

# **Overview and Executive Summary**

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California voters passed Proposition 63, also known as the Mental Health Services Act (MHSA), in November 2004 to expand and improve public mental health services. The intention of the Act is to expand and transform the mental health system in California to improve the quality of life for Californians living with or at risk of serious mental illness.

MHSA has been in California for ten years now, and more than \$13 billion has been raised since passage of the Act. Approximately 1600 programs have been developed throughout the state and thousands of people have been served. Through stakeholder input, mental health programs and supports are tailored to meet the individual needs of the diverse clientele in each county in California. As a result, the community is experiencing the benefits of expanded and improved programs to assist consumers in becoming active members of society. Counties are receiving funding and are able to provide “whatever it takes” treatment for people with serious mental illness.

Orange County Behavioral Health Services has used a robust stakeholder process to develop a behavioral health system of care that ranges from outreach and engagement services to crisis residential care. The current array of services was created based on the extensive planning efforts of thousands of stakeholders from 2005 to the current day. Through planning efforts in FY 13/14, a three-year plan was developed to cover fiscal years 14/15 through 16/17, and that plan serves as the basis for this current update.

The Orange County Mental Health Services Act Three-Year Plan for fiscal years 14/15 through 16/17 was approved by the Board of Supervisors in May 2014. That plan anticipated level funding for the three years covered by the plan. This current Annual Plan Update retains level funding for the vast majority of programs that were operational during FY 14/15, but includes some new or expanded programs based on available funding.

### **Community Services and Supports (CSS):**

The majority of Prop 63 money provides treatment for individuals with serious mental illness, using a “whatever it takes” approach. Full Service Partnerships provide wraparound services to clients/consumers. Prop 63 also helps counties fund housing by leveraging the funds in local partnerships to build and renovate thousands of housing units for people with serious mental illness, many of whom are homeless.

Within the CSS component, the following program had changes in funding:

Funding for new Crisis Residential location: The Crisis Residential Program provides short term crisis intervention services to meet the needs of adults who are at risk of psychiatric hospitalization. At their February meeting the MHSA Steering Committee recommended to provide an additional \$600,000 for Adult Crisis Residential expansion.

In addition to the above funding change, two Group 1 Innovation projects that demonstrated positive outcomes, and which were consistent with the CSS Plan were recommended for continuation using available CSS funding: Integrated Community Services and Volunteer to Work.

Integrated Community Services (ICS): ICS is a collaborative program between County mental health programs, community medical clinics, and substance abuse services that provides access to integrated medical and behavioral health services to County and community participants. This Innovation Project is reaching the end of Innovation funding. This program offers integrated services, with peer specialists to engage participants and act as liaisons between their behavioral health and medical care providers. The goal of this program is to fully integrate participants' physical and behavioral health care needs.

Volunteer to Work (VTW): VTW is a supported employment program that provides a "stepping stone" for individuals who need additional support in entering or re-entering competitive employment. It provides peer mentor support, skill development trainings and connections to volunteer opportunities. This Innovation Project has funding through June 30, 2015, and was recommended for one year of additional funding through CSS in the amount of \$541,510.

### **Prevention and Early Intervention (PEI):**

PEI programs are designed to prevent mental illness from becoming severe and disabling and to improve timely access for people who are underserved by the mental health system. Within the PEI component, the following programs have had changes in funding or implementation:

Expansion of OC Links: During FY 14/15, the funding for Information and Referral Services was increased by \$200,000 because of the expanded efforts to increase access to all behavioral health services. Funding for Training, Assessment and Coordination Services decreased by \$200,000. Besides these approved changes, the recommendation for level funding for all other PEI programs was approved at the February MHSA Steering Committee meeting.

In addition to the above changes, two Group 1 Innovation projects that demonstrated positive outcomes, and which were consistent with the PEI Plan were recommended for continuation using available PEI funding.

**OC Accept:** OC ACCEPT provides LGBTIQ specific behavioral health services to address behavioral health issues disproportionately faced by the LGBTIQ community. This program offers LGBTIQ specific behavioral health services and peer support services. In addition, LGBTIQ identified or allied peer specialists provide case management services, advocacy, and outreach and engagement activities. The goals of the program are to provide a safe environment to express feelings, build resilience, become empowered, and connect with others for support and to raise awareness and reduce stigma by providing education about the LGBTIQ population to the community at large.

**OC4Vets:** OC4Vets provides a participant-focused environment for veterans or families within the local military and veteran community to receive an integrated, holistic approach to address veteran behavioral health issues and facilitate a smooth transition back to civilian life. This program offers co-located veteran's services and peer support services, as well as peer navigators familiar with veteran and military culture who provide support and case management services.

### **Innovation:**

The Innovation component funds and evaluates new approaches that increase access to the unserved and/or underserved communities; promotes interagency collaboration and increases the quality of services. Five percent of MHSA funding is designated as Innovation to allow counties to test new and improved approaches to mental health service delivery with time-limited pilot programs. Because the funding is time limited, projects that are recommended to continue after their initial pilot phase would need to have CSS, PEI or other funding identified in order for them to continue. Such was the case for four Group 1 projects. Integrated Community Services (ICS), Volunteer to Work, OC4Vets and OC Accept were all recommended for additional funding. Those programs are described above in the PEI and CSS sections.

The Innovation component undertook a substantial community planning process to identify projects for Group 3 funding. The planning process is described in detail in the Community Program Planning section of this Plan Update. Through the planning process 31 projects were submitted to the MHSA Office. After thorough review and MHSA Steering Committee input, 11 proposals were recommended to move forward. Below is a brief description of the proposed Group 3 Innovative Projects:

INN01 Continuum of Care for Veteran & Military Children and Families: This project will identify, screen, and treat veterans and their families, utilizing collaborations with community partners who specialize in community-based support, basic needs and homeless prevention, domestic violence prevention, mental health and trauma treatment, and research and evaluation.

INN02 Community Employment Services Project: This project will provide a paid, supported employment program for individuals with severe mental health conditions. Participants will work alongside peer support specialists for on-site job training and coaching.

INN03 Employment and Mental Health Services Impact: This project will provide mental health, education, and counseling services within local employment centers to support job seekers' emotional and mental health needs.

INN04 Veteran Student Needs Assessment and Treatment: This project will design, distribute, and tabulate surveys to identify needs, problems, and potential solutions for veterans. Based on findings, a series of workshops will be offered to address PTSD symptoms and behavioral modification techniques. In addition, mental health providers will visit with veteran students on a social basis to create a trusting environment to facilitate referrals for needed services.

INN05 Shared Housing Program: This project will offer a database of shared housing for consumers seeking affordable housing. This project will create a committee of consumers and providers to help establish voluntary standards of key elements of shared housing and a process to review homes to ensure they meet these basic standards. A listing of homes that have completed the process would be available through currently existing behavioral and mental health databases.

INN06 Faith Based Mental Health Education for Children: This project will train ministers of all faiths to provide mental health support and referrals for children with mental illness and their families. Project proposes to offer educational resources and workshops to families, engage in outreach during congregational events, and establish a referral network that enables pastors and/or their designees to link families to services.

INN07 Job Training and On-site Support for TAY: This project will create a food services business that provides hands-on job training and experience to transitional age youth who are diagnosed with a serious mental illness combined with on-site support staff

who builds participants' confidence in the workplace and help manage mental health symptoms and behaviors while on the job.

INN08 Developing and Testing Effective EBPs for Children: This project will combine the manuals for Trauma-Focused Cognitive Behavioral Therapy (TFCBT) and Integrative Treatment of Complex Trauma (ITCT) into a single manual for the treatment of trauma among children and teens.

INN09 LGBTIQ Homeless Project: This project will address housing needs of those who are homeless or at-risk of homelessness within the LGBTIQ community. Staffed with peer mentors and clinicians, project will assist with housing resources, mediation work, employment assistance, and substance abuse treatment and support.

INN10 Immigrant Screening and Referrals: This project will combine various support services for newly arrived immigrants and offer a 12-week program that will provide home visits, family support, mental health screenings, and referrals for services, as needed.

INN11 Whole Person Initiative: This project will integrate physical, mental, and spiritual health to treat mild to severe mental illness. This project proposes to use a multidisciplinary team of professionals (i.e., medical doctor, physician assistants, spiritual leaders, mental health workers, licensed clinicians) to address the whole person in mind, body, and spirit.

### **Workforce Education and Training (WET):**

WET funding is intended to increase the number of qualified individuals to provide mental health services, and improve the cultural and language competency of the mental health workforce. The original Workforce Education and Training funds have been spent, but the programs continue using Community Services and Supports funding. Within the WET component, the following programs have had changes in funding or implementation:

Orange County Mental Health Loan Assumption Program (OCMHLAP): The Health Care Agency is in strong competition with private sector organizations and other governmental agencies to recruit and retain community psychiatrists. The shortage of community psychiatrists has been discussed on a local, state, and national level. In response to this need, a Financial Incentive Program for psychiatrists recommended by the MHSA Steering Committee. The Financial Incentive Program will utilize Mental Health Services Act (MHSA) funds to develop a loan assumption program in order to

recruit and retain qualified professionals working within the Public Mental Health System (PMHS). This program will help achieve staffing goals and enhance the quality of care that it provides to the County's population.

At the February meeting, the MHSA Steering Committee approved by consensus the recommended changes to the Workforce Education and Training Budget:

- Adding \$99,187 to Workforce Staffing Support
- Adding \$122,000 to Training and Technical Assistance
- Adding \$50,000 to Mental Health Career Pathways Program
- Adding \$228,814 for Administrative Costs to the WET Program
- Adding \$1,500,000 in funding for Loan Repayment Program
- Reducing the Residencies and Internships by \$500,000

### **Capital Facilities and Technology:**

This component supports counties for a wide range of projects necessary to support service delivery. Progress has continued in the implementation of an Electronic Health Record (EHR), which is now live in six outpatient Behavioral Health locations impacting 28 separate programs, representing over 40% of Behavioral Health Services programs. An EHR is a digital version of a patient's medical record. EHRs are centralized, real-time patient records that make information available instantly and securely to authorized users. They allow programs at different locations to better coordinate services and stay up-to-date on patients' treatment. The goals of implementing an Electronic Health Record include: improving the quality and convenience of client care, increasing program efficiencies and cost savings, increasing client participation in their care and improving coordination of care. Ongoing efforts continue to focus on implementing the EHR in additional locations, and working towards interoperability and full compliance with meaningful use standards.

During the years since Proposition 63 was passed, the Mental Health Services Act has continued to go through changes to help better the lives of the clients and the entire Orange County community.

