MHSA Advisory Committee (MAC) Wednesday, September 29, 2021 Zoom Meeting 3:30pm – 5:00pm



Welcome, Introductions, and Goals for meeting

Frank Warren, SLOBHD

Department Updates

- Anne Robin, SLOBHD
- Frank Warren, SLOBHD

CSS –Program Updates

• Kristin Ventresca, SLOBHD

PEI/INN Updates

- Timothy Siler, SLOBHD
- B-HARP Presentation Dr. Joe Holifield

WET Program Updates

Frank Warren, SLOBHD

Fiscal Update

Jalpa Shinglot, SLOBHD

Old Business

- Program Start Dates Pro-Rate Increase
- Plan for Released Prudent Reserve
- Additional phone response at CSU
- Additional car for youth mobile crisis
- Mini Grant program/awards

New Business for 2021-22

- CPI-based COLA Change
- CalMHSA EHR Released-PR Request
- Case Manager Released-PR Request
- Mini Grant Program Non-Contracted Providers

Updates

- MHSA Admin/Suicide Prevention/Training Restructure
- VTC Grant
- Suicide Px Grant
- No Place Like Home

Next Meetings:

December 1, 2021

Conclusion



MHSA Advisory Committee

MHSA AdvisoryCommitteeIntroductions



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



- 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.



Department Update



Community Services and Supports (CSS)

- 1. Child & Youth Full Service Partnership (FCN & SLOBHD)
- 2. Transitional Age Youth FSP (FCN & SLOBHD)
- **3. Adult FSP** (TMHA & SLOBHD)
- **4. Older Adult FSP** (Wilshire CS & SLOBHD)
- 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)





FAMILY SERVICES PROGRAM

YOUTH SERVICES & TRIPLE P

What Family Services Can Do

We assist parents, caregivers, grandparents, guardians, family members, and friends of those with a mentally ill loved one – even if there is no diagnosis in place.

We will:

- •Assess the family's needs and behavioral issues
- •Work to get a proper diagnosis if needed
- •Help them navigate mental health services
- •Help them establish long term mental health care for the individual and family as a whole

We work wit

- Families who suspect there could be mental health issues with their loved one, and
- Whose youth are displaying behavioral issues or substance abuse issues that could be indicative of mental health concerns

How Does Family Services Help?

- We promote wellness, recovery, and self-sufficiency on all levels.
- We recognize that reaching out when you are feeling defeated, overwhelmed, and beyond your stress level is the hardest thing to do sometimes. We will sit with families during those times, guiding them into self-sufficiency.
- We help guide families through the systems of care and connect them with resources
- We provide education about the mental health system and understanding diagnosis, treatments, and effects of mental illness.

Self Advocacy Reduce Stigma Family Well-Being Education Education

Improved
Quality of
Life

Family Services & Triple P

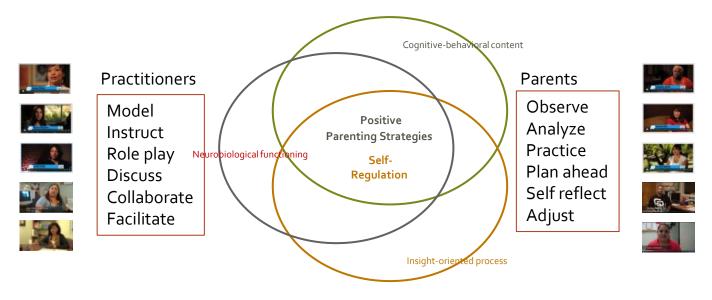
 Group Classes for Parents/Caretakers of Children Ages o-12 (Spanish and English)

- Group Classes for Parents/Caretakers of Teens (Spanish and English)
- One-on-one education with families
- Triple P Monthly Support Group for Triple P Graduates
 - Triple P Skills Shared in Weekly Support Groups



What is Triple P?

An evidence-based population approach for **improving parenting practices** and children's social and emotional well-being.



Principles of Positive Parenting

Safe & engaging environment

Positive learning environment

Assertive discipline

Realistic expectations

Taking care of yourself

Triple P trained staff are taught and given a multitude of screening and observation tools to assess the challenges of each family uniquely.

Staff start with assessing the home and family environment, past traumas that may be triggering behaviors, teaching parents how to address the environment and their own healthy responses and self-awareness.

Triple P - Positive Parenting Program®

DASS-21

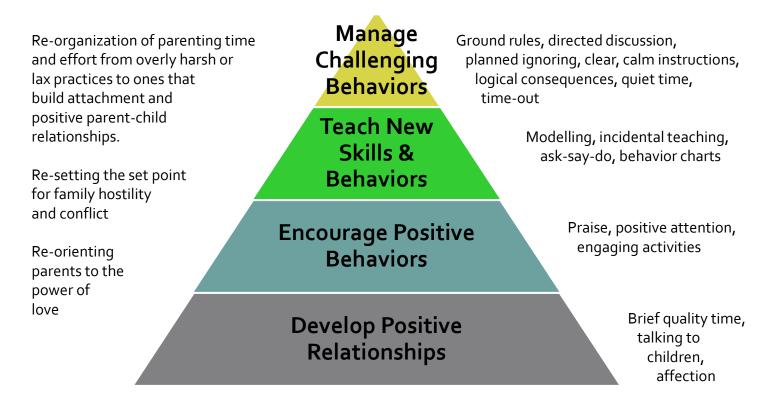
Please read each statement and circle a number 0, 1, 2 or 3 which indicates how much the statement applied to you over the past week. There are no right or wrong answers. Do not spend too much time on any statement.

The rating scale is as follows:

- 1 Did not apply to me at all
- 2 Applied to me to some degree, or some of the time
- 3 Applied to me a considerable degree, or a good part of the time
- 4 Applied to mevery much, or most of the time

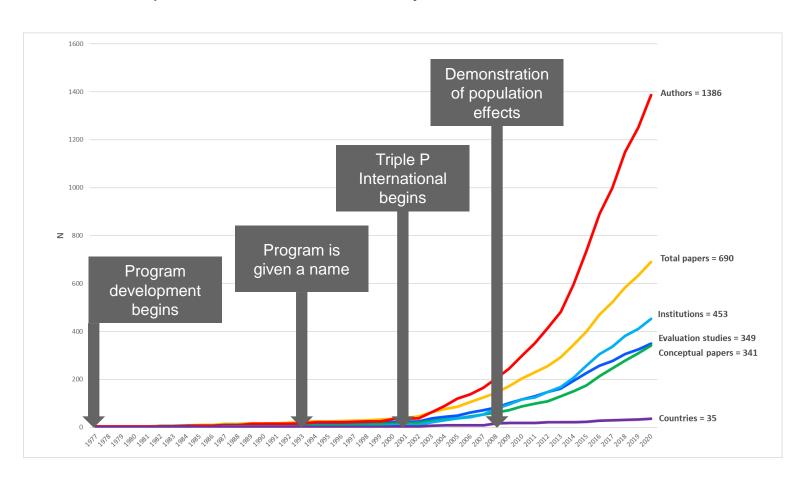
1. I found it hard to wind down.	0	1	2	3
2. I was aware of dryness of mymouth.	0	1	2	3
3. I couldn't seem to experience any positive feeling atall.	0	1	2	3
 I experienced breathing difficulty (e.g. excessively rapid breathing, breathlessness) in the absence of physical exertion. 	0	1	2	3
5. I found it difficult to work up the initiative to do things.	0	1	2	3
6. I tended to over-react to situations.	0	1	2	3
7. I experienced trembling (e.g. in the hands).	0	1	2	3
8. I felt that I was using a lot of nervous energy.	0	1	2	3
9. I was worried about situations in which I				
mightpanic and make a fool of myself.	0	1	2	3
10. I felt that I had nothing to look forward to.	0	1	2	3
11. I found myself gettingagitated.	0	1	2	3
12. I found it difficult to relax.	0	1	2	3
13. I felt down-hearted and blue.	0	1	2	3
14. I was intolerant of anything that kept me				
from getting on with what I was doing.	0	1	2	3
15. I felt I was close topanic.	0	1	2	3
I felt unable to become enthusiastic about anything.	0	1	2	3
17. I felt I wasn't worth much as aperson.	0	1	2	3
18. I felt that I was rather touchy.	0	1	2	3
19. I was aware of the action of my heart in the				
absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat).	0	1	2	3
20. I felt scared without any good reason.	0	1	2	3
21. I felt that life was meaningless.	0	1	2	3

Triple P Strategies



TEMPERAMENT × ATTACHMENT STYLE × POSITIVE PARENTING = CHILD SELF-REGULATION

Triple P Evidence over the years

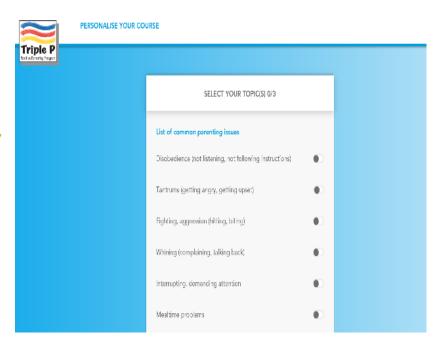


How Triple P is utilized throughout California

- Many agencies and programs utilize Triple P one-on-one or group classes to enhance their program offerings and family wellness:
- Many counties in CA incorporate Triple P into their CWS and Family Reunification programs.
- Foster Family & Adoption Support
- Inyo County has brought Triple P into the jail system for parents and provide tools and education before release
- Triple P Mobile Clinic in Riverside, bringing Triple P one on one and classes directly into their community
- In Napa County Triple P is implemented in all areas of family and mental wellbeing, including Family Resource Centers, Mental Health Services, Public Health, Child Welfare, School Districts, Early Education, Women's Supportive Services, and Health Clinics

Key features of Triple P Online programs

- Video clips of families in action
- Interactive exercises
- Individual goal setting, feedback and weekly check-in
- Downloadable worksheets
- Personalised and parent workbook
- Review and reminder strategies (text messages, emails)





Growing Wellness, Recovery, and Resiliency within Families.

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Santa Maria:

Maria Perez

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All Support Staff are Spanish/English bilingual!

Prevention & Early Intervention (PEI)

WORK PLAN	PROGRAMS					
PREVENTION	Positive Development	Family Education, Training & Support	Middle School Comprehensive Program	In-Home Parent Educator		
EARLY INTERVENTION	Community-Based Therapeutic Integrated Community Wellness Navigators					
OUTREACH FOR INCREASING RECOGNITION OF EARLY SIGNS OF MENTAL ILLNESS	Perinatal Mood Anxiety Disorder					
ACCESS & LINKAGE TO TREATMENT	Older Adult Mental Health Initiative					
STIGMA & DISCRIMINATION REDUCTION	Social Marketing Strategy College Wellness Program		ogram			
IMPROVE TIMELY ACCESS TO SERVICES TO UNDERSERVED POPULATIONS	Veterans Outreach Program					
SUICIDE PREVENTION	Suicide Preventi	on Coordination				



Innovation (INN)

UPDATE:

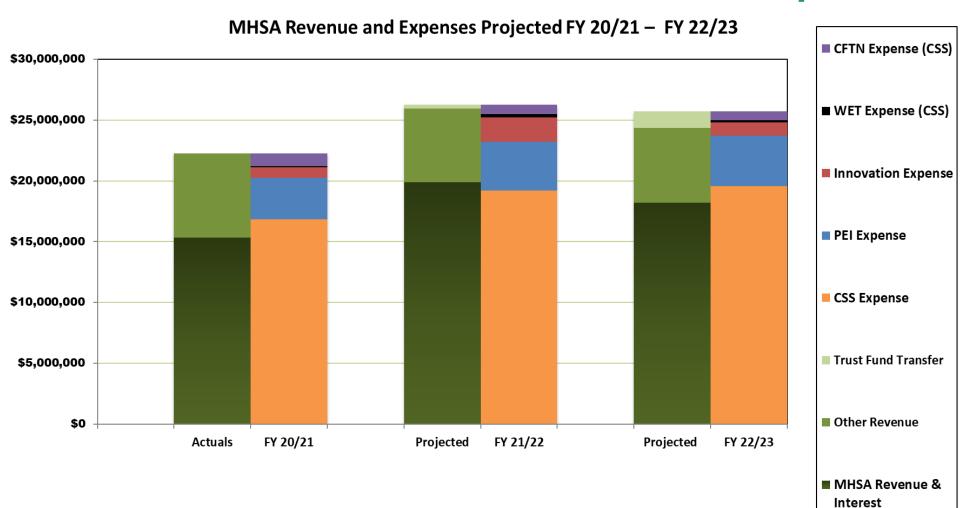
- FY 21-25 Innovation Project Plan received final approval from OAC on June 28
- BHEET & SoulWomb currently in contract negotiations

CURRENT:

- FY 18-22
 - SLO ACCEPTance: Cal Poly
 - 3-by-3: First 5
- FY 19-23
 - Holistic Adolescent Health: CAPSLO
 - B-HARP: Holifield Psychological Services



MHSA Fiscal Update





MHSA Fiscal Update

- Fund Balance 09/27/2021 (excluding actual PR) = \$23,061,500.75
 - Prudent Reserve Fund Balance = \$2,774,412

CSS Update:

- Full Service Partnership majority of CSS Funding (51%)
 - oFY 20/21 actual budget ended at 43%
 - oFY 21/22 current budget approximately 41%
- Additional revenue projected
- PEI Update:
 - PEI Stakeholders to meet to discuss potential new revenue
- Released Prudent Reserve to be spent by 6/30/22 = \$913K (after projected expenses)



Old Business

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Updates

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- b. VTC Grant
- c. No Place Like Home





Upcoming Meetings

December 1, 2021





Thank you ALL.

Frank Warren
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Prevention & Outreach Division Manager
County of SLO Behavioral Health Dept.

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