

Plumas County MHSA Stakeholder's Meeting Thursday, October 15, 2015

Louise Steenkamp (Interim Mental Health Director) opened today's meeting with a proposed new timeline for the MHSA Annual Update (handout). Today's agenda includes an update from MHSA Community Programs since the last Stakeholder meeting of September 17, 2015, and a review of the draft Plumas MHSA Annual Update. Regarding MHSA plans and updates, Louise reiterated the importance of Stakeholder participation in the planning process. The MHSA Annual Update will be presented to the Plumas Board of Supervisors on December 22, 2015.

The current, revised MHSA plan builds off the plan approved by the Board almost one year ago but supports and funds community-based organizations and county departments in implementing program components in addition to the staff and programs in the Mental Health department. The tenets of funded services include:

- Promoting the key concepts to the recovery for individuals who have mental illness
- Promoting consumer-operated services
- Developing services to address cultural and ethnic diversity
- Planning for consumer needs

Leslie (Community Connections) mentioned the challenges to accomplishing these goals with the consumer's integrity remaining intact and without violating privacy rules – what is the correct way to recommend MH services to our clients? Disclosure and privacy were discussed. It was decided that the current referral form used by Mental Health be revised to incorporate the communication needs of all community programs in order to track a client's progress. Leslie and Ellen (First 5 Plumas) will work together on developing a standardized form for all.

Johanna (PCIRC) provided an update on the plans for the Wellness Centers in each of the county's four population centers. Louise added that some of MHSA funds will be used to upgrade the Sierra House, the county board and care facility. Marta (Kemper Consultants) mentioned we will begin to see progress in capital changes for structures and improvements in workspace and equipment.

UC Davis is helping Paula (PRS) to make sure our renovations are as effective as possible. Brianna (PRS/SafeBase) reported that there are 4 discussion groups for school kids facilitated by coordinator Dana (PRS) and Tanya (FRC). They are partnering with Meagan and Charla on AOD issues. In process now is the design of modules for the 4 groups. The final versions will have the appropriate adjustments individualized for FRC students.

Shannon (Plumas Unified School District) was officially named leader of the PUSD Innovations Program. One area of progress in the past month has been the suicide prevention training; training is also taking place with Principals about intervention programs. Two schools are introducing "friend to friend" prevention for student peers. This includes showing students how to recognize classmates in distress. This student-based movement is improving the school climate. A very successful improvement has been the Coyote Awarding System for teachers and administrators who change/improve their approach in student contacts. Staff who focus on students doing well and acknowledging the positives, earns a "Coyote ticket".

Mary Joseph (Roundhouse Council) shared that their programs are making progress. Calvin is concentrating on teen leadership and Harvey is working with youth on their language skills through card and board games. Genevieve continues to make progress with the Women's Wellness Group. It was explained that having her group of adult women discuss domestic violence makes them uncomfortable. Native women have a hard time opening up to each other. Genevieve is seeing an improvement in their sharing by beginning a jewelry making session. Marvin in Susanville is very impressed with what Roundhouse is doing and is implementing these opportunities into their programs.

Ellen Vieira (First 5 Plumas) is looking forward to the new and improved Wellness Centers and discussed progress in home visits. First 5's MHSA program will serve children up to the age of 5 and older and siblings.

They would like to work with the Head Start in schools and FRC on what are the best techniques to use in the classroom.

Leslie (PRS/Community Connections) said there are outreach efforts to notify shut-ins especially how they can also participate without venturing beyond their comfort zone. Leslie mentioned that she recently made a presentation at a conference in Seattle. As an extension of Leslie's work, Meagan Miller had her first meeting with teens who just want to volunteer and get involved in giving back to the community. Colleges take a close look at an applicant's community service experience and Leslie is able to provide a Community Connections printout that documents the volunteer work done in "giving back to where you live."

Dana (Public Health/Senior Services) shared the scope of their efforts are the homebound seniors: serving 100 meals daily, completing in-take service forms* for home visits, and increasing the referral rate of those in need. They are designing a short screening tool. Portola is a pilot area for the 3 facets above. In addition, Quincy is promoting senior involvement in planning events.

Johanna (PCIRC) is looking for crisis line volunteers. Homebound seniors could be trained if interested.

Karla stated there are 2200 service vets in Plumas County. She has been concentrating on those who are homeless. Having Mental Health services also available would be very helpful.

Johanna Downey provided an update on the Wellness Centers; they are still seeking a suitable facility in Greenville; Dr. Wall is still involved in facility discussions. Recruitment for site supervisors continues. Sites are experiencing an Increase in walk-ins.

Louise pointed out that the timeline for the MHSA Annual Update time line has been changed (handout). Stakeholders are asked to provide comments on the draft. The new 30-day comment period is November 9 – December 9. Progress reports are due December 15, 2015.

Stephanie addressed an issue in the Criminal Justice System - the underlying substance abuse and/or MH issues. The courts are tasked with giving services as well as moving forward with the criminal process. Stephanie is asking for more guidance. The ultimate goal would be providing services while going through the criminal process and not warehousing the accused in county jails. Can we work toward a common goal without shortchanging those convicted needing additional services? There is also more evidence surfacing regarding generational needs that trickle down to offspring and into the schools.

Marta from Kemper Consultants reminded the group that MediCal should be paying for services (instead of Plumas County) for non-serious illness issues.

Respectfully submitted,
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Plumas County Mental Health Services Act

Incorporating MHSA's 5 Guiding Principles: Consumer and Family Involvement, Culturally Responsive, Community Collaboration, Integrated Service Delivery, Wellness and Recovery.

<http://plumascounty.us/index.aspx?nid=2439>