

MHSA Update October 2008

1. Eastfield Ming Quong (EMQ) – Dawniel Baker, Associate Clinical Director. Handouts.

Handouts included: The Wraparound Process User's Guide and a Wraparound Services Status Report. Eastfield Ming Quong has been providing services in Nevada County since February 2008 they have served 30 youth, five have been discharged. They currently are serving 26 kids. Services include therapy, and working closely with the parents. EMQ is available 24/7 and often works in the field, at the child's home or school. The Child and Adolescent Functional Assessment Scale (CAFAS) is part of the assessment process and measures school and home functioning, behaviors, and thought processes. CAFAS is done at admission, every 6 months and at discharge. A safety plan is created for every child within the first 72 hours. The safety plan includes staff phone numbers and an on call phone number.

A parent of two children spoke about her experience with EMQ. EMQ became involved with the family before the children returned home from foster care. EMQ has helped her come up with a parenting plan that works for her family and helped her work on one issue at a time so that she isn't overwhelmed. Since EMQ has been involved her son is now doing schoolwork and may soon be mainstreamed back to a regular classroom. EMQ helps keep all organizations (CPS, School) working with the family on the same page.

2. CSS Three Year Plan Update – Public Comment Period.

We are currently in the 30-day public comment period that will end on October 15th. The CSS plan will be on the October 8th MHSA Steering Committee Meeting agenda for public review and comment.

3. Behavioral Health Director's Report, Grant & MHSA update – Michael Heggarty.

At the November 7th Mental Health Board Meeting we will hold the Public Hearing on our Capital Facilities Plan and Project. The Governor has vetoed a bill that would have allowed non-profits to own a building built using MHSA funds. A question was asked about the new computer system if data will be transferred from the old system to the new system or is the new system being designed. There are 3 systems (Netsmart, Anasazzi, and an Echo Product) that 35 other counties are in the process of transitioning to. None of the systems are fully functional yet. We will be transitioning all of our existing data to the new system, train staff on the system, and setup on all electronic billing to ensure the correct insurance is billed in the correct sequence.

We will be working with EMQ to renew their contract. EMQ is asking for more money in their new contract. They feel they can generate the Medi-Cal revenue to pay for the increased contract. The Victor contract has doubled in size. The Turning Point contract is merging two contracts into one. This is due to the MIOCR Grant ending. We will continue to provide MIOCR Program mental health services with MHSA and Medi-Cal funds. We don't have funding for the District Attorney, Public Defender and Probation Officer to continue providing services in Mental Health Court. The Mental Health Court will continue as it did prior to the MIOCR Grant. The above departments will continue to provide some services, but it will not be at the same level when it was funded with the MIOCR Grant. We will keep the Sierra Nevada Home Care contract at the same cost as last year.

Sierra College Students are painting a mural in the lobby. MHSA funds are being used to pay for paint and supplies. The Students are providing labor for free.

A) Prevention and Early Intervention Funds – State Administered Projects.

DMH Information Notice 08-25 was handed out at today's meeting. We must respond by November 14th on whether or not we agree to assign \$86,500 per year for four years in PEI funds for Statewide Projects on suicide prevention, student health initiative and stigma and discrimination reduction. If we do not assign these funds to the State the money reverts back to the MHSA pool of funds to be redistributed among all the counties at a later date. For our county we would probably only receive a few thousand dollars. We would need to have public input and a public hearing on this as our PEI Plan has not yet been approved by the State. Suggestion to have further discussion at our next Mental Health Board Meeting.

B) Homeless Count - Michele Violett.

Hospitality House is taking the lead in applying for the continuum of care grant. One of the grant requirements is a homeless count conducted in the last ten days of January. The homeless count includes renting a hall for \$1,000 to encourage the homeless to come to the event food will be provided. Hospitality House is requesting \$1,000 in MHSA funds to conduct the count.

C) Quarterly Progress Report – Michele Violett. Handouts.

Michele Violett presented the CSS Plan Progress Report. Plan 1 is the Children's Wraparound Team. Plan 2 is the Adult Assertive Community Treatment Team.

4. MHSA Oversight Subcommittee – Iden Rogers.

Iden Rogers has sent inquiries about what other counties are doing on a local level for MHSA oversight and accountability. He has not received any information back. Suggestion was made that we develop our own.