



YOLO COUNTY: MHSA THREE-YEAR PROGRAM AND EXPENDITURE PLAN 2017– 2020

PUBLIC HEARING

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Agenda

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- Introductions and Meeting Objectives
- MHSA and CPP Overview
- Needs Assessment Key Findings
- Overview of Proposed Programs
- Public Comment

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MHSA and CPP Overview

MHSA Overview

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- Mental Health Services Act (Proposition 63) passed November 2, 2004
- 1% income tax on income over \$1 million
- Purpose of MHSA: to expand and transform mental health services in California



Community Planning Process

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The MHSAs intend that there be a **meaningful stakeholder process** to provide subject matter expertise to the **development of plans focused on utilizing the MHSAs funds at the local level**, including participation from:

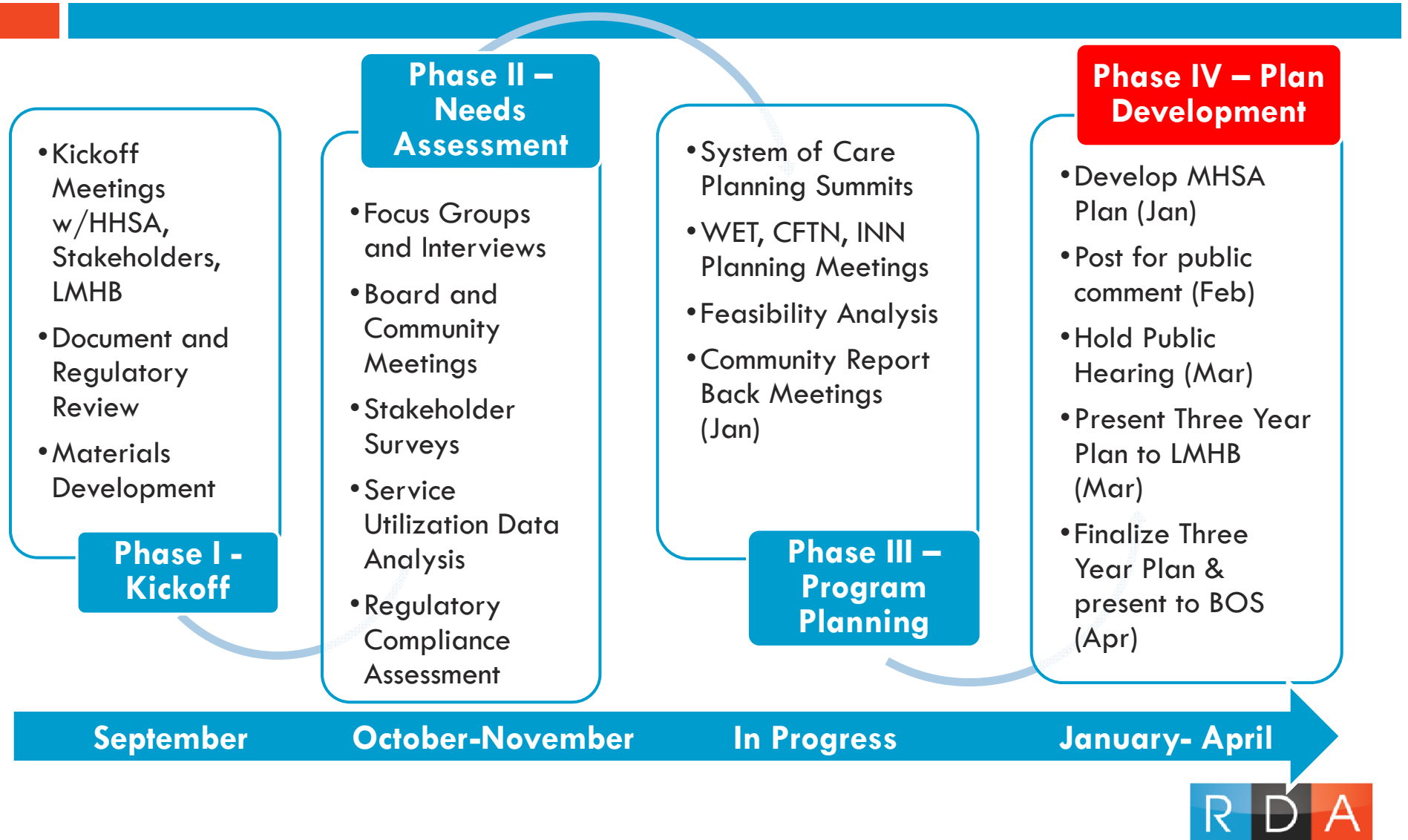
- Adults and seniors with severe mental illness
- Families of children, adults, and seniors with severe mental illness
- Providers of mental health services
- Law enforcement agencies
- Education agencies
- Social services agencies
- Veterans and representatives from veterans organizations
- Providers of alcohol and drug services
- Health care organizations
- Other important interests

Roles and Responsibilities

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- ❑ **Community Stakeholders: Collaborator**
 - ❑ Contribute to the shared understanding of community mental health needs
 - ❑ Develop proposed programs and services for the 3-year MHSA plan
- ❑ **Yolo HHSA: Administrator**
 - ❑ Outreach and convene stakeholders for the CPP
 - ❑ Contribute to plan development
 - ❑ Implement the 3-year MHSA plan
- ❑ **Board of Supervisors: Approver**
 - ❑ Approve the MHSA plan prior to MHSOAC submission
- ❑ **RDA: Planner/Facilitator**
 - ❑ Engage stakeholders in a participatory CPP process that aligns with MHSA Values
 - ❑ Develop a needs assessment and MHSA plan that is grounded in the needs of un, under, and inappropriately served populations
 - ❑ Draft a technically compliant MHSA Plan to best serve mental health needs of the community

MHSA Planning Activities and Timeline



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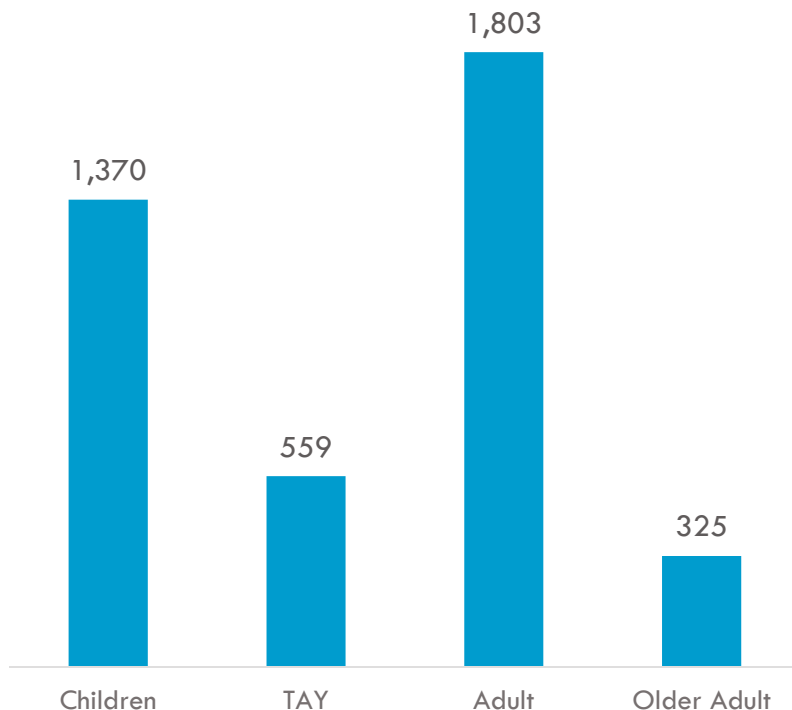
Needs Assessment

MHSA-funded System of Care

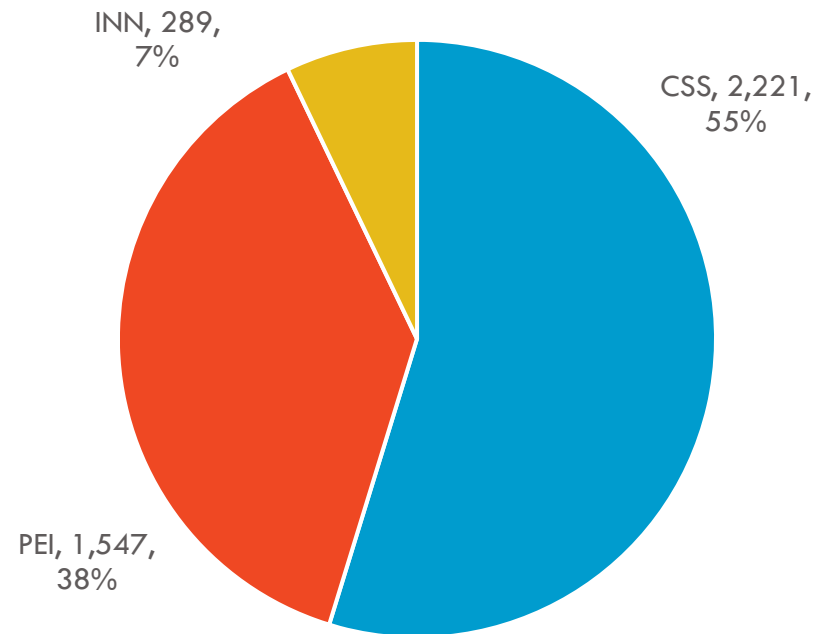
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- MHSA-funded programs served 4,513 people in FY 15/16.

Persons Served by Age



Persons Served by Component



*CIP data not included in the age and component figures.

Current Community Needs

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Service Access and Participation

- Identifying and linking individuals and families with mental health needs to the appropriate services remains challenging despite service availability.

Collaboration

- Many consumers are involved with other public and service agencies, making it confusing for consumers and other professionals. This is especially pronounced for people transitioning out of jail and/or hospital.

Crisis

- The crisis intervention program is a great asset to the community with a need to continue to move towards crisis prevention.

Cultural Competency

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- There is a need to broaden the definition of cultural competency.
- Stakeholders recommended adopting and/or formalizing a cultural competency model that:
 - ▣ Increases awareness of cultural difference and intersectionality amongst all staff and providers,
 - ▣ Includes more group, family, and community-level interventions,
 - ▣ Develops specific expertise amongst a smaller provider group, and
 - ▣ Supports consultation amongst providers.
- There is a need to focus attention on LGBT+ needs and services, including:
 - ▣ Acknowledging and documenting LGBT+ identity,
 - ▣ Addressing stigma and discrimination, and
 - ▣ Developing culturally responsive services, including those that build community.

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MHSA Proposed Plan

Plan Development Principles

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- ❑ Reduce duplication of efforts across funding sources
- ❑ Augment programs that are successfully meeting a community need
- ❑ Support identification of people in need and connection to the appropriate services
- ❑ Promote interagency collaboration
- ❑ Promote cultural responsiveness across programs

Children's System of Care Goals

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The plan responds to the community need to create a **more seamless process for children to connect to mental health services**. The planned services and modifications:

- **Implements universal processes** in which children are screened, identified, and linked to the appropriate level of care.
- **Removes duplicated clinical programs** that can be funded by other sources, including public and private insurance.
- **Increases support to access** and links children to care.

TAY System of Care Goals

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The plan responds to the community need to create **community-based location(s) with multiple levels of care**. The planned services and modifications:

- **Creates TAY-dedicated services at Wellness Centers** that include outreach and engagement, early intervention, and stigma discrimination reduction services.
- **Increases opportunities to interact with peers** through activity-based and socialization activities.

Adult System of Care Goals

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The plan responds to the community need to create **bridge the gap between crisis services and existing specialty mental health services.**

The planned services and modifications:

- **Bridges the gap for consumers** who are in and out of hospitals jails, and emergency departments to connect with ongoing services.
- **Supports access and linkage to mental health services** through centralized community based locations to meet “consumers where they are at.”
- **Removes duplicated programs** that can be funded by other sources, including grants, public and private insurance.

Proposed Programs for Children/TAY

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Children and Transition Aged Youth (TAY) System of Care

Children:

- Early Childhood Mental Health Access and Linkage Program (PEI)
- School-based Access and Linkage Program (PEI)
- Community and School Based Education and Mentorship Program (PEI)
- Children's Mental Health Program (CSS)

Transition Age Youth:

- Access/Linkage and Prevention Programs (PEI)
- TAY Wellness Center Services (PEI)
- Early Intervention Program (PEI)
- TAY Speaker's Bureau (PEI)
- Pathways to Independence (CSS)

Proposed Programs for Adults/Older Adults

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Adult and Older Adult System of Care Programs:

Adults

- Integrated Behavioral Health Services for Latino Community and Families Program (PEI)
- Community-based Navigation Centers (CSS)
- Peer and Family-led Support Services (CSS)
- Adult Wellness Alternatives (CSS)
- First Responders' Initiative/Mental Health Urgent Care (INN)
- Board and Care Study (INN)

Older Adults

- In-Home Peer Counseling Program (PEI)
- Older Adult Outreach and Assessment Program (CSS)

Component Proposed Plan

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- **Prevention and Early Intervention**

- Early Signs Project
- LGBT Initiative

- **Workforce Education and Training**

- Mental Health Professional Development
- Clinical Training Program
- Peer Workforce Development Workgroup

- **Capital Facilities**

- Wellness Center Remodeling
- Adult Residential Treatment Facility

- **Technological Needs**

- Communications Initiative
- EHR Upgrades



LMHB DISCUSSION



Next Steps

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Present plan to LMHB
Meeting (3/27/17)



Submit plan to Board of
Supervisors (4/4/17)

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