September 16, 2014

Group #3 (Vanessa D): Focus on Adult Services

1. In looking at the key need and gap areas that have been identified so far, are there any, from your perspective, that are missing? If so, what are they?

- Peer run, peer administration that reflects cultural competency of community being served
- Prevention: Aftercare (to prevent relapse); education, vocational (supported employment, family involvement
- Family involvement with aftercare planning; support network
- Education; close the gap in understanding (mental health recovery process)
- Better collaboration of agencies to support individual
- Dynamic web base to support collaboration
- Psychiatrist on site at residential programs (like Casa Pacific)
- Work experience; help get back in workforce, resume, mentors, practice interview role play.
- Gaps in access for substance use disorders
- Legal assistance; help with/go between public defender. Clients don’t understand law, or their rights. Don’t rush through the system
- Mentors: legal, TIC, employment
- Help navigating the system
- True supported employment. Department of Rehab takes months; gap while waiting. Engage within 30 days. Job coaching/support.
- Trauma informed care, education, so volunteers are trained to support-supplement county staff
- Therapy groups at Mariposa: communication, mindfulness, CBT, medication side effect.
- More diverse classes at Casa Pacific
- Co-occurring- only one program and funding ends, and it is only in South County.
- Gaps in treatment, service provider knowledge, police knowledge (psychosis vs. SUD)
- Concerns people not getting proper meds in jail
- Lack of collaboration between mental health and police, jail, probation
- Too few advocates/mentors; more locations; how to find (database) access to information
- More individualized treatment
- More bilingual staff
- Provide slower, more in depth explanation of options
- How to go through system with support
- Mental health and substance use disorder collaboration
- Discharge medication phase (when transitioning residential to independent living)
- Concerns regarding staff turnover and pay.
- Restorative justice
• More alternatives to medication: mindfulness, natural sleep, transition/therapy, learn from experiences, education
• Housing, solar back pack for homeless
• Mental health and all agencies need to be on same page

2. Which need or gap areas are most important?
• Peer run, peer administration that reflects cultural competency of community being served
• Prevention: Aftercare (to prevent relapse); education, vocational (supported employment, family involvement
• Family involvement with aftercare planning; support network
• Education; close the gap in understanding (mental health recovery process)
• Better collaboration of agencies to support individual
• Work experience; help get back in workforce, resume, mentors, practice interview role play.
• Gaps in access for substance use disorders
• Legal assistance; help with/go between public defender. Clients don’t understand law, or their rights. Don’t rush through the system
• Mentors: legal, TIC, employment
• Trauma informed care, education, so volunteers are trained to support/supplement county staff
• Therapy groups at Mariposa: communication, mindfulness, CBT, medication side effect.
• Trauma informed care, education, so volunteers are trained to support/supplement county staff
• Co-occurring- only one program and funding ends, and it is only in Couth County.
• More individualized treatment
• More alternatives to medication: mindfulness, natural sleep, transition/therapy, learn from experiences, education
• Housing, solar back pack for homeless

3. Which need or gap areas should we focus on working on first?
• Collaboration (agencies, families)
• Individualized treatment (sustaining stability, strength, gains), mentors, families
• Navigation. Availability of information for patients and providers, mentors, families.
• Co-occurring disorders.

4. Are there specific need or gap areas that may be unique or different for South County.
• No specific priorities.