

**Orange County Health Care Agency
Behavioral Health Services**



Mental Health Services Act (MHSA)

Stakeholder Meeting Report

Category/Title: Education

Date: 08/26/2005 Time: 8:00am – 12:00pm		Coordinator: Alan Albright Contact No.: (714) 834-5572 Facilitator: Alan Albright Recorder: Stacy Vandegriff	
Meeting Location: 200 Kalmus Drive, Bldg. A Costa Mesa, CA		Total number of Attendees per meeting: <u> 23 </u>	
Breakdown by Gender: <u> 7 </u> Male <u> 16 </u> Female <u> </u> Other <u> </u> Decline to State	Breakdown by role in the MH System: <u> 2 </u> Client/Consumer <u> 2 </u> Family Member <u> 0 </u> Service Provider <u> 19 </u> Other	Breakdown by Primary Language: <u> 23 </u> English <u> </u> Spanish <u> </u> Vietnamese <u> </u> Other <u> </u>	Breakdown by Ethnicity <u> </u> African American <u> 1 </u> Asian/Pacific <u> </u> Islander <u> </u> Latino <u> </u> American Indian <u> 22 </u> Caucasian <u> </u> Other
Breakdown by: <u> 2 </u> Total # of Ralph's Vouchers Distributed <u> 0 </u> Total # of OCTA Bus Passes Distributed <u> </u> Total # of consumers transported <u> </u> Total # of family members transported <u> </u> Total # of childcare recipients <u> </u> Other _____		Breakdown by: <u> 0 </u> Total # of people requesting a Spanish Translator <u> 0 </u> Total # of people requesting a Vietnamese Translator	

Stakeholder Group Questions:

- What are the problems you face?
- What do you need to make better?
- What are the outcomes you want?
- What kinds of services need to be in place to achieve them?

General Meeting Comments (type):

Handouts:

Three-Year Program and Expenditure Plan
Specific Populations by Age Consistent with MHSA and DMH Priorities
Frequently Asked Questions about the Mental Health Services Act
Orange County MHSA Decision Making Chart – Children & Youth
Orange County MHSA Decision Making Chart – Transitional Age Youth
Identifying Program Strategies
Prioritized list of statistics for Children & Youth, and Transitional Age Youth

Meeting discussion:

Alan Albright gave a brief overview of the Mental Health Services Act/Proposition 63.

We are in the first of six phases that need to be integrated into the plan and they are as follows:

1. Community Program Planning
2. Community Services and Supports
3. Capital Facilities and Information Technology
4. Education and Training Programs
5. Prevention and Early Intervention Programs
6. Innovative Programs

Our primary focus right now is to help the Severely Emotionally Disabled (SED) children of our community, and close the gaps and barriers on the underserved and unserved populations. We have to remember that we are working with limited funds, so while the most important issues are being worked on right now, in years to come we will be able to branch out and focus on other issues. The stakeholder group is under a very aggressive timeline and December is the deadline to write the plan and submit it.

The **problems** identified by the Children & Youth Work Group are as follows:

- Inability to be in mainstream school environment
- Involvement in the Child Welfare and/or Juvenile Justice Systems
- Peer & family problems
- Substance abuse
- Homeless or at risk
- Suicide/Crisis

The **problems** identified by the Transitional Age Youth (TAY) Stakeholder Group are as follows:

- Peer & family problems
- Substance abuse
- Involvement in Child Welfare Juvenile Justice Systems
- Homeless or at risk, lack of available/affordable housing
- Inability to work or manage independence
- Inability to be in mainstream school/school failure

- Suicide
- Hospitalizations and/or Emergency Room Care

The 211 Line was discussed and the Help Me Grow project in Connecticut and the group was reminded that this service can be utilized as an additional resource. This resource is managed quarterly to keep the network information flowing and current. Help Me Grow is a program that was added in for the 211 Line, it walks the caller through the steps for getting help and provides support and on-going assistance so that people can get the services they need.

Open Group:

- Talked about schools needing to identify and refer for mental health services.
- Housing issues – Theo Lacy inmates often come out homeless and even with transitional services there are still not enough resources.
- Educating people about current resources and about what to look for in their children, as far as mental health issues.
- Isolation
- The need for quick and appropriate referrals.
- High case loads and not enough resources being available.
- A suggestion was made to do prevention in one or two schools to see how it goes and then grow from there. Alan agreed that we could add to the referral part of the recommendations as a pilot program.

We currently have a Wraparound program run by Social Services to assist kids at risk of out-of-home placement (e.g., AB3632, child welfare, juvenile justice). We need expanded Wraparound resources to serve kids beyond age 18, plus make them available to the community dealing with SED or TAY populations. Wraparound is considered a best practice model because it is individualized to each person and their needs. Sometimes parents use their Wraparound resources for other children in the family and in other areas of their lives.

Building a healthy relationship with the schools is the answer; planning and implementation will include schools since they are with the kids all day. We may run different systems but the same kids go through both systems, this is why we need to work together.

The information from this meeting will be submitted to the Steering Committee.
