

Welcome to Lake County's LCBHS MHSa Public Hearing for the FY 2023-26 Three Year Plan!

¡Bienvenido a la audiencia pública de de MHSa de LCBHS del Condado de Lake para el Plan de Tres Años del Año Fiscal 2023-26!

While you're waiting for the meeting to start, please take a moment to fill out the sign-in sheet and demographic form if you're attending **in person**.

If you're joining **online**, please enter your name in the chat box and fill out the demographic survey by following the link or scanning the QR code below with your smartphone.

Mientras espera que comience la reunión, tómese un momento para completar la hoja de inicio de sesión y el formulario demográfico si asiste **en persona**.

Si se está uniendo **en línea**, ingrese su nombre en el cuadro de chat y complete la encuesta demográfica siguiendo el enlace o escaneando el código QR a continuación con su teléfono inteligente.

Demographic Survey Link (or scan QR code):
<https://tinyurl.com/Demographic-Form-FY-23-26>



Lake County's LCBHS MHSA Public Hearing for FY 2023-26 Three Year Plan



Welcome & Introductions

If you are attending in person, please take a moment to fill out the sign-in sheet. If you are online, please use the Zoom chat to introduce yourselves with your:

Name



Pronouns



Program





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Agenda & Objectives

Agenda

- MHSА Training & Education
 - MHSА Background
 - Three-Year Plan & Community Planning Process
- Community Needs Assessment Findings
- Proposed FY 23-26 MHSА Program Modifications
- FY 23-26 MHSА Program Budget Request
- Public Comment and Discussion

Objectives

- Present proposed MHSА Three-Year Plan developed with community input
- Provide opportunity for stakeholders to provide public comment

Meeting Tips




- For those attending in person, there will be a coordinator at each site to help manage the Zoom meeting and facilitate attendee participation.
- If you are joining virtually, please find a quiet, distraction-free location with a strong Internet or phone connection, if possible. Consider closing any unnecessary applications to improve Zoom performance.
- Please save any substantive comments, questions, or feedback. Clarifying questions may be asked during the presentation by raising your hand or entering your question into the chat.
- If you are attending in person, raise your hand and an on-site coordinator will let us know there is a question or enter your question into the chat.

How to Contribute to the Discussion





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Contribute to the discussion by:

 **Computer:** To speak through your computer click on the *participants* icon at the bottom of the screen and select the *raise hand* icon.

 **Phone:** To speak over the phone “raise hand” by pressing *9.

 **Chat:** To share a comment using the Zoom chat feature, click on the *chat* icon at the bottom of the screen and type your comment into the chat box. A meeting facilitator will review your comment.

 **E-mail:** Send your comments over email to Scott.Abbott@lakecountycal.gov

SECTION ONE

**Mental Health Services Act:
Training & Education**



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MHSA Background

- Proposition 63 passed on November 2, 2004
- 1% tax on income over \$1 million to *expand and transform* mental health services

**Wellness,
Recovery, &
Resilience**

**Cultural
Competence**

**Client- &
Family-Driven
Services**

**Integrated
Service
Experience**

**Community
Collaboration**

MHSA Overview



CSS: Community Services & Supports (76%)

Outreach and direct services for serious emotional disturbances or serious mental illness (all ages)

PEI: Prevention & Early Intervention (19%)

Prevent the development of mental health problems, and screen for and intervene with early signs

INN: Innovation (5%)

Test new approaches that may improve outcomes

WET: Workforce Education & Training

Build, retain, and train public mental health workforce

CFTN: Capital Facilities & Technology Needs

Infrastructure support (electronic health record, MH facilities)



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Current FY22-23 MHSA Programs

Community Services and Supports (CSS)	Prevention & Early Intervention (PEI)	Innovation (INN)
<ul style="list-style-type: none"> • Crisis Access Continuum • Forensic Mental Health Partnership • Full-Service Partnerships • Older Adult Access • Parent Partner Support • Trauma-Focused Co-Occurring Disorder Screening & Treatment • Outreach & Engagement* • Peer Support Centers* 	<ul style="list-style-type: none"> • Early Intervention Services • Family Stabilization & Well-Being • Older Adult Outreach & Prevention • Peer Support Recovery Centers* • Outreach & Engagement*/ Street Outreach • Postpartum Depression & Screening • Mental Health First Aid • Prevention Mini-Grants • Statewide, Regional, & Local Projects 	<p>Multi-County Full-Service Partnership Innovation Collaborative</p> <p>Capital Facilities & Technology Needs (CFTN)</p> <ul style="list-style-type: none"> • Capital Facilities • Electronic Health Record Project <p>Workforce Education & Training (WET)</p> <p>Workforce, Education, & Training</p>

*Outreach and Engagement programs and Peer Support Centers receive funding from both CSS and PEI



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MHSA Background & Overview

To learn more about the MHSA programs, please visit
LCBHS' MHSA website:

<https://www.lakecountycalifornia.gov/214/Mental-Health-Services-Act-MHSA>

SECTION TWO

**Three-Year Plan & Community
Planning Process**

Three-Year Plan & Community Planning Process



Purpose of Three-Year Plan:

To identify persistent mental health service gaps and develop strategies to address them over the next three fiscal years, based on the community needs assessment and stakeholder input, including:

- Program status and service accomplishments in FY 21-22
- Proposed program plan for next three-years, FY 2023-26
- Program changes beginning in FY 2023-24



Community Planning Process:

The MHSA intends that there be a meaningful stakeholder process to provide subject matter expertise to the development of plans focused on utilizing the MHSA funds at the local level

PEI Evaluation Reporting

In FY18-19, the MHSOAC updated PEI reporting requirements to include evaluation of PEI programs. Reporting requirements include:

PEI Annual Report:

- Consumers served, consumer demographic information, and program accomplishments in previous fiscal year
- Specific program implementation and outcome information based upon PEI service area

PEI Three-Year Evaluation Report:

- Program status, consumers served, and program accomplishments during the previous three fiscal years
- Specific program implementation and outcome information based upon PEI service area

The FY2023-26 Three-Year Plan includes LCBHS' FY23-24 PEI Annual Report. LCBHS has been working with all programs to strengthen data collection and outcome reporting, and PEI programs to strengthen PEI-specific reporting.



MHSA Stakeholders



Program planning shall be developed with local stakeholders including:

- Adults and seniors with severe mental illness
- Families of children, adults, and older adults with severe mental illness
- Providers of mental health services
- Law enforcement agencies
- Education agencies
- Social services agencies
- Veterans and representatives from veterans organizations
- Providers of alcohol and drug services
- Health care organizations
- Other important interests



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Roles & Responsibilities

Stakeholders

Present individual perspectives and lived experiences and share reflections of emerging strategies to meet the community's needs

Behavioral Health Services Department

Develop MHSA Three-Year Plan that is reflective of community needs, priorities, and identified strategies

Mental Health Advisory Board

Assure stakeholder involvement, review and advise on the MHSA Three-Year Plan, and conduct Public Hearing

Board of Supervisors

Review and approve the MHSA Three-Year Plan

RDA

Collect and present findings on the current system, offer recommendations for the future, facilitate discussions, and compile information into the MHSA Three-Year Plan



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MHSA Planning Activities



Phase I: Kickoff (Dec '22)

- Kickoff with LCBHS
- Document and regulatory review
- Materials development

Phase II: Needs Assessment (Jan - Mar '23)

- Conduct Community Meeting
- Launch Community Survey
- Conduct Focus Groups
- Collect Program Data

Phase III: Program Planning (Mar - Apr '23)

- Synthesize stakeholder input on needs and services
- Community report-back and planning meeting

Phase IV: Plan Development (Mar - Jun '23)

- Develop Three-Year Plan
- Public Posting
- Public Hearing
- Finalize Three-Year Plan & present to BOS

Mental Health Services Act: Training & Education

Stakeholder Poll

SECTION THREE

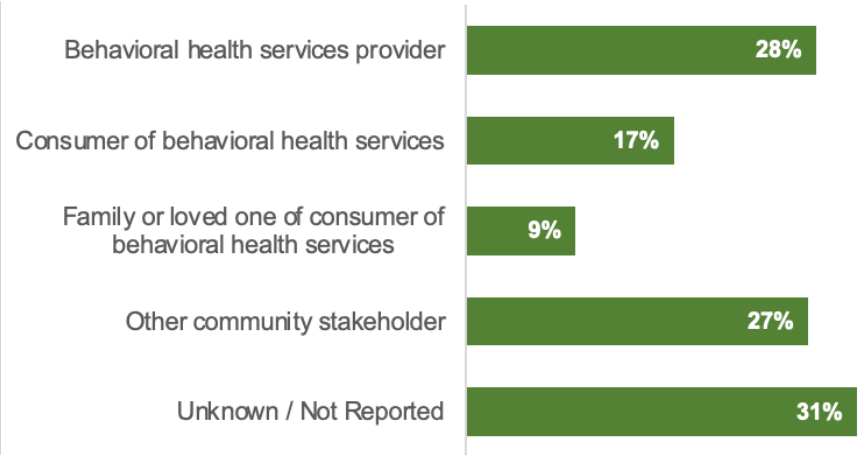
Community Needs Report-back

Needs Assessment: Stakeholder Participation

CPPP Activity	Activity Date(s)	Participants
Community Survey	1/6/23 - 2/28/23	108
Community Meetings (2)	2/2/23 & 3/23/23	155
Community Focus Groups:	2/14/23 – 2/28/23	43
LCBHS Provider Groups (2)	2/14/23 & 2/23/23	12
LCBHS Consumer / Community Groups (2)	2/23/23 & 2/28/23	10
Community Listening Session	2/23/23	21
TOTAL PARTICIPANTS*		306 PARTICIPANTS

*Total participants represent duplicated individuals as some individuals participated in more than one activity.

CPPP Participant Stakeholder Affiliation (N=306)

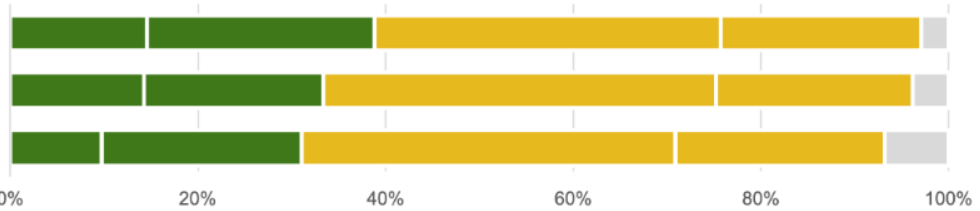


Needs Assessment Survey Findings

LCBHS Services Provided

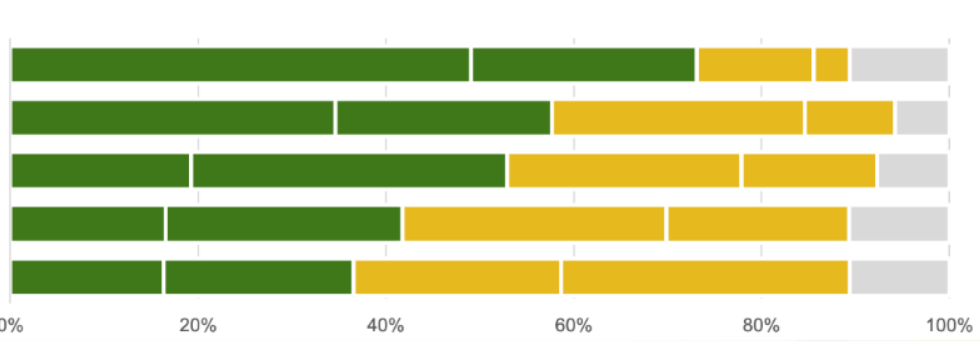
- Lake County's services meet the needs of people experiencing a mental health crisis
- Lake County's mental health services meet the community's needs
- Lake County's prevention and intervention services help people before they develop serious mental illness

Very True | Mostly True | A Little Bit True | Not at all True | Don't Know or N/A



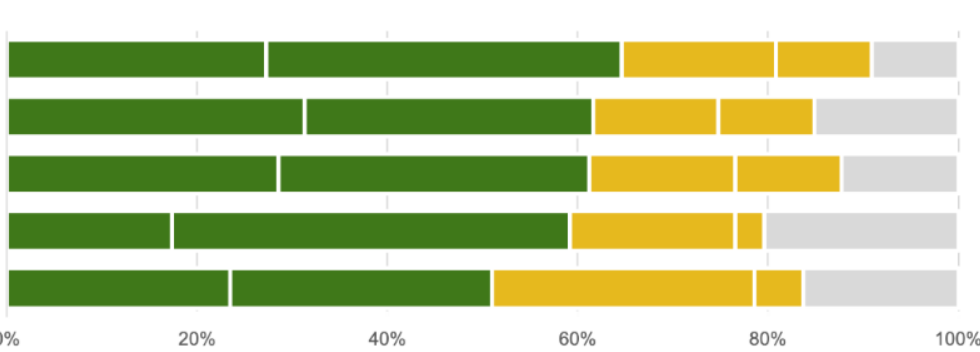
Access to LCBHS Services

- Lake County's hybrid service model improves access to mental health services.
- I know who to call or where to go if I or someone needs mental health support.
- Lake County's mental health services are available at convenient locations.
- Lake County's mental health services are available at convenient times.
- It is easy to get a mental health appointment when I or someone needs one.



Experience with LCBHS Services

- Lake County's mental health services are welcoming.
- Lake County's mental health services are respectful of clients' culture.
- Lake County's mental health services support clients' wellness and recovery.
- Lake County's clients and/or family members are involved in their treatment planning.
- Mental health providers work together to coordinate services.



Needs Assessment: System Strengths

- **Peer Support Centers**
 - Conveniently located, helpful and welcoming
 - Extended hours of operation and service regardless of “niche”
- **Friendly and supportive** LCBHS staff and leadership
- **Service Partnerships & Collaboration** focused on open communication and a lack of duplication of services
- **Services are accessible when:**
 - Services are **responsive and timely**
 - **Transportation is available**
 - **Flexibility** is afforded to the consumer
- **Telehealth and virtual services** increase service availability and accessibility
- Programs well received by stakeholders such as **Peer Support Centers, Mother-Wise, FSP, psychiatric services, and senior peer counseling**

I am very thankful for the nurturing staff and their consistent guidance on bettering myself and recovering from past experiences

-Consumer at Peer Support Center

LCBHS has partner agencies so there's a lot of collaboration among agencies and open communication so we can support the needs of the community

- Community Listening Session Participant

Needs Assessment: Challenges and Persistent Needs

- **Staff Shortage/Retention**
 - Limited access to **trained/licensed clinicians**
 - Limited staff capacity **affects timeliness and quality of care**
 - **Hard to recruit providers** due to pay, cost of living, location, etc.
- **Barriers to accessing/participating services**
 - **Service access challenges** such as transportation, location, Wi-Fi/Broadband issues, program closures and limited hours
 - **Insufficient culturally competent services** (particularly Latinx and Native American communities)
 - **Timeliness of services**, long wait times and lack of responsiveness
 - **Low levels of service awareness** and knowledge amongst consumers
- **Covid-19 Impact on services** and pivot to virtual services not being accessible or appropriate for everyone
- **Service gaps** and lack of infrastructure support for **care coordination**

We simply lack qualified staff; we lack the capacity to provide many key services. This creates higher stress on staff, who leave for better-paying, less stressful jobs. Perpetuating the pattern.
- Survey Respondent

Victims fall through the cracks; Nipomo baskets are woven in a way to keep in water, that is how we should treat our clients
-Consumer at Peer Support Center

Lake County Populations in Need

- **Unhoused population**
 - Low awareness and lack of follow up
- **Co-Occurring Issues (e.g., SUD)**
 - Limited services and resources available to meet high level of acuity
- **School-aged Children and Families/Parents**
 - Lowered mental health classroom engagement and high suicide rates
- **Youth/TAY**
 - Transportation issues (e.g., parents not getting off of work until 5pm, youth not able to drive, etc.)
- **LGBTQ+**
 - Need safe spaces to feel accepted
- **Undocumented Populations**
- **Older adults**
 - Access challenges
- **Latinx community (non-English speaking populations)**
 - Lack of bilingual services
 - Historic lack of trust
- **Native American community across all age groups**
 - Rise in teen suicide
 - Elder abuse
 - Historic lack of trust
- **Populations in rural areas**
 - Access challenges
- **Perinatal and postpartum moms**

Proposed Strategies to Address LCBHS System Needs and Challenges

Service awareness, outreach & access

- Improve staffing such as Behavioral health system navigators and community health workers
- Address transportation barriers
- Increase outreach and awareness
- More telehealth supports
- Improve convenience of locations like satellite clinics, more home visiting options etc.

Service Coordination

- Improve communication between agencies
- Adopt database to track clients such as ECM, Pathways Hub
- Avoid silos and align with CHIP and other initiatives like Hope Rising

Workforce, Education, & Training

- Workforce Incentives
- “Grown your own” staff
- Provide cultural competency trainings

Proposed Strategies to Address LCBHS System Needs and Challenges

Need for Consistent Funding

- For dependable programs/services like warming centers, after hours services
- Improve technical assistance, organizational capacity and expand building and facilities

Need for new services or expansion of existing services

- Prevention services focused on crisis prevention and service to all group types
- Mobile crisis response team
- Expand range of youth support services and mental health school outreach
- Provision of additional adult FSP programs prior to onset of crisis
- Expansion of case management services to address “grey area” of identified symptoms
- Expansion of co-occurring disorder services
- Growth of postpartum/perinatal services

Other System Needs

- Expand SUD services
- Improve access to basic needs such as shower services, comfort of homeless persons etc.
- Enhance social/community events
- Provision of emergency services
- Improve the 5150 screening system

SECTION FOUR

**Proposed FY 23-26
MHSA Programs & Modifications**

FY23-26 MHSA Programs & Modifications



Community Services and Supports (CSS)	Prevention & Early Intervention (PEI)	Innovation (INN)
<ul style="list-style-type: none"> • Crisis Access Continuum (Modified) • Forensic Mental Health Partnership • Full-Service Partnerships • Native American Peer Counseling (New) • Older Adult Access • Parent Partner Support • Trauma-Focused Co-Occurring Disorder Screening & Treatment (Modified) • Outreach & Engagement* (Modified) • Peer Support Recovery Centers* 	<ul style="list-style-type: none"> • Early Intervention Services • Family Stabilization & Well-Being • Older Adult Outreach & Prevention • Peer Support Recovery Centers* • Outreach & Engagement* (Modified) • Postpartum Depression & Screening • Mental Health First Aid • Prevention Mini-Grants • Statewide, Regional, & Local Projects 	<p>Multi-County Full-Service Partnership Innovation Collaborative</p> <div data-bbox="1217 502 1758 622" style="background-color: #cccccc; text-align: center; padding: 5px;"> Capital Facilities & Technology Needs (CFTN) </div> <ul style="list-style-type: none"> • Capital Facilities • Electronic Health Record Project <div data-bbox="1217 797 1758 917" style="background-color: #cccccc; text-align: center; padding: 5px;"> Workforce Education & Training (WET) </div> <p>Workforce, Education, & Training</p>

*Outreach and Engagement programs and Peer Support Centers receive funding from both CSS and PEI

FY23-26 MHSA Programs & Modifications



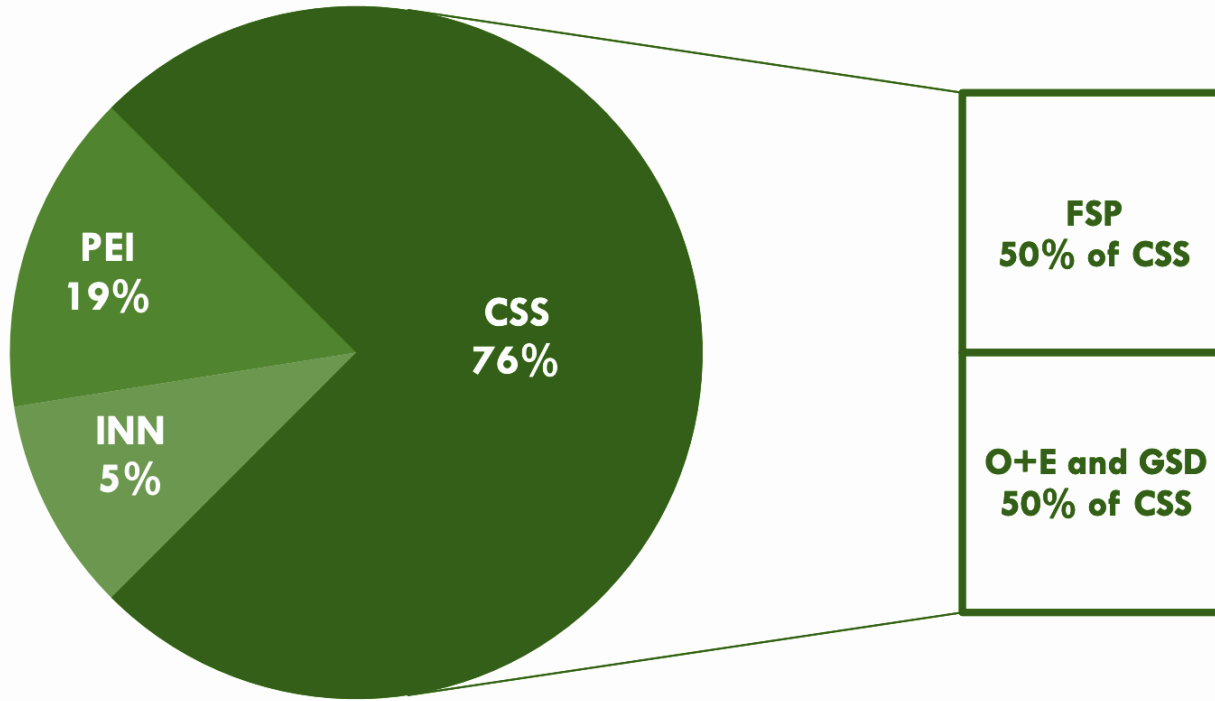
New Programs and Modifications:

- **Native American Peer Counseling Program:** New program with home- and community-based outreach, support, mentoring, and referrals to services for the Native American community; Funded under CSS
- **Crisis Access Continuum:** Addition of mobile crisis services provided by the Outreach Team and two additional peer support specialists added to the crisis team
- **Outreach and Engagement:** Addition of a second van purchased for the outreach and prevention team (OPS team) to respond to individuals with substance use or mental health issues
- **Trauma-Focused Co-Occurring Disorder:** Funding will be reduced and reallocated to strengthen and expand other MHSA programs

SECTION FIVE

**FY 23-26 MHSA Program Budget
Request**

MHSA Allocation Requirements



FY23-26 Estimated MHSA Budget Request

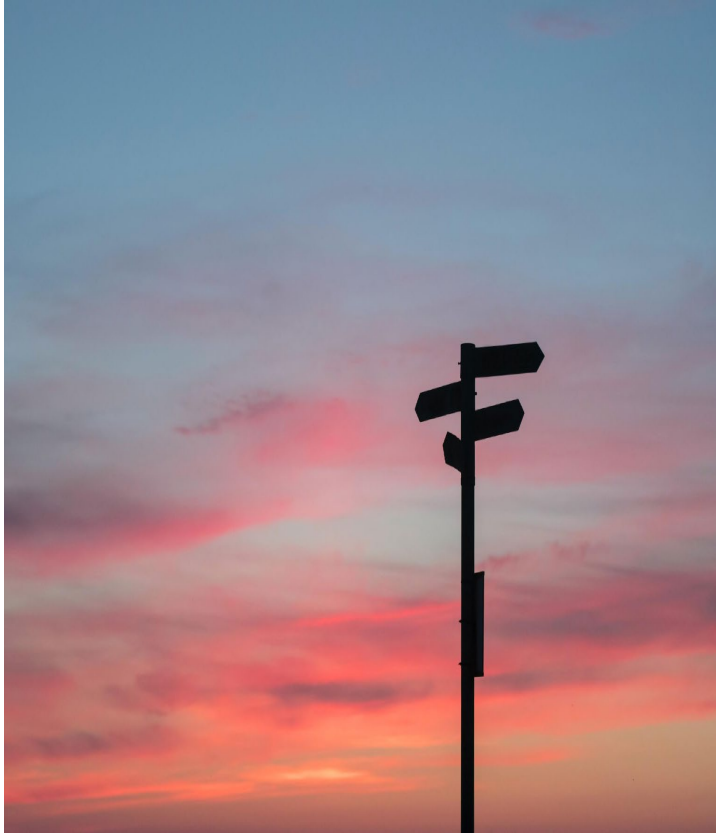
MHSA Component	FY 2023-24		FY 2024-25		FY 2025-26	
	Total Expenditure	MHSA Expenditure	Total Expenditure	MHSA Expenditure	Total Expenditure	MHSA Expenditure
CSS Programs	\$5,700,000	\$5,075,000	\$5,650,000	\$5,025,000	\$5,650,000	\$5,025,000
PEI Programs	\$1,540,000	\$1,400,000	\$1,415,000	\$1,275,000	\$1,415,000	\$1,275,000
INN Programs	\$37,500	\$37,500	\$37,500	\$37,500	\$410,000	\$410,000
WET Programs	\$340,000	\$340,000	\$265,000	\$265,000	\$265,000	\$265,000
CFTN Programs	\$1,062,000	\$1,062,000	\$32,000	\$32,000	\$109,534	\$109,534
TOTAL	\$8,679,500	\$7,914,500	\$7,399,500	\$6,634,500	\$7,849,534	\$7,084,534

Annual Revenue and Expenditure Reports (ARER)

- Purpose: Used to report MESA fund expenditures and identify interest earned and unspent funds on an annual basis
- Lake County's ARERs are available online through the LCBHS webpage:
 - Fiscal Year 2021-2022 ARER:*
https://www.lakecountycalifornia.gov/DocumentCenter/View/6929/MESA_ARER-FY21-22?bidId=
 - ARERs from past fiscal years:
<https://www.lakecountycalifornia.gov/Archive.aspx?AMID=46>

SECTION SIX

Public Comment & Discussion



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Public Comment



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Next Steps

Finalize Three-Year Report with Public Comments

Present Three-Year Report to
Board of Supervisors for Approval

Submit Plan to the Mental Health Services
Oversight & Accountability Commission (MHSOAC)

Meeting Feedback

Retroalimentación de la Reunion



We invite you to take our brief survey to share any feedback about this meeting, and to provide any additional comments about the MHPA FY 23-26 Three Year Plan. For in-person attendees, paper feedback forms are also available.

Lo invitamos a realizar nuestra breve encuesta para compartir cualquier comentario sobre esta reunión y para proporcionar cualquier comentario adicional sobre el Plan de Tres Años de MHPA FY 23-26. Para los asistentes en persona, también hay disponibles formularios de comentarios en papel.

Feedback survey URL (or scan QR code):
<https://tinyurl.com/Feedback-Form-FY-23-26>



Thank you!

¡Gracias!

Access recording and slides on this website

<http://www.lakecountyca.gov/Government/Directory/LCBHS/MHSA/Announcements.htm>

If you have any questions or comments, please contact:

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Patricia Russell, LCBHS: Patricia.Russell@lakecountyca.gov

Aditi Das, RDA: adas@rdaconsulting.com



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