

**7. List of current MHP initiatives and significant changes – FY12 Update**

The MHD continues to focus on the priorities outlined in the MHP’s “Health Agenda Report” accepted by the Santa Clara County Board of Supervisors in September 2009. The five overarching priority areas include the following:

<b>Mental Health Department Health Agenda – Strategic Priorities</b>	
<b>Priority 1</b>	Expand the focus of public mental health service delivery to incorporate an expanded “band width” of activity that includes three new dimensions of care: <ul style="list-style-type: none"> <li>a. A broader range of developmentally appropriate interventions from promotion, prevention, early intervention and treatment across the lifespan;</li> <li>b. A changed perspective on treatment of persistent mental illness that shifts from an episodic-based service to a longitudinal “life course” service that considers treatment outcomes across the lifespan of the individual; and</li> <li>c. An expanded view of the recipient of mental health interventions to include social-ecological systems around the individual.</li> </ul>
<b>Priority 2</b>	Introduce capacity-building strategies with key system partners assure basic mental health competency, improved access to mental health interventions, and better coordination of care.
<b>Priority 3</b>	Employ new and innovative strategies to improve ethnic and cultural population access to and engagement in services.
<b>Priority 4</b>	Increase mental health knowledge and understanding in order to prevent problems, reduce stigma, and support appropriate responses to mental health concerns.
<b>Priority 5</b>	Improve the system infrastructure to include more robust quality and accountability systems that offer reliable measures of practice and program effectiveness and valid outcome information.

**#6 - Attachment A** provides a FY12 overview of the MHD strategic priorities and the initiatives and projects being implemented to address those priorities. Those initiatives are grouped into three categories:

- I. **System of Care Initiatives** – These initiatives relate to the Mental Health service delivery system and those projects that are aimed at improving or enhancing direct services to clients of the system.
- II. **Infrastructure Initiatives** – These initiatives relate to the infrastructure of the current service delivery system and those projects that are aimed at improving administrative and quality supports of the system.

III. **Countywide & Health System Initiatives** – These initiatives relate to inter-departmental and inter-agency efforts aimed at improving services to shared populations.

I. **System of Care Initiatives**

A. **MHSA Prevention and Early Intervention Plan** - Four large projects are in various stages of implementation that will bring prevention and early intervention services to high risk families and children, older adults, and underserved ethnic communities. Included is a new fifth Suicide Prevention Action Plan that was completed in August 2010 and approved by the Board of Supervisors.

**FY12 Update:** These projects are all in process:

- **The high risk families and children project (PEI Strengthening Families)** – has been expanded to include a county-wide strategic planning process lead by the President of the Board of Supervisors to implement an evidenced based model of School-Linked Services in Santa Clara County. The PEI program will be one of the flagship programs of this initiative with the RFP process to begin in December 2011. The MHD has been the facilitator of the strategic planning effort which will be completed by November 2011.
- **An Older Adult Mental Health Summit** - was held in June 2011 and also was sponsored by the MHB under the leadership of the Board of Supervisors. The summit drew over 300 attendees from senior communities, providers and advocates. A strategic action plan to guide the future development of the MHD senior system of care will be guided by the plan, which will be presented to the Board of Supervisors in November 2011.
- **Underserved Ethnic Communities Engagement** – the seven Ethnic Community and Cultural Advisory Committees (ECCACs) continue to develop and expand their efforts to community education, outreach and prevention activities. The MHD has approval for 21 new Mental Health Peer Support Workers, a new county classification, and is in the process of interviewing and selecting these new staff. This is an important milestone for the system.
- **Suicide Prevention Action Plan** –The MHD has successfully launched the Suicide Prevention Action Plan. Activities include implementing suicide prevention policies throughout local city and education jurisdictions; training 89 community members in Applied Suicide Intervention Skills (ASIST); launching a BETA testing of QPR; facilitating training of media personnel and elected officials throughout the county; implementing improved data collection of suicide related activities in the county; and initiating efforts to obtain American Association of Suicidology (AAS) credential for the suicide hotline.

**B. MHSA Innovation Plans** – Eight new pilot plans have been approved by the Oversight and Accountability and will provided a range of innovative new programs across the lifespan. They include:

**FY12 Update:**

- **Innovation 1 - Universal Developmental Screening:** This innovation project offers a vital opportunity to identify and treat children with developmental needs who may go unidentified due to the lack of effective and accessible developmental screening and referral processes during well-baby/well-child pediatric visits. This project examines the utility of electronic developmental screening as a way to identify a greater number of children who may otherwise go unnoticed due to the lack of available developmental screening within pediatric settings. Due to HHS Information Systems security concerns regarding patient access to the HHS network via county-owned equipment, we are currently pursuing two options in order to implement this project. As we believe the implementation of electronic Universal Developmental Screening is vital to the well-being of young children's developmental progress, we are continuing to pursue discussion with HHS IS and the developmental software vendor in order to make the screening available to VMC pediatric clients. In addition, we are exploring the possibility of contracting with a 3<sup>rd</sup> party vendor to implement the innovation of electronic universal developmental screening in an outside pediatric clinic.
- **Innovation 2 - 24-hour Peer run TAY Inn:** This innovation project expands a promising new peer mentoring approach into a 24-hour care setting designed to promote wellness and recovery for TAY. Peer-led staff with support from professional staff will lead the responsibility for decision-making to run the facility and the provision of program services. The programs offered will be informed by wellness and recovery approaches that are effective in helping TAY develop skills and increase capacity to achieve life goals. In addition to helping TAY stabilize and gain self-awareness and skills within a safe environment, the program will also serve as bridge for access into appropriate ongoing services and supports in the broader system of care within the county. A contractor (Bill Wilson Center) has been selected to implement this project. Bill Wilson Center will begin implementing services in December 2011.
- **Innovation 4 – Older Adult Storytelling.** A culturally proficient MHSA Innovation funded program for isolated and depressed seniors using life review (storytelling) strategies designed for Spanish, Vietnamese speaking and elders 60 years of age. This project adapts a strength-based approach into the mental health system. The RFP was issued on June 30<sup>th</sup> and the department is in the process of negotiating the contract for the provider(s) of this service. Expected implementation is Dec1, 2011.
- **Innovation 5 - A Multi-Cultural Peer/Family Run Community Center.** A multi-cultural peer/family run community center site has been selected, however it requires extensive renovations which may be cost prohibitive for the project. Estimates of the renovation are being obtained. As a contingency plan additional sites are being reviewed for viability.

- **Innovation 6 - Transitional MH Services to Newly Released County Inmates.** The Innovation-6 Project is partnering with the Re-Entry Network Co-Chaired by Supervisor Shirakawa and Sheriff Laurie Smith to host a Faith Community Forum to discuss the County's Criminal Justice Realignment Plan. The goals of this forum are: 1) Engage the faith community in a meaningful way and to stimulate natural community support for re-entry clients; 2) Identify existing community resources that can be supported by the Mental Health Department to expand service capacity and better serve the needs of the client; 3) Develop a volunteer/mentor network to help clients navigate the re-entry process and improve outcomes; and, 4) The creation of "Faith Collaborative" so that congregations can remain engaged in the re-entry process and continue working together to promote strong communities, and reduce re-incarceration by helping clients maintain community connectedness.
- **Innovation 7 - Mental Health / Law Enforcement Post-Crisis Intervention.** The Mental Health/Law Enforcement Post-Crisis Intervention project was created to provide post-crisis mental health response to persons of all ages who live in the City of San Jose. The SCCMHD's Post-Crisis Intervention project, which was developed in partnership with the San Jose Police Department (SJPD) is providing immediate, compassionate, post-crisis intervention by a culturally competent team comprised of a peer advocate and a clinician to individuals and families who experience a law enforcement involved mental health/suicide related event. The project is expected to improve mental health crisis resolution, service engagement and outcomes as well as improve interagency collaboration.
- **Innovation 8 - Culturally specific Interactive Video Simulator Training for Police.** Innovation 8 Project 8 has progressed well. Focus groups contributed to the creation of six culturally specific scenarios depicting people with mental illness in crisis. Scripting, pre-production, filming and editing have been completed. Lesson plans and a PowerPoint presentation have been developed, and the training and interactive video simulations have been beta tested on a group of officers representing County police agencies. Public roll out is now being scheduled, after which the training will be made available at no cost to local police agencies. Our team of Law Enforcement Liaisons was invited to present this project at the recent International CIT Conference, and will be presenting it to the California Commission on Peace Officer Standards and Training in November.

**C. Criminal Justice System of Care** – In collaboration with Justice partners a continuum of post custody intensive support, temporary housing, and treatment services has been put in place.

**FY12 Update:**

**AB109-** As a result of new AB109/117 planning in Santa Clara County, the MHD has developed a new Innovation Plan titled the **AB109 Multidisciplinary Re-Entry Pilot.** The pilot was launched on October 1, 2011 and will study the needs of the re-entry population and will develop a screening and referral system to access clients to needed housing, health, behavioral health, benefits, employment, peer and family support services. The goal will be to identify key service and system strategies to put in place to

reduce recidivism and improve health and behavioral health and overall social adjustment of probationers.

- D. Customer Service Training** - In an effort to improve customer satisfaction and reduce consumer complaints, all mental health staff (including clerical, clinical and psychiatrists) are required to attend a Customer Service training. The objective for this training is to develop a more effective method of serving consumers with mental health conditions in a “person-centered” manner. To better understand the current customer service process and roadblocks to better customer service, key staff was interviewed.

**FY12 Update:** The Customer Service Tiger Team is working on developing a Customer Services Toolkit. The goal of the toolkit is to provide details about creating an environment for clients and their families that incorporates a “client- centered” approach within the full range of client experiences who enter our Mental Health System. The team responsible for working on the Toolkit reflects the collective wisdom of a collaborative of cross-departmental teams from Adult and Older Adult Division, Family and Children’s Division and the Learning Partnership Division, and includes representation from the clinical, management, clerical and consumer peer support staff.

The Toolkit will launch with a customer-centered assessment tool to be administered in locations where mental health clients are served. The intent of the assessment tool is to address staff resource and service knowledge gaps, site specific needs, staff behavior expectations, etc. Ultimately, the intent is to have a working Toolkit offering the blueprints and tools needed to transform concepts into action, through the inclusion of specific goals, scripts, tip sheets and protocols that provide specific strategies and address a client-centered culture that will fundamentally lead to organizational change.

## **II. Infrastructure Initiatives**

The following initiatives are underway to improve supporting functions of the MHD.

- A. Workforce Development** - The MHP is implementing its approved MHSA Workforce Education and Training (WET) plans. Trainings have been expanded to include: Cultural Competency Trainings for specific cultural and ethnic groups; Client centered treatment planning; Crises intervention training for non-clinical staff; Mental Health First Aid; Basic Computer classes for consumers and family members, understanding and treating Hoarding; older adult and multicultural elder specific trainings; and a play therapy training.

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- B. Technology Development Plan** - The MHP is implementing its approved MHSA Technological Needs projects, including the full implementation of an electronic health record.

## Update FY12:

- **EHR:** SCVHHS has elected to move towards an integrated core system, which will include Mental Health Department and Department of Drug and Alcohol Services. SCVHHS has selected a finalist vendor and will soon finish negotiations to reach an agreement for a major project to begin shortly thereafter. Mental Health Department and Department of Drug and Alcohol Services will be implemented in the first phase beginning in January 2012.

Community based organizations providing mental health services as contractors to the Mental Health Department will be migrating to their own EHRs using a small amount of financial assistance from MHSA Technology funds plus their own resources. Contractors will continue to send information to Unicare for billing, claiming and reporting

- **Data Warehouse:** A data warehouse is in development to house Mental Health Department and Department of Drug and Alcohol Services information. Currently the following concepts are being developed:

Development of the warehouse infrastructure for reports that capture business operations with a focus on billing and payment at the client as well as the program level. This will be a pilot to determine data needed, organization of that data in the warehouse, and reporting outputs.

Analysis of the scope of data and infrastructure needed to produce DADS outcome measures reports. Analysis of the scope of work involved with producing reports and graphics associated with the Mental Health dashboard project

- **Consumer Learning Centers;** The purpose of the CLC project is to provide additional support for consumers in Mental Health recovery programs and those living in the community by setting up supervised computer labs and basic PC skills training in established Self Help Centers across the County. The project will be implemented in phases beginning with the Downtown Mental Health Self Help Center and Evans Lane residential and outpatient programs
- **Bed and Housing Exchange:** Mental Health Department will contract with an ASP to provide an inventory of housing availability for Mental Health clients. An RFP is being prepared to solicit proposals from which a selection will be made in late FY 2012
- **WEB Redesign:** Migrating the Mental Health website and increasing content to better support consumers and family members is being explored with the County Information Services Department. This includes issues of design, content and security.

**C. Ethnic and Cultural Community Advisory Committees** – The MHD continues to support this important initiative which consists of over 50 consumers and family members from underserved ethnic communities. Seven distinct groups are in place to

provide outreach, engagement, service linkage and advocacy for underserved ethnic populations. As the year progresses the staffing pattern will change as 21 coded positions are filled to provide ongoing support to this program.

- D. Consumer and Family Involvement** - The MHP continues to prioritize the expansion of consumer- and family-run programs; the MHP is also continuing to improve the services that family members receive as they support their loved ones' recovery. In the past year the Department has been authorized coded Mental Health Peer Support Worker (MHSPW) county positions. The MHSPW codes will provide services to consumers in the self-help centers, at the clinical treatment programs and as family liaisons. The Department has three (3) full-time codes and fifteen (15) half-time codes along with a complement of Dependant Contractors to round out the staffing of the programs. Department staff is currently conducting the selection process for these positions with all codes to be filled by January 2012. The focus for this year's program is to expand the variety of activities and recovery services that are offered at the three self-help programs, increase peer support services at the county clinics and develop the Office of Family Affairs. An ongoing effort is to involve MHSPW staff in all operational and planning meetings that the department conducts to ensure mental health services reflect the needs of the consumers.
- E. Student Intern and Career Pathways** – The Learning Partnership Division has developed several tracks of training, internship and support for paraprofessional, undergraduate and graduate students.
- F. Procurement Improvement Project** – The MHD has been offered support from the County Chief of Procurement Services. A pilot project that will include technical expertise and guidance from procurement experts will be dedicated to assist the MHD in improving procurement business processes in it's management of close to 500 contracts annually. The Procurement Department has provided training to Operations and Contracting staff on vendor solicitation and contracting processes, and has completed the process mapping project related to the contract execution process. The next step in this project will be a briefing by the Procurement Department to the Mental Health Department's Executive Management team on what has been learned through their technical assistance, training sessions and process mapping. This information will help decide what needs to be accomplished to improve, standardize and streamline the Mental Health Department's vendor solicitation and contracting process.

### **III. Countywide & Health System Initiatives –**

- A. Strategic Planning Health System** - The MHP is working with partners at every level to ensure that the organization is in a position to implement or adopt the changes required by Health Care Reform. Key executive leaders are meeting bi-weekly to outline a strategic integrated plan to present to the Board of Supervisors in November 2010.

**FY12 Update:** The strategic plan was completed and approved by the Board of Supervisors in January 2011. The HHS system has proceeded with work on strengthening the Health system with an emphasis on the triple aim objectives of Health Care Reform. There is a new Finance Director and Information System Director and

plans have been launched to implement the new system-wide information system through a new vendor EPIC.

- B. 115 Medi-Cal Coverage Initiative** – A small group of SCVHHS leaders are preparing the application to expand coverage and to create a “bridge to 2014” when healthcare reform is implemented in 2014. The plan will include an emphasis on behavioral health benefits.

**FY12 Update:** The County HHS has implemented the new Low Income Health Plan (LIHP) to those with incomes under 75% of poverty. The new plan (Valley Care II) will have a robust mental health and substance use benefit and has enrolled over 6700 in the plan thus far, to our goal of 20,000. MHD sits of the oversight committee and is actively involved in enrollment of new members.

MHD also is involved in the Delivery System Reform Incentive Pool (DSRIP) and has a project for behavioral health integration.

- C. Destination:Home** – This multi-jurisdictional public/private initiative to end homelessness in Santa Clara County is active and growing.

**FY12 Update:** The MHD is an active participant in the initiative and provides leadership to support services and housing development for homeless mentally ill populations. The County has prioritized ending and preventing chronic homelessness in Santa Clara County by 2015. Across the nation, research shows that chronically homeless individuals utilize a disproportionate share of health and custody services. Providing permanent supportive housing to chronically homeless individuals significantly reduces their utilization of acute and jail services; these outcomes result in cost-avoidance and/or reduced local expenditures. In FY12, the County created the position of the Director of Homeless Systems within the MHD to work closely with Destination: Home - a multi-jurisdictional public/private partnership. The position oversees the MHD's Office of Housing and Homeless Support Services (OHHSS), and is tasked with developing and implementing a coordinated interdepartmental response to address chronic homelessness. The OHHSS is focused on working with departments to: 1) Develop the appropriate infrastructure to accurately assess the scope of the problem, report on outcomes, evaluate interventions, and document cost savings; 2) Develop additional housing and services; and, 3) Develop and implement policies to prevent chronic homelessness.

- D. Children's Cross Agency Systems Team** – This cross agency collaborative has established key goals and strategies to address the needs of children and families involved in county services.

**FY12 Update:** The collaborative has established a logic model including key goals and strategies to address the needs of children and families involved in county services. The indicators presented in this report are organized around both the cross systems partnerships that work together to support the results, and also around the four major barriers that could impede effective service integration (Access, Competence, Capacity and Coordination.) These outcome indicators were first identified and developed by the cross systems partners sharing the responsibility for the specific CAST goal.

**E. School Linked Services Planning** – The MHD will provide leadership and staff support to a new strategic planning process chartered by the Board of Supervisors to address health and human service needs of children in Santa Clara County.

**FT12 Update:** The School Linked Services Plan is near completion and will be presented to the Board of Supervisors in November for approval. This new initiative will consolidate child- and family-serving public services in order to better meet the behavioral health, health and social services needs of children at most risk of school failure and other negative outcomes in Santa Clara County.

**F. Nurse Family Partnership** – This initiative is a joint effort between the MHD and Public Health and will fund a team of nurse practitioners who will provide intensive case management and service support to young at risk pregnant women.

**FY12 Update:** The initiative has funded a team of 5 Public Health nurses who provide intensive case management and service support to first-time, low-income pregnant women. To date, NFP has enrolled 125 clients and 30 babies have been born since program inception in October 2010. Clients are primarily teen mothers with 43% between the ages of 15-17 years old and 27% between the ages of 18-19 years old.

**G. Public Health Smoking Cessation Initiative** –This initiative is the result of a large grant received by the Public Health Department to implement smoking cessation strategies in Santa Clara County. The focus will be to pilot a new intake process at 4 Mental Health clinics to encourage clinicians to ask, advise, refer and link clients who would like to quit smoking. Internal classes, brief counseling and nicotine replacement therapy options will be provided as appropriate.