

# MHSA Newsletter

Stanislaus County Behavioral Health & Recovery Services  
*A Mental Health, Alcohol and Drug Service Organization*

...a newsletter to share information about Stanislaus County's Mental Health Services Act (MHSA) programs with staff, consumers, stakeholders, other county departments and the community at large.



## COMMUNITY EMERGENCY RESPONSE TEAM UPDATE

By Ken Huntley, PhD, MFT—HMHT & SATT/SART Manager

*The universe is change; our life is what our thoughts make it—Marcus Aurelius*

Change always seems to be happening at BHRS and most of us have learned how we think about change can determine how we (and others) feel about change. The best thing about change is that it can give life to new ideas that can become transformational. Necessary change that comes from challenges in the current budget can also be used to improve cost effective services to the community. A host of changes are taking place at BHRS, one involving the Community Emergency Response Team or CERT.

Over the years, BHRS has listened to and responded to the needs of the community in various ways. With the passage of MHSA, funds became available to incorporate significant community input to programs, including one formerly known as "Emergency Services" or "MECA". Renamed and expanded in 2006, CERT added two services that address unmet community needs: Warmline/Peer Support Program (operated by Turning Point Community Programs) and the BHRS-operated Mobile Community Emergency Response Team or MCERT (partnership with Modesto Police Department). This month, BHRS will incorporate an additional program component to CERT.

Effective June 1, 2009, the Medi-Cal Access Team (MAT) joined the CERT service. MAT assessments are now provided at CERT located in the Jana Lynn Complex, Suite C, 500 North 9th Street, Modesto. MAT assessments are still available in languages other than English and the phone number remains the same: 1-888-376-6246.

People of all ages from diverse cultural backgrounds may call or walk in to CERT seeking assistance with various types of behavioral health issues. Some are having symptoms that are very serious and in need of high intensity or specialized treatment offered by BHRS programs. Others need and want short term, low intensity treatment services or supportive resources offered by community organizations such as Center for Human Services, Parent's United, Family Resource Centers and others. The experienced and capable CERT program brings unique strengths to the process of matching the right amount of service/support to the individual's need and desire for help.

All levels of service offered through CERT are part of the "front door" to BHRS that offers a connection to assessment, treatment, and referral to peer and community supports. The "1-800 team" are available with information, initial screening, and referrals. CERT/M-CERT clinicians are available for mental health assessments and for crisis intervention either on-site or in the community. Warmline/Peer Support staff are available to offer one-to-one support by phone or in person when needed. Other programs located at the Jana Lynn Complex include Integrated Forensics Team, all Telecare programs, Modesto Recovery Services, Wellness Recovery, National Alliance on Mental Illness (NAMI), and Stanislaus Chapter of Mental Health Consumers.

As State and local budgets present new challenges to the way we serve our community, a strong mandate will be to offer behavioral health services to the community in the most efficient and cost effective manner possible and do more to connect people in need with communities of support. It is hoped that through these changes, BHRS can, in collaboration with our community, continue to promote recovery, resiliency, and wellness. For more information call CERT at 558-4600 or MAT at 1-888-376-624.

**Personal note from author:** I used the Marcus Aurelius quote to start this article because his writings nicely articulate the importance of accepting life on life's terms and being of service to others. These two key elements have provided me a sound perspective on the recent BHRS structural changes as well as to appreciate my new position. Effective this month, I am the Manager of Health Mental Health Team/Senior Access Treatment Team and Senior Access and Referral Team and no longer the CERT Manager. I have enjoyed my time with CERT and have grown professionally. It seems as though we were always in one transition after another. And through it all, CERT staff always made the needs of our clientele our first priority. It has been an interesting and rewarding journey and we have all learned a lot. I welcome the change and know that just like life, our changes at BHRS will be "...*what our thoughts make it*".

### MHSA Five Essential Elements:

- Community Collaboration
- Cultural Competence
- Client/Family-Driven Mental Health Systems
- Wellness for Recovery & Resilience
- Integrated Service Experiences

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## STATEWIDE PEI PROJECT FOR TRAINING, TECHNICAL ASSISTANCE AND CAPACITY BUILDING

By Karen Hurley, MFT, MHSA Planning Coordinator

There is a document currently out for 30-day review and comment that describes a recommendation to "assign funds for statewide projects". The following brief article attempts to shed some light on the origin and purpose of assignment of funds for statewide Prevention and Early Intervention (PEI) projects.

The Mental Health Services Act specified that counties could act jointly to implement certain statewide approaches to components such as PEI and WET. Logically, it was discussed in statewide stakeholder meetings that a portion of funding would be identified to establish statewide PEI projects including suicide prevention, stigma and discrimination; student mental health; reducing racial disparities; and training, technical assistance and capacity building. A majority of stakeholders agreed that statewide approaches are an essential feature of the overall effort to transform public mental health services.

An effective way for statewide prevention projects to go forward has been established through the State Department of Mental Health in collaboration with major partners who have the capacity to work statewide. DMH Information Notices (08-25, 08-37) were issued

giving instructions on how counties could assign a portion of funds back to the State Department of Mental Health for statewide administration. It is important to note that under the current regulations there are no other funds for statewide PEI projects and, given the economic realities, none are likely to be identified. In order for these projects to go forward as developed, counties will need to assign the funds for use on a statewide basis.

As with all things, MHSA local and statewide PEI projects/programs are to be aligned with the transformational concepts inherent in the MHSA: community collaboration, cultural competency, Individual/family-driven programs and interventions, wellness focus including concepts of resilience and recovery, and integrated services experience for individuals and their families.

The primary goal of the Statewide Training, Technical Assistance and Capacity Building Project is to improve the capacity of local partners outside the mental health system (i.e., education, primary health care, law enforcement, older adult services) as well as County staff and partners who work on the development, implementation and evaluation of Prevention and Early Intervention work plans

and programs that are funded through the local PEI Plan. All counties could expect that they and their community partners would benefit, directly and indirectly, from the training, technical assistance, and capacity building available through this statewide project.

A request intended to complete assignment of funds by Stanislaus County for PEI Statewide Project for Training, Technical Assistance and Capacity Building Funding Request is offered for 30-day public review and comment from June 1, 2009 – June 30, 2009. The amount of funding available for Stanislaus County is \$77,400 each year for four years. The total amount is \$309,600. During the 30-day review and comment period an informational meeting was held at: Behavioral Health & Recovery Services, 800 Scenic Drive, Main Conference Room, Modesto, California, 95350, Tuesday, June 16, 2009, 3:00 p.m. – 4:00 p.m. Questions and comments may be emailed to [khurley@stancounty.com](mailto:khurley@stancounty.com), faxed to (209) 525-6291 or mailed to Behavioral Health & Recovery Services, 800 Scenic Drive, Modesto, California, 95350.

### MHSA FSP QUARTERLY ASSESSMENT FORM REVISED

By Brenda Kachel, DMS/Performance Measurement

Key Event Tracking (KET) forms are extremely important in determining if we are meeting goals established in our MHSA CSS Work Plans. A newly revised Quarterly Assessment form assists programs with capturing information in the high profile Outcome domains: Employment, Residential and Emergency Intervention. All staff has to do is select and mark appropriate bubbles on the Teleform to indicate:

1. Change in the past 3 months
2. Change already documented on KET and sent to DMS/PM
3. Change occurred and KET will be submitted in the next 7 days
4. No changes

All FSP staff will be trained and begin using the revised Quarterly Assessment form by Wednesday, July 1, 2009. This new process will reduce missing KETs and dramatically improve Outcomes reporting.

If you have questions or suggestions regarding MHSA, please forward them by I.D. mail or e-mail to: Carol Jo Hargreaves, BHRS/Administration, e-mail: [chargrea@stancounty.com](mailto:chargrea@stancounty.com); or Karen Hurley, BHRS/Administration, e-mail: [khurley@stancounty.com](mailto:khurley@stancounty.com)



The MHSA-CSS (Communicate, Share, and Support) Meeting is held the

4th Monday of each month at 10:00 a.m. in the Redwood Room, 800 Scenic Drive (unless otherwise notified).