Mental Health Services Act

Steering Committee Meeting
October 6, 2014
1 p.m. – 4 p.m.

Jeff Nagel
MHSA Coordinator

MHSA Update

1. PEI Regulations
2. DHCS issued Expenditure
MHSA Report
4. Prop 63 Stories of MHSA
Mary Hale
Behavioral Health Director
State/Local Update

Denise Cuellar
President, Community Action Advisory Committee
CAAC Update

MHSA Subcommittee Updates & Co-Chair meeting reports
Helen Cameron & Patti Pettit – CSS Adults & Older Adults
Pamela Kahn and Alyce Matrianni – PEI
Denise Cuellar and William Gonzalez – WET/Innovation
Kelly Tran and Linda Smith – CSS Children and TAY
Annette Mugrditchian
Director, Adult and Older Adult Behavioral Health
Assisted Outpatient Treatment Update

Orange County Health Care Agency Behavioral Health Services (BHS)
Outreach and Engagement Services

Jason Austin, Program Manager
Behavioral Health Navigation

What is Outreach & Engagement

- Outreach: reaching out to unserved or underserved populations by providing linkages to help people connect to services and ultimately into the community

- Engagement: the process by which a trusting relationship between the worker and client is established and services are provided
**WHO WE SERVE**

- Any person who meets the following criteria will be considered for O&E services:
  - All age groups currently residing in Orange County
  - Is residing in a transitional living situation, homeless or at risk of homelessness, or has not linked to behavioral health services due to impairments or
  - Is at increased risk of developing a behavioral health condition
- Referred by self or other

**STAFF**

Comprised of:
- Licensed professionals- LCSWs, MFTs, and Nurses
- Paraprofessionals- lived experience and/or experienced in working with target population

**Services Provided in:**
- English, Spanish, Vietnamese, Farsi, Chinese, Korean, Arabic, Tagalog, Thai, Cambodian

**SERVICES**

BHS Outreach and Engagement (O&E) Services

- County Operated
- Contracted Collaborative
- Multiple strategies are used to reach the sheltered and unsheltered homeless, those struggling with untreated behavioral health issues, and those at increased risk of developing a behavioral health condition
TYPES OF OUTREACH ACTIVITIES

Street outreach
- Teams go to known gathering places for the homeless, such as designated streets, highways, bridges, food banks, shelters, and parks
- Teams visit apartment complexes, Laundromats and other community sites to connect with other populations

Fixed-site outreach
- Teams regularly visit homeless provider sites and other community service-providers to offer O&E services

Field Contacts
- Staff address referrals from the triage phone line. Teams will meet with individuals to assess needs and assist with linking to services

TYPES OF ENGAGEMENT ACTIVITIES

Group Interventions
- Topical groups to address common concerns including anger management, coping skills, and employment

Individual meetings
- Case Management: structured meetings with clients who can actively participate in session
- Ongoing contacts in the field (engagement): Offer support
- Address barriers to linking
- Transporting to appointments

MEASURING SUCCESS: TOOLS USED

- Referrals and Linkages
- World Health Organization Well-Being Index (WHO-5)
- Protective Factors Survey
- Participant Satisfaction Survey

Other Data Collected
- Demographics
- Locations
- Past treatment history to assist with linkage
- Community Events and Provider presentations
**Age of Participants**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>FY 13/14 Data</th>
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<tbody>
<tr>
<td>0-15 yrs</td>
<td>22%</td>
</tr>
<tr>
<td>16-25 yrs</td>
<td>36%</td>
</tr>
<tr>
<td>26-59 yrs</td>
<td>26%</td>
</tr>
<tr>
<td>60+ yrs</td>
<td>4%</td>
</tr>
<tr>
<td>Unknown</td>
<td>22%</td>
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</tbody>
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**Race/Ethnicity of Participants**

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>FY 13/14 Data</th>
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<tbody>
<tr>
<td>Asian/Pacific Islander*</td>
<td>17%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>2%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>13%</td>
</tr>
<tr>
<td>White/Caucasian</td>
<td>51%</td>
</tr>
<tr>
<td>Other**</td>
<td>13%</td>
</tr>
<tr>
<td>Unknown</td>
<td>3%</td>
</tr>
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</table>

*Asian/Pacific Islander: Asian Indian, Cambodian, Chinese, Filipino, Guamanian, Japanese, Korean, Laotian, Native Hawaiian, Samoan, Vietnamese

**Primary Language of Participants**

<table>
<thead>
<tr>
<th>Language</th>
<th>FY 13/14 Data</th>
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<tbody>
<tr>
<td>English</td>
<td>44%</td>
</tr>
<tr>
<td>Spanish</td>
<td>51%</td>
</tr>
<tr>
<td>Other*</td>
<td>1%</td>
</tr>
<tr>
<td>Unknown</td>
<td>4%</td>
</tr>
</tbody>
</table>

*Other: Arabic, Cantonese, Russian, Tagalog & "Other"

**WHO-5 Average Well-being Scores**

<table>
<thead>
<tr>
<th>Group</th>
<th>WHO-5 Score</th>
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<tbody>
<tr>
<td>Pre-test</td>
<td>54.1</td>
</tr>
<tr>
<td>Post-test</td>
<td>67.1</td>
</tr>
</tbody>
</table>

Max Possible = 100

24% Improvement (n=737 paired pre/post)

World Health Organization Well-Being Index:
Higher score indicates better overall well-being
FY 13/14 DATA

Percent of participants who improved

- Nurturing & Attachment (n=334)
- Concrete Support (n=460)
- Social Support (n=474)
- Family Functioning/Resiliency (n=471)

% of Participants Satisfied with the Program

- Overall, satisfied with this program, (n=1,874)
- I would choose to participate in this program again, (n=1,861)
- As a result of my participation in this program, I feel more positive about myself, (n=1,895)
- Staff treated me with courtesy and respect, (n=1,839)
- I would recommend this program to someone I know, (n=1,942)

LINKAGES

- 9,260 Linkages were confirmed for FY 13-14

Top Categories
- Mental Health Care
- Primary Health Care
- Family Support Services
- Food and Nutrition Services
- Housing Services
- Employment Services
- Legal Services
- Welfare Services
 PROGRAM CHALLENGES

- Limited Resources and Availability for MH treatment
- Participants may not be ready for, or are resistant to services
- Keeping up with the increase of community requests - new team being trained, staffing vacancies, triage line created, increased scope of who serving from mild to severe
- Increased requests for community collaboration with various Police and Sheriff Departments

 HOW TO ACCESS O&E SERVICES

Call:
- BHS O&E Triage at (800) 364-2221
  Monday – Friday, 8:30 am to 5:00 pm

Or
- 855 OCLINKS (855) 625-4657
  Monday – Friday, 8:00 am to 6:00 pm

 QUESTIONS?

Contact
Jason Austin – Program Manager
Behavioral Health Navigation
Jaustin@ochca.com
(714) 834-2077
Mental Health Services Act
Round 3 Innovations
Idea Submission Process
MHSA Steering Committee

Background Information on MHSA

• Proposition 63 passed in 2004. This funding allowed for the provision of new mental health services to individuals who are seriously mentally ill
• Target population includes individuals with serious mental illness that are currently unserved, underserved, homeless or risk of being homeless
• In this current planning cycle, there is approximately $24 million to allocate towards Round 3 Innovation Projects

What is an Innovation Project?

• An Innovation Project is defined as one that contributes to learning rather than a primary focus on providing a service
• A project must contribute to learning in one or more of the following ways:
  ▪ Introduce a new mental health practice/approach
  ▪ Make a change to an existing mental health practice/approach
  ▪ Introduce a new application to the mental health system of a promising community driven practice/approach
Goals of Innovation Projects

• Each project must address at least one of the following 4 essential objectives:
  • Increase access to underserved groups
  • Increase the quality of services, including better outcomes
  • Promote interagency collaboration
  • Increase access to services

Innovation Project Idea Development

What makes this idea innovative?

Questions to consider:

• Who are the underserved or unserved group that your project is being developed for?
• Where are the gaps or barriers in the mental health system of care?
• What is the societal impact of the gaps/barriers?
• What is the learning objective?
  How would providing the proposed service answer the learning objective?
• What are we tracking and measuring for change (outcomes)?
Stakeholder Meetings

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<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Location</th>
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<tbody>
<tr>
<td>Tuesday, October 7</td>
<td>10:00 am – 11:30 am</td>
<td>West Alcohol &amp; Drug Abuse Services: 14140 Beach Blvd., Westminster, Suite 120, Rm #124</td>
</tr>
<tr>
<td>Wednesday, October 8</td>
<td>2:00 pm – 3:30 pm</td>
<td>Children and Youth Services Fellowship Hall: 21632 Wesley Dr., Laguna Beach</td>
</tr>
<tr>
<td>Thursday, October 16</td>
<td>6:00 pm – 7:30 pm</td>
<td>Training Center: 1729 W. 17th St., Bldg. E (trailer) Santa Ana</td>
</tr>
<tr>
<td>Tuesday, October 21</td>
<td>2:00 pm – 3:30 pm</td>
<td>Costa Mesa Community Center: 1845 Park Ave., Costa Mesa</td>
</tr>
<tr>
<td>Thursday, October 23</td>
<td>10:00 am – 11:30 am</td>
<td>Recovery Center-North: 103 W. Lincoln Ave. Suite 130, Anaheim</td>
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Technical Assistance

Technical Assistance (TA) workshops will be available to help answer specific questions regarding the form (i.e., budgets). TA meetings will be held on the following dates:

- Wednesday, Nov. 5 from 1:00 pm – 3:00 pm
- Thursday, Nov. 13 from 9:00 am – 11:00 am
- Wednesday, Nov. 19 from 2:00 pm – 4:00 pm
- Monday, Nov. 24 from 1:00 pm – 3:00 pm

All TA meetings will be held at the Board Planning Room, 333 W. Santa Ana Blvd. 92701. RSVP will be required for all TA meetings.

Innovation Idea Submissions

- Deadline for idea submissions is December 1. Late or incomplete submissions may not be accepted.
- It is the submitting author’s responsibility to research if the project idea is already being used anywhere else.
- The selection of a proposed idea does not mean the project will be awarded to the submitting author.
Innovation Idea Selection Process

• Following idea submissions, HCA will review and determine which projects are eligible to move forward

• Eligible projects will be presented to the Innovations Subcommittee, who will examine and make recommendations on prioritizing the ideas

• The subcommittee will then make recommendations to the full Steering Committee

Questions?

Thank You!
Contact Numbers

- MHSA Main Line: 714-667-5600
- Innovations Main Line: 714-517-6100
- MHSA Office: 600 W. Santa Ana Blvd. Suite 510
  Santa Ana, CA 92701
- MHSA Coordinator: Jeff Nagel
  jnagel@ochca.com
- Innovations Coordinator: Gerry Aguirre
  gaguirre@ochca.com

Steering Committee Member Comments

Members of the Public Comments
Next Month:
MHSA Subcommittee Meetings

November 3, 2014
1 p.m. – 2:25 p.m.
CSS Adults and Older Adults
PEI
2:35 p.m. – 4:00 p.m.
CSS Children and TAY
Innovation
Delhi Community Center
505 E. Central Ave.
Santa Ana, CA 92707