

Differences Between CSS and PEI Orange County

CSS Community Services & Supports Plan	DIFFERENCES	PEI Prevention and Early Intervention Plan
<ul style="list-style-type: none"> • Adults and older adults with severe and persistent mental illnesses • Children, youth, and young adults suffering from severe emotional disturbances 	Target Groups	Underserved cultural populations <ul style="list-style-type: none"> • Individuals experiencing onset of serious psychiatric illness • Children and youth in stressed families • Trauma-exposed • Children and youth at risk for school failure • Children and youth at risk of or experiencing juvenile justice involvement
<ul style="list-style-type: none"> • Recovery from mental illness and sustained individual wellness • Community collaboration and integrated mental health services (Full Service Partnerships) • Age-appropriate strategies to address severe diagnoses • Peer support • Outreach and engagement to unserved, underserved, and inappropriately served populations • Substance abuse and other co-occurring disorders • Accountability to outcomes • Reduction in involuntary services, institutionalization and out-of home placements for children 	Community Mental Health Needs Addressed	<ul style="list-style-type: none"> • Disparities in access to mental health services • Psycho-social impact of trauma • At-risk children, youth, and young adult populations • Stigma and discrimination • Suicide risk
<ul style="list-style-type: none"> • Full Service Partnerships • Peer support, peer counseling & peer mentoring • Housing and residential services • Counseling, assessment and other traditional mental health services • Alternative crisis services • Bridging and support services 	Types of Services	<i>Evidence-based practices, promising practices, and community-defined evidence focusing on:</i> <ul style="list-style-type: none"> • Mental health promotion • Mental health education • Screening • Short-term early intervention treatment
<ul style="list-style-type: none"> • To reduce barriers to services for individuals who would otherwise qualify for CSS mental health services, i.e., persons with serious mental illness or children/youth with serious emotional disturbances. 	Intent of Outreach and Engagement Strategies	<ul style="list-style-type: none"> • To engage persons prior to the development of serious mental illness or serious emotional disturbances or, in the case of early intervention, alleviate the need for additional mental health treatment and/or to transition to extended mental health treatment.
<ul style="list-style-type: none"> • Mental health providers; mental health client/consumer organizations; organizations with experience and background in traditional mental health services 	Providers	<ul style="list-style-type: none"> • Non-traditional mental health providers, including partners from health, education, social services, law enforcement, and underserved communities
<ul style="list-style-type: none"> • 55% of total MHSA Budget • \$78,062,342 million for FYs 05-06, 06-07, & 07-08; plus an additional \$17.1 million through the Growth Plan (\$9,030,401 FY 07/08 & \$8,135,900 for FY 08/09) • At least 51% of County's overall CSS funding must be used for Full Service Partnerships. 	Funding	<ul style="list-style-type: none"> • 20% of total statewide MHSA budget • Estimated \$ 26.1 million for FYs 07-08 & 08-09; (\$9.7 for FY 07/08 and \$16.4 for FY 08/09) • At least 51% of overall County PEI budget must be used for children and youth between birth and 25 years of age.
<ul style="list-style-type: none"> • Full Service Partnerships – funds to provide “whatever it takes” for initial populations • General System Development – funds to improve programs, services and supports for the identified initial full service populations and other clients consistent with the priority populations • Outreach and Engagement – funds for outreach and engagement of those populations that are currently receiving no or little service 	Types of Funding Available	<ul style="list-style-type: none"> • Funding for programs and interventions that meet the PEI operational definitions and the necessary costs to implement and evaluate those programs and interventions.