MHSA Advisory Committee (MAC)
Tuesday, February 27, 2018
Veterans Hall, San Luis Obispo
3:30pm – 5:00pm
Welcome, Introductions, and Goals for meeting

1) CSS Work Plan Review & Updates

2) PEI Work Plan Review & Updates

3) INN Work Plan Review & Updates

4) Fiscal Update

5) Old Business

6) New Business for 2017-18

7) Next Meetings:

8) Conclusion
The MHSA provides San Luis Obispo County:

- Funding, personnel, and other resources
- Supportive programs for underserved populations
- Best practices and innovative approaches
- Prevention, early intervention, treatment, and recovery
- Community partnerships and stakeholder engagement
MHSA Advisory Committee

- MHSA Advisory Committee Introductions
- Staff Introductions
• This is a somewhat informal meeting with all attendees welcome to comment, ask questions, make suggestions, etc.
• MHSA planning requires stakeholder involvement to guide and advise plans.
• Today’s meeting will update the MHSA oversight group (including original and new members) as to the implementation of the most current work plan.
• We will also provide information on work plan changes, and introduce new funding initiatives, for discussion and approval.
• We will use consensus-based decision making.
Community Services and Supports (CSS)

1. Child & Youth Full Service Partnership (SLOBHD & FCN)
2. Transitional Age Youth FSP (SLOBHD & FCN)
3. Adult FSP (TMHA & SLOBHD)
4. Older Adult FSP (Wilshire CS & SLOBHD)
5. Client & Family Wellness (TMHA, CAPSLO & SLOBHD)
6. Latino Outreach Program (SLOBHD)
7. Enhanced Crisis & Aftercare (Sierra Wellness & SLOBHD)
8. Schools and Family Empowerment (SLOBHD & CAPSLO)
9. Forensic Mental Health Services (TMHA & SLOBHD)
What is The CalVet MHSA Grant?

- Purpose: Expand and enhance county mental health services for veterans
- Supporting mental health outreach and treatment programs
- Provided by CalVet, Veterans Services Division
- Funded by passage of Prop 63 in 2004
- Up to $45,000 for 12 months
- Term: 12 months
History

• Grant administered in 4 of the last 6 fiscal years
• Funded beginning of ongoing activities
• Grant not obtained in FY 17-18
• Funded current year activities with donations, savings, subvention
• Applied for 18-19 grant on January 31, 2018
FY 18-19 CalVet MHSA Grant

- Outreach approach: Mental, Emotional, Physical health
- Goals:
  - Inform 3,000 vets of mental health services available
  - 100 veterans make mental health services appointment
  - 50 veterans keep mental health services appointment
- Maintain and establish community partnerships
- Continue and expand upon VTC
- Funding request: $37,101
Methods

• One temp help Outreach Coordinator
• Participate in community events, SRPs
• Coordinate VTC, outreach to County Jail
• Provide outreach literature, business cards, informational giveaways
• Staff satellite offices
Roles

• Outreach Coordinator – John Aparicio, japaricio@co.slo.ca.us
• Assistant Veterans Service Officers:
  • Yvette Mason, AVSO II, ymason@co.slo.ca.us
  • Sandra Gould, AVSO II, sgould@co.slo.ca.us
  • Kelly Zeller, AVSO I, kzeller@co.slo.ca.us
• Veterans Service Officer – Christopher L. Lopez, cllopez@co.slo.ca.us
• Administrative Assistants:
  • Tabitha Castillo, AA II, tcastillo@co.slo.ca.us
  • David Gutierrez, AA I, dagutierrez@co.slo.ca.us
• Administrative Services Officer – Zachary Lute, zlute@co.slo.ca.us
Prevention & Early Intervention (PEI)

1. Mental Health Awareness and Stigma Reduction (TMHA & SLOBHD)
   1. Update on Suicide Prevention Coordinator
2. School-based Wellness (CAPSLO, SLOBHD, & The LINK))
3. Family Education and Support (Center for Family Strengthening (CFS), CAPSLO)
4. Early Care and Support for Underserved Populations (Cuesta College, Public Health & Wilshire CS)
5. Integrated Community Wellness (Community Counseling Center, TMHA & SLOBHD)
PREVENTION & EARLY INTERVENTION (PEI)
PREVENTION & EARLY INTERVENTION (PEI)

PROGRAM 1:
Mental Awareness & Stigma Reduction

1.1 Transitions-Mental Health Association
   • Social Marketing

1.2 SLOBHD
   • Veteran’s Outreach

1.3 SLOBHD
   • College Wellness Program

1.4 SLOBHD
   • Suicide Prevention Coordinator

PROGRAM 2:
School-Based Wellness

2.1 Community Action Partnership of SLO
   • Positive Development Program

2.2 The LINK
   • PEI Middle School Comprehensive Program & Family Advocate
PREVENTION & EARLY INTERVENTION (PEI)

PROGRAM 3:
Family Education & Support
3.1 Center for Family Strengthening
   • Family Education, Training, & Support
3.2 Community Action Partnership of SLO
   • In-Home Parent Educator

PROGRAM 4:
Early Support for Underserved Populations
4.1 Cuesta College
   • Successful Launch
4.2 Wilshire Community Services
   • Older Adult Mental Health Initiative
4.3 SLOBHD
   • Perinatal Mood Anxiety Disorder
PREVENTION & EARLY INTERVENTION (PEI)

PROGRAM 5:
Integrated Community Wellness

5.1 Community Counseling Center
   • Community Based Therapeutic Services

5.2 Transitions-Mental Health Association
   • Integrated Community Wellness

5.3 SLOBHD
   • Young Adult Counseling
PREVENTION & EARLY INTERVENTION (PEI)

LGBTQ NEEDS ASSESSMENT – Contract FY17-18

Negotiations with Cal Poly

1. Assess mental health, wellness, and related experiences in a sample of LGBTQ Identified people living the County.
   1. Phase I: develop and provide a quantitative mental health and service utilization assessment.
   2. Phase II: proctor qualitative focus groups to be conducted with specific sub-populations (LGBTQ youth, adults/older adults, transgender and gender non-binary individuals, and participants with mental illness experience)

2. Results and report to be provided by the end of this calendar year
1. COLEGA
2. Late Life Empowerment & Affirmation Project
3. Transition Assistance & Relapse Prevention
4. Not for Ourselves Alone: Trauma Informed County
INNOVATION (INN)
INNOVATION

• Transition Assistance and Relapse Prevention Program (TARP)
• Late Life Empowerment and Affirmation Program (LLEAP)
• “Not for Ourselves Alone: Trauma Informed Care”
• Creating Opportunities for Latinas to Experience Goal Achievement (COLEGA)
INNOVATION

PROGRAM 1:
Transition Assistance and Relapse Prevention (TARP)

1.1 Transitions - Mental Health Association

• 15 unduplicated/unique clients served
• 157 duplicated contacts

• Contractual outcomes reported on 3rd and 4th quarter
INNOVATION
PROGRAM 2:
Late Life Empowerment and Affirmation Program (LLEAP)

2.1 Wilshire Community Services

- 88 one-to-one interface or group sessions
- 30 participants received assistance, counseling, and personalized plan
- 59% reduction in symptomology
- 69% reduction in depression rates
- 71% reduced hospitalizations
- 68% reduced need for mental health services
- 75% participants increased capacity to manage day-to-day basis
- 79% feel less isolated and anxious
INNOVATION

PROGRAM 3:
“Not for Ourselves Alone”

Customer Awareness Response Effort (CARE)

3.1 Behavioral Health Department

• 88 unique participants
• 251 duplicated contacts
• Library implemented Customer Response Policy & CARE principles during interview process
• Sheriff Department included a CARE communication component to New Employee Manual and provide tours to all different locations – Create a large sense of inclusiveness
• Clerk Recorder implemented internal CARE trainings
• All agencies receive a CARE Resource List
• Contractual outcomes reported on 4th quarter
INNOVATION

PROGRAM 4:
Creating Opportunities for Latinas to Experience Goal Achievement (COLEGA)

4.1 Women’s Shelter Program of SLO
• YTD clients: 42
• 2 groups of Latina Power & 1 Art Group every quarter
• 65% of clients completed all 12 weeks sessions
• 58% of clients provided feedback on each of the peer counselors
• 58% of clients joined on-going support groups
• 33% of clients demonstrated a reduction in depression levels
• 20% of clients demonstrated an increase in resiliency and outlook in life
INNOVATION

FY 2018-19
Potential to add up to $300K

FY 2019-20
Potential to add up to $200K
INNOVATION

What is innovation?

• Innovation is focused on learning, not on implementation.

• Innovation funds are used for developing models, testing the models, and communicating the results.
INNOVATION

An innovative project contributes to learning by doing the following:

• Introduces a brand new mental health practice or approach including PEI
• Makes a change to an existing practice in the field of mental health, including application to a different population
• Introduces a new application or adaptation to the mental health system that has been successful in a non-mental health setting.
INNOVATION

Innovation must include one of the following primary purposes:

• Increase access to underserved groups
• Increase the quality of services, including better outcomes
• Promote interagency collaboration
• Increase access to services
INNOVATION

Programs must be aligned with MHSA transformational values:

• Community Collaboration
• Cultural Competence
• Client-Driven Programs
• Family-Driven Programs
• Wellness, Recovery, and Resilience-Focused
• Integrated Service Experience for Clients and Families
INNOVATION

Planning:

• Programs seek to solve a persistent, seemingly intractable mental health challenge
  • Cannot be solved with simple funding
• Programs promote wellness, resilience, and recovery
• Programs developed at the grassroots, community-based level
• Includes a plan to share evaluation results and build upon success and lessons learned
INNOVATION

New Proposals:

• Mobile Peer Partnership Program
  • Tests if adding mobilization to peer partners would assist clients, after a crisis intervention, to be and remain connected to services.
  • Outcomes: reduction in emergency hospitalizations, reduction in admittance to the PHF, reduction in recidivism, increase in referrals, assistance in navigating the mental health system.
INNOVATION

New Proposals:

• **3-by-3: Developmental Screening Partnership between Parents and Pediatric Practices**
  • Tests three methodologies to administer ASQ:SE for children 0-3 that includes a health educator, parent self-administration, and child-care provider to understand which produces better results in early diagnoses and intervention.
  • Outcomes: which methodology increases: parent/caregiver knowledge of SE development, decreases stigma related to mental health, appropriate behavioral health referrals.
INNOVATION

New Proposals:

• **SLOACCEPTance: Affirming Cultural Competence Education & Provider Training**
  
  • Tests a pilot/never before used in the MHS curriculum “Train the Gap” to mental health therapists/clinicians to address culturally and linguistically competent mental health services for the LGBTQ+ community.
  
  • Outcomes: the new curriculum is the best tool for training therapists to work with LGBTQ+ clients, and would creating a team of professionals under this curriculum be able to address LGBTQ+ therapy in our community?
INNOVATION

New Proposals:

• **Brain Training for Improved Mental Health in SLO County: Utilizing Neurofeedback with FSP Population**
  • Tests the use of a neurofeedback machine on the FSP population.
  • Outcome: does neurofeedback produce an improved mental health outcome? - reduction in ER visits, PHF, and recidivism.
MHSA Fiscal Update

MHSA Revenue and Expenses FY 16/17 – Projected FY 18/19
MHSA Fiscal Update

• FY 2017/18 Adopted Budget is $17.2M (MHSA $12.4M/Other Revenue $4.8M)
  – CSS: $13.3M (increase $200K)
  – PEI: $2.6M (increase $100K)
  – INN: $634K
  – WET: $155K
  – CFTN (Electronic Health Record Support): $500K

• Prudent Reserve Balances:
  – CSS: $4,336,547
    • Amount proposed to transfer FY 17/18 approx. $1.2M
    • Amount proposed to transfer FY 18/19 approx. $1.3M
  – PEI: $67,608
MHSA Fiscal Update

• MHSA Funds Allocation = 0.674039%
  – Less than FY 16/17 by 0.001491% or $30K

• MHSA Revenue projected to decrease by 5% ($611K) for FY 2018/19

• Annual Adjustment based on actual tax returns known by March 15th
MHSA Fiscal Update

• **CSS Update:**
  - Beginning in FY 18/19 projected possibility to add $504K per year in services
  - Less $154K for 3.0 FTE Case Managers (upon approval by MAC stakeholders)
  - Full Service Partnership Majority of CSS Funding (51%)
## FY 2014-15 Through FY 2016-17 Three-Year Mental Health Services Act Expenditure Plan
### Community Services and Supports (CSS) Component Worksheet

**County:** San Luis Obispo  
**Date:** 5/9/14

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<tr>
<td><strong>Estimated Total Mental Health Expenditures</strong></td>
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<td><strong>Estimated Medi-Cal FFP</strong></td>
<td><strong>Estimated 1991 Realignment</strong></td>
<td><strong>Estimated Behavioral Health Subaccount</strong></td>
<td><strong>Estimated Other Funding</strong></td>
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<td>FSP Programs</td>
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| FSP Programs as Percent of Total | | | | | | 56.8%
### SECTION ONE

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<td>Total MSHA CSS Expenditures (Excluding Funds Transferred)</td>
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<td>FSP Percentage of Total CSS Expenditure</td>
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<td>8</td>
<td>40</td>
<td>School &amp; Family Empowerment</td>
<td>Community School Mental Health Services</td>
<td>Non-FSP</td>
<td>$804,787.15</td>
<td>$251,027.80</td>
<td>$128,888.84</td>
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<td>9</td>
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<td>Forensic Mental Health Services</td>
<td>Non-FSP</td>
<td>$1,103,731.93</td>
<td>$234,425.21</td>
<td>$70,866.01</td>
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<td>10</td>
<td>40</td>
<td>Housing</td>
<td>Non-FSP</td>
<td>$899,610.77</td>
<td>$299,618.77</td>
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<tr>
<td>11</td>
<td>40</td>
<td>Outreach &amp; Engagement</td>
<td>Non-FSP</td>
<td>$846,652.50</td>
<td>$299,618.77</td>
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</table>
MHSA Fiscal Update

• **PEI Update:**
  – Suicide Prevention Coordinator, CalMHSA increase, and LGBTQ questionnaire approved and included in budget and projections
  – No projected additional funding available at this time

• **Innovation Update:**
  – Round 3 projects to begin in FY 18/19:
    • Can add up to $400K per year (increase of $100)
  – Round 4 projects to begin in FY 19/20:
    • Can add up to $300K per year (increase of $100K)

• **Workforce, Education & Training Update:**
  – FY 18/19 transfer CSS funds to WET
Reversion 101
– Per statute the County must spend funds allocated to CSS, PEI, and INN within three fiscal years
– “First-in-first-out” method
MHSA Fiscal Update

• Reversion
  – Assembly Bill 114 addressed funds deemed to be reverted as of July 1, 2017
  – DHCS letter for CSS, PEI, INN funds through FY 2013-14
    • Innovation reverted and reallocated = $272K
  – WET & CFTN to be addressed on separate letter
  – Projected total reversion for FY 05/06 to FY 14/15 = $429K in Innovation funds
  – Spending Plan due July 1, 2018
  – Reallocated funds are to be spent by June 30, 2020
• Interest Funds
  – New guidance by state that interest funds subject to reversion and included as component revenue
  – Interest Fund Balance as of June 30, 2017 = $789K
    • CSS = $548K
    • PEI = $107K
    • INN = $59K
    • CFTN = $51K
    • WET = $24K
  – Requesting approval to spend interest funds first each fiscal year as allocated for component expenditures starting FY 2017/18
Old Business

- Support for Community Action Team
  - RFP in October
  - $115 approved in August

- LGBTQ Needs Assessment
  - Proposal adjusted to $25k
  - Negotiating indirect rate with Cal Poly
  - Recommending approval of one-time funds: $25-30k

- CSU: RFP for Services
  - Proposals due October 16
New Business

- Case Management Expansion
- Infrastructure/staffing review
PAAT PRESENTATION
Upcoming Meetings

- MHSA Advisory (MAC)
- Tuesday, April 24, 2018
- Tuesday, June 26, 2018
- 4:00pm – 5:30pm
  - Veterans Hall (main room/right wing)

INNovation Stakeholders Meeting
Tuesday, April 24, 2018
3:00 – 4:00pm
Thank You

Frank Warren
MHSA Coordinator
Prevention & Outreach Division Manager
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(805)788-2055