



Mental Health Services Act (MHS 63) Steering Committee Meeting

Please join us!

The MHS 63 Steering Committee meets twice a year and has the important role of making recommendations to the planning and services development process of MHS 63 to ensure that local diverse needs and priorities are reflected.

Tuesday, March 15, 2016 / 3-5 pm
399 Marine Pkwy, Redwood City, CA

Agenda items include updates on the MHS 63 Innovations projects and the new PEI regulations and providing input on the new MHS 63 grievance process and steering committee membership process.

- *open to the public
- *stipends available for consumers/clients participating in this meeting
- *language interpretation and childcare are available, please contact Doris Estremera at (650)573-2889 or destremera@smcgov.org to reserve these services
- *light refreshments will be provided

MHS 63 provides a dedicated source of funding in CA for mental health services by imposing a 1% tax on personal income in excess of \$1 million. The MHS 63 Steering Committee has the important role of making recommendations to the planning and services funded by MHS 63 in San Mateo County. For more information on MHS 63 in San Mateo County, please visit www.smchealth.org/bhrs/mhsa

For questions and/or comments, contact :
Doris Estremera,
MHS 63 Manager
(650)573-2889
destremera@smcgov.org



**San Mateo County Health System
Behavioral Health and Recovery Services Division**



Mental Health Services Act (MHSA) Steering Committee

Tuesday, March 15, 2016 / 3:00 - 5:00 PM

Redwood Shores Library, Community Room, 399 Marine Pkwy, Redwood City, CA 94065

AGENDA

- 1. Welcome & Introductions** 3:10 PM
Supervisor Dave Pine, District 1, Board of Supervisors

- 2. MHSA Background & Updates** 3:15 PM
 - Annual Update, Innovations and Public Comment Period
 - New PEI Regulations

*Doris Estremera, MHSA Manager
Steve Kaplan, Director BHRS*

- 3. MHSA-Funded Program Presentation** 3:30 PM
 - Digital Storytelling

- 4. Input** 4:00 PM
 - MHSA Grievance Process
 - MHSA Steering Committee Membership Process

- 5. Announcements** 4:30 PM

- 6. Adjourn** 4:45 PM

MARK YOUR CALENDARS!

A Public Hearing to close the 30-day comment period for the MHSA Innovation Plans will take place at the next Mental Health Substance Abuse and Recovery Commission meeting.

**MHSARC Meeting , Wednesday, April 6, 2016, 3-5pm
Health System Main Campus, Room 100,
225 37th Ave. San Mateo, CA 94403**



Mental Health Services Act (MHSA) Steering Committee

March 15, 2016

San Mateo County Health System
Behavioral Health and Recovery Services

www.smchealth.org/bhrs/mhsa



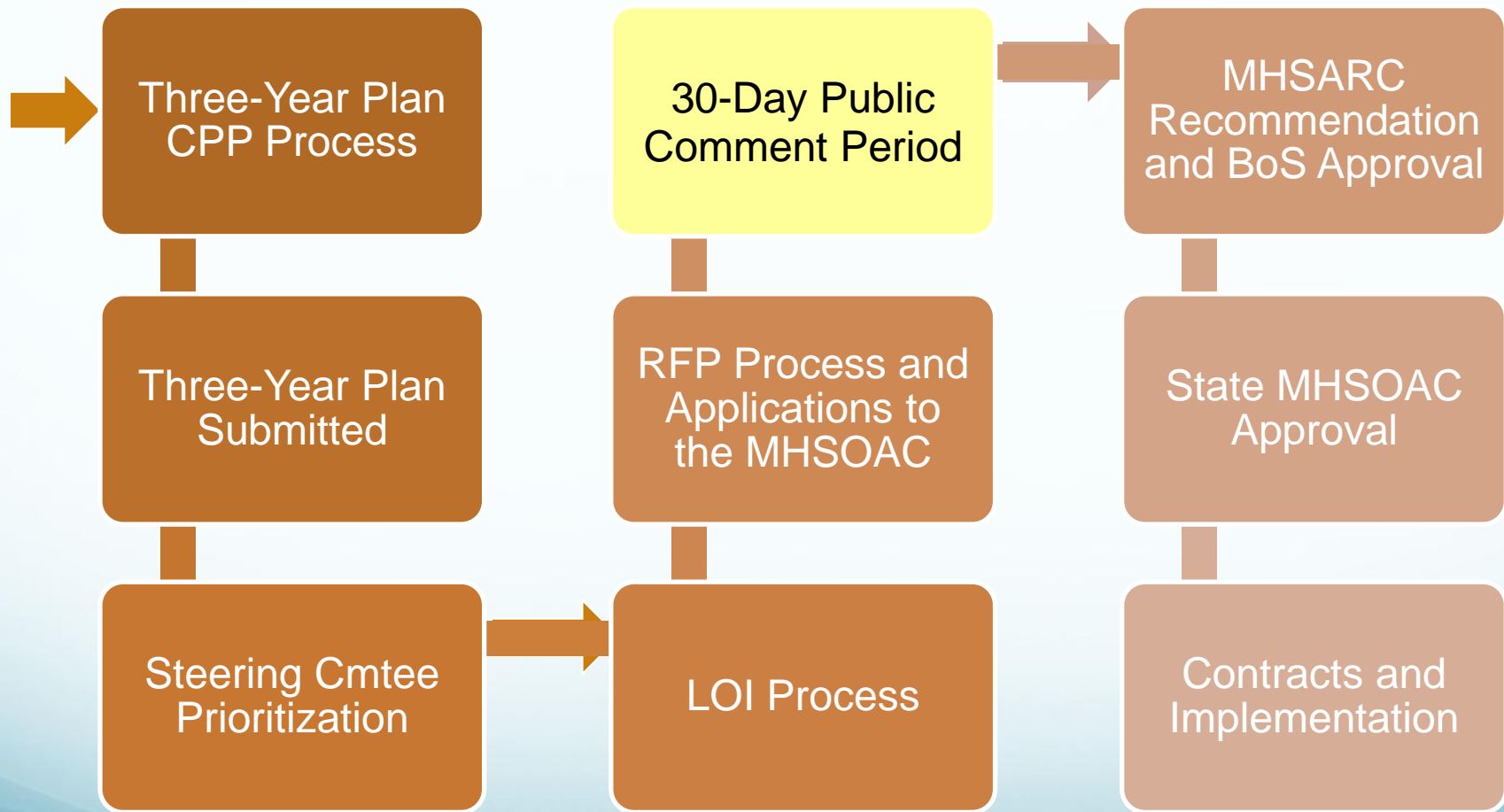
Background – MHSA

- Proposition 63 (2004) – 1% tax on personal income in excess of \$1 mill

Component	Annual Funding Allocation	Reversion Period
Community Services and Supports (CSS)	75—80%	3 years
Prevention and Early Intervention (PEI)	15—20%	3 years
Innovations (INN)	5%	3 years
Workforce Education and Training (WET)	One Time Funding (06/07 and 07/08)	10 years (expires 6/30/18)
Capital Facilities and Information Technology	One Time Funding (07/08 and 08/09)	Completed
Housing	One Time Funding (07/08)	Completed

- Stakeholder Input Process and Annual Updates

MHSA Innovation Process *(handout)*



CPP – Community Program Planning
RFP – Request for Proposal
LOI – Letter of Interest

MHSOAC – Mental Health Services Oversight and Accountability Commission (State of CA)
MHSARC – Mental Health Substance Abuse and Recovery Commission
BoS – Board of Supervisors

Proposed INN Projects

Category*	Project / Next Step	Estimated cost per year
Alternative Healing Practices	NMT expansion to adults (Expansion)	\$100,000
Client Advocacy	Youth Health Ambassador Program (RFP Released 12/15/15)	\$250,000
LGBTQQI	Coordinated LGBTQQI services (RFP Released 1/15/16)	\$700,000
Housing	TBD (no LOI's received)	TBD
Technology Innovations	Social media and texting for youth in crisis (Expansion**)	\$100,000
	Client lifestyle data tracking app (Pilot followed by RFP)	\$200,000

*listed in order of Steering Committee prioritization

**StarVista currently runs the youth crisis line for San Mateo County

More MHSA Updates

Evaluation Activities

- Harder + Co – outreach and PEI evaluation implementation
- AIR – FSP outcome report

New PEI Guidelines

- In effect January 1, 2016
- Implementation
 - MHSA Steering Cmtee input
 - Statewide meeting with MHSOAC
 - Next steps: bring PEI programs together, begin setting up infrastructure

Program Presentation

Digital Storytelling

MHSA Community Program Planning (CPP)

- DHCS has incorporated MHSA questions into Triennial Medi-Cal Review
- Strong emphasis on CPP process requirements (handout)
- In an effort to be proactive we are looking at two specific areas to strengthen:
 - MHSA Steering Committee membership
 - MHSA Issue Resolution process

Input Activity

- Small Group Breakouts

- Current state
- Refer to Handout re: MHSA Steering Committee
 - **Initial reactions to the proposed changes, comments/concerns?**
 - 50% represent families/clients
 - 50% cultural diverse backgrounds
 - Stakeholder groups
 - Selection process
 - Attendance
 - **Moving forward – interest in selection group, grandfathering in, other?**
 - Report back (10min)

Public Comment

Announcements

- MHSa website subscriber feature, BHRS blog, Wellness Matters
www.smchealth.org/bhrs/mhsa
<http://smcbhrsblog.org>
www.smchealth.org/bhrs/wm
- MHSARC Meeting every 1st Wed of the month
MHSa Public Hearing for Innovation Plans
April 6, 2016 (3-5pm)
225 37th Ave. San Mateo, Room 100
- Other Announcements?

Thank you!

For questions or comments contact:

Doris Estremera, MHSA Manager at destremera@smcgov.org
or (650) 573-2889



MHSA Community Program Planning (CPP) Summary of Requirements

Who Should be Involved in the Stakeholder Process

WIC § 5848 states that each Annual Update shall be developed with local stakeholders, including:

- Adults and seniors with severe mental illness
- Families of children, adults, and seniors with severe mental illness
- Providers of mental health services
- Law enforcement agencies
- Education
- Social services agencies
- Veterans and representatives from veterans organizations
- Providers of alcohol and drug services
- Health care organizations
- Other important interests (e.g., individuals served by Prevention and Early Intervention (PEI) and Innovation (INN) projects).

CCR § 3300 further includes:

- Representatives of unserved and/or underserved populations and family members of unserved/underserved populations.
- Stakeholders that reflect the diversity of the demographics of the county, including but not limited to, geographic location, age, gender, and race/ethnicity
- Clients with serious mental illness and/or serious emotional disturbance, and their families.

What Should be Included in the Stakeholder Process

WIC § 5848 states that counties shall demonstrate a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on:

- Mental health policy
- Program planning
- Implementation
- Monitoring
- Quality improvement
- Evaluation
- Budget allocations.

CCR § 3300 states that involvement of clients and their family members be in all aspects of the CPP process and that training shall be offered, as needed, to stakeholders, clients, and client's family who are participating in the process.

Standards

CCR § 3320 states that counties shall adopt the following standards in planning, implementing, and evaluating programs:

1. Community collaboration
2. Cultural Competence
3. Client-Driven
4. Family-Driven
5. Wellness, recovery, and resilience-focused
6. Integrated service experiences for clients and their families

Public Review

WIC § 5848 states that a draft Annual Update shall be prepared and circulated for review and comment for at least 30 days to representatives of stakeholder interests and any interested party who has requested a copy. Additionally, the mental health board shall conduct a public hearing on the draft Annual Update at the close of the 30-day comment period. It also should review the adopted Annual Update and make recommendations for revisions.



MHSA Steering Committee

The MHSA Steering Committee plays a critical role in the development of MHSA program and expenditure plans. Specifically, the MHSA Steering Committee makes recommendations to the planning and services development process and as a group, assures that MHSA planning reflects local diverse needs and priorities, contains the appropriate balance of services within available resources and meets the criteria and goals established. The Steering Committee meetings are open to the public and will include time for public comment as well as means for submission of written comments.

Guiding Principles

- Focus on wellness, recovery and resilience
- Cultural and linguistic competency
- Consumer/family-driven services
- Integrated service experience for families and consumers
- Community collaboration

Composition and Membership

The Steering Committee will be co-chaired by a member of the Board of Supervisors and the chair of the Mental Health and Substance Abuse Recovery Commission (MHSARC). Membership will include a broad and diverse set of stakeholders as listed below.

At least 50% of Steering Committee members will represent:

- Clients/consumers of BHRS
- Families of children, adults, and seniors clients/consumers of BHRS

At least 50% of ALL positions will include individuals from diverse cultural and ethnic groups including, Pacific-Islander, LGBTQ, African-American, Filipino, Latino, Chinese, and Native American groups.

Minimum 1-2 seats will represent:

- Client/Consumers (youth, TAY, adults, older adults, substance abuse)
- Families of children, adults, and seniors clients/consumers
- Providers of mental health and alcohol and drug services
- Providers of social services
- Law enforcement agencies
- Veterans and /or representatives from veterans organizations
- Health care organizations
- Education
- Cultural competence and diversity
- Disabilities
- Other interests (aging and adult services, youth advocacy, individuals served by PEI/INN, etc.)

Members of the Steering Committee will be appointed by the BHRS Director after recommendations by a MHSAs Membership Selection Group consisting of the MHSAs Manager, MHSAs Steering Committee member(s) and a representative of the Office of Consumer and Family Affairs and/or the Office of Diversity & Equity. Applications will be accepted on a rolling basis and reviewed biannually during January and May of each year. All selected members will be required to attend an initial orientation regardless of previous experience with organizations or agencies, such as boards, committees, workgroups, service providers, etc. Please visit the MHSAs website www.smchealth.org/bhrs/mhsa for the MHSAs Steering Committee application and the most up-to-date membership list.

Roles and Responsibilities

The Steering Committee will oversee the Community Program Planning (CPP) process and development of the MHSAs Three-Year Program and Expenditure Plan (MHSAs Plan) and the Annual Updates. The role of the Steering Committee will be to assure that the recommended MHSAs Plan

- reflects local needs and priorities,
- contains the appropriate balance of services within available resources, and
- meets the criteria and goals established by the state Mental Health Services Oversight Accountability Commission (MHSOAC).

Instructions and guidelines for the development of the plan can be found at the MHSOAC website, www.mhsoac.ca.gov.

The Steering Committee will also:

- Review input received through the CPP process and make recommendations for strategy development.
- Recommend priorities for inclusion in the MHSAs Plan. The MHSARC will open a 30-day public comment period for the Draft MHSAs Plan and subsequently, a public hearing.

MHSAs Planning Timeline

MHSAs planning, implementation and updates are on a Fiscal Year (FY) calendar July 1 – June 30.

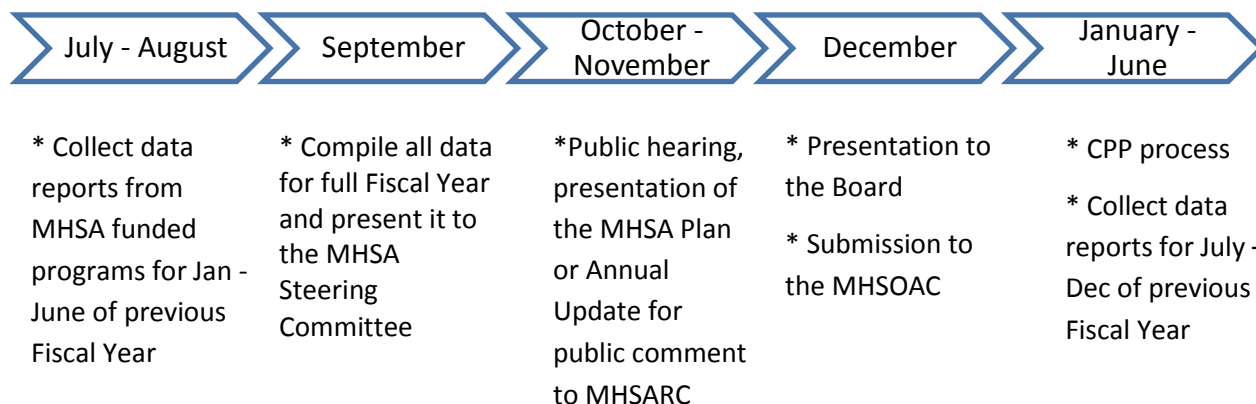
Counties are required to plan for and submit a Three-Year MHSAs Plan and Annual Updates each year.

Current Three-Year Implementation Phase: July 1, 2014 through June 30, 2017

Annual Updates Due: December 2015, December 2016, December 2017

Next Three-Year Planning Phase: January 2017 – April 2017

Next Three-Year MHSAs Plan Due: December 2017



Steering Committee Meetings

- The MHSa Steering Committee will **meet twice a year in the Fall and Spring** during Implementation Phase July 1, 2014 – June 30, 2017.
- As we begin the Planning Phase, January 2017 – April 2017 for the next three years of MHSa services there may be 1-2 additional meetings to allow for more engagement in the CPP process and making recommendations.

Given that there are only 2-3 meetings per year, consistent attendance is very important. We will make every attempt to provide you meeting date, time and location well in advance. Unfortunately, our seats are limited and Steering Committee members who miss two consecutive meetings or two-thirds of meetings over the course of a year may be removed from the committee. Extenuating circumstances will be considered and the MHSa Membership Selection Group will make the final decision.

For any additional questions about the the Steering Committee please contact Doris Estremera, MHSa Manager at mhsa@smcgov.org or (650) 573-2889.



MHSA STEERING COMMITTEE REPRESENTATIVE APPLICATION OF INTEREST



Name: _____

Address: _____

Phone #: _____ E-mail: _____

1. Which stakeholder representative seat you are applying for (select all that apply)?

- Client/Consumers (youth, TAY, adults, older adults, substance abuse)
- Families of children, adults, and seniors clients/consumers
- Providers of mental health and/or alcohol and drug services
- Providers of social services
- Law enforcement agencies
- Veterans and /or representatives from veterans organizations
- Health care organizations
- Education
- Cultural competence and diversity
- Disabilities
- Other interests (aging and adult services, youth, individuals served by PEI/INN, etc.)

2. Age: <15 years 16-25 years 26-59 years 60+ years Decline to state

3. Gender assigned at birth: Male Female Decline to state

4. Gender identity: Male Female Transgender Genderqueer
 Questioning Decline to state Other: _____

5. Sexual orientation: Bisexual Gay/Lesbian Heterosexual Queer
 Questioning Decline to state Other: _____

6. Race/ethnicity: (select all that apply)

African American Caucasian/White Native American Pacific Islander

Latino: Central American Mexican South American Other: _____

Asian: Chinese Filipino Other: _____

Decline to state Other: _____

7. What is your preferred language? (select ONE)

English Spanish Cantonese/Mandarin Tagalog Other: _____

8. Do you have a disability or learning difficulty? (select all that apply)

Difficulty seeing Difficulty hearing Physical/mobility disability

Learning disability Developmental Dementia

Chronic health condition Other: _____

Signature: _____

Name (printed): _____

Date: _____

Applications will be accepted on a continuous basis and reviewed bi-annually during January and May.

Please return your completed application via email, mail or fax to:

Colin Hart
225 37th Avenue, 3rd Floor
San Mateo, CA 94403-4324
Fax: (650) 573-2841
Email: MHSA@smcgov.org

SEE PAGE 3 FOR ADDITIONAL QUESTIONS →

1. Please describe your experience working with organizations or agencies, such as boards, committees, workgroups, service providers, etc.?

2. What is your experience working with communities of culturally diverse backgrounds?

3. Every individual has strengths to contribute to a steering committee, what are some of the strengths you would bring to the Steering Committee?