

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

# MHSA NEWSLETTER

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Volume 2, Issue 11  
 November 2008

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*...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.*

## MHSA Representative Stakeholder Steering Committee

Prior to the passage of the Mental Health Services Act (Proposition 63), Behavioral Health and Recovery Services (BHRS) had successfully developed and implemented programs with extensive help of stakeholder groups; primarily consumers, family members and key agency partners. The Representative Stakeholder Steering Committee (RSSC) was formed in 2005 to meet the requirements of Mental Health Services Act (MHSA) to include meaningful stakeholder input in local planning that would result in funding of new programs and services. The MHSA would bring new meaning to the words 'stakeholder input' and forever prioritize the importance of 'meaningful participation of stakeholders' in public mental health program development.

Since 2005, the core responsibility of the RSSC has been to provide guidance to Stanislaus County in establishing initial priorities for the component plans of MHSA. Each time an initial plan is being developed a variety of methods are used to engage broad community input and there are always more needs identified than can be addressed in the initial three-year plan. As a result, there are tough decisions to make about where to start. It is crucial to keep in mind the importance of what is being asked of this group of representative stakeholders. Each time a new plan is developed it must accurately incorporate three ingredients: community stakeholder input, DMH Plan Guidelines, and BHRS' capacity to implement and sustain the plan developed. By utilizing a consensus model the Steering Committee prioritizes themes from the broad stakeholder input that are then used to develop the plan to be submitted.

Membership of the Steering Committee is determined by the requirements of the Mental Health Services Act and is meant to be a broad representative group of Stanislaus County stakeholders. The chart below shows the composition of the Representative Stakeholder Steering Committee at this time:

Partner Organization / Community	Number of Representatives
BHRS Staff	2
Chief Executive Office, Stanislaus County	1
Consumers	4
Contract Providers of Public Mental Health Services	3
Courts	1
District Attorney	1
Diverse Communities	6
Education	3
Faith Based Organizations	2
Family Members	4
Health Care: Public & Private	4
Housing & Employment	2
Law Enforcement	2
Probation / Juvenile Justice	1
Public Defender	1
Public Mental Health Labor Organization	1
Regional Areas: South & Westside	2
Senior Services	2
Social Services	2
<b>Total</b>	<b>44</b>

Because participation and attendance at these Steering Committee meetings is so crucial to the overall community stakeholder process, each committee member has the opportunity to identify an "alternate" to attend meetings in their unavoidable absence. In designating an alternate, a number of considerations are important:

- The alternate must also represent the community's interests/priorities;
- The alternate must be identified prior to scheduled meetings to allow communication and education, if needed;
- The alternate must be empowered to fully participate in the prioritization and consensus process

Finally, we sincerely thank the RSSC members for the spirit of collaboration they have continuously brought to the work they have done on behalf of public mental health services and the communities they represent. Stakeholder participation and ownership of the process has contributed powerfully to a change of focus for BHRS toward a strengths-based, community development oriented, and community capacity building way of operating. We look forward to further development of our working relationship with the community.

\*A list of the representative stakeholders names can be found at [www.stanislausmhsa.com](http://www.stanislausmhsa.com).

## A True Recovery Success!

by LaVon B. Lopez, BHS II, Integrated Forensic Team

IFT was fortunate to work with this young man. A 19-year-old African male that was adopted and brought to the United States at age five. He was referred to us by WMRS. He had a history of physical violence toward his adoptive family that later resulted in group home stays as well as incarceration. He transferred from WMRS to IFT in October 2007 after being interviewed at the Public Safety Center. He was interested in seeking services immediately. He began attending IFT groups up to four times weekly. Assistance was provided to get him to Respite at Garden Gate directly from jail. He stayed at Respite for seven days, attending Maddux Youth Center for recreation daily. He then moved over to extended stay for approximately two weeks.

He was reserved and kept to himself a good portion of the time when meeting with staff. He stated concerns of living alone; he had tried this in the past and it didn't work out so well for him. He was open to the idea of staying at a room and board but was a little apprehensive of going since he knew no one and the environment was new to him. He lived there for approximately four months. He then began to explore Transitional Living options – slowly. Again, this was another change for him to something he knew nothing about. After visiting the transitional living location he began to talk more about it and to ask more questions about how transitional living works. By February 2008, he was residing in a transitional living arrangement. He had his own room in an apartment shared with another roommate. He was very excited to have his own room. He had never had this before, with a history of moving from group home to group home. Even in room and board, he still shared a room with three other individuals.

Throughout this process, he has continuously struggled with his immigration status. His dental records indicate that he is two years older than what his residency paperwork shows. He has always remained hopeful throughout the process of resolving this situation. He had expressed wanting to go to work but, due to his immigration status, he has not been able to obtain proper identification that would allow him to be employed. As time passed, he was able to obtain a California Identification Card and now has a part-time job at a fast food franchise. He is now expressing interest in going back to school to get his GED, then to college. He is currently in Project YES. This program can assist him in many areas of employment and education. Working closely with him on independent living skills, he has learned how to budget and shop for groceries comfortably. I am very pleased to see that he has come so far in just eleven months with IFT. He is also rebuilding a relationship with his biological sister in Modesto. He still continues to be hopeful regarding his immigration status. He is a true recovery success!

## MENTORING SESSIONS FOR LINE STAFF

by Carol Jo Hargreaves, CSO/OASOC MHSA  
Implementation Manager

Based on feedback from MHSA Coordinators, regular quarterly Mentoring Sessions for line staff will begin after a long hiatus. These sessions are a great opportunity to network with and learn from each other. We will discuss topics suggested and prioritized by line staff themselves.

The first session scheduled is for **Full Service Partnership (FSP) line staff** from Westside SHOP/TRAC, Juvenile Justice, SART, Health/Mental Health Team and IFT. It will be held Wednesday, December 10, from 3:00 to 5:00 p.m. at the County Center III Institute, Classroom #3. The Institute is located at 917 Oakdale Road. It is a comfortable off-site learning center, away from telephones and the hustle and bustle of busy offices, where we can relax and share experiences and information with each other.

Quarterly Mentoring Sessions for **General System Development (GSD) line staff** will begin in January and will also be held at the County Center III Institute. More information to come about the date and time of these sessions.

All MHSA line staff is encouraged to attend these important sessions and Coordinators to support staff attendance and permit flex time, if necessary. This is a great way to share our energy, enthusiasm, successes and challenges, new ideas and concerns.

To sign up, contact Marisela Cantu by email at: [mcantu@stancounty.com](mailto:mcantu@stancounty.com) or by phone at: 525-6081.

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



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