

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

MHSA NEWSLETTER

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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.

Our Diversity is Our Strength: Warm Line

By Noel Silva, Program Coordinator

Behavioral Health and Recovery Services and Turning Point Community Programs created a partnership for delivering services to individuals and family members with issues associated with psychiatric disabilities. This consumer-run program is called the On-Site Peer Support and Warm Line Program (Warm Line) and is a General System Development program funded by the Mental Health Services Act. We provide 24-hour non-crisis peer support via telephone and on-site peer support for anyone who has been clinically assessed by the BHRS Community Emergency Response Team (CERT).

Warm Line staff consists of non-treatment providers, consumers, family members, and/or volunteers who have an understanding of non-crisis needs because they "have been there." Our purpose is to share the message of recovery and hope as most of us have been recipients of treatment in the past.

Our program is pleased to be working side by side with the Community Emergency Response Team (CERT). Comprised of mental health clinicians, psychiatric nurses, and manager, Ken Huntley, CERT works closely with law enforcement and various medical and psychiatric treatment facilities to provide the best care for each client and his/her family.

The diversity of both CERT and the Warm Line team creates a unique environment in which to provide the necessary perspectives to best assist those individuals and family members who are seeking services. The BHRS campus provides a safe environment, all staff is well-trained in de-escalation procedures and Guardsmark Security officers lend additional support and assistance, if needed.

CERT and the Warm Line provide on-site clinical assessments and non-crisis peer support at our new location: 800 Scenic Drive, Bldg. D, Modesto, CA 95350. Services are available 24 hours a day, 7 days a week and may be reached by calling (209) 558-4600.

Anyone seeking an evaluation of their mental health needs may walk in. If there is a life threatening emergency or immediate psychiatric attention is needed, call 911 or go to Doctors Behavioral Health Center at 1501 Claus Road, Modesto.

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.

New Funds for Community Services and Supports

By Karen Hurley, MHSA Coordinator

We are pleased to announce that the MHSA CSS Additional One-Time Funding Augmentation Request for Funding is available for public review and comment through December 2, 2007, at www.stanislausmhsa.com

In the fall of 2007, DMH notified counties that additional unused state administrative funds would be redistributed to all 58 counties for use as an opportunity for one-time augmentation of services. BHRS determined the most appropriate way to use this additional one-time funding was to continue to be guided by stakeholder input and continue to strengthen services in existing CSS programs. A number of programs/services will be expanded in ways that address gaps. Peer and family member support, crisis housing for outreach and engagement for at-risk individuals and expansion of levels of service to Transition Age Youth are some of the highlights of what is included.

Working from the BHRS Vision and Mission, MHSA Essential Elements, input from community partners, and guidance from DMH regulations, this Additional One-Time Request for Funding Augmentation of CSS programs/services was developed. Comment on the proposal is invited. Please contact Karen Hurley at 525-6229.

JOSIE'S PLACE — NEW HOURS

Jim Hurley, Coordinator

Due to the switch from Daylight Savings Time to Standard Time and the earlier arrival of darkness in the evening, Josie's Place Drop-In Center hours are now as follows:

Monday -Thursdays 10:00 a.m. - 5:00 p.m.
Fridays 10:00 a.m. - 4:00 p.m.

Hours will change back when Daylight Savings resumes next Spring.

If you have questions or suggestions regarding MHSA, please forward them by I.D. mail or email to:

Carol Jo Hargreaves, BHRS/Administration

Email: chargrea@co.stancounty.com

Karen Hurley, BHRS/Administration

Email: khurley@co.stancounty.com



The state provides four sets of FSP Outcome forms to select from based upon the age of the client: Child/Youth (for ages 0-15), Transition Age Youth (16-25 years), Adults (26-59 years), and Older Adults (60+ years). Each age group contains three types of assessments: Partnership Assessment Form (PAF), Key Event Tracking (KET), and Quarterly Assessment (3M). Please ensure that you are using the appropriate age form.

The appropriate PAF form (Child/Youth, TAY, Adult or OA) is based upon the age of the client at the time the partnership was established. For example, a 17-year-old client may be enrolled in a program that serves children and youth, but since the client falls in the TAY age range of 16-25 years, the TAY PAF should be used.

The appropriate KET form (Child/Youth, TAY, Adult, or OA) is based upon the client's age at the time of the status change, not the date the KET form was completed. For example, a change occurred in a client's residential status when the client was 59 years old. The clinician discovered this status change a few weeks later, after the client turned 60 years old. The Adult KET form should be used, as the client's age at the time of status change was in the Adult age range of 26-59 years old. If additional events occurred after the client turned 60 years old, these events would need to be recorded on the OA KET since the client's age at the time of status change falls in the OA age range of 60 years old and older.

The appropriate Quarterly form (Child/Youth, TAY, Adult or OA) is based upon the client's age at the time the form is completed. As a client ages in the program, it may be necessary to start using the Quarterly form in the next age bracket depending upon the client's age at the time the form is completed. For example, if a client is 15 years old, a Child/Youth Quarterly form should be completed since the client falls in the Child/Youth age range of 0-15 years. Once the client turns 16 years old and another quarterly assessment is due, the TAY form should be used since the client now falls in the TAY age range of 16-25 years.

For questions relating to MHSA forms, please contact Carol Locke at 525-5347 or Brenda Kachel at 525-6049.



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