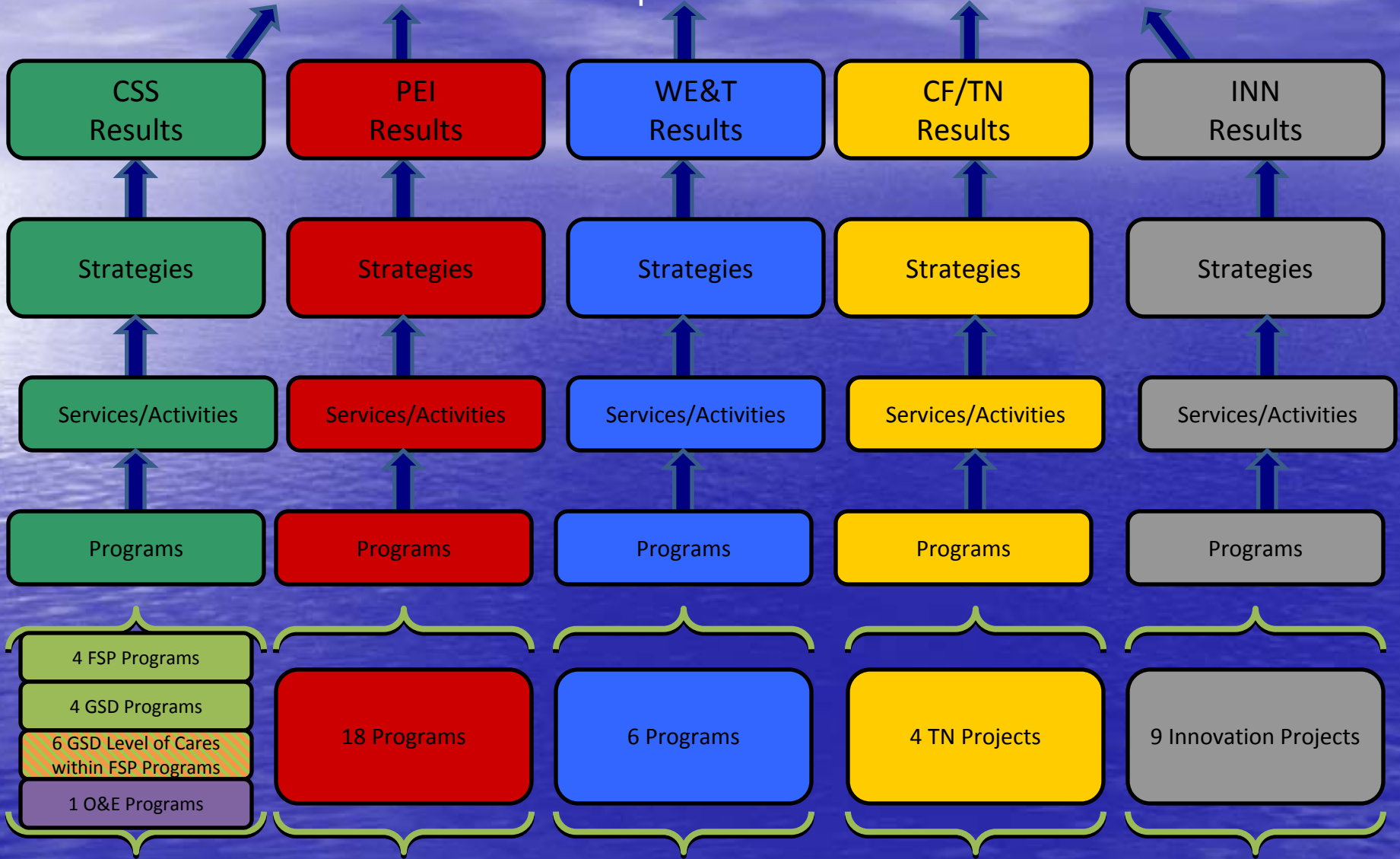
- MHSA Statute, Regulations, and Guidelines
- Representative Stakeholder Input
- BHRS Capacity to implement funds

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

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

Prevention & Early Intervention Results:

Reduced stigma & discrimination – Increased timely access to underserved & unserved populations – Decreased negative outcomes that may result from untreated mental illness (suicides, incarcerations, school failure or dropouts, unemployment, homelessness, removal of children from their homes and prolonged suffering)

Universal Prevention Results:

- Mental health awareness
- Increased knowledge about mental health, mental illness (SMI/SED), and early signs of mental illness

Selective Prevention Results:

- Increased knowledge about mental health, mental illness (SMI/SED) and signs
- Individuals at risk for SMI/SED are engaged & supported
- Reduced risk factors for SMI/SED
 - Developed/strengthened protective factors

Indicated Prevention Results:

- Individuals exhibiting onset of SMI/SED or with MH issues and their families are:**
- Engaged
 - Supported
 - Screened/referred

Early Intervention Results:

- Individuals exhibiting onset of SMI/SED or with MH issues and their families are provided services in a timely manner

Strategies

Promotion of Mental Health

Mental health training & education

Outreach & engagement

Community support

Community capacity building

Screening & Referral

Peer Support

Brief Counseling Intervention

Stanislaus County residents

- Underserved/Unserved
- Individuals at risk for SMI/SED

- Individuals exhibiting onset of SMI
- Individuals with MH issues
- Families of those with MH issues

- Individuals exhibiting onset of SMI
- Individuals with MH issues
- Families of those with MH issues

Services/Activities

Services/Activities

Services/Activities

Services/Activities

Programs

Programs

Programs

Programs

4 programs

15 programs

7 programs

6 programs

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

Prevention & Early Intervention Results:
Reduced stigma & discrimination – Increased timely access to underserved & unserved populations – Decreased negative outcomes that may result from untreated mental illness (suicides, incarcerations, school failure or dropouts, unemployment, homelessness, removal of children from their homes and prolonged suffering)

Universal Prevention Results:

- Mental health awareness
- Increased knowledge about mental health, mental illness (SMI/SED), and early signs of mental illness

Strategies

Mental health training & Education

Services/Activities

Targeted Population:
All Stanislaus County Residents

Services/Activities:

- County-wide information and resources about mental health, signs of mental illness, and suicide prevention
 - Personal experience sharing
 - Resource guides and websites

Programs

- Mental Health Promotion Campaign
 - Friends Are Good Medicine
 - In Our Own Voice
 - PEI/Statewide Campaign

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

Prevention & Early Intervention Results:
Reduced stigma & discrimination – Increased timely access to underserved & unserved populations – Decreased negative outcomes that may result from untreated mental illness (suicides, incarcerations, school failure or dropouts, unemployment, homelessness, removal of children from their homes and prolonged suffering)

Selective Prevention Results:
Increased knowledge about mental health, mental illness (SMI/SED) and signs - Individuals at risk for SMI/SED are engaged & supported –
Reduced risk factors for SMI/SED - Developed/strengthened protective factors

Strategies

- Mental health training & education
- Outreach & engagement
- Community support
- Community capacity building
- Screening & Referral
- Peer Support

Services/Activities

Targeted Populations:
• Underserved/Unserved
• Individuals at risk for SMI/SED

Services/Activities:
See handouts

Programs

- Asset-Based Community Development
- Promotores & Community Health Workers
- The Community Outreach and Engagement
- Student Assistance and School-based Consultation
- Faith/Spirituality Behavioral Health Integration
- Leadership and Resiliency Program
- In Our Own Voice/Parents & Teachers as Allies
- Mental Health Promotion Campaign
- Friendly Visitor
- Senior Center Without Walls
- Friends Are Good Medicine
- PEI/Statewide Campaign
- Children Are People
- Expanded Child Sexual Abuse Prevention & Early Intervention
- Early Psychosis Prevention (LIFE Path)

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

Prevention & Early Intervention Results:

Reduced stigma & discrimination – Increased timely access to underserved & unserved populations – Decreased negative outcomes that may result from untreated mental illness (suicides, incarcerations, school failure or dropouts, unemployment, homelessness, removal of children from their homes and prolonged suffering)

Indicated Prevention Results:
Individuals exhibiting onset of SMI/SED or with MH issues and their families are:
Engaged – Supported - Screened/referred

Strategies

Outreach & engagement

Community support

Community capacity building

Screening & Referral

Peer Support

Services/Activities

Targeted Population(s):

- Individuals exhibiting onset of SMI
- Individuals with MH issues
- Families of those with MH issues

Services/Activities:

See handouts

Programs

- Promotores and Community Health Workers
 - Faith/Spirituality Behavioral Integration
- The Community Outreach and Engagement
 - Friends Are Good Medicine
 - In Our Own Voice
- Early Psychosis Intervention: LIFE Path
- Expanded Child Sexual Abuse Prevention and Early Intervention

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

Prevention & Early Intervention Results:
Reduced stigma & discrimination – Increased timely access to underserved & unserved populations – Decreased negative outcomes that may result from untreated mental illness (suicides, incarcerations, school failure or dropouts, unemployment, homelessness, removal of children from their homes and prolonged suffering)

Early Intervention Results:
• Individuals exhibiting onset of SMI/SED or with MH issues and their families are provided services in a timely manner

Strategies

Screening & Referral

Peer Support

Brief Counseling Intervention

Services/Activities

Targeted Population(s):
• Individuals exhibiting onset of SMI
• Individuals with MH issues
• Families of those with MH issues

Services/Activities:
See handout

Programs

- Aggression Replacement Training (ART)
- Expanded Child Sexual Abuse Prevention and Early Intervention
- Early Psychosis Intervention: LIFE Path
 - PEARLS & Senior Peer Counseling
- Health/Behavioral Health Integration

MHSA Representative Stakeholder Steering Committee



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



Prevention and Early Intervention (PEI)

- Share out PEI Proposals/Ideas
- Roundtable Discussions



BREAK



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



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

Innovation Result:
Development of new best practices in mental health

Results:
Increased interagency & community collaboration for MH services or supports

Results:
Increased quality of MH services

Results:
Increased access to underserved populations

Results:
Increased access to mental health services

Strategies

Introduce a mental health practice or approach that is new to the overall MH system

Make a change to an existing practice in the field of mental health

Applies to the MH system a promising community-driven practice or approach that has been successful in non-mental health contexts or settings

Targeted mental health adaptive dilemma

Targeted mental health adaptive dilemma

Targeted mental health adaptive dilemma

Services/Activities

Services/Activities

Services/Activities

Programs/Projects

Programs/Projects

Programs/Projects

5 projects

3 projects

4 projects

Mental Health Adaptive Dilemma

Defined:

A mental health challenge that cannot be resolved through habitual or known responses

MHSA Representative Stakeholder Steering Committee



NEW BALLGAME

Innovation

Estimated Funding Available

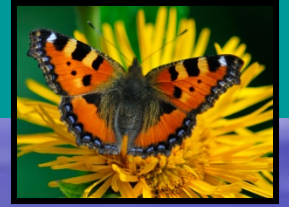
– \$1.3 million over two fiscal years

FY 2014-2015

FY 2015-2016



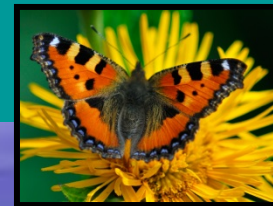
Innovation



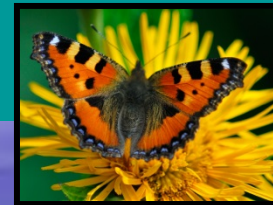
Share out INN
Proposals/Ideas

Roundtable
Discussions





Representative Stakeholder Consultation



Group Activity on Priorities

Prioritizing

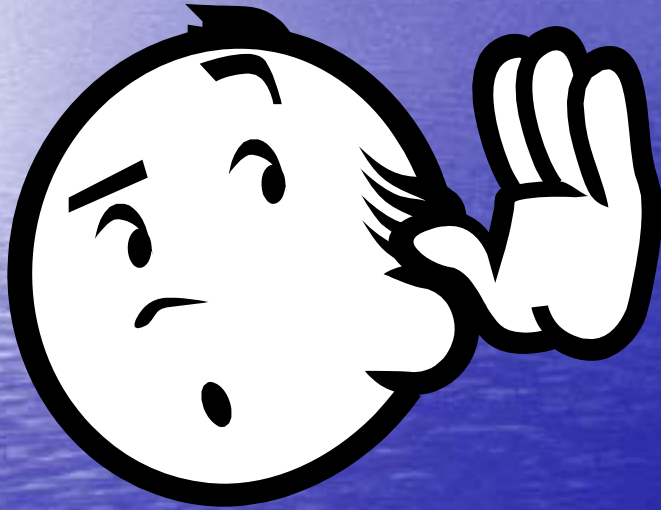
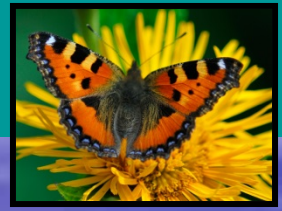


Green=3 points

Yellow=2 points

Blue=1 point

Next Steps



- What questions do you have?

Next Steps

- Return Feedback Form
- Final Reflections/Questions?

Next Meeting

July 18, 2014

1-4 pm

Sutter Health Education Center

www.stanislausmhsa.com





Thank you for your
partnership!