



Santa Cruz County
Mental Health & Substance Abuse Services

**Mental Health Services Act
Community Services & Supports
Expansion/Amendment Plan**

Draft for Public Comment
June 1, 2007

LETTER FROM THE MENTAL HEALTH & SUBSTANCE ABUSE DIRECTOR

June 1, 2007

On May 31, 2006 the State Department of Mental Health (DMH) approved the first phase of Santa Cruz County's Mental Health Service Act (MHSA) plan known as the Community Services and Supports component. Since that time, the Health Services Agency's (HSA) Mental Health and Substance Abuse Division has been working with community non-profit organizations, the Local Mental Health Board, the MHSA Steering Committee and other stakeholders to implement the new and enhanced services. I am pleased to report that services are generally proceeding as described in the work plans submitted to DMH.

Due to revenues in excess of projections, the DMH notified Counties that additional funding was available for the CSS component of the Mental Health Services Act (MHSA/Proposition 63) programs. Santa Cruz County Mental Health & Substance Abuse Services has completed a draft of the CSS Expansion/Amendment Plan. The Plan has been prepared according to instructions from the State Department of Mental Health (DMH), pursuant to DMH Information Notice #06-15.

The expansion plan relied on stakeholder input that was completed during the initial planning processes for the California Mental Health Services Act (MHSA), as well as the two Town Hall meetings that took place in November 2006.

The plan is available for public review from June 1, 2007 to June 30, 2007. This plan is accessible on line at www.santacruzhealth.org. You may call 831-454-4498 for additional information or to request a hard copy. Send your comments or feedback to mhsa@health.co.santa-cruz.ca.us or mhsa@co.santa-cruz.ca.us or write to:

Santa Cruz County Mental Health & Substance Abuse Services
1400 Emeline Avenue
Santa Cruz, CA 95060

There are of course many critical needs that remain for us to address in the future phases of MHSA funding. The Santa Cruz County MHSA Steering Committee will notify and engage the public as part of our planning for these subsequent components.

Sincerely,

Leslie Tremaine
Director

EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
 Program Work Plan #: 1
 Program Work Plan Name: Community Gate
 Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	*See below									6	
TAY										4	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	*See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

Work Plan # 1: Community Gate

Description of Services:

The Community Gate is designed to address the mental health needs of children/youth in the Community at risk of hospitalization, placement, and related factors. In our original plan we added two mental health clinicians with the goal of improving our system so that at-risk youth are identified earlier and can get help before problems get serious, and to increase services for youth with both mental health and substance abuse issues. Implementation has been successful in that more youth/families are receiving mental health services with better access to services in their community.

We propose to expand mental health services in the Community Gate to expand mental health services to all youth/families regardless of payer source. Contracts with Youth Services and Family Services will increase service capacity for families without Medi-Cal or Healthy Families benefits, and Youth Services will also have a slight increase in Medi-Cal/Healthy Families services. These services include assessment, individual, group, and family therapy with the goal of improved mental health functioning and maintaining youth in the community.

Description of Initial Population:

The Community Gate services are designed to create expanded community-linked screening/assessment and treatment of children/youth suspected of having serious emotional disturbances—but who are not referred from our System of Care public partner agencies (Probation, Child Welfare, Education). Particular attention will be paid to addressing the needs of Latino youth and families, as well as serving Transition-age youth.

Youth Services focuses on the needs of youth and transition-age youth, while Family Services serves children and youth up to age 21 and their families.

Services/Strategies:

- Education for children/youth and family or other caregivers regarding mental health issues
- Parental mental health education, with language access and culturally appropriate services
- Integrated services and supports for children/youth and their families with co-occurring mental health and substance use disorders within the context of a single child/family services and supports plan
- Services located in racial ethnic communities to reach children, youth and families who may be more responsive to services in these settings
- Services and supports provided at school, in the community and in the child/youth's home
- Values driven evidence-based and promising clinical services that are integrated with overall service planning and which support youth/family selected goals.

EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
 Program Work Plan #: 2
 Program Work Plan Name: Probation Gate
 Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	*See below									10	
TAY										5	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

Work Plan # 2: Probation Gate

Description of Services:

The Probation Gate is designed to address the mental health needs of youth involved with, or at risk of involvement, with the Juvenile Probation system. Of particular focus shared with Probation is the System of Care goal of keeping youth safely at home, rather than in prolonged stays of residential placement or incarcerated in juvenile hall. In our original plan we funded two community-based agencies to provide increased dual diagnosis (mental health/substance abuse services) for youth identified at juvenile hall and youth with multiple risk factors for probation involvement, with a primary focus on Latino youth. Implementation has been successful in that more youth/families are receiving mental health services, helping to decrease further involvement with the Juvenile Probation system.

We propose to further expand mental health services in the Probation Gate to more youth families regardless of payor source. Contracts with Youth Services and the Pajaro Valley Prevention and Student Assistance (PVPSA) program will increase service capacity for families without Medi-Cal or Healthy Families benefits, as well as a slight increase in Medi-Cal/Healthy Families services. These services include assessment, individual, group, and family therapy with the goal of improved mental health functioning and maintaining youth in the community.

Description of Initial Population:

The Probation Work Plan is designed to increase dual diagnosis (mental health/substance abuse) services to youth and families involved with the Juvenile Probation system, or at risk of involvement. This includes Transition-age youth aging out of the system, with particular attention paid to addressing the needs of Latino youth and families.

Services/Strategies:

- Integrated services and supports for children/youth and their families with co-occurring mental health and substance use disorders within the context of a single child/family services and supports plan
- Services located in racial ethnic communities to reach children, youth and families who may be more responsive to services in these settings
- Services and supports provided at school, in the community and in the child/youth's home
- Values-driven evidence-based and promising clinical services that are integrated with overall service planning and which support youth/family selected goals.

EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
 Program Work Plan #: 3
 Program Work Plan Name: Child Welfare Gate
 Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below									5
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Work Plan #3: Child Welfare Gate

Description of Services:

The Child Welfare Gate goals were designed to address the mental health needs of children/youth in the Child Welfare system. We added four mental health clinicians in order to increase mental health treatment that is provided during visitations between biological parents and their children in foster care (including children 0 – 5), develop services for parents (with children in the CPS system) who have both mental health and substance abuse issues, and increase services to Transition age youth (18-21 years old) who are leaving foster care to live on their own (as well as other youth with SED turning 18).

Implementation has been successful and we propose to increase our service capacity. In an attempt to provide more mental health services to children and families who do not have health care coverage we are contracting with Parents Center to increase service capacity for families without Medi-Cal or Healthy Families benefits. In addition there will be a slight increase in Medi-Cal/Healthy Families services. This will also increase our capacity to serve the 0-5 child population. These services will include assessment, counseling, family therapy and crisis intervention.

Description of Initial Population:

The Child Welfare Work Plan is designed to increase dual diagnosis (mental health/substance abuse) services to youth and families involved with Child Welfare Services, as well as Transition-age youth (particularly those aging out of foster care, but not limited to this population). Particular attention will be paid to addressing the needs of Latino youth and families.

Services/Strategies:

- Family Preservation Principles using child welfare reform principles
- Integrated services and supports for children/youth and their families with co-occurring mental health and substance use disorders within the context of a single child/family services and supports plan
- Services located in racial ethnic communities to reach children, youth and families who may be more responsive to services in these settings
- Services and supports provided at school, in the community and in the child/youth's home
- Values driven evidence-based and promising clinical services that are integrated with overall service planning and which support youth/family selected goals.

EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
Program Work Plan #: 4
Program Work Plan Name: Education Gate
Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	*See below									20	
TAY										4	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #	
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated	
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

Work Plan # 4: Education Gate

Description of Services:

The Education Work Plan goal is to address the mental health needs of children/youth in Education system at risk of school failure by

- Increasing mental health services to children/youth with serious emotional disturbance (SED) at school sites
- Increasing consultation and training of school staff in mental health issues regarding screening and service needs of students with SED

Over the years schools have experienced budget cuts that have resulted in the elimination of counseling positions on school sites. In order to address this gap in services, the original plan for Education Gate had a position that was to target general education students on school sites to increase mental health services to child/youth with SED. In addition, this position would increase our capacity for consultation and training of school staff in mental health issues regarding screening and service needs of students with SED. County Mental Health proposes to add a clinical position. This will allow flexibility in service delivery and increase service capacity for the Education Gate.

Description of Initial Population:

The Education Gate program is designed to create new school-linked screening/assessment and treatment of children/youth suspected of having serious emotional disturbances. In addition, specific dual diagnosis (mental health/substance abuse) service capacity will be created and targeted to students referred from Santa Cruz County's local schools, particularly those not referred through Special Education (since the AB3632 Program has its own referral process and service capacity). Particular attention will be paid to addressing the needs of Latino youth and families. Transition-age youth will also be served.

Services/Strategies:

- Integrated services and supports for children/youth and their families with co-occurring mental health and substance use disorders within the context of a single child/family services and supports plan
- Services located in racial ethnic communities to reach children, youth and families who may be more responsive to services in these settings
- Services and supports provided at school, in the community and in the child/youth's home
- Values driven evidence-based and promising clinical services that are integrated with overall service planning and which support youth/family selected goals.

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EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
 Program Work Plan #: 5
 Program Work Plan Name: Special Focus: Family Partnerships
 Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below									10
TAY										15
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below									10
TAY										15
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Work Plan # 5: Special Focus- Family Partnership

Description of Services:

This MHSA contract is designed to expand Family Partnership Program activities provided by parents, and youth, who are or have been served by our Children's Interagency System of Care. It will be targeted to increase the capacity of an existing community-based agency experienced in providing consumer-run and delivered services. Specific youth positions with financial stipends will be created. Particular attention will be paid to addressing the needs of Latino youth and families. Transition-age youth and their families will also be served.

Proposed amendment will increase capacity for youth and family partnerships by increasing the MHSA contract for these services with a community-based agency. Emphasis will be on increasing youth-partnership activities. Family Partnerships Work Plan goals will remain the same.

Description of Initial Population:

Families and youth involved in our Children's Mental Health System of Care in need of family and youth partnership activities.

Services/Strategies:

- Family Partnership Program service expansion
- Education for children/youth and family or other caregivers regarding mental health issues
- Parental mental health education, with language access and culturally appropriate services
- Integrated services and supports for children/youth and their families with co-occurring mental health and substance use disorders within the context of a single child/family services and supports plan
- A single child/family services and supports plan
- Services located in racial ethnic communities to reach children, youth and families who may be more responsive to services in these settings
- Values driven evidence-based and promising clinical services that are integrated with overall service planning and which support youth/family selected goals.

EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
 Program Work Plan #: 6
 Program Work Plan Name: Enhanced Crisis Response
 Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY										5
Adults										10
Older Adults										5
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY										25
Adults										60
Older Adults										15
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY										40
Adults										130
Older Adults										10

Work Plan # 6: Enhanced Crisis Response

Description of Services:

The Santa Cruz County Mental Health and Substance Abuse Program is committed to a person-centered recovery vision as it's guiding principles and values; central to this is the notion that every individual should receive services in the least restrictive setting possible. The MHSA planning process and the first year of implementation have made it clear that a number of individuals in the community with mental health needs could avoid hospitalization and/or incarceration if more crisis response and enhanced intensive services were available to provide service in the community.

There are three principle objectives of the enhanced crisis and support response program:

1. Enable individuals to avoid or minimize the disruption and trauma of psychiatric hospitalization, incarceration, or other locked settings, while maintaining their safety in supportive, safe and comfortable environments;
2. Provide individualized attention and supports via a “compassionate presence” for individuals in need on a 24/7 basis; and
3. Provide enhanced mobile support to maintain the least restrictive setting and disruption to the individual's life.

To accomplish the program objectives, service interventions and innovations proposed include:

- **Center for Hope and Healing:** This program will be transformed from a social rehab model to a crisis residential program, while retaining the recovery oriented philosophy and approach originally described, to enhance the capacity to successfully provide a voluntary alternative to acute psychiatric hospitalization.
- Add a new mobile enhanced support team consisting of 3 FTE crisis specialists and 3 FTE peer counselors to assist adult Full Service Partnerships and other System of Care consumers maintain the least restrictive level of care. This team is designed to provide additional services and enhanced supports to expand the capacity for 24/7 coverage and the recovery “whatever it takes approach”. The new team will partner with current providers to wrap around services to consumers and their families. This enhanced staffing and support will provide some of the “wrap-around” capacities of FSP teams to all parts of the system.
- Add 2 FTE crisis specialists to the mobile crisis response team expanding the service and support capacity needed for non-System of Care individuals. The crisis service is intended to provide voluntary alternatives to psychiatric hospitalization as well as assist with the services and supports needed to successfully transition from hospitalization or incarceration into the least restrictive community setting.

- There is an additional 1 FTE position added to the South County region to expand Access services and mobile crisis support. This person will enable mobile crisis services to expand in the southern part of the County, increasing service access and enhanced crisis response to the Latino population, meeting one of our goals of culturally sensitive service delivery.
- Front Street Short Term Crisis: In our original plan we had intended to contract with Front Street Inc. to increase voluntary crisis mental health services at Front Street Residential Care. As we implemented our Older Adult Services Full Service Partnership Team, we found the need for residential care for older adults with complex medical needs. Therefore, we contracted with Front Street Inc. and for 07-08 we project using 5 beds at Drake House in Monterey County (in conjunction with Monterey County).

Description of Initial Population:

The priority population for this program are individuals 18 and older at high risk of crisis who are either (1) experiencing significant impact to their level of functioning in their home or community placement that need enhanced 24/7 supports to maintain functioning in their living situation, or (2) in need *or at risk* of psychiatric hospitalization but are able to be safely treated on a voluntary basis in a lower level of care, or (3) individuals being inappropriately treated at a higher level of care or incarceration and able to step down from psychiatric hospitalization or locked skilled nursing facility to a lower level of care in the community.

Services/Strategies:

The following MHSA strategies are fundamental features of the services described above:

- Intensive community services and supports teams capable of providing services to clients where they live, 24/7, including consumers as team members
- Culturally appropriate services to reach persons of racial ethnic cultures who may be better served and/or more responsive to services in specific culture-based settings.
- Ethnic-specific outreach strategies for racial ethnic populations to eliminate disparities in care
- Mobile crisis services, including crisis intervention team partnerships with law enforcement
- Peer support services for crisis and enhanced support response
- Crisis and transitional residential treatment alternative to hospitalization.

EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
 Program Work Plan #: 8
 Program Work Plan Name: Community Support Services
 Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	* See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults										20
Older Adults										10
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	* See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults										20
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Work Plan # 8: Community Support Services

Description of Services:

We will be adding two FTE Employment Specialists to further expand the model of supported employment by having at a minimum, a part time designated employment specialist assigned to the “POWER” and “Older Adult” Full Partnership teams, as well as the “Recovery” and “South County Adult” general service teams. This will provide increased staff time by adding new employment specialists to each of our teams to further our recovery based mission and values of employment and education supports. It is important that we maintain consistency of available services throughout all our teams so that the population served is benefiting from our core values of recovery oriented work no matter what team an individual is assigned to. These services will continue to be expanded through our community-based organization, Community Connection, through their SEAS team.

Description of Initial Population:

This expansion will serve Older Adults with health issues, adults with serious mental illness (including adults with co-occurring substance abuse disorders) and adults involved in the criminal justice system. This population has been underserved in the area of supports to enhance meaningful activities.

Services/Strategies:

- Supportive employment and other productive activities and personal growth opportunities, including development of job options for clients, competitive and non-competitive options as well as volunteerism, and other meaningful activities
- Vocational services through the DOR co-op
- Supportive education
- Values-driven culturally competent evidence-based practices that are integrated with overall service planning and support housing, employment and/or education goals.

EXHIBIT 6: QUARTERLY PROGRESS GOALS AND REPORT (Estimated/Actual Population Served)

County: Santa Cruz
 Program Work Plan #: 9
 Program Work Plan Name: Person Centered Mental Health Services and Supports
 Fiscal Year: 07-08

Full Service Partnerships		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Age Group	Description of Initial Populations	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY										6
Adults										5
Older Adults										10
System Development		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	*See below	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults										80
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outreach and Engagement		Qtr 1		Qtr 2		Qtr 3		Qtr 4		Annual #
Total Number to be served	Services/Strategies	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Unduplicated
Child/Youth	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TAY		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Older Adults		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Work Plan # 9: Person-Centered Mental Health Services and Supports

Description of Services:

The implementation of Santa Cruz County's Person-Centered Mental Health Services and Supports began in May'05. This proposal, if funded, will expand the existing program and our commitment to further the work of transforming services to better support consumer recovery and resiliency within our Adult service teams. New monies will help us to not only serve additional individuals and families but also allow us to respond to the recommendations and requests of community stakeholders (including family members, consumers, as well as direct care staff) to enhance existing services.

Expansion funds will be distributed to further support and enhance all of the existing service teams and programs including the Full Service Partnership teams, Older Adults and POWER, a specialty team that supports individuals with co-occurring substance disorders. You will recall from our 2005 MHSA plan that funds for the Puentes team are being utilized to expand our ability to serve the entire county with an emphasis on increased outreach to the Latino population in the southern part of the county. While Puentes is our original model of an FSP, we continue to refer to them in a specialty area due to the categorical funding of AB2034. However, for all intents and purposes Puentes should be considered an FSP.

Below are some of the specific plans for expansion/enhancement that will be supported with new funding:

- Recovery and South County Team

We are proposing to add one Mental Health Client Specialist (care coordinator) and one Mental Health Aide to the Recovery Team. We are also proposing to hire a Mental Health Aide for the South County Team. Hiring preference will be given to consumers interested in the Mental Health Aide positions consistent with our core values of peers working with peers as well as providing more jobs for consumers. The two aides will work on the Recovery Team and the South County Team. The aide will assist the coordinators in driving people to doctors appointments, helping with shopping, moving and free the coordinators to provide more direct service and focus on the individuals goals.

The Recovery Team and the South County team provide basic supports to the adult system of care. Essentially they share the values of the FSP's without the team enhancements or reduced caseloads. These two teams serve all individuals who are not on one of the specialty teams, for example Older Adults, Transition Age Youth as well as those teams focused on special needs individuals (such as adults with significant dual diagnosis, on probation or experiencing chronic homelessness). We are proposing the addition of one new Mental Health Client Specialist and two Aides using

system development funds. Santa Cruz County is committed to continuing to grow and enhance these teams to improve services for all consumers.

A full time Senior Case Data Clerk will also be added in this expansion. This position will take care of entering data for MHSA expansion including service, episode and outcome information, maintaining caseload assignment and some quality assurance activities.

- Occupational Therapist Staffing

There is currently a .8 FTE Occupational Therapist (OT) providing assessments for *all* teams throughout the county. These assessments evaluate consumers' readiness for independent living and help to identify the supports and skill building needed in order to maintain independent housing. The OT works collaboratively with care coordinators on each of the Teams. We propose the expansion of this critically important specialty service with an additional .5 FTE OT. With increased OT resources, OT contributions to assessment and service planning can be extended to the Older adult team and enhance overall access to OT services.

- Serving the Latino Community in South County

Overall, the proposed program expansions continue to advance MHSA goals by increasing access to and the quality of culturally and linguistically competent person-centered service and supports that focus on the individuals' strengths and resiliency, providing an integrated service experience. This expansion plan proposes the creation of a licensed, 16-bed, 24/7, care facility for a mixed population of seniors and adults with bi-lingual bi-cultural services.

From the first day that MHSA related services commenced in Santa Cruz, meeting the needs of the South County Latino community has been a stated priority. Current access to services by this group is low and there is a clear need to improve the penetration/service initiation and retention rates with improved infrastructure, outreach and service capacity which requires improving current capacity and resources. For example, there is a paucity of board and care and residential social rehabilitation services in South County. Consumers who want these services must all too often move to North County and leave behind their community, natural supports, family, friends, care coordinators and doctor.

We are proposing that funds be designated to provide expanded residential services in South County with the creation of a new licensed residential care facility, "Wheelock House". Emphasis will be placed on licensing for Older Adults to meet the needs of this ageing population. This new facility is intended to be a flexible residential community with an individualized person-centered plan reflecting each resident need. For example, some

people may chose to live there indefinitely and receive board and care supports while others may identify goals to work towards independent housing and gain from social rehabilitation services. The County currently owns the building but it is not being utilized for any services.

Description of Initial Population:

- Older Adults with health issues
- Individuals with co-occurring substance disorders
- Individuals with Criminal Justice involvement
- Underserved and at risk of homelessness
- Underserved and at risk of institutionalization
- Frequent users of hospital and emergency services

Services/Strategies:

- Full Service Partnership
- System Development
- Integrated physical and mental health services in collaboration with primary care
- Intensive community services and supports teams capable of providing services to clients where they live, 24/7, including consumers or family members as team members
- Development of housing options for Seniors in need of assistance with meals, medications and social supports (Wheelock)
- Integrated substance abuse and mental health services where clients/members receive substance abuse and mental health services simultaneously, not sequentially from one team with one service plan for one person; specialized housing may accompany these services
- Values-driven evidence-based and promising clinical services that are integrated with overall service planning and which support housing and other client-selected goals
- Home care assistance, including training of care givers and providers about enhancing the ‘therapeutic environment’ of the home (OT)
- Culturally sensitive residential support settings in close proximity to natural support system (Wheelock).