Behavioral Health and Recovery Services
Mental Health Services Act – Innovation Project(s) Planning
October/November 2010

Stanislaus County Behavioral Health and Recovery Services (BHRS) is preparing to release a Request for Proposals for Innovative Projects in Fall 2010. Funds for these projects are from the Mental Health Service Act Innovation Component and can only be used for projects that <u>contribute to learning</u> in mental health/behavioral health. To help community partners learn about this opportunity, BHRS is conducting orientation workshops in five locations around Stanislaus County: Modesto, Riverbank, Ceres, Patterson and Turlock. These workshops are not bidder's conferences; attendance is voluntary. All materials from the outreach workshops are available at www.stanislausmhsa.com.

What follows is a summary of information presented at the workshops.

1. **The Givens (from MHSA Guidelines)**
   o <u>Primary Purpose of Projects</u>
     - Contribute to learning rather than provide services to address unmet need. Services are ok; they just can't be the point of the project
     - Must include one or more MHSA essential elements (the more the better): community collaboration; creating integrated service experiences; promoting wellness, recovery, and resiliency; creating a consumer- and family-driven mental health system; and creating a culturally competent system of care
     - May add a learning strategy to an approved Community Services & Supports (CSS), Workforce Education & Training (WET) or Prevention Early Intervention (PEI) program (but not required)
     - No time limit on projects—can go on until learning occurs
     - Once the project has achieved and documented its learning, Innovation funds can no longer be used. To continue the services or other activities involved in the project beyond the learning, the project organizers must identify and access other funding
   o <u>Potential Focus of the Project</u> (one is better than more)
     - Increase access to underserved groups
     - Increase the quality of services, including better outcomes
     - Promote interagency collaboration
     - Increase access to services
   o <u>Potential Contributions to Learning</u>
     - Introduces new mental health practices/approaches…that have never been done before
     - Makes a change to an existing mental health system practice/approach, including adaptation for new setting or community
     - Introduces a new application to the mental health system of a promising community-driven practice/approach or a practice/approach that has been successful in a non-mental health context

2. **Working Definitions**
   o Community: a group of individuals who have sufficiently strong relationship to be able to provide tangible support to each other and act together
   o Learning Edge: a place where focused learning can significantly advance the transformation of the system

Contact Information prior to release of RFP: Karen Hurley 525-6229 khurley@stanbhrs.org
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3. **BHRS Priorities and Commitments**
    o   Focus toward projects that emphasize community ownership of increased emotional health and well being for all
    o   Focus on supporting projects to the conclusion of learning
    o   Support sustainability where appropriate
    o   Open to both large and small projects
    o   Open to projects that contribute to learning with specific populations (including, but not limited to, Veterans, LGBTQ, older adults, specific ethnic/cultural groups, physical health interface with emotional health and wellness, family respite, specific neighborhoods or communities in outlying areas of county)
    o   Community-developed and driven proposals
    o   Projects that address the priority learning edges to help support and accelerate our county-wide transformation (see list below)
    o   Projects that will achieve their learning in 1-2 years

4. **Privileged Scoring for Projects that Incorporate these Priorities**
    o   Community-developed and driven proposals
    o   Projects that address the priority learning edges to help support and accelerate our county-wide transformation (see list below)
    o   Projects that will achieve their learning in 1-2 years

5. **BHRS staff-initiated project Ideas**
    o   BHRS ideas may also be developed with community partners
    o   BHRS staff who develop and submit projects will be excluded from scoring and decision-making process
    o   BHRS project ideas are available to all potential bidders to avoid appearance or actual conflict of interest
    o   BHRS projects will not be given higher score other than as indicated for all projects

6. **BHRS Priority Learning Edges**
    o   Learning Edge: a place where focused learning can significantly advance the transformation of the system
    o   Priority learning edges have been developed to help support and accelerate county-wide transformation
    o   BHRS is sharing priority learning edges at potential contractor outreach workshops prior to release of RFP
    o   Priority learning edges were developed with stakeholder input

    o   <u>Issue:</u> Connecting people receiving services to community-based supports
        ▪   Learning questions:
            •   How can people providing services encourage people receiving services to connect with community-based supports that focus on their interests, passions, and strengths instead of their symptoms, illness or diagnosis?
            •   Does making these connections to community-based supports improve the experience of recovery and decrease the length of time and intensity of needed treatment?

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- o Issue: Honoring and identifying more holistic approaches to well-being
  - ▪ Learning questions:
    - • What will help clinicians and other service providers become more open and receptive to more holistic approaches to well-being?
    - • What will help clinicians and other service providers become more able to link their clients to appropriate information and support for more holistic approaches to well-being?

- o Issue: Improving the well-being of children, Transition Age Youth (TAY) and Transition Age Young Adults (TAYA).
  - ▪ Learning questions:
    - • Does strengthening developmental assets at an early age (ages 2 and up) help children in underserved areas improve their ability to thrive in stressful life circumstances?
    - • Do strengthening developmental assets for TAY and TAYA in underserved areas improve their ability to thrive in stressful life circumstances?
    - • How can social networking technology be used to create support for and promote the well-being of TAY and TAYA?

- o Issue: Treatment options for people struggling with both substance abuse and mental illness.
  - ▪ Learning question:
    - • Can adopting a "harm reduction" treatment strategy for substance abuse issues help improve the overall effectiveness of treatment for people with mental illness and substance abuse?

7. **LET 1000 FLOWERS BLOOM –** All Ideas are Welcome. While the Senior Leadership Team has developed priority learning edges, they will review any project submitted, including those that do not directly address the Priority Learning edges we have shared.

8. **Projected Stanislaus County Innovation Funding Summary**

Calculation of Total funds for this Round of Project Proposals	
Reverts 2012	$ 934,706
Reverts 2013	$1,233,594
Total to be allocated in this year	$2,158,300
Less 15% BHRS Administration Cost	$323,745
Amount available for projects:	$1,834,555

Anticipated* Sustainable Funding Going Forward	
Current state estimate:	~ $600,000
Less 15% Administration costs	~ $90,000
Anticipated Total annual $ projects	~$510,000
*Anticipated allocations based on future MHSA funding estimates	

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9. **Anticipated* Timeline:**
   o Potential contractor outreach workshops – October/November 2010
   o Release of RFP- *Early December 2010
   o Close of RFP – *Late January 2011
   o 30 day review/comment - *March 2011
   o Submit to OAC/DMH - *April 2011
   o Approval of projects - *July 2011

▪ Refer to Handout #2 for details regarding RFP and vendor registration process
▪ Refer to Handout #3 for details regarding date/location of other outreach workshops

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