MHSA Programs 2013:

Saving Lives, Saving Money

NAMI California
National Alliance on Mental Illness

A report created by NAMI California | September 2013

ACKNOWLEDGEMENTS

We are pleased to present the *MHSA Programs 2013: Saving Lives, Saving Money* (Report). Many contributed to the creation of this Report and NAMI California would like to acknowledge those organizations and individuals that assisted in this effort.

We are extremely grateful to all 58 County Mental Health Directors and their staff for assistance in compiling the data from their counties. In addition, we would like to acknowledge Pat Ryan, Executive Director for the California Mental Health Directors Association for her support in completing this report.

NAMI California is also appreciative to the Mental Health Oversight and Accountability Commission (MHOAC) for their financial support in funding the dissemination of this Report.

We would like to recognize NAMI California's employee partners, our Executive Director Jessica Cruz and her Advocacy Team including Policy and Legislative Consultant Bettie Reinhardt and Advocacy Coordinator David Czarnecki in compiling the data and creating the Report. Perry Communications Group contributed its expertise to developing the Report's introductory documents and assisting with its release and press coverage.

For their continued support we would like to thank our NAMI California Board of Directors, affiliates and members. It is because of their support that this report and all other efforts are possible.

As we release this second annual report we reflect on the bigger picture that has led to the work captured in this document. It was nearly a decade ago that California voters approved Proposition 63, the Mental Health Services Act (MHSA). We would like to thank everyone who worked so hard to secure the passage of Prop 63. NAMI California also acknowledges the contributions of people who live with a mental illness and their family members.

In addition, we would like to recognize the individual responsible for bringing about this crucial piece of legislation. After his initial authoring of Prop 63 in 2004, Senate President Pro Tem Darrell Steinberg has also been a faithful supporter of other important mental health legislation, including AB 34 and AB 2034. We send our sincerest regards to Senator Steinberg and his staff for their work in reiterating the importance of MHSA funding and for their support for projects beyond this legislation.

We acknowledge those who authored Assembly Bill 34: Former Senator John L. Burton, and Former Assembly members Elaine Alquist, Scott Baugh, Gil Cedillo, Martin Gallegos, Bob Hertzberg, Mike Honda, Hannah-Beth Jackson, Fred Keeley, Shiela Kuehl, Bonnie Lowenthal, Kerry Mazzoni, Anthony Pescetti, Gloria Romero, Virginia Strom-Martin, Helen Thomson and Carl Washington.

Continued

Special thanks go to Stephen W. Mayberg, PhD., former director of the California Department of Mental Health, for his long service and advocacy on behalf consumers and family members. Thanks to Rusty Selix, Director of MHAC, for his foresight and diligence in the field of mental health.

There are many we have failed to mention who have worked for support of mental health in our state, but rest assured your work has not gone unnoticed. The MHSA is an unprecedented piece of legislation in California. We are grateful to those named above and everyone else who has played an integral role in not only the passage but also the continued success of the MHSA.

Thank you,

Dorothy Hendrickson
President

Jessica Cruz, MPA/HS
Executive Director

MHSA Programs 2013:
Saving Lives, Saving Money

The National Alliance on Mental Illness, California (NAMI California) has taken the lead in compiling data on the number and types of MHSA funded programs throughout the state, and is pleased to release the second annual comprehensive report – *MHSA County Programs 2013: Saving Lives, Saving Money* (Report).

This report showcases a wide variety of community-driven funding priorities. MHSA funding provides county-level flexibility to choose where to use the funding and how it can best serve the needs of the county's individual populations.

One in 12 of California adults (8.3%) in households have mental health needs and, of those, more than three quarters (76.6%) have unmet mental health needs. Of those with unmet needs, one-quarter (26.2%) received some treatment (but not minimally adequate treatment), and half (50.4%) received no treatment.[1] Left untreated, the consequences can be devastating. Thirty years ago, the State of California cut back on its services in state hospitals for people with severe mental illness without providing adequate funding for mental health services in the community.

To address this issue, in 2004 voters approved Proposition 63, the Mental Health Services Act (MHSA), placing a one percent tax on personal income for individuals making more than $1 million. MHSA programs have a highly personalized approach. Senate Pro Tem Darrell Steinberg – who worked tirelessly to pass Proposition 63 – recently touted the benefits of tailored programs compared to traditional treatment approaches, reflecting that sometimes you have to help the communities where they are most comfortable being treated.

As this Report details, the programs funded represent a wide spectrum of services – from prevention and early intervention to supportive housing to in-home care. *MHSA Programs 2013: Saving Lives, Saving Money* shows MHSA programs have served hundreds of thousands of Californians over the past eight years and are available to those diagnosed with a chronic and persistent mental illness, serious emotional disturbance, and their families. These programs reduce hospitalization, homelessness, suicide, and incarcerations, reaching children, youth, transitional age youth (16-25), adults, older adults, veterans and their family members. Programs funded through the MHSA help people achieve recovery and obtain meaningful places in society.

The intended goals of the report are to:

- Raise awareness of the programs and services available for Californians living with chronic and persistent mental illness and their families.
- Provide Californians – policymakers, opinion leaders and citizens – a comprehensive understanding of the critical services available for those living with a chronic and persistent mental illness and their families.
- Showcase the approximately 1,500 programs developed throughout the state serving thousands of people.
- Provide – in one document – background on the programs and the tailored supports that meet the individual needs of diverse clientele regionally.

MHSA Programs, Services and Successes

Every county in California has MHSA-funded programs that help individuals and families affected by mental illness to recovery. These programs cover a wide range of services, including wellness centers, homeless outreach and stabilization programs, family education, crisis intervention teams, community college pathways, early childhood counseling, parenting skills, transition to independence, LGBTQ (lesbian, gay, bisexual, and transgender) life skills, treatment for depression and anxiety, and suicide prevention. Many of these programs are available in multiple languages.

Local NAMI Affiliate organizations, and other community-based organizations, played key roles in determining the types of programs implemented.

These programs are effective. A Prop 63 funded evaluation, conducted by the University of California, Los Angeles (UCLA) Center for Healthier Children, Youth and Families in May 2011, found positive outcomes associated with participation in Community Services and Supports (CSS) programs. The report showed:

- Substantial reductions in homelessness, arrests, incarcerations and acute psychiatric hospitalizations for most age groups.
- The number of consumers and number of days spent in independent or residential living situations increased, particularly for children, transitional age youth, and adults.
- Reductions in homelessness of 82 percent for young adults and 67 percent for adults.
- Psychiatric hospitalizations or "mental health emergencies" were reduced by 88 percent for children, 86 percent for young adults, and 90 percent for adults.
- Reductions in arrests: 74 percent for adults, 78 percent for young adults, and 98 percent for older adults.

An October 2012 study by the UCLA Center for Healthier Children, Families and Communities found that Full Service Partnerships (FSPs), also part of CSS, are resulting in significant cost savings. The study found:

- FSPs result in a cost savings of $1.27 for every Prop 63 dollar spent.
- About 21,000 new clients were enrolled in FSPs in California during the two years studied, with a 22 percent increase in enrollment in year two.

"The program gave me good tips on how to handle and control my grandkids' anger and control issues. [My grandchildren] learned how to share and take turns. Before they would fight with their cousins. . . now they go to the park and play tennis and soccer."

Maria, caregiver to grandchildren with learning disabilities and ADHD

Mental Health Funding

"If I hadn't walked through that door, I would have been homeless the next day. I had no idea how to take care of myself. I was afraid I'd end up like 60 to 70 percent of foster kids – homeless, jobless and committing crimes to survive."

Dewan, City of Temecula employee

With the reduction in state general fund spending on mental health services and the ongoing budget crisis, MHSA funds are more important than ever. The creators of MHSA did not intend for it to be the sole funding source for county mental health services. The intent of the Act was to provide additional funding to expand needed services, not to supplant existing programs.

Services funded through MHSA have provided positive outcomes, yet the state has redirected portions of its funds to balance the state budget. In addition, reductions to general mental health funds continue, resulting in further decline of the overall resources available for these successful programs. Annual budget cuts and the redirection of funds are contrary to voter intention and will result in an increase in the number of people who are homeless, incarcerated, arrested, and hospitalized.

While there may be disagreement about the best way to use the MHSA funds, there can be no debate about the need. NAMI California strongly supports retaining the money in MHSA programs and using it where it can do the most good for the one in 12 affected by mental illnesses.

About the Report: Organization and Preparation

After the success of the 2012 Report, NAMI California was able to confidently compile all information for this year's updated report from all 58 California County Mental Health and Behavioral Health Departments.

Organized by county, the Report names and describes each county's MHSA program, population served and the name and contact information for each county's MHSA coordinator or link to its county website.

Beginning in 2012, NAMI California gathered data for this Report by contacting all 58 California County Mental Health and Behavioral Health offices, reviewing county plans, and annual updates. County Mental Health Directors were asked to review the data for their county to ensure accuracy and completeness.

NAMI California is very grateful for the cooperation and collaboration of the county mental health directors and their staffs for assisting us with this resource guide.

"When I came into the program I did not want to talk to anyone. I was used to having relationships with counselors and then they would go away. I've matured a lot in the program. They're helping me find a job and look after myself."

Deleliah, 20, long-time foster child

"My life has changed radically. . . . The TAY program gave me a new family and helped build me into an independent woman who likes herself. I have my goals, I have learned to be independent, and I really like who I am. My diagnosis has not defined me."

Penny, mental health consumer in her 20s

About NAMI California

The National Alliance on Mental Illness, California (NAMI California) is the largest membership organization comprised of families and individuals affected by a chronic and persistent mental illness in the state. As a non-profit grassroots organization, we advocate for lives of quality and respect, without discrimination and stigma, and provide leadership in advocacy, legislation, policy development, education, and support throughout California.

NAMI California has 66 affiliates and represents 19,000 people. NAMI California and its affiliates educate families, professionals, and the public about scientific research into neurobiological brain disorders, provide peer and family support groups, and promote stigma reduction.

NAMI California and its affiliates strongly supported Proposition 63, which established the Mental Health Services Act (MHSA). We are grateful for the willingness of California voters to support this legislation. To learn about the history of mental health initiatives and advocacy in California, go to: http://www.pendari.com/DMH/Books/MHSA_and_Transformation/files/mhsa_and_transformation.pdf

Proposition 63: Overview

California voters passed Proposition 63, also known as the Mental Health Services Act (MHSA), in November 2004 to expand and improve public mental health services and establish the Mental Health Services Oversight and Accountability Commission (MHSOAC) to provide oversight, accountability and leadership on issues related to public mental health.

At that time, California's public mental health funding was insufficient to meet the demand for services. County authorities estimated serving about half the population that needed public mental health care. The majority of mental health funding went to treatment for individuals with the most severe and persistent mental illness, state hospitals and the criminal justice system. For this reason, California's mental health delivery system was frequently portrayed as a "fail first" model. Instead of providing services, the "safety net" of an under-funded system had become the criminal justice system, the courts, and emergency rooms.

In its March 2003 Report, the California Mental Health Planning Council estimated between 500,000 and 1.7 million Californians needed mental health services but failed to receive care. In addition, cultural, racial and ethnic populations have been disproportionately affected because they use fewer mental health services.

Children under 18, for whom early diagnosis and treatment are critical, have been especially underserved. It is estimated that 75 to 80 percent of all children requiring mental health services were not receiving them.

MHSA Today

Since California taxpayers approved a one percent tax on incomes above $1 million dollars to fund Proposition 63, more than $8 billion has been raised. Approximately 1,500 programs have been developed throughout the state and thousands of people have been served. Through stakeholder input, mental health programs and supports are tailored to meet the individual needs of the diverse clientele. As a result, the community is experiencing the benefits of expanded and improved programs to assist consumers in becoming active members of society. Counties are now receiving funding in an attempt to provide "whatever it takes" treatment for people with serious mental illness.

Prop 63 services maintain a commitment to service, support and assistance. Because of Prop 63, California is moving its public mental health system to a "help first" system by providing enhanced funding for effective treatment for people with serious mental illness, new Prevention and Early Intervention services and the unique Innovation component.

Client outreach support services and family involvement are improving, including programs to enhance access and reduce disparities to unserved and underserved individuals throughout California.

1. Grant, D., Kravitz-Wirtz, N., Aguilar-Gaxiola, S., Sribney, W.M., Aydin, M., Brown, E.R. (2010). Mental health status and use of mental health services by California adults. Policy brief (UCLA Center for Health Policy Research)." Policy Brief UCLA Center for Health Policy Research, 2010 Jul;1-87.

"Tens of thousands of Californians are benefiting from mental health services provided through this act, but many are simply not aware of the breadth of the work being done and the number of lives being affected in positive and profound ways. It's important Californians hear that story so that those suffering with mental health problems know that they can reach out and get help from a system that works."

Senate President pro Tem Darrell Steinberg

NAMI California
National Alliance on Mental Illness

MHSA Funded Programs Statewide – By County

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County	Program Name	Component	Program Description	County/City MHSA Website or Program Contact Information
			ACRONYM KEY: **MHSA** Mental Health Services Act **CSS** Community Services & Supports **FSP** Full Service Partnership **OESD** Outreach & Engagement/System Development **PEI** Prevention & Early Intervention **WET** Workforce Education & Training **CFTN** Capital Facilities & Technology **INN** Innovation	
Alameda	Support Housing for TAY	CSS - FSP	Provides permanent supportive housing for youth who are homeless, aged out of foster care, leaving the justice system or residential treatment.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Greater HOPE	CSS - FSP	Adds housing, personal service coordination and medication capacity to existing mobile homeless outreach provider in South and East County.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	CHOICES for Community Living/ Recovery Education Centers	CSS - FSP	Integrates supportive housing, supportive employment, peer counseling and case management to enable clients to graduate from Service Teams system.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Forensic Assertive Community Treatment	CSS - FSP	Creates a multi-disciplinary community treatment team and community support center for adults with extensive criminal justice histories and those experiencing their first or second incarceration.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Mental Health Court Specialist	CSS - OESD	Team of mental health staff at Alameda courtrooms to provide assessment, treatment and advocacy for defendants with serious mental illness (SMI).	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Juvenile Justice Transformation of the Guidance Clinic	CSS - OESD	Provides in-depth assessment and treatment for youth in the juvenile justice system. Creates linkages to community based services and expands on-site treatment in Juvenile Hall.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Multi-systemic Therapy	CSS - OESD	Family preservation strategy that serves chronic juvenile offenders with Serious Emotional Disturbance (SED) co-occurring with substance abuse and violent behavior.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Transition to Independence	CSS - FSP	Provides services to transition-age youth who are homeless, leaving foster care or criminal justice system through a multidisciplinary Transition to Independence (TIP) team.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Behavioral Health Court	CSS - FSP	Creates a new multi-disciplinary team and provide housing subsidies and peer counseling to individuals involved in the criminal justice system	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Co-occurring Disorders Program/ Co-occurring Housing Program	CSS - OESD	Provides housing, medication assessment, evaluation, education, support and monitoring to individuals with co-occurring mental health and substance abuse disorders in alcohol and drug treatment settings throughout the county.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Crisis Receiving Facility for Adolescents	CSS - OESD	This strategy will provide crisis stabilization and acute care to youth ages 12-17 and their families, moving them towards a reduced level of care.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Wraparound Program for Asian/Pacific Islander (API) & Latino Youth	CSS - OESD	Provides services to API and Latino Youth that are in need of intensive case management through the Wrap-around service model.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Mobile Integrated Assess Team for Seniors	CSS - OESD	Increases access for homebound seniors through the use of mobile geriatric mental health teams.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Crisis Response Program - Capacity for TriValley	CSS - OESD	Augments ACCESS services with clinical and peer staff dedicated to East County.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Crisis Response Program - Capacity for Tri-City	CSS - OESD	Augments ACCESS services with clinical and peer staff dedicated to South County. Crisis Response Program.	http://www.acbhcs.org/MHSA/overview.htm

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Alameda	Older Adult Peer Program	CSS - OESD	This strategy will provide outreach, education and peer based services to the older adult population.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Behavioral Health Medical Home	CSS - OESD	This will integrate primary health care services into two Alameda County Mental Health Community Support Centers.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Low Income Health Plan Pilot	CSS - OESD	Broad array of services to provide increased access of consumers of the system to primary care services	http://www.acbhcs.org/MHSA/overview.htm
Alameda	ACCESS for Asian/Pacific Islanders (API)	CSS - OESD	Improve availability of ACCESS and brief treatment clinic/field based services by increasing bicultural staff in one Asian crisis clinic. Includes assessment, brief treatment and referral services.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	ACCESS for Latinos	CSS - OESD	Improve availability of ACCESS and brief treatment clinic/field based services by increasing bicultural staff in one Latino crisis clinic. . Includes assessment, brief treatment and referral services.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Family Education & Resource Center	CSS - OESD	Provides a range of info/referral and support services for families within ACBHCS. Increases number of county-wide family support groups and encourages linkage with providers. Promotes county-wide family	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Mental Health Consultation in Preschools	CSS - OESD	Outreach, on-site mental health consultation, screening and evaluation at preschools.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Mental Health Consultation in Schools	PEI	Outreach, on-site mental health consultation, screening and evaluation at elementary, middle and high schools.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Prevention and Recovery in Early Psychosis (PREP) Alameda County	PEI	Outreach, education and early treatment for TAY experiencing the onset of psychosis and SMI.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Stigma & Discrimination Reduction Campaign	PEI	Outreach, education, training, consumer empowerment, and local media projects to reduce stigma associated with mental illness.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Outreach, Education & Consultation for the Latino Community	PEI	Outreach and education, mental health consultation, and cultural wellness practices for Latino community.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Outreach, Education & Consultation for the Asian/Pacific Islanders (API)	PEI	Outreach and education, mental health consultation, and cultural wellness practices for API community.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Outreach, Education & Consultation for the South Asian/Afghan Community	PEI	Outreach and education, mental health consultation, and cultural wellness practices for South Asian& Afghan community.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Integrated Behavioral Health & Primary Care for Latino & Asian/Pacific Islander (API) Older Adults	PEI	Outreach and education, mental health consultation, and cultural wellness practices for Native American community.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Integrated Behavioral Health & Primary Care for Older Adults in Emergency Rooms	PEI	Deploys a mental health Geriatric Assessment and Response Team (GART) into Emergency Rooms (ERs). Provides training to ER staff. Provides mental health services and supports.	http://www.acbhcs.org/MHSA/overview.htm

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Alameda	Integrated Behavioral Health & Primary Care Integration for All Age Groups	PEI	Deploys mental health staff into two primary care clinics serving underserved ethnic and language populations. Trains primary care professionals in mental health screening. Provides mental health services and supports.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Peer Support for Children, TAY and Adults	PEI	This strategy will provide outreach, education and peer-based services to the older adult population.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Transition Age Youth (TAY) Resource Center	PEI	Provides mental health services to TAY at an existing youth development center.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Trauma Informed Care	PEI	Seeks to reduce the incidence of suicide amongst high-risk groups.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Wellness, Recovery, Resiliency Resource Hub	PEI	Provides technical assistance and training to integrate wellness practices into the culture and operations of BHCS programs. Hub staff and consultants provide program design consultation, workshops, ongoing classes and events that build culturally relevant and wellness-oriented experience, knowledge, skills and practice.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Multi-Jurisdictional Statewide Projects: Student Mental Health	PEI	Trainings to create a supportive environment for students experiencing mental distress and reducing stigma in the K-12 and Higher Education settings.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Multi-Jurisdictional Statewide Projects: Suicide Prevention	PEI	Trainings to increase awareness for community gatekeepers, building capacity in peer support models, and reducing gaps in addressing underserved populations.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Multi-Jurisdictional Statewide Projects: Stigma & Discrimination Reduction	PEI	Multiple trainings aimed at a diverse group of stakeholders to increase awareness and sensitivity toward consumers and family members. Expanding capacity in existing peer support programs.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Workforce Staffing Support	WET	Provides infrastructure to manage the development, implementation and evaluation of all Workforce Education and Training (WE&T) programs and initiatives. Spearheads partnerships with community-based organizations, peer-run agencies, educational institutions and local, regional and state agencies.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Training Institute	WET	Provides a coordinated, consistent approach to training and staff development. Develops, researches and provides a broad array of training related to mental health practice; wellness, recovery and resiliency; peer employment and supports and management development.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Alameda	Peer Employment Toolkit	WET	Offers an integrated, coordinated approach to peer (i.e., consumer and family member) employment and supports peer employees at all stages of the employment process, from recruitment to retention. The goal is to develop and retain authentic consumer and family member voices in leadership roles as we develop new wellness, recovery and resiliency practices across the system.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Community College Career Pathway	WET	Develops a mental health career pipeline strategy in the community colleges, which serve as an academic entry point for consumers, family members, ethnically and culturally diverse students and individuals interested in human services education and can lead to employment in the ACBHCS workforce.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Educational Campaign to Increase Workforce Diversity	WET	Develops a culturally appropriate educational campaign to enhance the image of mental health employment and to recruit students and potential employees from Alameda County's diverse communities.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Alameda	Graduate Stipends to Increase Workforce Diversity	WET	Offers financial stipends to graduate students enrolled in Social Work, Marriage and Family Therapy, Nursing and Psychology Programs. Requires a year of employment for each year of funding. Provides 20 stipends of $5000 annually. ACBHCS will develop eligibility criteria and an application process. Anticipated start date: August 2013	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648

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Alameda	Loan Assumption Program	WET	Offers loan forgiveness for county and contract community-based organization staff. Requires a year of employment for each year of loan repayment. Pilot program will provide $150,000 in the first year. ACBHCS will develop eligibility criteria and an application process. Anticipated start date: Jan 2014	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Alameda	Internship Program	WET	Coordinates academic internship programs across the ACBHCS workforce. Meets with educational institutions to publicize internship opportunities and provides training to clinical supervisors and student interns.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Alameda	*Currently in development phase:* Hayward Behavioral Health Support Center Crisis Stabilization Expansion for Adults	CFTN	HBHC to provide space for the administration and service of four programs: • BHCS Crisis Response Program Central Hub for crisis services in central, south, and east county; • Geriatric Assessment Response Team (GART); • Co-Occurring Disorders • Medication Support Pilot Program; and Hayward satellite office of the Family Education and Resource Center (FERC). Expansion to Crisis Stabilization to provide capacity of unlocked bed for adults.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	*Currently in planning phase:* MHSA Technology project	CFTN	Purchase, installation and maintenance of a new behavioral health information system, to include: electronic health records, personal health records, e-prescribing functions, data interoperability and the necessary support staff during the implementation process, and other projects that provide access and supports to consumers and family members for access to their personal health record and other wellness and recovery supports.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Renovation and/or Expansion - Capital Facilities	CFTN	Renovates and/ or expands County-owned or County-controlled properties for use by MHSA programs/activities and capital facilities. The MHSA program(s) to be located at the facility are yet to be determined.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Electronic Health Record (EHR) - Technology	CFTN	Creates electronic health records based on technology that supports interoperability with other systems to ensure a dynamic data exchange with other entities involved in the care of consumers. Given the vast network of ACBHCS service providers in Alameda County, ACBHCS seeks to facilitate the use of an electronic health record by both County-owned and operated programs, as well as the contracted provider community. Where contracting providers already have electronic health record systems in place, standardized data exchange ensure a seamless integration of client data.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Provision of Computer Resources - Technology	CFTN	Provides computer resources in locations where consumers and family members gather and receive services to allows access the internet and other software. Computers will be used for education, accessing job-related information and public policy materials, accessing/managing personal health information and other tools that promote wellness and recovery such as Patricia Deegan's Common Ground shared decision-making software.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Electronic Prescription Functionality - Technology	CFTN	Develops electronic prescription functionality that will be available to consumers in Alameda County. E-prescribing improves quality of care and reduces medication errors, including the possibility of a misread prescription by a dispensing pharmacist. E-prescription applications alert doctors to potential drug-to-drug/food interactions and drug allergies, provide pregnancy and lactation alerts, peer medication dosing patterns and online access to clinical references.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Personal Health Record - Technology	CFTN	Develops a Personal Health Record (PHR) that will be available to consumers to access important aspects of their Electronic Medical Record, including scheduled appointments, treatment information, options for completing a Wellness and Recovery Action Plan (WRAP) and for communicating with clinical staff. The specific function of the PHR will be determined by emerging PHR standards, stakeholder processes, clinical care policy, security implications, and other technical and administrative issues that emerge from accessing health information electronically.	http://www.acbhcs.org/MHSA/overview.htm
Alameda	Innovations	INN	Programs to be determined, planning to begin soon. Berkeley City.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648

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Alameda	Innovative Grants Program	INN	Alameda County Behavioral Health Care Services (BHCS) invites members of the community to present fresh and new ideas to be funded as Innovative Projects. Applicants may submit applications for: •Mental health outreach, education and training for mental health and non-mental health providers •New treatment interventions or supports to improve outcomes among individuals and their families with or at risk for mental health issues •New organizational practices, processes or procedures to improve collaboration, cultural competence, recovery, efficiencies or revenue •Increased mental health advocacy •Other creative ideas to improve the public mental health system and reduce the need for longer-term mental health treatment. www.acinnovations.org.	http://www.acbhcs.org/MHSA/overview.htm
Alpine	Full Service Partnerships	CSS - FSP	Full Service Partnerships	http://www.alpinecountyca.gov/behavioral_health
Alpine	Wellness Centers	CSS - OESD	Builds on a former and future CSS investment in two Wellness Centers - one currently in operation (but underutilized), the other yet to be identified. CSS funds will be used for outreach, rent, maintenance and startup costs, funding a portion of the Wellness Center Coordinator's salary and for services to individuals with severe mental illness and severe emotional disturbances. PEI funds will be used to deliver an expanded array of services.	http://www.alpinecountyca.gov/behavioral_health
Alpine	Outreach & Engagement	CSS - OESD	Conducts outreach and engagement activities related to mental health promotion, awareness and education.	http://www.alpinecountyca.gov/behavioral_health
Alpine	Field Capable Clinical Services	CSS - OESD	Through MHSA, offers field capable clinical services as well as transportation to behavioral health- related programming and services.	http://www.alpinecountyca.gov/behavioral_health
Alpine	Activities offered at Wellness Centers	PEI	Wellness Center activities may include age-specific workshops and skill-building classes; parenting classes and parenting support groups; youth counseling and pro-social enrichment activities; youth counseling and pro-social enrichment activities; cross-generational mentoring; talking circles and traditional healing; senior socialization and exercise; conflict resolution and communication; grief and trauma support for youth, adults, and older adults; luncheons and community-wide celebrations; referrals and advocacy.	http://www.alpinecountyca.gov/behavioral_health
Alpine	Anti-Bullying Program	PEI	Funds a community and school-based anti-bullying campaign that targets youth, parents, and educators to reduce bullying, cyberbullying, homophobia, racism and hatred and decrease school violence and absenteeism. Identifies and selects student leaders (ambassadors) from diverse groups across the campus and teaches them nonviolent communication skills to stop bullying and violence.	http://www.alpinecountyca.gov/behavioral_health
Amador	MHA Sierra Wind Wellness Center	CSS-OE	Sierra Wind is a peer-led self-help center offering advocacy, support, benefits acquisition, culturally diverse support groups, training, and patient's rights advocacy. Sierra Wind provides weekly support groups, daily meals, linkage and navigation of services, and volunteer opportunities for all of its clients.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Consumer Advocate / Primary Care Liaison	CSS-SD	The Advocate/Liaison attends client meetings and serves on policy and program development teams to promote the concept of clients/families as partners in the treatment process	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Full Service Partnerships	CSS-FSP	The program's focus is to provide an integrated system of care, including outreach and support, to children, youth, transitional age youth, adults and older adults seeking or receiving behavioral health care in Amador County. Its focus with Full Service Partners is to provide a team approach to "wrap around" clients and their families. Staff do whatever it takes from a clinical perspective to ensure that consumers can stay in the community and out of costly psychiatric hospitals, incarcerations, group homes, and evictions. The focus is on community integration and contribution.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Personal Service Coordinators	CSS-FSP	Functioning as case managers and personal service coordinators, the positions provides direct clinical services consistent with the vision and goals of MHSA. PSCs will be responsible for implementing outreach and engagement activities and individual and group services for the corresponding age groups. Off-site services will be integrated with existing activities at a community-based center or within the home. The position will ensure that services are delivered in a manner that embraces the recovery model.	http://www.co.amador.ca.us/index.aspx?page=524

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Amador	Integrated Recovery Team	CSS-SD	Amador County employs an Integrated Recovery Team (IRT) System of Care. IRT integrates mental health services, substance abuse services and consumer and family representation. Behavioral Health IRT members now share the responsibility of providing client-driven, welcoming, recovery-oriented and strength-based services. With its client-driven focus, this program can further inform the County's adoption of MHSA principles in service delivery.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Crisis Team	CSS-SD	Provides follow-up specialized skills for staff/team building in the community, including hospital ER and family groups.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	NAMI Outreach & Engagement	CSS-OE	NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raising awareness and building a community of hope for all of those in need. For this project in Amador County, NAMI conducted outreach and education to family members and people with lived experience.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	NAMI Family to Family	CSS-OE	This free, 12-week course offered by the National Alliance on Mental Illness (NAMI) is offered throughout the United States, in two Canadian provinces and in three regions in Mexico. With more than 3,500 volunteer teachers, 250,000 family members have participated in the program since 1991. Family to Family provides education about mental illness and treatments, emotional and practical support, and problem solving and communication skills for family members and caretakers of those with a mental illness.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	NAMI Peer to Peer	CSS-OE	Provided by NAMI Amador, Peer-to-Peer is a unique, experiential learning program for people with any serious mental illness who are interested in establishing and maintaining their wellness and recovery. Peer-to-Peer consists of 10 two-hour units and is taught by a team of two trained mentors and a volunteer support person who are personally experienced at living well with mental illness.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	NAMI Networking with Behavioral Health Staff	CSS-OE	Partnership with NAMI Amador.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	First 5 Behavioral Consultation	PEI	First 5 Amador provides high quality mental health consultation, treatment, and socialization classes, as well as education to child care providers, teachers, families and children in order to reduce the number of youth who are removed from child care setting and to improve family functioning.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	ATCAA Community Center Outreach	PEI	This program provides outreach, education, and support intervention services to Spanish-speaking and isolated consumers and their families. The program also provides mental health and wellness education workshops for the community. The program offers consumer-centered case management and family advocate support services to help consumers identify mental and physical health issues and service needs. Staff then provide referrals to resources and assist consumers with the beginning steps of an individualized care plan.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	ATCAA Building Blocks of Resiliency	PEI	The Building Blocks of Resiliency program offers Parent-Child Interaction Therapy (PCIT) to help create stronger and healthier families with positive relationships. PCIT is designed to improve family functioning, resiliency, and cohesion as parents receive one-on-one coaching in “real time” to acquire skills and tools to improve the quality of the parent-child relationship. The program also offers Aggression Replacement Training (ART) to help increase resiliency in children and teens. Through ART, youth develop a skill set for responding to challenging situations with social learning and cognitive behavioral strategies.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	ATCAA PCIT-Parent Child Interaction Therapy	PEI	Evidence-based program for young children and their parents targeting development of parenting strategies around difficult or complicated behavior patterns.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	ATCAA ART-Aggression Replacement Training	PEI	Evidence-based program for children which evaluates current acting out behaviors in a group setting. Currently being implemented in the Amador County Community School and one middle school.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	ATCAA Youth Empowerment Program	PEI	Develops a network of transitional age youth to guide and shape youth empowerment activities.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	ATCAA Project SUCCESS	PEI	Project SUCCESS is a SAMHSA-recommended, research-based program that uses interventions proven effective in reducing risk factors and enhancing protective factors.	http://www.co.amador.ca.us/index.aspx?page=524

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Amador	ATCAA Promotores de Salud	PEI	The Promotores de Salud is a Latino Peer-to-Peer program that utilizes Spanish-speaking Hispanic/Latino community members to reach out to other historically underserved Spanish-speaking Hispanic/Latino and linguistically isolated community members. The goal of this program is to promote mental health, overall wellness, and ultimately increase access to services. Promotores conduct educational presentations and outreach activities and help overcome barriers such as transportation, culture, language, stigma, and mistrust.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	The Resource Connection Grandparents Program	PEI	Provides respite care for at risk grandparents raising their grandchildren. Grandparents are eligible to receive up to 16 hours of care per month for their grandchildren in a licensed child care facility. The program also provides a training/support group four times per year and mails additional resources to all who apply for services.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Isolated Seniors Project	PEI	In order to address isolated seniors, ACBHS plans to contract with a senior-serving group to expand the scope and/or outreach of their efforts to support the mental health and wellbeing of isolated older adults.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Training, T/A & Capacity Building for Promotores	PEI	Involves Promotores in the orientation and cultural competency training of the Integrated Recovery Team (IRT).	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Training, T/A & Capacity Building for Law Enforcement	PEI	Trains law enforcement and other first responders in mental health law and engagement strategies to ensure both mental health consumer and first responder safety and to reduce trauma and stigma currently identified as creating barriers to the success of these interactions.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	"Self Management Techniques" Training Project	INN	The Self-Management Techniques Project will provide supportive services to Amador County residents suffering from stress-related symptoms. Trainers will offer these services throughout the county and the public will have the opportunity to receive training at no charge in exchange for passing on or "paying forward" what they learn to others in the community.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	"Plymouth Wellness Day" Bus Route Project	INN	The Plymouth Wellness Day Project aims to improve access to services by creating a transportation route from the especially isolated River Pines/Fiddletown to Plymouth one day per week and increasing mental health and primary care services on that day. The project also aims to increase mental health and primary care collaboration by providing coordinated services and tracking the usage of these services for their viability in the future.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Workforce Staffing Support	WET	Staffing support includes assisting staff with work-related education and training goals, tracking mental health workforce trends, identifying local needs, and representing the department at regional and statewide meetings.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Essential Learning Online Training Platform	WET	Essential Learning includes over 300 courses of readily available curriculum, with CEUs at no additional cost. Essential Learning curriculum covers training on all MHSA target populations, current therapeutic interventions, as well as the MHSA essential elements.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Human Services Certificate Sponsorship	WET	ACBHS is partnering with the Amador Community College Foundation (ACCF) to promote an 18-unit Human Services certificate and to provide additional supports as needed. ACCF currently partners with Coastline Community College to offer Amador County residents certificate and associate degree programs, completely online. The Human Services certificate is the ideal entry level certificate for consumers, family members, or anyone interested in beginning employment with ACBHS, typically as a Personal Service Coordinator.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Community College Scholarships	WET	ACBHS is creating a menu of options for consumers, family members, staff, and the public. To fully support the partnership with ACCF and to ensure the success of the students seeking the Human Services certificate, ACBHS is dedicating $20,000 in scholarship funds for those with a financial need. For staff seeking to advance their careers in public mental health, ACBHS will assist in identifying which of the several loan assumption programs are most appropriate, including the MHSA-funded Mental Health Loan Assumption Program, which provides Bachelor or Masters level graduates who are in "hard to fill" positions up to $10,000 in funding for a one year service commitment.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Internship & Supervision Program	WET	ACBHS continues to offer Masters in Social Work and Marriage and Family Therapist Interns opportunities to earn their hours toward licensure within the department. Students needing practicum hours to graduate are also extended opportunities for needed experience as capacity allows. A roving supervisor has been contracted through the Central Region WET Partnership and visits Amador weekly to support all interns and practicum students.	http://www.co.amador.ca.us/index.aspx?page=524

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Amador	Anasazi Electronic Health Record System	CFT	Technology funds have been dedicated to the department's Electronic Billing and Records System, Anasazi, in partnership with Kingsview for technical support.	http://www.co.amador.ca.us/index.aspx?page=524
Amador	Housing	Housing	Amador County has completed a needs assessment for permanent housing. The funds currently available have not been sufficient to attract a partner or meet the guidelines of this component.	http://www.co.amador.ca.us/index.aspx?page=524
Berkeley City	Intensive Support Services Children's Wraparound Full Service Partnership	CSS - FSP	This community-based mental health program is designed to provide intensive short-term, individualized treatment, care coordination and support to children and youth ages 0-18 years.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	TAY-Adult & Older Adult FSP	CSS - FSP	Provides intensive support services to individuals with severe mental illness who are homeless or at risk of becoming homeless. Priority populations include transition-age youth, older adults, and individuals in unserved and underserved ethnic communities.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Multi-Cultural Outreach & Engagement	CSS - OESD	Using cultural, linguistic, and age-appropriate methods, conducts outreach and engagement activities to ethnic populations that are currently unserved, underserved or inappropriately served in the mental health system.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Transition Age Youth Support Team	CSS - OESD	Provides outreach, support, services, and/or referrals to homeless Transition Age Youth (TAY) with serious mental health issues. Priority is given to youth coming out of foster care and/or the juvenile justice system, with targeted outreach strategies to engage youth from various ethnic communities, including Asian and Latino populations.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Wellness & Recovery Support Services	CSS - OESD	Advances wellness & recovery goals on a system wide level through a collaboration of staff, consumers, family members, and other stakeholders. Promotes increased involvement of consumers and family members in the service delivery system. Creates policies that facilitate the MHSA goals of becoming more wellness and recovery oriented and consumer and family member driven. Designed, organized, and led by BMH consumers and consumer staff, this program implements workshops, trainings, creative activities, and ongoing healthy groups for consumers and family members .	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Family Advocacy	CSS - OESD	Provides outreach, education, supports, referrals, and community linkages for family members throughout the mental health system.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Employment and Education Support	CSS - OESD	Develops relationships with existing employment services such as the State Department of Rehabilitation, Alameda County Behavioral Health Vocational Services Program, and community-based one-stop employment centers. The Employment Specialist will collaborate with existing service teams to provide information and support for consumers accessing employment and educational services.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Housing Support	CSS - OESD	Provides housing retention for homeless and at risk TAY, adults and older adults through dedicated support to consumers, staff, landlords, and housing-related social services.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Benefits Advocacy	CSS - OESD	A collaboration with a community-based organization assists clients in obtaining benefits.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	BE A STAR (Behavioral-Emotional Assessment, Screening, Treatment, and Referral)	PEI	Implements a coordinated system to identify children birth to five at risk of developmental delays, physical, social-emotional, and behavioral concerns. Triage, assessment, referral, and treatment as needed through appropriate community-based or specialist services.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Community Education & Supports Project	PEI	Partners with community groups to implement culturally appropriate outreach, engagement and support services within underserved cultural/ethnic populations to individuals in need of trauma supports.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Social Inclusion Project	PEI	Ensures a coordinated effort with ACBHCS around anti-stigma programming in Berkeley. Among other activities, trains consumers to conduct community presentations in order to dispel myths, attitudes and discrimination around mental health clients and issues.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	High School Youth Prevention Program	PEI	The program consists of a thorough screening process that is used to identify young people who may need more intensive intervention, and to provide referrals that connect students in need with therapeutic treatment and services when necessary.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Community-Based Child & Youth Risk Prevention Program	PEI	A range of psycho-educational activities in multiple modalities provide information and supports for those in need. Services also include assessment, brief treatment, case management, and referral to long term providers as needed to reduce risk factors or other stressors, and promote positive cognitive, social, and emotional well-being.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648

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Berkeley City	Homeless Outreach Program	PEI	This new program will increase access to available resources for homeless individuals in Berkeley and Albany. Those in need will be outreached to and provided supported referrals to area programs and services including education, crisis intervention, short-term counseling, and referrals.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Peer Leadership Coordination	WET	Coordinates skills training for consumers, family members, and culturally and linguistically diverse community members to enable them participate on Berkeley Mental Health (BMH) committees and boards; secure consumer and family member positions; and/or provide wellness and recovery community organizing.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Staff Development and MHSA Training	WET	Through this program BMH staff and affiliated community agencies provide trainings to guide the MHSA system transformation.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Career Pathways Adjunct Support	WET	Collaborating with Berkeley Unified School District to implement curriculum in High School to both inform and prepare students for careers in the mental health field.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Graduate Level Training Stipend Program	WET	Enables BMH to provide stipends to culturally and linguistically diverse graduate level trainees and interns.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Peer Leader Stipend Program	WET	Provides stipends for consumers and family members to participate in leadership roles at BMH and in peer counseling training roles in the clinics.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Adult Services Clinic Renovation	CFTN	Using Capital Facilities funds, renovates the BMH Adult Services Clinic to create a safe and welcoming, consumer-friendly and family friendly environment.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Electronic Health Records Project	CFTN	Uses Technological Needs funds to implement a fully operable Electronic Health Records system, providing greater consumer access to personal health information.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	African American Community Empowerment Academy	INN	Using an Afro-Centric model this project seeks to assess whether Cultural Heritage training and Leadership Skill building activities improve the mental health of African American consumers; increase access for those who are in need but not currently receiving services; and build community advocates.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Re-entry Systems Synergy	INN	This project seeks to understand whether participating in informal community-building activities that are offered in a supportive environment by peers, builds resiliency, increases knowledge and awareness, promotes successful re-entry into the community, and increases positive mental health outcomes for Ex-Offenders, Veterans and their families.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Wellness Strategy for Asian Pacific Islanders	INN	This project seeks to understand the main challenges and barriers to accessing and utilizing mental health services for Asian Pacific Islanders through testing whether culturally based activities that foster intergenerational interaction, support continuity in community narratives, build intercultural alliance, and improve the quality and density of social support, can result in a reduction of acculturative stress; promote healthy integration and wellness; and increase the access to, or the outcomes of, mental health services for underserved and un-served API's in Berkeley and Albany.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Trauma Informed Holistic Health Care Delivery Project for Transition Age Youth	INN	This project seeks to understand the impact and outcomes on the well-being of TAY who simultaneously receive mental and physical health interventions; to ascertain whether various skills based interventions promote positive health practices and healing; and to assess the impact of receiving services in a culturally appropriate setting from an agency that provides culturally-based services, has on the healing of traumatic issues.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Senior 2 Senior Project	INN	This project provides Technology Support Groups for Senior Citizens in an effort to decrease isolation, increase social connections, and identify those in need of mental health services in an effort to understand whether issues of loneliness and isolation can be decreased, and mental health positive outcomes can be increased in the Senior Citizen population through training and access to social media technologies and associated peer supports.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Board & Care Nutrition Project	INN	This project implements a nutrition and exercise support services project for Board and Care residents in an effort to improve and/or prevent serious medical conditions and increase positive health outcomes for mentally ill Adults and Older Adults.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648
Berkeley City	Improve the Access and Quality of Mental Health Services for LGBTQI Individuals	INN	Through partnering with multiple area agencies this project seeks to understand whether LGBTQI individuals will be more accepting of mental health services and have better mental health outcomes when culturally competent individuals meet them in their own settings (i.e., agencies where they are already accessing other services), and to determine whether providing competency training on LGBTQI mental health issues for agencies that do not specifically provide such services, improves outcomes for their LGBTQI clients.	http://www.ci.berkeley.ca.us/ContentDisplay.aspx?id=15648

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Butte	Crisis Stabilization Unit (CSU)	CSS - OESD	Provides up to 23 hours of specialized services to voluntary individuals. Services include crisis intervention and stabilization, emergency medications, nursing health assessment, and mental health assessment for all ages.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Senior Comprehensive Support Program (SCSP)	CSS - OESD	Offers home-based counseling and support to older adults who are experiencing depression, anxiety, complicated grief and/or loss, trauma, and/or medication mismanagement. Services are offered in the home to those who may have difficulty accessing them.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Hospital Alternative Program (HAP)	CSS - OESD	This short-term intensive service targets youth at risk of hospitalization. Provided by Youth for Change, Inc. (YFC).	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Northern Valley Talkline	CSS - OESD	A non-crisis warm line offering peer to peer support, compassionate listening, and county-wide resource referrals. The Northern Valley Talk Line operates 365 days a year, 4:30–9:30pm. 1-855-582-5554.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Support, Employment, Assistance, Recovery, Consumer Housing (SEARCH	CSS - OESD	Provides intensive services to individuals who are homeless or at risk of homelessness due to a severe and persistent mental illness. Individuals are linked to the Housing Authority of Butte County, Department of Rehabilitation (DOR), Veterans Services, Legal Aid, Social Security Administration, and other needed services.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Master Leasing	CSS - OESD	Provides site control and guaranteed permanent housing for our Transitional Age Youth (TAY), Adult, and Older Adult consumers. Northern Valley Catholic Social Services (NVCSS) and Youth for Change, Inc. (YFC) manage and offer this service to individuals who are homeless or at risk of homelessness. BCDBH provides case management for tenants.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Consumer Employment Program	CSS - OESD	Employment opportunities are contracted through several local agencies.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Department of Rehabilitation Cooperative (DOR Co-Op)	CSS - OESD	BCDBH has partnered with Department of Rehabilitation (DOR) to assist individuals in finding employment.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	6th Street Center	CSS - OESD	Open to homeless youth, or those at risk of homelessness. Services include basic needs (laundry facilities, showers, afternoon meals), education support, employment development, family reunification assistance, and referral to community services. 6th Street Center is a program of Youth for Change, Inc. (YFC).	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Welcoming Triage & Referral	CSS - OESD	Welcomes youth and adult outpatients into the Behavioral Health system. This program allows for walk-in and urgent care services.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Wellness & Recovery Centers	CSS - OESD	The Wellness and Recovery Centers (WRC) are consumer driven and emphasize recovery-oriented activities including peer support, socialization opportunities, life skills groups, reintegration into the community, employment services, and medication support. These centers are open to all community members ages 18 and over.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Youth Intensive Programs	CSS - OESD	Youth Intensive Programs (YIP) provide specialized wraparound services throughout the county. Services include culturally specific teams; teams for children and youth detained by Social Services, and TAY youth.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Housing Development Program	CSS - OESD	The MHSA Housing Development Program will provide approximately 14 units of permanent, affordable, supportive housing to individuals with Mental Health disabilities who are homeless or at risk of homelessness. The housing units will be linked with on-site or off-site supportive services that help tenants to retain their housing and consumers to become more self-sufficient and live as independently as possible. The housing program serves adults, older adults, transitional age youth, and all races/ethnicities and genders.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	African American Family and Cultural Center	PEI	Provides African American families and community members a place to reclaim and revitalize their community in order to create healthy and vibrant lives. This program is in partnership with Youth for Change, Inc. (YFC) and is in alliance with Southside Oroville community members.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	GLBTQ Suicide Prevention and Education Program (SAYes)	PEI	A program of Stonewall Alliance of Chico, provides suicide prevention, education, and outreach services to gay, lesbian, bisexual, transgender, and questioning youth and young adult and their families and friends. This program also connects individuals to the Trevor Project 24/7 LBGTQ Youth Helpline (1-866-488-7386) and Butte County Crisis Services (1-800-334-6622).	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx

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Butte	Integrated Primary Care and Mental Health	PEI	Integrated Primary Care (IPC) fosters cooperation and connection between the behavioral health and medical professions by providing support such as psychiatric consultation to physicians and medical staff, assessments, linkage and referrals to additional mental health resources, and other services as needed.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Live Spot Gridley & Oroville	PEI	Provides academic support, life skills and leadership development, vocational support, relationship building, connection to the community, and supportive services to school age youth during after school hours.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Mental Health Awareness	PEI	Mental Health Awareness collaborates with existing groups and develops community response to mental health issues. This includes collaboration with NAMI for providing classes and mental health awareness events; American Foundation for Suicide Prevention which hosts an annual 'out of the darkness walk' in	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Older Adult Suicide Prevention and Education	PEI	Provided by Passages, OASPE conducts outreach, education, coaching, social opportunities, training for caregivers, and other supportive services.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Promotores	PEI	A program of Northern Valley Catholic Social Services (NVCSS) in partnership with BCDBH, Promotores provides health education and support to Latino and Hmong communities.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	A Community Based Treatment for Historical Trauma to	INN	Zoosiab (The Happy Program), in partnership with the Hmong Cultural Center of Butte County, utilizes both western and traditional cultural practices to support Hmong elders to alleviate the impact of historical trauma.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Working Innovations Network (WIN)	INN	Helps individuals transition from a mental health crisis to stabilization in the community. A team of behavioral health staff and peer partners (individuals and family members) will provide services starting at the point of crisis until the individual is well connected to ongoing treatment and support services and is established back within his/her community	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Workforce Education & Training	WET	Unlike Many of the MHSA programs, Workforce Education and Training (WET) programs do not provide direct services. The goal of WET is to develop a diverse and well-trained mental health workforce skilled in providing services to consumers and the community, and that understand the wellness and recovery philosophy. Butte County's WET plan includes strategies and funding for training and skill development for employees across all levels of the public mental health workforce.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Butte	Informaiton Technology	CFTN	Information Technology has allowed BCDBH to upgrade technology infrastructure which has allowed for the implementation of an Electronic Health Record. The Electronic Health Record has allowed BCDBH to have more streamlined patient care including e Prescriptions and e Labs. Clinical staff are better able to accurately document services which leads to better data and better billing. Information Technology has also been used to provide consumer with computer labs in all four major population areas in Butte Counties. Consumers are able to access computers in order to learn new skills and to assist in job and house hunting. Butte County has a shortage of psychiatrists which can have a negative effect on clinical services, the Information and Technology component has allowed for implementation of the Tele-Psychiatry for patients who are interested in accessing psychiatric services in this manner. The Capital Facilities funds were used to renovate a building which houses a adult wellness and recovery center and provides medication management services.	http://www.buttecounty.net/Behavioral%20Health/Mental%20Health%20Services%20Act.aspx
Calaveras	Full Service Partnerships	CSS - FSP	FSP provides extensive and specialized case management services for adults who have serious mental illness or children/youth with a severe emotional disorder. Services include assignment of a single point of responsibility case manager, access team with 24/7 availability, linkages to supportive services, and a "whatever-it-takes" commitment to progress on concrete recovery goals.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Garden to Families	CSS	Recovery includes meaningful work. This program connects consumers with volunteering opportunities with local community gardens. Produce is grown and donated to the Calaveras County Food Bank.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Peer Support Services	CSS	The Living Room Wellness Center, Drop in Day, and a range of Peer Recovery Support Groups are all services available as part of Calaveras Behavioral Health Services' peer driven continuum of care.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	System Development	CSS - OESD	This refers to staff (case managers, clinicians, administrators) and groups that support the system as a whole. Case management can include supports for clients such as rental subsidies, utility assistance, or meals (to engage a client). Groups can include refreshments.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Outreach & Engagement	CSS - OESD	The department employs staff to reflect the clients and families it serves. Staff work in the community, provide support groups, and host events to draw people into services.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx

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Calaveras	Supportive Housing Services	CSS - OESD	Calaveras Behavioral Health Services has been working closely over the last two years with Visionary Home Builders to include five MHSA funded apartments as part of their larger thirty apartment Hillside Housing Project in San Andreas.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Staff Training	WET	Encompasses individual training for staff offsite (including meals and travel), as well as staff group training, which may be open to and hosted in the community.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Educational Programs	WET	The department supports a psychosocial rehabilitation certificate program at Columbia College for consumers, family members, and staff who want to work in mental health field.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Tuition Assistance	WET	Provides community college reimbursement for staff as well as scholarships for consumers, family members, and eligible community members seeking employment in public mental health. The department plans to implement additional educational assistance programs for recruitment and retention of professional staff in fiscal year 2013/2014.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Grandparents Project	PEI	This program is contracted to the Calaveras County Office of Education to provide groups and individual consultation to grandparents and other caregivers raising relatives' children.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Suicide Prevention	PEI	Provides training and education outreach to prevent suicide. Funding goes toward training and education, participation in community events, and promotional items.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Calaveras Strengthening Families Program	PEI	Contracted to First 5 Calaveras, this program provides community-based educational services and training for parents, as well as local educators and child care providers. Services include training, parenting seminars, workshops, coaching, counseling and counseling scholarships.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Anasazi	CFTN	Anasazi, an electronic medical record and mental health service billing system, has been purchased in 2013. Implementation and staff training is currently in process for the new system.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Capital Facilities	CFTN	The department does not currently have a capital facilities plan in place.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Calaveras	Community Support Groups	INN	Thirteen community based support groups have been provided over the last two years, and designed to reach people with limited access to mental health services and to reduce stigma associated with seeking services at mental health facilities.	http://co.calaveras.ca.us/cc/Departments/BehavioralHealthServices.aspx
Colusa	Wraparound Colusa	CSS - FSP	This is our only FSP pilot program. Staff works with families to achieve their desired outcomes through individualized family-driven mental health services and supports using the "whatever it takes" model to help them build resiliency and live successfully in the community. Staff includes a Family Facilitator and four Family Specialists. Funds a probation officer to work with this target group.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Adult system of Care - Full Service Partnership	CSS - FSP	FSP slots implemented to provide a full array of "whatever it takes" services to a select number of clients.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Children's System of Care Development/ Outreach and Engagement	CSS - OESD	The Colusa County multi-disciplinary team (MDT) includes representatives from the county offices of education, children's services, child protective service, probation, health and human services, sheriff, Regional Medical Center, Colusa One Stop Job Services, various schools and mental health and substance abuse staff. MDT meets monthly to discuss children, youth and transitional age youth cases. Provides linkages to and coordination of services requested by consumers and family members. Services are being transformed to be provided in the home and in the schools and communities where consumers and family members live.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Direct School Services - system development/outreach and engagement	CSS - OESD	Provides treatment and other services in a client-centered, culturally competent, recovery, wellness and resiliency supportive relationship in the schools, at home and in the community where youth and transitional age youth live. A counselor goes to the Family Action Centers in Williams and Arbuckle to provide bilingual counseling services on site. Focuses on the underserved Hispanic school-aged population and their families, specifically children and youth above the age of 5.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Native American Collaboration	CSS - OESD	Addresses the unmet needs of Native Americans. The Cachil dehe Wintun Tribe provided cultural competency trainings for County mental health and other county agency staff. Collaboration hosted an adolescent outreach seminar and also provides funding for a Marriage and Family Therapist (MFT) to provide services on the reservation, as well as a psychiatrist to back up those services.	http://colusa.networkofcare.org/mh/home/index.cfm

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Colusa	Adult System of Care system development/outreach and engagement	CSS - OESD	Provides outreach and engagement with our adult and older adult consumers. Partnership with Dept. of Health and Human Services, the One-Stop and partners for the homeless housing project. Have begun working with the local clinic, Del Norte, to coordinate services with primary physical health care services and link mental health and health care services.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Training	WET	Provides an annual training calendar for all behavioral health services staff focused on mental health service delivery improvement. Goals include 12 meetings/workshops focused on wellness, recovery and resilience and training staff in small groups designated by the job function. At least two of the workshops to be devoted to consumers, and one workshop to family members. Training has helped change the culture of the department and brought internal staff stigma to the surface so that it can be addressed.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	WET Action Volunteer program	WET	Involves consumers and family members in a volunteer setting with progressive steps leading toward job placement and the responsibility and independence associated with employment. Steps include job application and interview, commitment, workforce activity coaching, and activity performance. Working with organized community groups helps to overcome the stigma associated with mental illness.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Peers Helping Peers (PHP) and Peer Advocate Council (PAC)	WET	The PHP group is a source for leadership training. Peer Advocate Council (PAC) includes five members elected by their peers to serve for one year. PAC members are trained on conducting public meetings and Robert's Rules of Order. The PAC reports to the Colusa County Mental Health Board as an agendized item at monthly Board meetings.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Internship Program	WET	Provides supervision of registered interns. This successful ongoing program is expected to increase, reflecting the need for additional qualified staffing at BHS. Due to lack of funding we had to discontinue the supervisor's contract. We are now revisiting the resources required to offer this needed service to our staff.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Student Loan Repayment and Scholarship Program	WET	Funds scholarships to fully repay student loans (determined by loan amount and degree) for individuals who earn either a bachelor's degree in the mental health field (including administration/finance)or a master's degree in social work or marriage and family therapy.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Prevention and Early Intervention for Pre-School/Enhanced Second Step	PEI	Enhances the social and emotional development of 400 children in Colusa County. Targets children and youth in stressed families, at risk for school failure, at risk for experiencing juvenile justice involvement; foster care youth; underserved cultural populations. Program increases the likelihood that they will succeed in school and personal competencies related to life success and decrease the need for more intensive and costly services as the children grow older. Provides training on mental health for those working with children and youth and outreach and education to children, youth, families, school staff, and communities to increase awareness of early intervention of mental health issues.	http://colusa.networkofcare.org/mh/home/index.cfm
Colusa	Friday Night Live/ Club Live	PEI	Expands existing FNL and CL groups, making them countywide. Programs are optimally situated to intervene with youth at risk for school failure. Assessment can often identify past trauma, substance four abuse, suicide risk and juvenile justice involvement and link them to screening and appropriate referrals. Expansion builds programs specifically in four additional high schools and four elementary and junior high schools and bring the services to the outlying rural area populated by Native Americans.	http://colusa.networkofcare.org/mh/home/index.cfm
Contra Costa	Children's Full Service Partnerships	CSS - FSP	The Children's FSP Program, provides a comprehensive range of services and supports to families and children ages 0 to 18 who have serious emotional disturbance or serious mental illness and have experienced repeated failure in learning and home environments throughout Contra Costa County. Additionally, the original planning process identified the following three issues as priority for the Children's FSP: Failure in learning environments; out-of-home placements; and involvement in child welfare or juvenile justice systems. This program will direct money towards the youth who are utilizing crisis services most frequently, including MRT, PES and Hospitalizations, regardless of region of residence. Services will be provided county-wide. There are four program components: 1) Children's County-wide Assessment Team, 2) Personal Service Coordination for youth and families, 3) Multidimensional Family Therapy for co-occurring disorders (MDFT) and 4) Multi-systemic Therapy for Juvenile Offenders (MST).	http:cchealth.org/services/mental_health/prop63/

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Contra Costa	Transition Age Youth (TAY) Full Service Partnerships	CSS - FSP	The TAY FSP Program, operated by Fred Finch, is located in West County and provides services to young adults between the ages of 16 and 25. Eligible youth are those who reside in West County with a Serious Emotional Disturbance (SED) or Serious Mental Illness (SMI). The young adults exhibit key risk factors, especially: homelessness; co-occurring substance abuse; exposure to trauma; repeated school failure; multiple foster-care placements; and experience with the juvenile justice system. Services draw on several evidence-based practices adapted for use with the TAY population. These services may include case management, educational and vocational support, wellness and recovery peer programs, substance abuse treatment, financial counseling, and community integration. The capacity of the TAY FSP Program is 90 young adults.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Adult Full Service	CSS - FSP	The Adult FSP work plan is comprised of three separate programs: 1) Familias Unidas; 2) Anka Forensic Services; and 3) Bridges to Home, a collaboration between Rubicon, Anka, Community Health for Asian Americans (CHAA) and Mental Health Consumer Concerns (MHCC). Familias Unidas is located in West County, Anka Forensic Services is located in Central County, and Bridges to Home is located in both West and Central County. Each program's service delivery model is structured differently; however, all three programs provide services to adults over the age of 18 who are diagnosed with a serious mental illness, are at or below 300% poverty and are uninsured or receive Medi-Cal benefits. Services are delivered based on a "what-ever-it-takes" model and include flexible funds, case management, educational and vocational support, crisis intervention, psychotherapy and wellness and recovery supports. The capacity of all three programs combined is 185 FSPs.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Older Adult Systems Development	CSS - OESD	There are two Older Adult Mental Health Programs funded by CSS: IMPACT and Intensive Care Management Teams. IMPACT, or Improving Mood: Providing Access to Collaborative Treatment (IMPACT), is an evidence-based program delivering services, in collaboration with the primary care clinics, to older adults who are experiencing symptoms of depression. One Licensed Clinical Social Worker (LCSW) staff member located in each region of the County provides services to older adults using problem solving therapy. The Intensive Care Management program is comprised of three multi-disciplinary teams consisting of one psychiatrist, one nurse, one mental health clinical specialist, and one mental health community support worker. Services are provided in the home or community and may include individual therapy, family support, mental health assessments, consultation services, medication monitoring and support, transportation services, and linkages to other necessary resources. The Older Adult Programs have the capacity to provide services to 225 older adults during the fiscal year.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Housing Program	CSS - OESD	Housing available in this program is intended for Full Service Partners (FSP) receiving services under Work Plans #1 - #3. The priority is given to those who are homeless or imminently homeless and otherwise eligible for the FSP programs. Specific housing elements include new facilities, housing vouchers, and development of new housing options for all groups in the future.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Systems Development Strategies - Six Strategies	CSS - OESD	Systems Development Strategies do not constitute standalone programs; instead, they are a series of strategies for overall systems improvement. There are six Systems Development Strategies included in the approved CSS Plan: • Enhancements to the Office for Consumer Empowerment (OCE) • Planning for Future Systems Development • Peer Benefits Advocates • Expansion of the Family Partner Program • Wellness Services • Transformation Training	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Workforce Education and Training (WET) Coordination	WET	WET Coordination provides support for the implementation of the WET Plan and enhances the County's training infrastructure. An education and training policy has been created. Other activities include partnerships with local high school health academies to create a mental health concentration/curriculum; development of certificate programs at local colleges; development of clinical supervision protocols for staff and interns; and hiring of a WET Senior Clerk.	http:cchealth.org/services/mental_health/prop63/

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Contra Costa	Staff Development Training Initiatives	WET	Staff Development Training Initiatives include: 1) a training calendar of clinical and other training topics for all staff and contract providers; 2) an e-learning program for all county staff and contract providers; and 3) working with local colleges to build partnership and explore opportunities to develop a co-occurring disorders certificate training. Training topics include: Crisis Intervention Training for Law Enforcement, Unlocking Suicidal Secrets, Mental Health Across Cultures, Law and Ethics for Behavioral Health Providers and various LGBTQ trainings.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Mental Health Training for Law Enforcement	WET	Mental Health Training for Law Enforcement offers technical assistance to law enforcement agencies in the County. It provides a Crisis Intervention Training (CIT) for law enforcement personnel to increase their cultural awareness of issues specific to mental health consumers, assist officers in identifying the signs of mental illness and teach them techniques designed to defuse situations that might otherwise lead to use of force. CIT trainings are provided annually to support local law enforcement, ultimately improving the interactions between mental health consumers, their families and law enforcement in the County.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Consumer Employment Strategies - SPIRIT Expansion and Enhancement	WET	The Contra Costa Behavioral Health Office for Consumer Empowerment Works with Contra Costa College and local behavioral health organizations to coordinate and teach the Service Provider Individualized Recovery Intensive Training (SPIRIT). The training is taught by peers to peers. SPIRIT is a series of three college accredited courses designed to teach mental health consumers.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Family Member Employment Strategies	WET	Family Member Employment Strategies explore the development of a formal family member training for individuals who wish to be employed in the public mental health system. Trainings help family members and parent partners gain skills to be effective advocates and navigate the system, become less dependent on the traditional services, and build upon community supports.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Developing Mental Health Concentration in High School Academies	WET	This program convenes a small workgroup of high school staff/educators in existing high school health academies to develop a mental health concentration/curriculum. A mental health curriculum developed in Canada was adopted and is being piloted at Vicente Martinez High School, a local high school in the central region of the county.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Community College Partnerships; Psychosocial Rehabilitation	WET	This program implements the Psychosocial Rehabilitation (PSR) Certificate program using the curriculum developed by the California Association of Social Rehabilitation Agencies (CASRA). The courses make up the core of a new 12-unit Certificate of Specialization in Psychosocial Rehabilitation. Collects student data tracks enrollment and completions for the initial PSR program at Contra Costa College.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Psychiatric Technician Program	WET	There is no funding allotted for this program under the County's WET Plan. Psychiatric Technician Programs are notable in enhancing the mental health workforce; therefore, Contra Costa Behavioral Health will continue to explore existing and potential Psychiatric Technician Programs in Contra Costa and surrounding areas.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Expanding Graduate Level Internship Opportunities	WET	This program provides graduate level internship opportunities to support the success of the County's mental health workforce and improve the delivery of quality care. It assigns interns to several clinics and offices throughout Contra Costa. The Internship Program includes individuals who speak Spanish, the County's threshold language; additionally, Vietnamese, Russian and French, were also among the languages spoken. Five community-based organizations were awarded intern stipend funds to support incoming graduate-level interns.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Psychiatry Workforce Development	WET	Psychiatric Workforce Development promotes the development of a culturally relevant, recovery-oriented curriculum and experience for both County and Community-Based Organizations (CBO) systems-of-care. It assesses training needs and provides trainings and supervision for psychiatrists and other medical staff that address the needs of consumers and family members to help inform current and best practices for care, The County continuously develops its team of psychiatrists as subject matter experts with specialization, including community psychiatry, children, geriatrics, forensics, co-occurring disorders (and other areas) to train Contra Costa Behavioral Health staff. It considers affiliation with University of California Davis and University of California San Francisco to explore developing a psychiatric residency and/or fellowship program for Contra Costa Behavioral Health.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Nursing Workforce Development	WET	This program continues collaboration with the University of California San Francisco for the clinical placement of psychiatric nurse interns in County facilities, including children's and adult mental health clinics. A collaboration with Sonoma State University provides nursing students the opportunity to gain practical experience in the mental health field supervised by a psychiatrist.	http:cchealth.org/services/mental_health/prop63/

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Contra Costa	Scholarship Program for Bachelors Level Degrees	WET	The County is developing a design for a bachelor's level scholarship program. Applicant prerequisites, application materials and other technical details were determined and vetted by the Training Advisory Workgroup. The County continues to discuss and plan logistics for program delivery.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Scholarship Program for Masters Level Degrees	WET	The County is developing a design for a master's level scholarship program. Applicant prerequisites, application materials and other technical details were determined then vetted by the Training Advisory workgroup. The County continues to discuss and plan logistics for program delivery.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Building Connections in Underserved Cultural Communities	PEI	This program is designed to strengthen underserved cultural communities in ways that are relevant to specific communities, with the purpose of increasing wellness, reducing stress and isolation, and decreasing the likelihood of needing services of many types. It also is intended to help support strong youth and strong families. This initiative includes the following cultural communities: Native Americans, LGBTQ, Latinos, African Americans, and immigrants from the Afghan, Bosnian, Iranian Russian and Asian Pacific Islander communities. The programs provide activities such as: community outreach, system navigation, psycho education groups and educational workshops.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Coping with Trauma Related to Community Violence	PEI	This program provides community organizing and a proactive approach to community violence. It raises awareness, engages in culture-building activities, celebrates resilience and creates opportunities for healing and restoration. It convenes public forums to respond to specific incidences of violence within the West Contra Costa community. It includes a Trauma Response and Resiliency System with community partners (e.g., community-based organizations, youth groups, neighborhood associations, law enforcement, public officials and medical and health agencies).	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Stigma Reduction and Mental Health Awareness	PEI	This program has two components. One component is the WREACH (Wellness and Recovery Education for Acceptance, Choice, and Hope) Speakers' Bureau. Audiences for WREACH presentations consist of law enforcement personnel, landlords, employers, college students and faculty, behavioral health and primary health care providers, and faith-based organizations, as well as the general public. Speakers include consumers, family members, and providers who share their experiences and facts about mental illness and recovery to decrease stigma and increase social inclusion in the community. The second component is the Committee for Social Inclusion which guides a stigma reduction and awareness initiative.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Suicide Prevention	PEI	A culturally diverse committee co-chaired by Contra Costa Crisis Center and Contra Costa Mental Health, along with representatives from other community healthcare systems, are evaluating the current system of care, have completed a gap analysis of existing services, and are working toward a comprehensive suicide prevention plan. The Plan will address some of the most difficult clinical situations regarding suicide assessment, documentation of risk, and treatment planning. The program includes activities such as Crisis Line expansion to include Spanish speaking staff, continuing linkages between key leaders, key agencies, and the community, for suicide prevention efforts as well as a pilot program to provide follow up phone calls and drop-in groups for the region of the county with the highest number of suicides among the patient population. The pilot will be modeled after the successful Suicide Prevention Program implemented by the Henry Ford Health System.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Fostering Resilience in Older Adults Initiative - Supporting Older Adults	PEI	This program targets Older Adults who are trauma exposed, isolated, and depressed members of underserved cultural populations of older adults and older adults experiencing onset of serious psychiatric illness. The purpose of the program is to help prevent mental illness and suicide in older adults and provide early intervention when warning signs appear. The program activities include: expansion of senior peer counseling cultural competence and language capacity. Staff have been added to expand linguistic and cultural outreach to Chinese and Spanish speaking seniors.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Parenting Education and Support	PEI	The purpose of this program is to educate and support parents and caregivers in high risk families to support the strong development of their children and youth. There are five community-based organizations providing parent classes to various targeted populations. Activities in this program include: Triple P Parenting Classes offered in English and Spanish are aimed at increasing parenting skills, improving parents sense of competence and reducing parental distress. Family support, teen support groups and after school programs are provided throughout the county in both English and Spanish.	http:cchealth.org/services/mental_health/prop63/

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Contra Costa	Families Experiencing the Juvenile Justice System	PEI	This is an early intervention program with activities designed to identify youth in the juvenile justice system with the purpose of providing individual and family supports that will help the youth become strong, healthy, law abiding members of their community. The two areas of focus are providing community supports to youth on probation and placing three mental health liaisons in the probation department offices in East, Central and West County. The liaisons work intensively with youth on probation and those being released from Juvenile Hall. The following are some activities provided by the liaisons: coordination of after care, assess youths level of need and determine appropriate linkages, support youth transitioning back to their communities, provide direct short term therapy, consult with probation officers, and facilitate warm hand-offs to CBOs and to County Mental Health Systems. This program also offers screening, early intervention and discharge support for the youth at the Orin Allen Boys Ranch. The services provided include two health clinicians at Orin Allen Youth Rehabilitation Facility (Boys Ranch) in Byron. The clinicians provide mental health assessments for youth who may present with early signs of mental illness. In preparation for discharge, the clinicians provide direct early intervention services, such as intensive short-term therapy or less intensive services, work with the family to plan for client's transition and after care in the community and coordinate community-based follow-up services.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Support for Families Experiencing Mental Illness	PEI	This program provides a series of services to meet the needs of adults experiencing mental illness and their families through the programming of Putnam Clubhouse. All programming (both evening/weekends and the work-ordered day) offers respite and stress reduction for caregivers and family members by providing a safe, restorative community for their loved ones that extends the system of support for recovery and improves independence through opportunities for socialization, education, and employment. Putnam Clubhouse's Young Adult Initiative serves those ages 18-25 experiencing the onset of mental illness, supporting them with a recovery model while encouraging connections with peers and reengagement in the wider community through school and work. All of those impacted by the Clubhouse are experiencing the trauma of mental illness, whether personally or in their loved ones. The Clubhouse includes a diverse staff (almost all of whom are themselves consumers and/or family members) and membership in terms of ethnicity, language fluency, sexual orientation, and age. Putnam Clubhouse provides peer-based programming for adults throughout Contra Costa County in recovery from psychiatric disorders, helping them to develop the support networks, life skills, vocational skills, and self-confidence needed to sustain stable, productive, and more independent lives. New program plans include wellness coaches to support physical health outcomes for severely mentally ill individuals, Community Support Workers to help families experiencing Psychiatric Emergency Services, and Behaviorist services in ambulatory care setting.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Youth Development	PEI	This program enables youth-serving agencies to implement and carry out youth development activities relevant to their target population. Youth development activities include strength-based efforts that build on youths' assets and foster resiliency, as well as to help youth build knowledge and concrete life skills for a successful transition to adulthood. The primary focus is on at-risk youth. CCMH has contracted with five agencies that have provided new and innovative approaches to support youth development of a positive identity, self-esteem and positive community involvement. The purpose of this program is to see that youth engaged in the activities develop their individual strengths/assets, feel supported and connected in their communities, and less likely to engage in "system involvement", and reduce demand on service systems such as juvenile justice, mental health and others. The program provides activities such as school based services, after-school job development, youth empowerment, wellness promotion and violence prevention activities.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Early Intervention in Psychosis	PEI	New program aimed at providing intensive early psychosis intervention for adolescents and young adults aged 12-25. Based on the PIER model, an early detection and intervention approach based on the Portland Identification and Early Referral (PIER) program. Focuses on both the early onset of psychosis and those at ultra high risk for the onset of psychosis. Services include community outreach, assessment, treatment, family psycho-education, community re-entry, multi-family groups, social vocational re-engagement, supported education and employment, and psychotherapy.	http:cchealth.org/services/mental_health/prop63/

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Contra Costa	Social Supports for LGBTQQI Two-S Youth/TAY	INN	This project is a three-year pilot currently in its third year. The goal of the project is to determine whether applying a "Social Support Model" (based on the Social Ecological Model[1]) to services targeting LGBTQQI2-S youth/TAY (up to 29 years of age) will improve their health and wellness and prevent poor health outcomes. The project seeks to attempt to reduce family, peer, and/or community rejecting behaviors and increase accepting behaviors. It will test the effectiveness of various modes of engagement and service provision and will develop best practices toolboxes for engaging/serving youth and their social supports. The program's target population is LGBTQQI2-S youth/TAY as well as their families and caregivers, straight peers and allies, providers, schools, faith-based organizations and community-based organizations.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Promoting Wellness, Recovery and Self-Management through Peers	INN	Augments integrated mental and physical health services for people with multiple needs. This program provides Peer Wellness Coaches, who are trained to provide individual and group support to consumers teach them to use self-management skills to enhance their recovery from co-occurring behavioral and physical health disorders.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Interagency Perinatal Depression Treatment Program	INN	This 12-month program is an Innovative collaboration between Contra Costa Mental Health Services, Public Health Nursing and Women Infant and Child (WIC) program. It will pilot the integration of perinatal/post partum depression services into the services currently provided at the Central County WIC office. The target population consists of mothers who receive services from the Central County WIC office who screen positive for perinatal and/or post partum depression. The goals of the program are to learn: 1) which elements of the collaboration are most/least effective and why; 2) if the collaboration leads to an increase in awareness about mental health services and a decrease in the mothers' perception of stigma associated with depression; and 3) improved health outcomes for the women participating in the collaboration.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Libby Madelyn Collins Trauma Recovery Project	INN	This 24-month program pilots the use of a Trauma Recovery Group with consumers diagnosed with co-occurring Post-Traumatic Stress Disorder (PTSD) and schizophrenia, schizoaffective disorder, bipolar disorder and/or cluster B personality disorders who receive mental health services at the county-operated adult mental health clinics. The program is currently in its second year.	http:cchealth.org/services/mental_health/prop63/
Contra Costa	Trauma Services for Sexually Exploited Youth (up to 25 years of age)	INN	Creating a Safe Haven to Support Transgender and LGBTQQI2-S Youth Involved in Sexual Exploitation. This 36-month project will target LGBTQQI2-S youth who are (or at high risk of) being sexually exploited. The goal of this project is to create a new street-based venue intended to increase youth access to a comprehensive array of social and support services, delivered at a site specifically designed to support their needs. This program will be piloted in Central Contra Costa County and will develop a safe space and drop-in program targeting LGBTQQI2-S youth with a specific focus on youth who are gender variant and/or transgender identified and who engage in street socialization, commercial sex work and/or survival sex. Additional project goals include developing replicable outreach methods that support the ability to identify and reach this underserved group; the development of assessment tools that will support identification of sexual exploitation in this population; and establishment of a referral network that will increase LGBTQ youth's ability to integrate into mainstream social service programs. Reluctant to Rescue This 36-month project will target sexually exploited youth in Central and East County. The goals of the project are to: 1) gather information from sexually exploited youth about their backgrounds and reasons for entering and remaining in sexually exploitative situations as well as feedback on what would motivate and/or help them to leave these situations; 2) create a drop-in center to provide the youth needed support and services; 3) develop a training program for the care providers of sexually exploited youth; 4) determine the most effective ways of promoting and sustaining youth engagement with services; 5) determine how programs can decrease the attraction of the lifestyle some sexually exploited youth associate with their exploitation; and 6) determine what additional services and/or interventions are necessary to increase the ability of sexually exploited youth to access healthy choices and increase the number of youth who recognize they can make choices about their risk behav*iors.*	http:cchealth.org/services/mental_health/prop63/

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Contra Costa	Requesting Approval for NEW Training, Technical Assistance and Capacity Building Funds Request	Training, TA & Capacity Building for PEI	Uses education and training to service stigma and increase the social inclusion of mental health consumers. Develops recovery and wellness education for community members and persons with lived experience, as well as persons at risk of developing mental illness. Provides advanced training to CCMH peer providers, speakers bureau members, and peer interns and graduates of our Service Provider Individualized Recovery Intensive Training (SPIRIT). Provides training material and equipment to film and display this training. Provides education to mental health providers on spirituality and its impact on the recovery of persons facing serious mental illness. Provides education to community faith-based organizations to help them understand mental health recovery and the consumer culture. Develops a curriculum to teach peers and providers in recovery-based techniques. Curriculum will be made available for use by other counties. Provides LGBTQQI2-S culturally competency training to mental health providers.	http:cchealth.org/services/mental_health/prop63/
Del Norte	Adult Full Service Partnership Programs	CSS - FSP	Helps identified individuals achieve their desired outcomes through the delivery of individualized, consumer/family-driven mental health services and supports, providing a "whatever it takes" approach to help these individuals move toward recovery and live successfully in the community. Services include traditional mental health services (psychiatry/medication support, therapeutic interventions), as well as services and supports including transitional and permanent supportive housing, vocational and employment opportunities, necessities of daily living (food, clothing), and peer support. We will expand services to include more options for individual counseling, life skills training and linkages to adjunct services and community resources.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
Del Norte	Children's System of Care/ Wraparound Services	CSS - FSP	To be implemented - Works with our priority population of children ages 0-15 with serious emotional disturbance at risk of out-of-home placement and/or uninsured at risk of out-of-home placement. Expands the program for better coordination with our county Wraparound program to include schools, local service agencies, Hmong, Latino, and Native American communities, and faith-based organizations to provide linkages for all available services. Expands the program to provide additional family treatment.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
Del Norte	Service Center Programs	CSS - OESD	The Center offers daily activities and supports that allow staff to assist consumers using a wellness focus in an alternative setting. Many consumers have recently returned to the community from long-term care facilities; others are at risk of higher levels of care without staff intervention. The concepts of recovery and resilience provide the foundation to develop independence and achieve goals in stable living, personal and community functioning, dual diagnosis substance abuse. Additional peer self-help groups and linkages to other community resources empower consumers, allowing them to remain in the community in a successful manner. Services address the individual's known risks, utilize and strengthen available resources, and open opportunities to help consumers develop personal potential and self sufficiency.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
Del Norte	TAY Center (Transitional Age Youth)	CSS - OESD	The priority population for these services is youth ages 16-25 who are seriously emotionally disturbed and severely and persistently mentally ill. Provides the foundation to develop independence and achieve goals in employment, education, stable living, and personal and community functioning. Provides individual counseling and education and resources in the areas of health care, coping skills, healthy relationship choices, identifying means for health insurance, money management, social skills, parenting skills, and cultural appreciation. Groups offered in life skills and dual diagnosis provide TAY with the tools to make healthier life choices. Recreation groups promote social skills. Expands technology room to provide additional training resources and community partnerships that enable us to link consumers with vocational rehabilitation and training.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
Del Norte	Adult Service Center	CSS - OESD	Provides the foundation to develop independence and achieve goals in stable living, personal and community functioning, education, and employment. Provides education and resources in the areas of social skills, stress management, coping skills, healthy relationship choices, basic health care and hygiene, and cultural appreciation. Includes individual counseling options and clinical and dual- diagnosis groups. Vocational rehabilitation/return to work program identifies and trains employment skills based on consumer strengths. Expands outreach and engagement efforts to the outlying communities, tribal, Hispanic, and Hmong communities.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193

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Del Norte	Bridge Team	CSS - OESD	The Bridge Team will continue to deliver integrated services providing expanded Outreach and Engagement activities and intensive case management for all clients entering our Mental Health system as a consequence of crisis. The Team monitors progress toward goals over a 20-90 day period, adjusting services to meet consumer needs, while creating linkages to our Service Center programs and all other available community supports in order to prevent "decompensation," which places clients at risk of higher levels of care, incarceration, homelessness, and inpatient hospitalization.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
Del Norte	Strengthening Families	PEI	The Strengthening Families program will be focused on youth who are at risk of developing low level mental health and behavioral problems that affect the health of the family. This voluntary program is intended for children and youth ages 6-18 and their families. the ability to reach a more diverse age group allows for customization of the sessions, and better utilization of staff time. These parenting classes, which also involve children and youth in separate and joined sessions with the parents, provide a unique and rich opportunity for life skills and relationship building.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
Del Norte	Reach for Success	PEI	The Reach for Success program is voluntary and will be held during school hours to facilitate access and participation for youth where transportation is a barrier. Programs held within tribal organizations or community centers would be in a familiar environment that is not routinely used for provision of mental health services. As a result outcomes are enhanced through a sense of trust and safety. The program is designed to provide prevention and early intervention to youth at risk of developing low level mental health and behavioral problems that affect the health of the family as well as transition age youth in foster care. Youth will learn relationship building, life and coping skills and resiliency. With the development of significant support systems and role models they will have the ability to make better life choices, including school participation and success, following rules, and understanding consequences. As a result they will have better opportunities for success in life, preventing further generational traumas of domestic violence, child abuse, and substance abuse.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
Del Norte	Transition Age Youth Collaboration: Rural Connection for Leadership, Advocacy, and Support	INN	Convenes, empowers, and supports a local Del Norte County Transition Age Youth (DN-TAYC) Council that would advise the recently formed Del Norte Transition Age Youth Collaborative on launching a social networking site for TAY. Site connects TAY with peers, peer mentors, and resources. Advocates for tailoring local services and resources to better meet the needs of TAY, including TAY involved with the foster care system; and links TAY to training resources for leadership and advocacy skills, and educational and job training resources and internships. The TAY Collaborative is a coalition of agencies and groups in Del Norte County working to improve services and opportunities for transition age youth. Areas for learning are to understand if and how the quality of mental health-related services improves for transition age youth (TAY) and if changes result in better outcomes, such as decreased involvement with the justice system, fewer mental health crises, improved emotional well-being and social connectedness, and increased confidence about their future. Seeks to improve services for and access to services for transition age youth, particularly those at higher risk for mental illness.	http://www.co.del-norte.ca.us/index.php?option=com_content&view=article&id=6&Itemid=193
El Dorado	Youth and Family Strengthening Program - Wraparound Full Service Partnership	CSS - FSP	Provides at-risk and underserved youth of all ages with a range of outreach programs, treatment options and general services. Targeted at-risk youth include those who are not succeeding at school, those at risk of out-of-home placement and those currently or previously involved with the juvenile justice system. Wraparound Full Service Partnership (FSP) services are typically, but not exclusively available to youth in grades K-6 who are at risk of out-of-home foster-care placement. These services may include outreach, engagement and treatment, as well as supportive activities, as needs arise and capacity allows.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Youth and Family Strengthening Program - Family Strengthening Academy	CSS - OESD	The academy offers a range of promising, best, and evidence-based practices. These programs are designed to promote family unification and may be offered in a variety of settings.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Adult Wellness and Recovery - Outreach and Engagement	CSS - OESD	Designed to reach at-risk individuals with serious mental illness who may be homeless, isolated, incarcerated, or have co-occurring disorders.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Adult - Full Service Partnership (FSP) Services	CSS - FSP	Assists adults with severe mental illness by providing supports and services to facilitate recovery and progress toward independent living.	http://www.edcgov.us/MentalHealth/MHSA.aspx

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El Dorado	Adult - Resource Management Services	CSS - OESD	Develop key relationships and build access to resources for consumers and families, including psychiatry, and engage in general systems development planning to improve access and service delivery. This project also provides program evaluation and quality improvement oversight for the CSS programs.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Adult - Wellness Center and Clubhouse	CSS - OESD	Center and clubhouse activities provide a range of services such as medication, case management, and evidence-based practice interventions offered both on-site and in community-based settings.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Early Intervention Program for Youth	PEI	Provides screening for early identification, assessment and referrals to appropriate PEI programs as well as other Medi-Cal and MHSA-funded programs.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Primary Intervention Project (PIP)	PEI	Uses evidence-based practices to identify children experiencing classroom difficulties and provide services that foster resilience and mental health. School-based collaboration between the county school district and the mental health division.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Incredible Years Program	PEI	This evidence-based program provides services for children 2-12, their parents, and school teachers.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Community Education Project	PEI	Promotes community mental health through knowledge, education and skills training and seeks to build the community's capacity to promote mental health through community education.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Wennem Wadati	PEI	A Native Path to healing is a culturally specific strategy outreaching to Native American youth. Combines early intervention strategies and traditional cultural teachings to engage and strengthen the mental health of youth and their families.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Wellness Outreach Program for Vulnerable Adults	PEI	Provides community-based outreach, engagement and early intervention services, primarily to the older adult population.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Health Disparities Initiative	PEI	Addresses health disparities in the county's Latino population. The program uses the Promotora model and provides outreach, engagement and early intervention services. Uses care pathways to improve linkages between behavioral health, primary care, and natural community supports to facilitate health and well-being of unserved and underserved individuals.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Workforce Development	WET	Provides resources for training programs and activities to ensure the delivery of recovery oriented, culturally competent consumer driven services. Uses e-learning technology to provide credentialed courses for licensed staff.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Workforce Development through Psychiatric Rehabilitation Training	WET	Teaches the critical skills needed by practitioners to assist consumers through the rehabilitation process.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Electronic Health Records (EHR) System Implementation	CFTN	Will allow for the secure, reliable and immediate sharing of information across a secure and reliable environment and enhance communication between treating health care professionals.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Telepsychiatry and Videoconferencing Services	CFTN	Provides an effective and efficient way of serving mental health consumers, family members and community partners in rural unserved/underserved areas of the county.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Electronic Outcome Measurement Tools	CFTN	Will facilitate treatment planning and track client treatment progress. These tools will measure and accurately score client needs, resulting in more appropriate treatment recommendations and improved outcomes.	http://www.edcgov.us/MentalHealth/MHSA.aspx
El Dorado	Electronic Care Pathways	CFTN	Health care technology to be used in collaboration with community health partners and referral specialists. Will facilitate linkage between behavioral health and primary health care providers for persons with mental illness, chronic disease issues and/or co-occurring substance abuse.	http://www.edcgov.us/MentalHealth/MHSA.aspx
Fresno	Children and Youth-School-Based Program	CSS-OESD	Outpatient mental health services on school sites include individual, family, and group therapy, case management and collateral services. Improves and expands mental health services and supports for youth K-12 (ages 4-18) with serious emotional disturbance, and their families. The program is designed to have flexible hours of treatment. Fresno County, Dept. of Behavioral Health, Children's Division.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Children and Youth-School-Based Program (RURAL)	CSS-OESD	Outpatient mental health services on school sites include individual, family, and case management and collateral services provided in the rural communities. Fresno County, Dept. of Behavioral Health, Children's Division.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244

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Fresno	Children and Youth - Assertive Community Treatment (ACT)	CSS - FSP	Provides a wide range of mental health and rehabilitation services to youth aged 10-18 and their families, including individual and family therapy, case management, substance abuse, educational and vocational support, and psychiatric services. EMQ Families First.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	SMART Model of Care-Bright Beginnings	CSS - OESD	Provides mental health and community support services including intensive case management, crisis intervention, parenting treatment, and in-home therapeutic services to children ages 0-5 and their families. EMQ Families First.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	SMART Model of Care (PCIT)	CSS - OESD	Provides Parent-Child Interaction Therapy (PCIT), an evidenced-based treatment model for children e ages 2-7. Treatment emphasizes changing negative parent/child patterns. Comprehensive Youth Services.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	CSS – Children Age 0-10 Years Full Service Partnership	CSS - OESD	Provides mental health and community support services including intensive case management, crisis intervention, evidence based treatment, and in home therapeutic services to historically underserved minority children primarily from birth through 10 years of age, meeting SED criteria and their families. Treatment models utilized include PCIT, Trauma Focused CBT, Triple P, and Incredible Years.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Transition Age Youth MH Services & Support FSP	CSS - FSP	Provides mental health services and supports to transitional age youth. Turning Point.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Co-occurring Disorders Program - FSP	CSS - FSP	Provides/coordinates mental health services, housing, and substance abuse treatment for seriously and persistently mentally ill adults and older adults. Turning Point.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Intensive Community Services and Supports FSP	CSS - FSP	Provides mental health services that may include personal service coordination, medications, housing, through treatment plan for seriously and persistently mentally ill adults. Turning Point.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Rural Services - FSP	CSS - FSP	Program in rural Fresno County (Sanger, Reedley, Pinedale) provides mental health services that may include personal service coordination, medications, housing, through treatment plan for seriously and persistently mentally ill adults. Turning Point.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Rural Services-Outpatient	CSS - OESD	Outpatient program in rural Fresno County (Sanger, Reedley, Pinedale) provides outpatient mental health services for seriously and persistently mentally ill adults and older adults. Turning Point.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Rural Services - Intensive Case Management	CSS - OESD	Intensive case management services for seriously and persistently mentally ill adults and older adults in rural Fresno County. Turning Point.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Housing & Recovery FSP	CSS - FSP	Provides mental health services that may include personal service coordination, medications, housing, through treatment plan for seriously and persistently mentally ill adults. Turning Point.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	CSS - OPTIONS	CSS - OESD	Mental health outpatient program serves "multiple users" of the local hospital emergency departments to participate in engaged consumer-focused program. Westcare.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Crisis Psychiatric Response Services (CPRS)	CSS	Mobile crisis psychiatric response services to rural hospital Emergency Departments. Redesign of program includes CPRS Clinicians (Westcare and County staff) stationed at Community Medical Regional Center (CMRC).	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Integrated Mental Health Services FSP	CSS	Full Service Partnership program that provides mental health services that may include personal service coordination, medications, housing through treatment plan for seriously and persistently mentally ill adults.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Consumer/ Family Advocate	CSS - OESD	Provides mental health consumer and family advocacy services to unserved and underserved populations, consumers and families. Provides education, training, consumer/family advocacy in Fresno County with monthly meetings through Centro de Familia.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Cultural/ Linguistic MH services	CSS - OESD	Culturally competent and linguistically accessible community-based outpatient specialty mental health services provide clinical training and oversight for students to obtain required hours for licensure, thereby increasing licensed SEA mental health professionals in our community. Assists consumers and their families in assimilation process by addressing mental health needs. Fresno Center for New Americans.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Urgent Care Wellness Center	CSS - OESD	Delivers urgent care services for up to 90 days. Services include crisis evaluation and intervention, medications, individual/group therapy, and linkage to other appropriate services. Program expanded to include evening hours and Saturday. Center's goal is to reduce visits to emergency rooms and crisis services, incarcerations, and acute psychiatric hospitalizations. Fresno County Dept. of Behavioral Health.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244

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Fresno	Older Adult Team	CSS - OESD	Metropolitan and rural services for older adult consumers. Staff partner with primary care physicians and APS for outreach and engagement of services to seniors. Fresno County Dept. of Behavioral Health.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Functional Family Therapy (FFT) Program	PEI	A 12-week (minimum) mental health intervention service for families provides therapy in-home to the family unit of consumers aged 11-18 years who have disruptive behaviors, family conflict, and/or risk of involvement in the juvenile justice system. Program outcome goals include reducing frequency of incarceration, reducing crisis visits, improving quality of life, and reducing number of hospitalizations. Comprehensive Youth Services.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Children and Youth-Team Decision Making (TDM)	PEI	Provides mental health expertise at meetings focused on decisions of placement change, removal of children, or volunteer family maintenance for clients interfacing with the child welfare system. Goal is to stabilize the home/placement and prevent removal or change of placement of children. Consumers come from unserved/underserved populations. Fresno County, Dept. of Behavioral Health, Children's Division.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Perinatal Program	PEI	Provides outpatient mental health services to pregnant and postpartum teens, adults and infants. Short-term mental health includes outreach, early mental health identification through screening, assessment, and referrals to treatment as well as public health nurse visitation, assessment, and preventive services. Helps women and teenagers who are suffering from perinatal mood disorders to reduce symptoms and shorten the recovery period, teaching coping skills and self-management for wellness and recovery. Fresno County, Dept. of Behavioral Health, Children's Division.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Blue Sky Wellness Center	PEI	Center offers prevention and early intervention peer-centered wellness and recovery-focused activities. Provides engaging peer support to enhance quality of life, reduce stigma and isolation, increase coping skills, knowledge, sense of wellness and recovery. Agreement amended to include peer and family support and youth empowerment mini-centers for children and youth and transition age youth. King's View.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Crisis Field Clinician (Crisis and Acute Care Program)	PEI	Provides liaison with law enforcement in the County to provide training, outreach, and direct field response to mentally ill consumers in the community. 5150s and recurrent calls to law enforcement are a primary focus. Goals include decreasing discrimination and family distress, enabling consumers to access more sensitive and efficient crisis/mental health services, fewer financial burdens due to legal consequences, fewer consumers inappropriately detained in jail, and improved safety. Fresno County Dept. of Behavioral Health.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Integration of Mental Health Services at Community Primary Care Clinics	PEI	Provides prevention and early intervention services in primary care settings with goal of integrating mental health and physical health care services. Services include mental health screening, assessment, and short-term therapeutic treatment. Initiates mental health prevention activities and early interventions in areas of the County where individuals disproportionately experience untreated mental health concerns and illness due to multiple factors: stigma against mental illness, cultural and linguistic barriers to services, poverty, distrust, isolation, and transportation needs.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Community Gardens	PEI	Provides/enhances horticulture-based community sites (community gardens) to serve as neighborhood resource centers for the delivery of mental health planning and early intervention activities. Specifically designed to address community mental health in culturally sensitive and linguistically competent ways. Encourage therapeutic horticultural activities and serve as locations for collaboration with other components of Fresno County's PEI plan and MHSA programs to help reduce stigma and discrimination against mental illness and provide outreach and engagement related to mental well-being and mental health services. Fresno Interdenominational Refugee Ministries (FIRM) and Fresno Center for New Americans (FCNA).	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	School Based Team K-8th Grade	PEI	This three-tier, evidence-based mental health prevention and early intervention program within the schools provides positive behavioral supports. Program goals include increasing student attendance, increasing GPA, students meeting multiple treatment goals and feeling better about themselves. Fresno County Office of Education.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	Cultural-Based Access-Navigation Specialist Project	PEI	Similar to the Promotores/community health workers model, this program will consist of community health workers and Peer support specialists providing advocacy and serving as liaison between the mental health system, other systems, and cultural communities within Fresno County. Goals include increasing awareness of mental health issues, education, and creating access to mental health resources. (Centro La Familia, Fresno Interdenominational Refugee Ministries, West Fresno Family Resource Center).	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244

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Fresno	Blue Sky Youth Empowerment Centers	PEI	Prevention and early intervention, wellness and recovery activities including education, socialization, life skills training and other peer and family support activities. Youth empowerment mini centers for children and youth and TAY.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	First Onset	PEI	The First Onset Team (FOT) is a multi-disciplinary team consisting of a psychiatrist, clinicians, case managers and peer support staff. A wide range of services is provided that includes such services as medication management, individual, family collateral and group therapy. Case management, individual and group rehabilitative services are provided. Also provided by FOT is education about mental health symptoms, treatment and stigma. Fresno county Department of Behavioral Health	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	INN04 AB109 - FSP Services, Outpatient Services, Substance Abuse Services	INN	**AB 109** Successful Integration back to the Community from State Jails **Full Service Partnership (FSP) Services** (Funded and Managed by MHSA) **Substance Abuse/Use Services (SAS) and Outpatient (OP) Services** (Funded and Managed by SUS) Key features of this program include: • Initial assessment • Communication, collaboration, and compliance with Fresno County Probation Department and AB109 regulations • Provide appropriate mental health services • Linkage to appropriate services as needed • Follow-up with each consumer on a regular basis to ensure consumer is still actively participating mental health and community support services. • The team shall be culturally sensitive and offer natural supports to the client and families • Family support services through Peer Support Specialists and Case Managers will be provided to aid in the recovery of the client as well as to educate and engage with the whole family. Turning Point	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	INN03 - Holistic Cultural Education and Wellness Center	INN	The Holistic Cultural Education and Wellness Center will provide an innovative approach in addressing mental health/behavioral health related issues for underserved and un-served clients who may typically not seek traditional (Western clinically based) mental health services, and may be more responsive if County staff and County practices understand and incorporate alternative culturally and ethnically focused wellness and recovery practices. The Center is not designed to be exclusive in terms of who may access the education/referral component and any member of the community may be interested in alternative culturally and ethnically focused wellness and recovery practices in addition to clinically based treatment. Fresno Center for New Americans	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	INN02 - Overnight Stay	INN	This program will provide after hours/overnight stay services (approximately 8pm-10am) seven days a week to include holidays for mental health consumers who present at local hospital Emergency Departments (ED). Bidder will provide services in Fresno County at Community Regional Medical Center (CRMC) and St. Agnes, and Community Regional Medical Center in Clovis. WestCare	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	INN01 - Integrated Discharge Team	INN	The Integrated Discharge Team (IDT) is a multi-disciplinary team consisting of clinicians, case managers, peer support, and related support staff tasked with addressing effective discharge planning for clients admitted to short term stays at inpatient psychiatric facilities. This quick discharge indicates that clients may have received incorrect admission assessments into hospitals and that lesser levels of care may have been more appropriate. This also indicates that clients may need to be offered other forms of treatment/linkage and/or natural supports to avoid repeated admissions into inpatient hospitals.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244
Fresno	MHSA Housing	Housing	Permanent supportive housing offering MHSA eligible tenants studio, 1 and 2 bedroom apartments within a safe, healthy living environment. Renaissance at Trinity provides 15 MHSA one bedroom units. The Parc Grove development provides 5 MHSA (2 and 3 bedroom) units. Renaissance at Alta Monte provides 29 MHSA single room occupancy (SRO) housing units and Renaissance at Santa Clara provide 25 MHSA SRO housing units. In total, 74 MHSA housing units with supportive services are available to assist MHSA tenants in their wellness and recovery, leading towards independence.	http://www.co.fresno.ca.us/DepartmentPage.aspx?id=3244

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Glenn	MHSA CSS Comprehensive Service Plan	CSS - OESD, FSP	Encompasses all ages children aged 0-17 through older adults 60+, all genders and all ages/ethnicities. Includes comprehensive assessment services; wellness and recovery action planning (WRAP); case management services; individual and group mental health services; crisis services; short-term hospitalizations; peer-led self-help/support groups; education and employment support; anti-stigma events; linkages to needed services; and housing support. Consumer-run Adult Wellness Center (Harmony House) provides a safe, comfortable place to receive services and participate in age-appropriate activities. TAY Center offers an alternative to delivering mental health services in the clinic and helps to ensure inclusion and non-discrimination. The TAY Center is a safe environment for youth who are LGBTQ and provides advocacy and support for youth at the local high school. Services for all clients, including the persons who have been identified as FSP, are culturally and linguistically competent, as well as offering services to persons who are visually and/or physically challenged. A number of our FSP clients from the Latino and/or Native American communities.	http://www.countyofglenn.net/govt/departments/mental_health/
Glenn	Welcoming (Warm) Line	PEI	Provides outreach to persons who are unserved and underserved, including the homeless community. Outreach activities reduce stigma and increase the community's awareness of our programs. Welcoming Line engages callers and provides information and support.	http://www.countyofglenn.net/govt/departments/mental_health/
Glenn	Weekend Wellness Program	INN	This program is designed to offer weekend services for our clients that are coming home from IMD or Board and Care Placement, or for those clients who are at risk for placement in higher levels of care. As our mental health system moves toward a recovery and wellness model of care, it has become our priority to look at ways to help clients remain in the community and avoid hospitalizations as well as to avoid placement in higher levels of care. This program offers services provided at our drop in center, Harmony House. The program offers transportation services to and from Harmony House on Saturday, and clients are given the opportunity to attend community events, outings, and wellness activities. Lunch is prepared at Harmony House with the goal of teaching budgeting and nutrition. Our goal is to ensure that Weekend Wellness Consumers have support during non-traditional hours, have trained staff available on the weekends, and provide activities that encourage getting out into the community.	http://www.countyofglenn.net/govt/departments/mental_health/
Humboldt	Rural Outreach Services Enterprise (ROSE)	CSS - OESD	Provides mobile access to services with efforts focused on reducing cultural and ethnic barriers that tend to exist in more traditional mental health settings.	
Humboldt	The Hope Center	CSS - OESD	Provides a safe, welcoming environment based on recovery self-help principles and the resources for people with mental health challenges to be self-sufficient. Center is client run and includes peer-to-peer education and support, system navigation, and linkage to services.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Full Service Partnership	CSS - FSP/OESD	Provides intensive community services and supports (e.g., housing, medical, educational, social, vocational, rehabilitative, alcohol and other drug treatment and other needed community services) as defined by the partner to decrease hospitalization and achieve recovery.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Older Adults and Dependent Adults Program Expansion	CSS - OESD	Provides intensive community services and supports (e.g., housing, medical, educational, social, vocational, rehabilitative, alcohol and other drug treatment and other needed community services) as defined by the partner to decrease hospitalization and achieve recovery.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Crisis Intervention Services (CIS)	CSS - OESD	Provides crisis support during critical incidents or potential critical incidents involving persons who may have a mental illness or co-occurring disorder to intervene and prevent hospitalizations and incarcerations. Partnerships between law enforcement, mental health systems, clients of mental health services and their family members assist people who are experiencing a mental health crisis, helping them gain access to the treatment system where they are best served. Crisis Intervention Training is provided annually and has reached over 250 local law enforcement.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Outpatient Medication Services Expansion	CSS - OESD	Provides medication support to people with a serious mental illness residing in remote rural areas. Delivery via video conferencing equipment.	http://co.humboldt.ca.us/hhs/mhb/mhsa/

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Humboldt	Integrated Program & Planning Support Structures	CSS - OESD	Provides support to the Office of Client & Cultural Diversity and its Research and Evaluation Unit and Training, Education and Supervision Unit. Office provides leadership in policy and program development related to culturally competent client and family driven services and reduction of racial, ethnic, and geographic disparities. The Research and Evaluation Unit provides evaluation services from data management and verification to statistical analysis and interpretation to written progress reports. The Training, Education and Supervision Unit provides supervision for those pursuing licensure and training opportunities to staff, clients, parents, families, community partners, and providers.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Stigma and Discrimination Reduction	PEI	Provides training and social marketing projects to educate the community and decrease the discrimination people with mental health challenges often face. The program includes activities that promote a community where people affected by mental health challenges are socially included, valued, and supported in their wellness and recovery, education, housing, employment, health care, and other needs in order to live a fulfilling and productive life.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Suicide Prevention	PEI	Training and social marketing projects increase awareness of suicide risk and protective factors and provide suicide prevention trainings and resources.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Transition Age Youth (TAY 16-25 years old) Partnership	PEI	Training increases transition age youth leadership and advocacy and culturally appropriate early intervention services for transition age youth with mental health challenges	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Learning Management System	WET	Purchases and deploys a web-based e-learning program for all DHHS staff.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Specialized Training	WET	Provides specialized training in evidence-based practices and full-service partnerships for service delivery staff.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Support to Peer Volunteers and Staff	WET	Increases participation of individuals with experience as mental health clients and family members in mental health service delivery.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Humboldt	Integrated Clinical and Administrative Information System	CFTN	Provides secure, reliable, real-time access to client health record information where and when it is needed to support care.	http://co.humboldt.ca.us/hhs/mhb/mhsa/
Imperial	Ward Access to Services and Supports (WASS) - Full Service Partnership	CSS - FSP	Serves SED youth aged 12-15 and SED transition aged youth 16-18 who are involved in or at risk of entering the juvenile justice system and have a mental health disorder whose service needs are not being met. Provides independent living skills and education, employment and housing support through a "whatever-it-takes" approach to coordinated, integrated and comprehensive services.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Transition-Age Youth Supportive Transitional Services (TAY-STS) - Full Service Partnership	CSS - FSP	Serves SED transition age youth 16-25 who are homeless or at risk of homelessness, are aging out of the mental health or child welfare system, and have a mental health disorder whose service needs are not being met. The FSP emphasizes client-driven opportunities for education, employment and housing through a "whatever-it-takes" approach.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Jail Supportive Transitional Services (JSTS) - Full Service Partnership	CSS - FSP	Serves SMI adults between the ages of twenty-six through fifty-nine (26-59) that are incarcerated in the adult criminal justice system and transitioning back into the community. JSTS staff assists individuals in obtaining services which includes mental health services, and referrals to a variety of different community resources. Intensive support services are provided immediately following the individual's release. The services offered by the JSTS program include case management services, rehabilitative services, integrated community mental heath services, alcohol and drug services, illness management services, crisis response services, peer support services, housing support, employment support, educational assistance, transportation services, housing assistance, benefit acquisition, co-occurring disorder services, and independent living skills,	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Senior Access to Supports and Services (SASS) - Full Service Partnership	CSS - FSP	SASS provides services to the unserved and underserved older adult population age sixty (60) and older. The services are geared for the SMI clients which are isolated and homebound, homeless, or at risk of homelessness. The SASS mobile team (which consists of a Mental Health Rehabilitation Technician, Clinician, Nurse and Psychiatrist) provides services in the community to this target population. The individuals served are part of the unserved/underserved population that otherwise could not access services at the outpatient clinic.	http://www.imperial.networkofcare.org/mh/home/index.cfm

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Imperial	HSA-Transitional Engagement Supportive Services (TESS) - Outreach and Engagement	CSS-OE	Provides supportive network services for unserved and underserved SED and SMI youth between the ages of eighteen through twenty-five (18-25) residing in racially and ethnically diverse communities. The TESS program staff also provides services to the unserved and underserved SMI adults between the ages of twenty-six through fifty-nine (26-59), and SMI Older Adults over the age of sixty (60) years old and above. This program serves unserved and underserved populations regardless of gender, religion, or sexual preference. The outcome goals are to reduce disparities in services provided to individuals residing in racially and ethnically diverse communities. The TESS program staff provides a wide range of supportive services to assist consumers in transitioning between various levels of treatment.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Recovery Center	CSS - OESD	Serves the unserved and the underserved SMI Transitional Age Youth (TAY), Adult, and Older Adult populations. This program serves individuals eighteen (18) years of age and older (TAY - 18-25, Adults - 26-59, and Older Adults - 60 and over). The MHSA-RCP offers daily organized and structured activities that are consumer directed and geared to assist consumers in their recovery from their SMI, and assist them in obtaining a restoration of a healthy and more independent lifestyle. MHSA-RCP has partnered with Department of Rehabilitation, Imperial Valley College, and Imperial Valley Regional Occupational Program to offer consumers educational classes, pre-employment readiness, and employment training. Consumers are also offered access to computers and the internet, transit and transportation assistance, English language classes, and arts and crafts. Consumers are offered the opportunity to participate in support groups such as medication, psycho-education, smoke cessation groups, wellness groups, health and fitness classes, and individualized Wellness and Recovery Action Plans.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Community Outreach and Engagement	CSS - OESD	Provides outreach and engagement activities to unserved seriously emotionally disturbed and seriously mentally ill individuals in the neighborhoods where they reside, including those who are homeless, to increase utilization of mental health services. The program reduces the stigma associated with receiving mental health treatment by providing education and information and promoting access to services. Provides education to the communities, schools and various agencies regarding early identification of mental illness, resources to improve access to care, and stigma reduction.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Trauma Exposed Individuals	PEI	Addresses the psycho-social impact of trauma with PEI efforts to reduce the negative psycho-social impact of trauma for all ages.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Dual Disorders-Integrated Supportive Treatment Services (DDx-ISTS)	CSS - FSP	Serves transition age youth (TAY), ages 12-18, and adults, ages 18-65, who have a mental health and substance abuse disorder whose service needs are not currently being met, are aging out of the youth mental health or child welfare system, or involved in the criminal justice system. The FSP offers a full range of integrated community services and supports which may include housing, education, and vocational opportunities.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Training and Technical Assistance Action 1 - Evidence-Based and Promising Practices Trainings	WET	This action provides for three trainings: 1) Aggression Replacement Training (ART), which is designed to alter the behavior of aggressive and violent youth ages 12-17 who were incarcerated in juvenile institutions to reduce aggressive and anti-social and high-risk behavior and promote anger management and social competence; 2) Trauma Focused – Cognitive Behavioral Therapy (TF-CBT) – Designed to reduce post-traumatic stress disorder (PTSD) symptoms by exploring inaccurate or unhelpful cognitions about the trauma and the feelings that accompany them, and 3) Early Detection and Intervention for the Prevention of Psychosis (EDIPP) – Designed as an intervention for young people exhibiting early symptoms of psychotic illnesses, but also seeks to build community support for changing the way severe mental illness is approached. EDIPP focuses on the early emergence of symptoms that might indicate the likelihood of a future mental illness without intervention.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Training and Technical Assistance Action 2 - Interpreter Training Program	WET	This action will enhance the ability to provide culturally and linguistically appropriate services to our community by offering: 1) a workshop designed to immerse bilingual staff who currently serve as interpreters in the principles and practices of interpreter communication skills; and, 2) a training for monolingual English speaking clinicians and other providers to learn to work more effectively with consumers through the use of trained interpreters.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Training and Technical Assistance Action 3 - Clinical Practicum Supervision	WET	This action is a collaborative effort between a local university, a federally qualified health center (FQHC), and Imperial County to assist MFT students moving forward in their careers by providing opportunities to obtain practicum hours on a volunteer basis.	http://www.imperial.networkofcare.org/mh/home/index.cfm

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Imperial	Training and Technical Assistance Action 4 - Stipends for Graduate Students	WET	This action provides for 10 stipends to individuals interested in pursuing a graduate level degree in social work from San Diego State University to expand the diversity and cultural competence of our workforce. Our stipend program will offer a fixed amount to students in the second and third year of their MSW program to assist in covering their expenses in exchange for a commitment to work in the public mental health system for a specific time period.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Technology - CareConnect/OrderConnect	CFTN	The Electronic Health Record System Project will provide CareConnect which will provide a secure way to exchange clinical and administrative information between and among providers in the care of a consumer and Order Connect, which is a secure web-based electronic lab and radiology ordering management system.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Technology - ConsumerConnect	CFTN	The Client and Family Empowerment project will provide Consumer Connect which is a service that will increase client and family member empowerment and engagement by providing tools for secure access to the electronic health and wellness information.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Technology - Document Imaging/Signature Capture	CFTN	This Other Technological Need Projects That Support MHSA Operations project will provide Document Imaging which facilitates the electronic collection, transformation, management, delivery, and ongoing access to information as well as signature capture to allow for capturing the consumer's signature electronically.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Imperial	Technology - ITEMS	CFTN	This Other Technological Need Projects That Support MHSA Operations project will replace out-of-date equipment with more effective and more reliable technology, standardize the PC operating systems and business applications, and install data back-up repositories.	http://www.imperial.networkofcare.org/mh/home/index.cfm
Inyo	Wellness Centers in Bishop and Lone Pine	CSS - OESD	Two wellness centers offer a warm welcoming environment for adults and older adults, providing support from our staff, as well as from each other. The Bishop Wellness Center is centrally located and close to where many consumers live. Activities include cooking, budgeting, housing, employment, photography, writing, exercise, walking, gardening, canning, and education. A consumer-driven, co-occurring group meets weekly as well as a women's group, DBT group, and recovery skills group. The Lone Pine Wellness Center is also centrally located and provides similar peer-facilitated activities and supports in the community.	http://www.inyocounty.us/MHSA/MHSA-1112_AnnualUpdate.pdf
Inyo	Transition Age Youth (TAY) Program	CSS - OESD	Transition Age Youth (TAY) program meets at the Bishop Wellness Center. Youth learn life skills needed in the "real world" and develop employment and independent living skills. Off-site recreation activities promote positive social interactions.	http://www.inyocounty.us/MHSA/MHSA-1112_AnnualUpdate.pdf
Inyo	4 Crisis Beds at Progress House	CSS - OESD	Local residential program Progress House has four beds designated for crisis respite care and transitional care for high-risk, high-need clients. helps de-escalate the situation and keep clients in the community while preventing inpatient hospitalizations (closest inpatient facility for over 200 miles away).	http://www.inyocounty.us/MHSA/MHSA-1112_AnnualUpdate.pdf
Inyo	Full Service Partnership Program	CSS - FSP	Serves children, transition age youth, adults, and older adults. Provides the additional support needed to remain in the community and thrive. A nurse meet the needs of older adults, enabling us to coordinate physical with mental health care to help elders to stay in their homes and manage their health and mental health needs.	http://www.inyocounty.us/MHSA/MHSA-1112_AnnualUpdate.pdf
Inyo	Wraparound Program	CSS	Work collaboratively with Social Services and Juvenile Probation to provide wraparound services to families with youth at risk of placement.	http://www.inyocounty.us/MHSA/MHSA-1112_AnnualUpdate.pdf
Inyo	Parent-Child Interaction Therapy (PCIT) Community Collaboration	PEI	Intensive parent-training program for families with hyperactive, defiant, and/or oppositional children; families with parents who have limited parenting skills; and families who have experienced domestic violence and/or child abuse. Program has been adapted as an intervention for many different types of families (child welfare population, at-risk families, adoptive families, foster families, and other languages including Spanish). Case managers provide in-home coaching to reinforce skills. Skills are also taught to teachers to reinforce in the classroom.	http://www.inyocounty.us/MHSA/MHSA-1112_AnnualUpdate.pdf
Inyo	Older Adult PEI Services	PEI	Identifies at-risk seniors who begin to exhibit symptoms of depression, prescription abuse, isolation, and other mental health conditions related to the aging population. Provides linkage and support for older adults to access mental health and health care services especially in our remote southeast end of the County. Provides early mental health screening and intervention to older adults who are receiving Senior Center Services, In-Home Supportive Services, Meals on Wheels and/or have contact with APS. Also trains agency partners, to recognize the signs and symptoms of mental illness in older adults.	http://www.inyocounty.us/MHSA/MHSA-1112_AnnualUpdate.pdf

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Kern	Assertive Community Treatment - Full Service Partnership	CSS - FSP	Serves transition aged youth, adults, and older adults at high risk for frequent psychiatric hospitalization who have historically benefitted little from traditional mental health services. Provides integrated support services, including mental and physical health, medication management support, vocational/educational, life skills, housing, and social opportunities to improve and expand peer support and personal outcomes and recovery.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Adult Transition Team - Full Service Partnership	CSS - FSP	Serves transition aged youth, adults, and older adults for whom traditional mental health services were ineffective. Consumers often suffer from co-occurring disorders, criminal justice system involvement and are homeless or at risk of homelessness. Provides integrated support services, including mental and physical health, medication management support, vocational/educational, life skills, housing, and social opportunities to improve and expand peer support and personal outcomes and recovery.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Transition Aged Youth - Full Service Partnership	CSS - FSP	Serves youth ages 17-21 with serious mental illness. Many are recently emancipated from the foster care system and are at risk for hospitalization, incarceration, and homelessness. Uses the Transitions to Independence Process (TIP) evidence-based model, addressing such needs as education, employment, housing, and transition to the community and to the adult mental health system.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Multi Agency Integrated Services Team (MIST) - Youth Full Service Partnership	CSS - FSP	Serves youth ages 0-19 who have more than one inpatient hospitalization in the past year; multiple emergency room visits which have not led to hospitalization; one placement failure or at risk for placement failure. Collaborative program targets youth who are at risk of losing their foster home, group home, or biological home placement. An intensive family centered, strength-based approach, incorporates group, individual, and family contacts to preserve the family unit. Youth in need of high-level residential placement are treated in foster care settings when possible.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Wellness, Independence & Senior Enrichment - Full Service Partnership	CSS - FSP	Serves transition aged adults 55-59 years and older adults 60+ who are reluctant or have difficulty seeking care in traditional mental health settings. Mobile team provides age-competent services in the home, primary care offices and other settings where older adults are most comfortable. Provides comprehensive, integrated assessments of mental health, substance abuse and physical health conditions, planning and management, intensified mental health services, crisis intervention, and linkage to community resources.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Recovery Supports Administration	CSS - OESD	Serves children, youth, and adults of all ages; consumers and family members of mental health services; mental health providers and the general public. Provides enhanced access for consumers and families to self-help and support services throughout Kern County. Programs focus on recovery and outreach activities, training of staff consumers and family members, and dissemination of recover- based education and anti-stigma information. Three types of programs: Consumer Family Learning Centers (CFLC), Self-Empowerment Team (SET), and the Recovery and Wellness Center (RAWC). CFLC provides recovery-based classes and support groups, computer lab access, and opportunities for outreach to peers and to the community. SET provides consultation and assistance from professional staff, training in peer supports for those who self-identify as having lived experience with recovery from mental illness. RAWC teams provide recovery-oriented treatment approaches, including psychiatric medication support, solution-focused brief therapy, and case management services.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Youth Wraparound - System Development	CSS - OESD	Serves youth ages 0-19 years with severe emotional disorders deemed eligible for mental health services and needing intensive services to transition effectively to community living; youth at risk for inpatient psychiatric hospitalization or who have recently been discharged from an inpatient hospital. Stabilizes and maintains children in the least restrictive safe environment. Assists families who are experiencing the transition of a child back into the home, or foster families receiving a child, who may need more interventions than can be provided by clinic-based services. Also provides mental health services to children who reside in group homes.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp

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Kern	Housing Program	CSS - OESD	The purpose of these projects is to offer affordable housing linked to supportive services needed for MHSA-eligible individuals and their families to live independently. **Desert Willow Apartments** opened in November 2008, in the City of Ridgecrest. DWA consists of 14 rent-subsidized, one-bedroom apartments, including 3 handicapped units, a two-bedroom manager's residence, a community center and covered patio area built around a central courtyard. **Haven Cottages** opened in September 2011 in south Bakersfield. Haven Cottage (HC) consists of four single-story buildings built around a central courtyard. Haven Cottages features 23 one-bedroom apartments, including 4 handicapped accessible units, a two-bedroom manager's unit, a laundry room, case management offices, and a group room. The **Residences at West Columbus** (RWC) is a 56-unit, multi-family housing project which includes 20 rent subsidized, one-bedroom units for transition age youth (TAY) and 36 two-bedroom units for low-income families. The KCMH TAY Team will certify eligible youth (18-24 years old), who have exited the foster care or juvenile justice systems, and also provide treatment and case management on- site. Additionally, a partner agency, Covenant Community Services, will offer tenants a full range of supportive services on site, including linkage with educational and employment resources.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Adult Wraparound - System Development	CSS - OESD	Serves transition-aged youth, adults, and older adults at Imminent risk for homelessness, substance abuse, criminal justice involvement, and/or psychiatric hospitalization. Provides outreach to individuals prior to discharge from inpatient psychiatric hospitalization to assure the supports necessary for successful transition to community living are in place. Services include medication support, home visits, crisis services, transportation, housing and living skills assistance, substance abuse services, and family support.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Office of Program Development and Implementation	CSS - OESD	Supports the entire Kern County Mental Health System with indirect services. All age groups, race/ethnicities, genders, and languages identified by the MHSA plan benefit from its products and assistance. Office provides administrative services, serves as a point of accountability for MHSA funded programs, streamlines information flow, facilitates decision-making on research, and supports the research, development and evaluation of new or expanded services.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Access to Care	CSS - OESD	The Access Hotline is designated by Lifeline and SAMSHA as part of the national 1 (800) Suicide Prevention lines for all Kern County residents. Provides immediate English and Spanish phone access for crisis intervention, mental health services access and information. Serves children, youth, adults, and older adults who have barriers or challenges to accessing care, who have previously been underserved, unserved, or uninsured.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Community Outreach and Education	CSS - OESD	Serves children and families, transition aged youth, adults, and older adults who receive mental health services or might benefit from services; the community at large; elected and appointed office holders; the business community. Outreach increases community awareness and understanding of mental illness and reducing stigma. Collaborates with community agencies on special events and educational opportunities. Educates and trains law enforcement agencies and other community partner agencies to improve understanding of mental illness and its impacts.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Training and Technical Assistance	WET	Increases the knowledge and competency of current and future direct line staff, supervisors, and managers within the department as well as contract providers. Encourages licensure at all levels and provides for increased knowledge through continuing education. Support consumers wishing to develop a career in public mental health. Enhances knowledge of and commitment to cultural competence, recovery principles and strategies and integrated services that address the needs of individuals with co-occurring disorders.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Career Pathways	WET	Creates a mental health career pathway for individuals with experience as recipients of mental health services and their family members, individuals living in Kern County and representing underserved populations. Establishes a collaborative relationship with the Kern Community College District for students interested in mental health professions. Builds relationships with the Kern County High School District, Bakersfield Community College and Cerro Cosa Community College in adapting the current Human Services Certificate Program curriculum to address additional specifics to public mental health and recovery. Collaborates with Stockdale High School and implement the first High School Academies Project	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Internship Programs	WET	Increases the number of internship placements available in the mental health system. Serves psychology doctoral student interns, marriage and family therapist interns and licensed clinical social work interns.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp

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Kern	Financial Incentive Programs	WET	Encourages mental health department staff and contract providers to achieve career advancement. Supports those pursuing a new career in the mental health professions and mental health consumers and family members who wish to pursue a career in mental health. Distributes stipends (bus passes or mileage reimbursement) for approximately 8 to 10 consumers or family members to participate in Behavioral Health Board subcommittee meetings and other MHSA stakeholder meetings.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Student Assistance Programs	PEI	Addresses problems of depression, suicide, violence, and needs behind juvenile delinquency, truancy, drop-out and school failure. Delivered in Kern's K-12 school sites. Provides on-site mental health screening, consultation, and evaluation, school-based mental health services, parenting and family intervention and skill building, and training to educators and providers about early identification of signs and symptoms of mental health and substance abuse-related problems. Included evidence-based peer helping programs (peer conflict mediation, peer tutoring, Link Crew, Safe School Ambassadors).	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Future Focus	PEI	Provides supportive prevention and early intervention services for transition aged youth housed in a shelter for short-term, temporary housing (up to 90 days). Helps youth successfully transition into adulthood and the community. The supportive housing is a very temporary, short-term safety net for at-risk youth so they are open to the focused prevention and early intervention services being offered.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Integrated Physical and Behavioral Healthcare	PEI	Located in community health centers in both urban and rural areas. Serves individuals and families not receiving behavioral health care due to cultural, economic, geographic, or other causes. Addresses the specific types of mental health needs of military veterans and people with substance related, mental health, or co-occurring conditions. Services include on-site physician triage with licensed mental health staff or referral to the co-located mental health provider(s); mental health screening for depression, personality and mood disorders, and other tests; psychiatric assessment for patients referred for medication evaluation and management.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Senior Volunteer Outreach	PEI	Serves older adults who isolate due to loss, illness, grief, loneliness, and/or substance abuse; at high risk for mental decompensation and requiring specialty services. As this particular population is increasing in number with prolonged longevity, additional services are needed to prevent hospitalization and institutionalization. Uses community volunteers to make contact with the at-risk older adults and use peer counseling techniques to socialize with the senior and watch for early signs of problems or decompensation. Based on the Santa Monica Peer Counseling for Seniors model Provides for comprehensive training of volunteers and other involved persons in peer counseling for a variety of cultural populations.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	PEI Statewide Training and Technical Assistance	PEI	Provides statewide training, technical assistance, and capacity building programs in partnership with local community partners. Promotes prevention and early intervention activities in our local communities and uses training methods that have demonstrated capacity to increase skills and promote positive outcomes consistent with the MHSA and PEI proposed guidelines.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Network Infrastructure Modernization	CFTN	Improves communication infrastructure to support the expansion of Kern's EHR system and overcomes staff resistance/barriers to system use. Includes improvements to connectivity for contract providers and for our tele-psychiatry network. Update sub-par carrier service in remaining isolated sites. Tele-medicine packages are installed at contract provider locations and will be included in the communications upgrades.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Technology Refresh	CFTN	A large percentage of the currently deployed equipment has passed its useful life. Updating that equipment enhances the potential for a successful EHR implementation. This project addresses the needs of our contract providers as well as the needs of county staff.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	e-Prescribing	CFTN	The e-Prescribing module provides access to a national medication database providing alerts, warnings, dosage, interaction and educational information. Supports avoidance of medication-related errors. In addition to all of the regulatory and EHR certification aspects of this project, it also satisfies enhances client safety. This technology radically transforms the way our medical staff perform their day-to-day tasks.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Recovery Oriented Treatment Plan	CFTN	Establishes an interoperability standard for treatment plans throughout the California public Mental Health System. A state-wide workgroup of counties collaborates with the California Institute of Mental Health (CIMH) to develop common criteria and common tools for recovery-based treatment plans that address MediCal documentation standards and reflect goals of client-centeredness, wellness and recovery, and cultural competence. Implements the common criteria, content and format in EHR systems being used across all counties and throughout their universe of community-based programs.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp

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Kern	Consumer/Family Computer Facilities	CFTN	Modernizes computers used by consumers and family members, replacing out-of-date equipment with more effective and more reliable technology. Expands the software available on these computers. Expands the availability of computer services by implementing two similar facilities at remote locations in the County.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Personal Health Record	CFTN	Empowers consumers by developing functionality that provides them and their family members more visibility into and control over their medical records. Provides an internet-based client portal to the client's PHR as well as a provider portal that allows external providers to access selected portions of the client's electronic record and to post entries (medication notes, progress notes, lab results, etc.) into the PHR.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Network of Care Website	CFTN	Continues to deploy and support this important, consumer-centric information source, which is the standard mental health information internet application used by all California counties.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	MHSA/DCR Batch Interfact	CFTN	Increases functionality of Anasazi system, reduces duplicate data entry and resubmission of data based on key event changes. This enhancement allows use of common data elements by all programs within the County. Many of these data elements are used as performance outcome indicators, thus the project will enable Mental Health programs to better track consistent performance outcome measurements.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kern	Freise Hope House	INN	Assists mental health consumers with developing the skills to obtain suitable housing and employment, and increases community and social supports. Treatment focuses on the recovery principles of encouragement, empowerment, strength, and community integration. A local non-profit social service organization, Bethany Services, currently owns the Freise facility. The phased plan includes a 16-bed crisis residential (first) paired with a 16-bed adult residential facility (to follow) co-located on the same campus.	http://www.co.kern.ca.us/artman2/kcmh/publish/mhsa/index.asp
Kings	In Common & We-CAN	PEI	The InCommon program, uses a Community Specialist, who conducts direct outreach to local residents who have little to no contact with public community-based behavioral services, especially the rural communities so to increase knowledge of services, network with local services providers, as well as address issues with Stigma. Often the outreach efforts are conduced with mono-lingual Spanish speakers, as well as other locally underserved populations. The We-CAN uses a blend of screenings and linkages to those to address possible behavioral health issues early on. We-CAN also provides a variety of direct clinical services including clinical screenings, individual therapy, group therapy to those who do not meet a medical necessity, as well as specialized clinical services such Parent Child Interactive Therapy (PCIT) for parents and children from 2-7yrs of age. Though PEI a number of different community support groups (Family Member Support Group, 1st Responders, Veterans Support, etc.) are also provided. Another Kind of Valor training (specialized training for any organizations and persons who serve Veterans) as well as Mental Health First Aid trainings and certification are also provided as a part of our Prevention efforts. We-CAN provides school based prevention services at a number of local schools, utilizing the CAST Curriculum for student skill building groups. Behavioral Health participates in the development of the Truancy Intervention & Prevention Program (TIPP) with the Office of Education and Student Attendance Review Board (SARB) to provide linkages and specific skill development group services for offenders	http://www.kingscountybehavioralhealth.com/mhsa.html
Kings	Empowered Consumers Helping Others (ECHO)	CSS - OESD	Primary ECHO focus is the Oak Wellness Center, a consumer-driven wellness and recovery drop-in center in the County seat of Hanford. Offers groups and activities in addition to field trips and conference participations to consumers not necessarily receiving traditional mental health services. The program supports peer driven advocacy, stigma reduction, and general support for those living with a mental illness.	http://www.kingscountybehavioralhealth.com/mhsa.html
Kings	Family Resource Center and Satellite Expansion	CSS - OESD	Continues to enhance service capacity of the mental health plan to four family resource centers and two satellite clinics in the outlying areas in Kings County. Extending into outlying areas serves people who are unable to come to the clinic due to different barriers including language, transportation and stigma. Services are available to all consumers, although the targeted population is adult Spanish-speaking-only females, or those who in the transition age youth age group. This program has also provided outreach, education, support and early intervention to both families and consumers dealing with serious mental illness, which may avert out of home placements, unnecessary hospitalizations and homelessness. Consumers, families and individuals of all ethnic/cultural backgrounds are eligible and benefit from this expansion program..	http://www.kingscountybehavioralhealth.com/mhsa.html

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Kings	Tulare-Kings Suicide Prevention Task Force	PEI	Tulare and Kings Counties joined forces to establish a joint Task Force to implement programs funded under the Statewide PEI Plan. Some of these programs and suicide prevention efforts include the Annual Festival of Hope in September to promote awareness, and reduce stigma, the Trevor Project which focuses on suicide prevention with LGBTQ Youth. Signs of Suicide (SOS) and RESTATE which both are student school based suicide prevention efforts.	www.sptf.org
Kings	Children and TAY FSPs	CSS - FSP	Provides a "whatever it takes" approach to services, including individual and family therapy. Services target diverse groups of unserved or underserved populations. Have participated in IEPs for children as well contracting with a foster family agency to engage foster youth and other at-risk youth with WRAParound services. Provides "Summer Day Camp" which delivers intensified services to adolescents who are underserved during the summer months and may decompensate due to lack of services and support.	http://www.kingscountybehavioralhealth.com/mhsa.html
Kings	Adult and Older Adult FSPs	CSS - FSP	Provides intensive culturally sensitive and creative services, using a "whatever it takes" approach. Services include individual, couples and family therapy, as well as life skills groups and helping consumers in the employment process. Enrichment Series covers topics such as wellness and recovery, treatment options, social skills, budgeting, self-care, Social Security, employment and education, and community resources. Additional services include connecting consumers with community partners as well as providing resources to any individual who requests them. Partners with the Kings Commission on Aging to support their SAFE program and to engage the older adult population. Community outreach includes participating in community events related to working towards identifying homeless consumers, individuals who are soon to be release from the County jail, and presenting and providing resources to the military and veteran population. Additionally, Behavioral Health offers direct clinical services to local veterans in the form of individual and group therapy. Ensures a community mental health model where consumers can stabilize and thrive in a less restrictive setting from IMDs, hospitals, or other psychiatric facilities.	http://www.kingscountybehavioralhealth.com/mhsa.html
Kings	Community Integration Team - FSP	CSS - FSP	Targets individuals who are high-end Emergency Room users and have a high rate of psychiatric hospitalizations. The program also targets those consumers who are in an IMD or Board and Care and have the potential of moving to a lower level of care and integrating into the community. The program encompasses many of the principles of an Assertive Community Treatment Team (ACTT) although it does not have full capacity to be staffed at the level this evidence-based model requires. Develops a wellness plan for each consumer. Services include a dedicated clinician for Veteran's EMDR treatment, PTSD and Trauma groups, case management, group and individual counseling for all target groups, group rehab services, nursing and psychiatric services, including medication management, substance abuse groups, the Oak Wellness Center and participation in the Enrichment Series through Kings County Behavioral Health. Flexible funding to provide assistance towards employment, housing, clothing, transportation or other needs.	http://www.kingscountybehavioralhealth.com/mhsa.html
Kings	Senior Access for Engagement (SAFE)	CSS - OESD	Provides the opportunity for many unserved and underserved older adults age 59 and up to access supports and services they have not utilized. Outreach efforts are made at senior centers, nursing homes, assisted living facilities and events targeting older adults. Outreach and engagement strategies include presentations, activities, and interventions at senior centers that promote wellness and resiliency, medication management and education, and linkages, advocacy and referrals for services, including Full Service Partnerships. Older adults are often referred to other services which could affect their mental status including home-delivered meals, congregate nutrition centers, caregiver support group, the Health Department/Public Health nurse, adult day center, Human Services, emergency food and shelter programs, public guardian, and veterans Services. A new respite program for older adults who are caregivers will be implemented this fiscal year through the PEI In Common program.	http://www.kingscountybehavioralhealth.com/mhsa.html
Kings	Workforce Education and Training	WET	The Kings County WET plan includes three distinct actions: 1) A staff person at Behavioral Health to assess and coordinate training; 2) Training for staff, consumers and family members; 3) A clinical supervisor at Kings View dedicated to MSW and MFT student interns. Behavioral Health now employees a fulltime LMFT who provides clinical supervision for two new positions of Non-Licensed Mental Health Clinicians with the Department, which allows non-licensed clinicians to gain required clinical hours necessary for licensure while working fulltime, and increase the amount of clinical services that can be rendered by Behavioral Health.	http://www.kingscountybehavioralhealth.com/mhsa.html

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Kings	Native American Youth Equine-Facilitated Psychotherapy Program (Youth in Transition)	INN	Behavioral health specialists and mental health researchers are constantly searching for effective interventions to address the problems of at-risk youth (in elementary and middle school). Equine-Facilitated Psychotherapy (EFP) helps improve communication, impulse control, self-esteem, self-confidence, trust, listening skills and concentration. This Evidence based form of therapy combines traditional therapeutic interventions with a more innovative component involving relationships and activities with horses. The relationships established with the horse assists in fully engaging the participant's mind, body, and spirit, thereby building confidence, attunement and sensitivity to internal processes and non-verbal communication. This program integrates cultural components from the local tribe into the program, to increase community connectedness. The innovative part of this program is the Implantation Learning Council (ILC). The ILC combined agencies that historically have not worked together (Santa Rosa Rancheria, County Mental Health, and school) to implement and maintain the EFP program. The goal of the ILC is to establish positive collaborative relationships with non-traditional partners to improve access and provision of mental health services to underserved population. This program is using an independent evaluator to assess the effectiveness of the program and success of the ILC collaboration.	http://www.kingscountybehavioralhealth.com/mhsa.html
Lake	Full Service Partnership	CSS - FSP	Consumers of all ages (children 0-15, transition age youth 16-25, adults 26-59, and older adults 60+) who meet eligibility requirements are provided "whatever it takes" services. A full array of recovery- oriented mental healthcare, including psychiatric services, is provided to consumers enrolled in an FSP. Services and supports include funding for housing, food, clothing, primary healthcare, transportation, education, and vocational opportunities.	http://mhsa.lakecountyca.gov
Lake	Crisis Access Continuum	CSS - GSD	Provides increased access and an introduction to mental health recovery concepts at the earliest opportunity for consumers experiencing challenges. Provides a local crisis hotline, a warm line, and outreach and engagement services for consumers who have recently been hospitalized or released from a crisis evaluation, and respite in a supported transitional housing setting.	http://mhsa.lakecountyca.gov
Lake	Forensic Mental Health Partnership	CSS - GSD	Provides support for consumers who encounter legal problems or are incarcerated in jail or juvenile hall due to mental illness. Assists consumers in addressing their mental health needs, navigating the legal process, transition planning, and provides support in the community after release from incarceration through service coordination, clinical services, and the FSP program when indicated.	http://mhsa.lakecountyca.gov
Lake	Housing Access	CSS - GSD	Provides resources and linkage to MHSA-subsidized housing for FSP consumers, one-time funding for those consumers at risk of losing their housing or needing assistance getting established in housing, and transitional housing for homeless consumers.	http://mhsa.lakecountyca.gov
Lake	Older Adult Access	CSS - GSD	Provides outreach and engagement services, linkage to resources, mental health interventions, and FSP programming to seniors who may be experiencing mental health challenges. The Senior Peer Counseling program provides peer-aged volunteer support to older adults who may be isolating or experiencing mild mental health concerns.	http://mhsa.lakecountyca.gov
Lake	Integrated Physical and Mental Health	CSS - GSD	Works with consumers and links them to primary care physicians. This expanding element in the recovery planning process is a critical component of comprehensive services and supports that has been identified as an obstacle to wellness for consumers experiencing mental health difficulties.	http://mhsa.lakecountyca.gov
Lake	Peer Support	CSS - GSD	Supports both transition age youth and adult consumers. TAY and Adult Wellness Centers provide a gathering point for consumers. Programs provide access to services (including non-mental health related), peer support, socialization, and companionship to these two age groups. The concepts of wellness, recovery, and resiliency are imbedded in the programming in both locations.	http://mhsa.lakecountyca.gov
Lake	Parent Partner Support	CSS - GSD	Supports families involved with community mental health. A Parent Partner with "lived experience" as a family member assists families with navigating the system, service coordination, group support, and, as an FSP team member, assists the family through the FSP process.	http://mhsa.lakecountyca.gov
Lake	Community Outreach and Engagement	CSS - OE	Two outreach programs specifically target the Tribal and Latino communities. Also identified as unserved or underserved in Lake County are the homeless population, the transition age youth and older adult age groups, as well as the unique cultural groups of military veterans and those who identify as LGBTQ.	http://mhsa.lakecountyca.gov
Lake	Early Intervention Services	PEI	Lake County Behavioral Health provides the equivalent of one full-time mental health specialist to provide direct early intervention services and supports to those consumers and families who experience the first onset of a serious emotional disturbance or serious mental illness.	http://mhsa.lakecountyca.gov

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Lake	Early Student Support	PEI	The Early Student Support program provides mental health therapy to and enhances the social and emotional development of young students (grades 1-8) who are experiencing mild to moderate school adjustment difficulties and/or early signs of mental illness. Using a systematic selection process of students most likely to benefit from program participation, alternative personnel provide direct services to students under ongoing supervision and training by credentialed school therapists in collaboration with Lake County Behavioral Health Department professional staff.	http://mhsa.lakecountyca.gov
Lake	Wellness and Recovery Centers	PEI	The Circle of Native Minds Center in Lakeport and the proposed Latino and Family Wellness and Recovery Centers in the southern and eastern parts of the county respectively, serve niche populations, promote cultural competency through program design, and allow access to resources and service delivery in a close-to-home setting for consumers of all ages and their families.	http://mhsa.lakecountyca.gov
Lake	Older Adult Outreach and Prevention	PEI	The Friendly Visitor Program provides companionship to the vulnerable population of homebound older adults. The volunteers offer individualized companionship, support, and friendship on a regular basis to seniors who have limited access to outside activities. Reassuring phone calls and access to the MHSA-funded Senior Peer Counseling Program are also benefits of the program.	http://mhsa.lakecountyca.gov
Lake	Postpartum Depression Screening and Support	PEI	Mother-Wise prevents and reduces the harmful effects of perinatal mood and anxiety disorders by offering tangible support to local mothers at a time when they need it most. The Saathi home visiting program delivers dedicated companionship from our team of volunteers, while facilitated weekly peer support groups help moms learn and develop new parenting skills in a fun, supportive environment. Mother-Wise services are available to all pregnant women and new moms with babies under twelve months, regardless of income.	http://mhsa.lakecountyca.gov
Lake	TAY Peer Support	PEI	Funds one half-time outreach coordinator position at the MHSA-funded TAY Drop-In Center and is intended to reduce disparities in access to mental health services to this identified priority population (transition aged youth). This position provides project coordination, peer training for like-aged volunteers at the center, and expands the existing programming to include outreach and prevention activities for the TAY population.	http://mhsa.lakecountyca.gov
Lake	Community Screening and Treatment	PEI	Will serve Lake County Behavioral Health clients in a community collaboration for screening and treatment for trauma and co-occurring disorders.	http://mhsa.lakecountyca.gov
Lake	Prevention Mini-Grants	PEI	The PEI Mini-Grant program provides community-based organizations with funding of up to $2500 to develop prevention-oriented activities aimed at building protective factors and reducing risk factors with respect to mental health problems. Priority is given to those applications that address underserved racial/ethnic and cultural populations of all ages.	http://mhsa.lakecountyca.gov
Lake	Capital Facilities	CFTN	The Clearlake Clinic will be renovated to provide a more integrated experience that promotes wellness, recovery, and resiliency and increased access and engagement to underserved populations.	http://mhsa.lakecountyca.gov
Lake	Lake County Electronic Health Record Project	CFTN	Addresses technological needs for secure, reliable, real-time access to client health record information where and when it is needed to support care. Includes the following components: implementation of Anasazi software, conversion to Microsoft SQL server, conversion of paper charts, purchasing additional hardware, and ongoing service/maintenance, as well as meeting Meaningful Use and Interoperability requirements.	http://mhsa.lakecountyca.gov
Lake	Workforce Education and Training	WET	Provides funding for workforce staffing support, training and staff development, mental health career pathways strategies, and financial incentives to address shortages in the public mental health workforce.	http://mhsa.lakecountyca.gov
Lake	Peer Informed Access	INN	The Peer Informed Access project has assembled a representative group of community member stakeholders (peers) to assess the current status of the mental health consumer experience, make recommendations for improving the quality of the experience and intended outcomes, and inform the process for networking community-based clinics and wellness centers. The goal is to create a "no wrong door" approach and increase access for consumers and family members of all racial/ethnic and cultural populations of all ages.	http://mhsa.lakecountyca.gov
Lassen	Full Service Partnerships	CSS	Full Service Partnerships	tarmstrong@co.lassen.ca.us

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Lassen	Outreach & Engagement	CSS	Outreach and engagement to identify unmet needs of the Seriously Mentally Ill (SMI) / Severely Emotional Disturbed (SED) population across Lassen County. It will establish an integrated delivery system with clinicians, consumers and family members and existing community resources. Its goal is to involve families and individuals in an array of appropriate services tailored to the rural culture. Unserved and inappropriately served SMI / SED individuals and families in areas of Lassen County which have not had consistent mental health services.	tarmstrong@co.lassen.ca.us
Lassen	Wellness Activities	CSS	Through a comprehensive stakeholder process in Lassen County, the stakeholders supported the idea of having Wellness and Recovery activities implemented within Susanville and all One Stop locations. Also known as Wellness and Recovery Workgroup: This workgroup develops, supports, promotes Wellness and Recovery initiatives within the mental health division. Funding for organized consumer and family member groups to work in partnership with LCMH to develop a service infrastructure to engage, identify and provide peer support services to MHSA eligible Seriously Mentally Ill / Severely Emotionally Disturbed individuals and families. This program embraces central concepts of wellness and recovery and promotes consumer employment. The program engages vulnerable and at-risk individuals who might not otherwise seek mental health services. Individuals experiencing mental distress can be assessed and supported with brief interventions or appropriate referrals to community resources. Also offers mental health clients a place to meet, socialize, and participate in client-centered and client-directed activities. These activities have	tarmstrong@co.lassen.ca.us
Lassen	School and Juvenile Hall	CSS	Created infrastructure in the Lassen County Juvenile Hall and at selected school sites to identify and engage Seriously Mentally Ill (SMI) / Severely Emotional Disturbed (SED) individuals with unmet mental health needs. At the three One Stop locations (Fort Sage, Westwood and Big Valley), Lassen County Behavioral Health case managers and therapists screen children for mental illness at the local schools who could be identified as un-served and underserved. Lassen County Behavioral Health staff provides students with basic pro-social skills from the Skill Streaming curriculum.	tarmstrong@co.lassen.ca.us
Lassen	Workforce Education and Training Project Support	WET	Provides staff support to implement and coordinate all actions funded by the Workforce Education and Training plan. Supports consumer and family member transitions to employment; strengthens the mental health workforce by strengthening recruitment efforts for all job levels for Lassen County Behavioral Health and partner agencies. Recruits for career pathways programs with a special focus on cultural and linguistic diversity.	tarmstrong@co.lassen.ca.us
Lassen	Collaborative Partnership Training and Technical Assistance	WET	Provides consultant and training resources to improve the capacity of Lassen County Behavioral Health staff, consumer and family member partners, and partner agencies to better deliver services. Expands capacity to provide services that support wellness, recovery and resilience; that are culturally and linguistically competent; that are client-driven and family-driven; that provide an integrated service experience for clients and their family members, and that are delivered in a collaborative process with our partners.	tarmstrong@co.lassen.ca.us
Lassen	Career Pathways	WET	Designs recruitment and training/educational programs that will engage and prepare individuals for a career in public mental health. Priority given to those with consumer/family member experience, Hispanic or Native American candidates, Spanish linguistic competence, and current employees of Lassen County Behavioral Services.	tarmstrong@co.lassen.ca.us
Lassen	Financial Incentive Programs	WET	Funds educational stipends for up to two individuals seeking graduate level social work education and licensing or bachelor degree in social work.	tarmstrong@co.lassen.ca.us

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Lassen	Screening/ Assessment and Counseling	PEI	Lassen County Behavioral Health established a 3-element program to provide prevention and early intervention efforts for children age 0-17 and their families. Early intervention can occur when screening of children indicates the likelihood of behaviors and conditions that create multi-problems, serious symptoms and troublesome behaviors in children and their families. This PEI proposal will: 1) support and augment existing screening and identification efforts, including developing a staff position to provide consultation and support to collaborating partners that identify families and children in difficulty; 2) financially support and expand direct family education and support programs; and 3) develop clear protocols for referring children and families that need and want early intervention, adding an evidence-based practice that provides that intervention. PEI provides Lassen County Behavioral Health case managers and therapists screening of children who could be identified as un-served and underserved. Lassen County Behavioral health has been providing staff to Lassen High School and Diamond View middle school to provide screening, assessment and counseling to youth and their families. The stakeholders requested the need to expand these services to other community schools, such as Shaffer, Janesville and Johnstonville. Behavioral Health staff have also provided students with basic pro-social skills from Skill Streaming curriculum. Prevention and Early Intervention one time funding was used in 2010-2011 for the two programs listed below Pathways & Early Intervention expanded their use of the screening tool known as Ages and Stages Questionnaire-Social Emotional (ASQ-SE). The expansion would include all children between the ages of 0-5 years in Lassen County. The use of the screening tool will help identify concerns within children and help refer them to appropriate services. Lassen Indian Health Center (LIHC) trained their psychologists in trauma focused cognitive based therapy programs and implement an Indian Country Child Trauma Center (ICCTC). The program will provide culturally appropriate Cognitive Behavioral Therapy services to children (Age 4-12) and their families.	tarmstrong@co.lassen.ca.us
Lassen	Assessment Tools	PEI	Through a comprehensive stakeholder process in Lassen County, the stakeholders supported the idea of having one time funding used for Prevention Early Intervention in 2010-2011 for the two programs listed below. Pathways & Early Intervention expanded their use of the screening tool known as Ages and Stages Questionnaire-Social Emotional (ASQ-SE). The expansion would include all children between the ages of 0-5 years in Lassen County. The use of the screening tool will help identify concerns (i.e. mental illness) within children and help refer them to appropriate services. Lassen Indian Health Center (LIHC) trained their psychologists in trauma focused cognitive based therapy programs and implemented an Indian Country Child Trauma Center (ICCTC). The program will provide culturally appropriate Cognitive Behavioral Therapy services to children (Age 4-12) and their families.	tarmstrong@co.lassen.ca.us
Lassen	Capital Facilities	CFTN	The Capital Facilities component of MHSA consists of technological projects that support the development of an integrated infrastructure and improve the quality and coordination of care that will transform the mental health system and support the goals of MHSA. The Capital Facilities component consisted of three projects: Construction/Renovation of the Big Valley One Stop, provide new heating and air conditioning system for the Fort Sage One Stop, and the expansion and remodel of the Westwood One Stop building. New heating and air conditioning has been completed at the Fort Sage One Stop and work on the construction/renovation of the Big Valley One Stop has just begun. Lassen County Behavioral Health will be contracting with NST Engineering to provide for the expansion/remodel of the Big Valley One Stop. Any funding left over from the first two projects will be used towards the Westwood One Stop Building.	tarmstrong@co.lassen.ca.us

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Los Angeles	Children's FSPs	CSS - FSP	The Children's Full Service Partnership (FSP) is a mental health service program for children ages 0 – 15 and their families who would benefit from an intensive in-home program designed to address the total needs of the child, including his or her family, who is experiencing significant, emotional, psychological and behavioral problems that are interfering with the child's well being. Children ages 0 – 15 who have a serious emotional disturbance (SED) and are at risk of being removed from the home, who have extreme behavior problems at school, whose parents or caregiver have a substance abuse problem or who are moving back home or into the community after being in an out-of-home placement are the ideal candidates for an FSP program. Children's FSP programs are capable of providing an array of services 24 hours per day, seven days a week that are well beyond the scope of traditional clinic-based outpatient mental health services. A children's FSP consists of a team of mental health professionals and other service providers dedicated to working with the child and family and providing comprehensive, intensive services in the family's home and community. Services may include: • Individual and family counseling • Peer support from people experiencing similar issues • Transportation • Access to physical health care • Help finding suitable housing for children and families enrolled in FSP programs • Help getting the financial and health benefits the child and family are entitled to	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Children's Field Capable Clinical Services	CSS-OESD	Children's Field Capable Clinical Services (FCCS) program provides an array of resiliency-oriented and field-based mental health services to children and families. Children's FCCS programs provide specialized mental health services delivered by a team of professional and para-professional staff. The focus of FCCS is working with community partners to provide a wide range of services that meet individual needs. The program is designed to provide services to individuals who are isolated, unwilling or unable to access traditional mental health outpatient services due to location/distance barriers, physical disabilities, or because of the stigma associated with receiving clinic-based services.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Children's Family Support Services	CSS-OESD	Family Support Services (FSS) provide access to mental health services such as individual psychotherapy, couples/group therapy, psychiatry/medication support, crisis intervention, case management linkage/brokerage, parenting education, domestic violence and Co-Occurring Disorder services to parents, caregivers, and/or other significant support persons of Full Service Partnership (FSP) enrolled children who need services, but who do not meet the criteria to receive their own mental health services.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Transition Age Youth (TAY) FSPs	CSS - FSP	Intensive services with 24/7 staff availability to help individuals address emotional, housing, physical health, transportation, and other needs to help them function independently in the community. FSP have several defining characteristics, including providing a wide array of services and supports, guided by a commitment by providers to do "whatever it takes," to help individuals within defined focal populations make progress on their particular paths to recovery and wellness.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Transition Age Youth (TAY) Drop In Centers	CSS - OESD	Drop-In Centers provide temporary safety and basic supports for Seriously Emotionally Disturbed (SED) and Severe and Persistently Mentally Ill (SPMI) TAY who are living on the streets or in unstable living situations. Drop-In Centers provide "low-demand, high tolerance" environments in which TAY can make new friends, participate in social activities, access computers, books, music, and games. As the youth is ready, staff persons can connect them to the services and supports they needs in order to work toward stability and recovery. Drop-In Center services include the following: Showers, Meals, Clothing, Computer/Internet Access, DVD and Games, Social Activities, Peer Support Groups, Linkage to Mental Health and Case Management Services, Linkage to Substance Abuse Treatment Information, Educational Services, Employment Assistance, Housing Assistance and more.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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Los Angeles	Transition Age Youth (TAY) Enhanced Emergency Shelter Program	CSS - OESD	The Enhanced Emergency Shelter Program contained in the Mental Health Services Act (MHSA) Plan will serve the immediate and urgent housing needs of the Seriously Emotionally Disturbed (SED)/Severely Persistently Mentally Ill (SPMI) TAY population. The goal of this program is to ensure availability in all eight (8) Service Areas and to ensure countywide coverage and geographic accessibility. The primary objective of this program is to provide temporary shelter for TAY clients in a supportive housing environment for up to 29 nights (including extensions) while pursuing the long-term goals of secure, permanent housing. The Enhanced Emergency Shelter Program will offer a warm, clean and safe place to sleep, hygiene facilities; hot meals (breakfast, lunch, and dinner); and case management services. Since placement in the Enhanced Emergency Shelter Program is very short-term, a plan for transitioning the TAY client into stable housing should be made at the time of placement into the program. Eligibility Criteria • TAY 18-25 (Minors 16-17 may be accepted at a later date) • SED/SPMI • Indigent • Homeless or at imminent risk of homelessness • Does not have any income, benefits, or any other resources to pay for shelter • Not a danger to self, others, or gravely disabled	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Transition Age Youth (TAY) Probation Camps Services	CSS - OESD	Probation Camp Services provides services to youth ages 16 to 20 who are residing in Los Angeles County Probation Camps; particularly youth with SED, SPMI, those with co-occurring substance disorders and/or those who have suffered trauma. Services in the Probation Camps are critical in assisting this population to reach their maximum potential and eventually transition back to the community rather than continue their involvement in the criminal justice system as adults. Multidisciplinary teams, including parent advocates, clinicians, Probation staff, and health staff provide an array of on-site treatment and support services that include the following: • Assessments • Substance-abuse treatment • Gender-specific treatment • Medication support • Aftercare planning Transition services (including FSP and other intensive community-based mental health services) A key component of the planned services is outreach and engagement to the incarcerated youth's family providing transportation to the camps to ensure opportunities to participate in the youth's treatment during camp placement and through the transition back into the community.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Transition Age Youth (TAY) Project Based Operating Subsidies for Permanent Housing	CSS - OESD	Housing provides a fundamental level of stability for young people to achieve their goals of wellness, recovery, and eventual self-sufficiency. The lack of safe and affordable housing options is often a profound barrier for SED/SPMI TAY who needs access to these basic supports for recovery. The Project-Based Operational Subsidy funds provide subsidies for Unit-based Permanent Supportive Housing programs and "Youth-Oriented" board and care-type (non-licensed) programs to address the long-term housing needs of SED/SPMI TAY who are eligible for Full Service Partnerships (FSP) and others coming directly from transitional housing programs or directly from foster care or group homes. The Project-Based Operating Subsidy targets youth who, with sufficient support, could live independently in community settings. Supportive mental health and other services will be made available for youth who are: High-risk (transitioning out of long-term institutional settings) Moderate-risk (often homeless but are actively engaged on the streets) Low-risk (generally high-functioning in their recovery and may be working or going to school) The advantage of these long-term investments is that when a unit is vacated by a youth, the unit remains available for occupancy by other TAY with similar mental health needs. The operational subsidy stays with the unit, not with the individual, and thereby insures a permanent supply of housing for this hard-to-place population. Moreover, the rents remain stable (affordable) over decades since the apartments are not in the competitive private real estate market.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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Los Angeles	Transition Age Youth (TAY) Field Capable Clinical Services	CSS - OESD	Field Capable Clinical Services, delivered under the Mental Health Services Act, are intended to address the needs of individuals who are SED/SPMI. FCCS are direct interventions; evidence-based services are the preferred strategies whenever they can be identified. While FCCS clients do not have the intensive service needs characteristic of individuals who qualify for Full Service Partnerships, they may serve as a way of transitioning former FSP clients to less intensive programs as they meet their recovery goals. Most important, FCCS enables providers to reach unserved, underserved or inappropriately served individuals who will not or cannot access mental health services in traditional settings – due to preference, stigma, physical limitations, or multiple demands on families and systems that provide their care.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Adult Full Service Partnerships (FSPs)	CSS - FSP	Adult Full Service Partnership (FSP) programs are designed for adults ages 26-59 who have been diagnosed with a severe mental illness and would benefit from an intensive service program. The foundation of Full Service Partnerships is doing "whatever it takes" to help individuals on their path to recovery and wellness. Full Service Partnerships embrace client driven services and supports with each client choosing services based on individual needs. Unique to FSP programs are a low staff to client ratio, a 24/7 crisis availability and a team approach that is a partnership between mental health staff and consumers. Adult FSP programs assist with housing, employment and education in addition to providing mental health services and integrated treatment for individuals who have a co-occurring mental health and substance abuse disorder. Services can be provided to individuals in their homes, the community and other locations. Peer and caregiver support groups are available. Embedded in Full Service Partnerships is a commitment to deliver services in ways that are culturally and linguistically competent and appropriate. Adult Full Service Partnership programs will provide services to 2,611 individuals.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Adult Wellness Centers	CSS - OESD	1) Antelope Valley MHC, 2) Arcadia MHC, 3) CA Hispanic Commission - Client Run, 4) Compton MHC, 5) Downtown MHC, 6) Edmund D. Edelman Westside MHC, 7) Exodus Recovery, 8) Harbor-UCLA, 9) Hillview, 10) Hollywood MHC, 11) National Mental Health Association - Client Run, 12) Northeast MHC, 13) Pacific Clinics - Client Run, 14) Portals, 15) Rio Hondo MHC, 16) San Fernando MHC, 17) San Fernando Valley CMHC - Client Run, 18) San Pedro MHC, 19) Social Model Recovery System, 20) South Bay MHC, 21) Special Services for Groups - Client Run, 22) Step Up On Second - Client Run, 23) West Central MHC, 24) West Valley MHC	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Adult Field Capable Clinical Services	CSS-OESD	The Adult Field Capable Clinical Services (FCCS) program provides an array of recovery-oriented, field-based and engagement -focused mental health services to adults. Providers will utilize field-based outreach and engagement strategies to serve the projected number of clients. The goal of Adult FCCS is to build the capacity of DMH to serve this significantly underserved population with specifically trained professional and paraprofessional staff working together as part of a multi-disciplinary team. Services provided include: outreach and engagement, bio-psychosocial assessment, individual and family treatment, evidence-based practices, medication support, linkage and case management support, treatment for co-occurring disorders, peer counseling, family education and support. FCCS will directly respond to and address the needs of unserved/underserved adults by providing screening, assessment, treatment, linkage, medication support, and consultation.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Adult Jail Linkage and Transition Services	CSS-OESD	Jail Transition and Linkage Services are designed to outreach and engage individuals involved in the criminal justice system and receiving services from jail or jail related services (e.g. court workers, attorneys, etc.) and successfully link them to community-based services upon their release from jail. The program addresses the needs of individuals in collaboration with the judicial system by providing identification, outreach, support, advocacy, linkage, and interagency collaboration in the courtroom and in the jail. Jail Transition and Linkage staff work with the MHSA Service Area Navigators as well as service providers to assist incarcerated individuals with accessing appropriate levels of mental health services and supports upon their release from jail, including housing, benefits and other services as indicated by individual needs and situations. The goal of these services is to prevent release to the streets, thus alleviating the revolving door of incarceration and unnecessary emergency/acute psychiatric inpatient services.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Adult Housing Services	CSS-OESD	The Adult Housing Services include 14 Countywide Housing Specialists that provide housing placement services primarily to individuals and families that are homeless in their assigned Service Area.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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Los Angeles	Adult IMD Step-Down Services	CSS- OESD	IMD Step-Down Facility programs are designed to provide supportive on-site mental health services at selected licensed Adult Residential Facilities (ARF), and in some instances, assisted living, congregate housing or other independent living situations. The program also assists clients transitioning from acute inpatient and institutional settings to the community by providing intensive mental health, health, substance abuse treatment and supportive services.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Older Adults Field Capable Clinical Services	CSS - OESD	The Field Capable Clinical Services, also known as FCCS, are the first system-wide DMH programs focused exclusively on Older Adults and designed to improve access to needed mental health services for this traditionally underserved population. FCCS offers a range of field-based services to older adults who may be reluctant or unable to access needed mental health services due to impaired mobility, frailty, geographic limitations or stigma associated with receiving services in a traditional mental health clinic. Key Components FCCS provides specialty mental health services designed to meet the unique biopsychosocial needs of older adults ages 60 and above. FCCS are provided in settings that are often preferred by older adults, for example in the home of the older adult, or in other community settings such as senior centers or senior housing complexes, or primary care settings. FCCS are provided by multi-disciplinary teams of professional, paraprofessional and volunteer providers who have received specialized training preparing them to work effectively with older adults.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Older Adults Full Service Partnerships (FSPs)	CSS - FSP	Older Adult Full Service Partnership (FSP) are comprehensive, intensive services for persons 60 and above who have been diagnosed with a mental illness and are interested in participating in a program designed to address their emotional, physical and living situation needs. FSP Programs are capable providing an array of services beyond the scope of traditional outpatient services. Key Components FSP provides specialty mental health services designed to meet the unique biopsychosocial needs of older adults ages 60 and above. FSP are provided in settings that are often preferred by older adults, for example in the home of the older adult, or in other community settings such as senior centers or senior housing complexes, or primary care settings. FSP are provided by multi-disciplinary teams of professional and paraprofessional and volunteer providers who have received specialized training preparing them to work effectively with older adults. Who is eligible to receive these services? Older adults, ages 60 and above with a serious and persistent mental illness: *who are homeless or at serious risk of becoming homeless *who are being released from jail or at serious risk of going to jail *who have multiple psychiatric hospitalizations or are in an Institution for Mental Disease (IMD) *who experience significant factors such as risk of being placed in a Skilled Nursing Facility (SNF), have a co-occurring medical or substance abuse disorders, and are unable to participate in services provided in traditional mental health clinic programs, may be eligible to participate in FSP	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Service Area Navigators	CSS - OESD	Service Area Navigator Teams will assist individuals and families in accessing mental health and other supportive services and network with community-based organizations in order to strengthen the array of services available to clients of the mental health system. Such networking creates portals of entry in a variety of settings that make the Department's long-standing goal of no wrong door achievable.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Alternate Crisis Services	CSS - OESD	Alternate Crisis Services (ACS), including Mental Health Urgent Care Centers, provides a comprehensive range of services and supports for mentally ill individuals that are designed to provide alternatives to emergency room care and psychiatric hospitalization.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Children/TAY Full Services Partnerships (FSPs)	CSS - FSP	Target population of ages 0-25 who due to their mental illness experience out of home placement, isolation, juvenile justice involvement, homelessness and/or failure in achieving educational milestones. Individuals in the FSP receive more frequent counseling services and more intensive case management.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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Los Angeles	Adult/Older Adult Full Services Partnerships	CSS - FSP	Target population of ages 26 and over who due to their mental illness are at risk of becoming unserved or underserved, being placed out of home, experiencing increased levels of isolation, involved in the criminal justice system, homelessness, and receiving involuntary treatment or hospitalization. Individuals in the FSP receive more frequent counseling services and more intensive case management.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	School-Based Services Project	PEI	The School-Based Services Project provides an array of evidence-based practices that will (1) build resiliency and increase protective factors among children, youth and their families; (2) identify as early as possible children and youth who have risk factors for mental illness; and (3) provide on-site services to address nonacademic problems that impede successful school progress. The programs will provide outreach and education; promote mental wellness through universal and selective prevention strategies; foster a positive school climate; offer early mental health intervention services on school sites; and provide training in mental health evidence-based programs to school personnel and providers working with youth and children.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Family Education and Support Project	PEI	The Family Education and Support Project provides an array of evidence-based practices that will build competencies, capacity and resiliency in parents, family members and other caregivers in raising their children by teaching a variety of strategies. Services will be offered to a diverse population throughout the county. The project utilizes universal and selective intervention as well as early intervention approaches for children/youth in stressed families. The programs will address the risk factors and protective factors that promote positive mental health, concentrating on parental skill-building through a variety of training, education, individual, group parent, and family interaction methods.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	At-risk Family Services	PEI	The At-Risk Family Services Project will provides an array of evidence-based practices that (1) provide training and assistance to families whose children are at risk for placement in foster care, group homes, psychiatric hospitals, and other out of home placements; (2) build skills for families with difficult, out of control or substance abusing children who may face the juvenile justice involvement; and (3) provide support to families whose environment and history renders them vulnerable to forces that lead to destructive behavior and the disintegration of the family.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Trauma Recovery Services	PEI	The Trauma Recovery Services Project provides an array of evidence-based practices that will (1) provide short-term crisis debriefing, grief, and crisis counseling to clients, family members and staff who have been affected by a traumatic event; and (2) provide more intensive services to trauma-exposed youth, adults, and older adults to decrease the negative impact and behaviors resulting from the traumatic events. The programs include outreach and education, psychosocial assessment, individual short-term crisis counseling, family counseling, youth and parent support groups, case management, and training for staff that are likely to work with trauma victims.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Primary Care and Behavioral Health Services	PEI	Develops mental health services within primary care clinics in order to increase primary care providers' capacity to offer effective mental health guidance and early intervention through the implementation of screening, assessment, education, consultation, and referral. Another purpose is to prevent patients at primary care clinics from developing severe behavioral health issues by addressing their mental health issues early on. Behavioral health professionals skilled in consultation and primary care liaison will be integrated within the primary care system. It is the intent of the Project to build resiliency and increase protective factors among children, youth, adults and older adults and their families and other caregivers through the PEI programs. By offering assistance in identifying emotional and behavioral issues at a clinic setting, the stigma associated with seeking out mental health services will be minimized.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Early Care and Support for Transition-Age Youth	PEI	The Early Support and Care for Transition-Age Youth Project provides an array of evidence-based practices that will (1) build resiliency, increase protective factors, and promote positive social behavior among TAY; (2) address depressive disorders among the TAY, especially those from dysfunctional backgrounds; and (3) identify, support, treat, and minimize the impact for youth who may be in the early stages of a serious mental illness. The programs will provide outreach and education; promote mental wellness through universal and selective prevention strategies; offer early mental health intervention services on school sites, youth centers and other youth-friendly sites; and provide training in mental health evidence-based programs to school personnel and providers working with TAY. Emancipating, emancipated, and homeless TAY are a special focus of this project.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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Los Angeles	Juvenile Justice Services	PEI	The Juvenile Justice Services Project provides an array of evidence-based practices that will (1) build resiliency and protective factors among children and youth who are exposed to risk factors that leave them vulnerable to becoming involved in the juvenile justice system; (2) promote coping and life skills to youths in the juvenile justice system to minimize recidivism; and (3) identify mental health issues as early as possible and provide early intervention services to youth involved in the juvenile justice system. Services will be provided at probation camps throughout the County, residential treatment facilities, health clinics, community settings, and other non-traditional mental health sites.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Early Care and Support for Older Adults	PEI	The Early Care and Support Project for Older Adults provides an array of evidence-based practices that will (1) establish the means to identify and link older adults who need mental health treatment but are reluctant, are hidden or unknown, and/or unaware of their situation; (2) prevent and alleviate depressive disorders among the elderly; and (3) provide brief mental health treatment for individuals. The stigma of mental illness is a significant barrier for the older generation who often do not seek treatment until the illness has progressed significantly. Services are directed at older adults, their family members, caregivers, and others who interact with and provide services to this senior citizen population.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Improving Access for Underserved Populations	PEI	The Improving Access for Underserved Populations Project provides an array of evidence-based practices that will (1) build resiliency and increase protective factors among monolingual and limited English-speaking immigrants and underserved cultural populations, lesbian/gay/bisexual/transgender/questioning (LGBTQ) individuals, deaf/hard of hearing individuals and their families; and blind/visually impaired individuals and their families; (2) identify as early as possible individuals who are a risk for emotional and mental problems; and (3) provide culturally and linguistically appropriate early mental health intervention services. The programs will provide outreach and education as well as promote mental wellness through universal and selective prevention strategies.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	American Indian Project	PEI	The American Indian Project will (1) build resiliency and increase protective factors among children, youth and their families; (2) address stressful forces in children/youth lives, teaching coping skills, and divert suicide attempts; and (3) identify as early as possible children and youth who have risk factors for mental illness. The programs will provide outreach and education; promote mental wellness through universal and selective prevention strategies; offer early mental health intervention services at comfortable, non-stigmatizing localities; and involve multi-generations in the American Indian children and youth's lives. An important emphasis is on preventing suicide among American Indian youth, given the high rate among this population.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Workforce Staffing and Support	WET	Workforce Education and Training Coordination; WET County of Los Angeles Oversight Committee	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Training and Technical Assistance	WET	Transformation Academy Without Walls, offering a. Public Mental Health Workforce Immersion to MHSA b. Licensure Workshops Learning Management System - The Learning Net Recovery-Oriented Supervision Trainings Interpreter Training Program Training for Community Partners	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Career Pathways	WET	Offers Intensive Mental Health Recovery Specialist Training Program Expanded Employment and Professional Advancement Opportunities for Consumers in the Public Mental Health System-Peer Training Expanded Employment and Professional Advancement Opportunities for Parent Advocates, Child Advocates and Caregivers in the Public Mental Health System Expanded Employment and Professional Advancement Opportunities for Family Members Advocates in the Public Mental Health System Mental Health Career Advisors High School Through University Mental Health Pathways Market Research and Advertising Strategies for Recruitment and Professionals in the Public Mental Health System Partnership with Educational Institutions to Increase the Number of Professionals in the Public	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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County	Program Name	Component	Program Description	County/City MHSA Website or Program Contact Information
Los Angeles	Capital Facilities	CFTN	Los Angeles County's Department of Mental Health's (LAC-DMH) Capital Facilities Component Proposal funds will be utilized to increase and improve the existing capital facilities infrastructure to accommodate the implementation of the MHSA plans. The proposal addresses the current and anticipated needs that will arise during the implementation of the various MHSA plans. LAC-DMH Capital Facilities Component Proposal will produce long-term impacts with lasting benefits that will move its mental health system toward the goals of wellness, recovery, and resiliency. The $39 million allocation will fund acquisition of land(s) and building(s); construction of mental health service facilities and administrative space; and renovation and expansion of existing County owned facilities which require modernization and transformation to provide an environment for the clients and families of empowerment, reduce disparities, and increase access and appropriateness of care. The MHSA Capital Facilities Component Proposal was approved by the State on May 27, 2010. Preliminary research for acquisition, construction, and/or renovation of various sites has started. Please click on the link below to go directly to the Draft Capital Facilities Plan: http://file.lacounty.gov/dmh/cms1_159597.pdf	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Technology	CFTN	The MHSA-IT Plan contains six projects: I. Integrated Behavioral Health Information System II. Contract Provider Technology Projects III. Consumer/Family Access to Computer Resources IV. Personal Health Record Awareness and Education V. Data Warehouse Re-Design VI. Telepsychiatry Feasibility Study and Recommendations	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Integrated Behavioral Health Information System	CFTN	The IBHIS will provide integrated clinical, administrative and financial functionality to LAC-DMH in its role as a provider of mental health services and in its role as the Local Plan Administrator. The IBHIS will provide LAC-DMH clinicians access to consumer clinical records regardless of where each consumer was seen previously in the LAC-DMH network. Clinicians will have access to medication history information, recent assessments, laboratory and psychological test results, and, when appropriate, clinician notes from prior visits.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Contract Provider Technology Projects	CFTN	The Contract Provider Technology Project is an umbrella project encompassing a mix of technology projects within the range of projects identified in the MHSA Capital Facilities and Technological Needs Guidelines. This umbrella project is intended to provide a means for Contract Providers within the LAC-DMH provider network to obtain the funding necessary to fully participate in the Integrated Information Systems Infrastructure and address their technological needs consistent with the MHSA Capital Facilities and Technological Needs Guidelines.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Consumer/Family Access to Computer Resources	CFTN	Mental health consumers, and family members need access to computer resources and they should have access to computer training and technical assistance. Computer skills training, and technical assistance are essential to ensure that consumers and family members are able to effectively use computer resources made available to them. Through this project LAC-DMH plans to set-up one or more consumer/family dedicated computer workstations in service settings and secure residential settings. Other settings are being considered. Videoconferencing is being explored in at least one service location in each of 8 Service Planning Areas. This project also includes implementation of a computer skills training program and providing technical assistance during normal business hours to consumer/family users.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Personal Health Record	CFTN	Through the stakeholder process, LAC-DMH received considerable feedback suggesting that many mental health consumers have limited awareness of PHR(s) and how a PHR may be used as a recovery and wellness tool. LAC-DMH is requesting MHSA Information Technology funds to support the development of written and online PHR awareness and education materials. Online materials will include both written and video content. Content will be developed with two specific target audiences, consumer/family and mental health service providers.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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Los Angeles	Data Warehouse Redesign	CFTN	Implementation of the electronic health record necessitates re-designing the current LAC-DMH data warehouse. Along with new data collected in the IBHIS, forthcoming MHSA programs (Prevention and Early Intervention, Workforce Education and Training, and Innovation) will bring in additional new clinical, administrative, and financial data that must be stored in the data warehouse. This project will prepare LAC-DMH for warehousing these data from disparate data sources as well as establish appropriate resources for warehousing legacy data.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Telepsychiatry	CFTN	LAC-DMH encompasses over 4,000 square miles and some areas are sparsely populated and remote from major medical centers and mental health service delivery resources. Over 24 locations have been identified for telepsychiatry services and a "tele-hub" permanent location.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Description of 4 Distinct Practices for Integration of health, mental health, and substance abuse care	INN	Provides an opportunity for counties to identify potentially innovative practices, implement them and learn. LA County focus is on adopting 4 distinct practices for the integration of health, mental health and substance abuse care: Integrated Clinic Model Integrated Mobile Health Team Model Community-Designed Integrated Service Management Model Integrated Peer-Run Services Model The target populations for each model are seriously mentally ill adults with at least one co-morbid physical health or substance use disorder. As a whole, this Innovations Plan should provide important data to help inform LAC-DMH's system transformation efforts. To access the complete INN Plan, click the link below: http://file.lacounty.gov/dmh/cms1_159416.pdf	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Integrated Clinic Model	INN	The Integrated Clinic Model combines physical health, mental health, and substance abuse services in a community-based site, such as a primary care clinic or mental health clinic, to more fully address the spectrum of needs of individuals who are homeless, uninsured, and/or members of under-represented ethnic populations (UREP). This strategy seeks to increase access to the aforementioned services to those for whom services are fragmented and resources limited. This strategy could potentially transform access in Los Angeles County as it increases the capacity for physical health, mental health, and substance abuse programs in organizations and systems where people in the community already go. It also seeks to increase the quality of services, including better physical health and mental health outcomes, as providers work together to coordinate care across practices. The utilization of existing infrastructure and the leveraging of other programs will create an efficient and cost-effective system that promotes interagency collaboration between Los Angeles County departments and providers.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Integrated Mobile Health Team Model	INN	The Integrated Mobile Health Team Model is a client-centered, housing-first approach that uses harm reduction strategies across all modalities of mental health, physical health, and substance abuse treatment. This will be done in collaboration with the housing developers that have units available for this population in addition to accessing Federal housing subsidies and other housing resources. In this model, the primary goal is to address the fragmentation of services to the homeless population, many of whom are uninsured and are members of UREP. This model proposes to deploy a mobile, enhanced, integrated, multi-disciplinary team that includes physical health, mental health, and substance abuse professionals and specially-trained peers and that is managed under one agency or under one point of supervision. This model will develop individualized client care plans that contains physical health, mental health, and substance abuse client-centered treatment goals and objectives. Another unique feature of this model is that individuals will have access to the Integrated Mobile Health Team services through multiple points of entry, whether initially seeking assistance with physical health, mental health, substance abuse, or housing. It will increase access to services and leverage multiple funding sources including capital for housing development and Federal Qualified Health Center funding.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa

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Los Angeles	Community-Designed Integrated Service Management Model (ISM)	INN	The Community-Designed Integrated Service Management Model (ISM) envisions a holistic model of care whose components are defined by the community itself and also promotes collaboration and partnerships between regulated entities, contract providers, and community-based organizations to integrate health, mental health, substance abuse, and other needed care to support the recovery of consumers with particular attention to under-represented ethnic populations. The ISM model consists of discrete teams of specially-trained and culturally competent "service integrators" that help clients use the resources of both "formal" (i. e., mental health, health, substance abuse, child welfare, and other formal service providers) and "nontraditional" (i. e., community defined healers) networks of providers, and who use culturally-effective principles and values. The ISM Model services are grounded in ethnic communities with a strong foundation of community-based, non-traditional, and natural support systems such as faith-based organizations, voluntary associations, and other service groups. In this model, ISM teams will integrate formal and informal provider and community-based resources through the following: 1) community-specific outreach and education; 2) community-specific enhanced engagement practices; 3) enhanced linkage and advocacy; and 4) harmonious intertwining of formal and non-traditional services and supports through facilitation of inter-provider clinical communication. ISM teams work with each client to ensure service access, coordination, understanding, follow-up, and inter-provider clinical communication. The teams consist of both service professionals and specially-trained peers who meet regularly with clients and provide information, transportation, motivation, encouragement, and help with provider communication.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Integrated Peer-Run Model	INN	The Integrated Peer-Run Model supports people with mental health needs who also have additional health and/or substance abuse treatment needs to become well and stay well by providing new programs that are designed and run by people with lived experience of mental health issues. This model incorporates two innovative strategies: Peer-Run Integrated Services Management (PRISM) and Alternative Peer-Run Crisis Houses. PRISM is a client-driven, holistic alternative to traditional community mental health services that allows uninsured peers to secure needed physical health, mental health, and substance abuse options as part of a program designed to support and empower people to take responsibility for their own recovery. PRISM is based upon a "whatever it takes" philosophy in a context of personal choice. It consists of innovative specially-trained peer teams that share features of ISM teams in the Community- Designed ISM Model. As in the ISM model, the teams work clients to ensure service access, coordination, understanding, follow-up, and inter-provider clinical communication. Also as with ISM teams, PRISM teams meet regularly with clients and provide information, transportation, motivation and encouragement, and help with provider communication. However, unlike the teams in the ISM model, PRISM teams consist entirely of specially-trained peers who will coordinate the provision of clinical services and coordinate and deliver peer-run/self help services. Peer-Run Crisis Houses are client-driven, holistic alternatives to hospitalization and are designed to provide a warm, safe, welcoming environment for uninsured people in psychiatric distress who are not a danger to others. These houses are located in two places in Long Beach and in the San Gabriel Valley.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Los Angeles	Full Service Partnerships for Adults, Older Adults, Children and Transition Age Youth	CSS - FSP	Tri-City Mental Health Center. Full service partnerships are the heart of the Community Service and Supports plan. Full service partnerships are individualized services grounded in a "whatever it takes" commitment. Each enrolled individual, and where appropriate his or her family, participates in the development of a culturally appropriate plan focused on recovery and wellness. The plan can include all needed services, including but not limited to traditional mental health services, so long as the services and supports contribute to the outcomes of well-being defined in the plan, including: meaningful use of time and capabilities; safe housing; a network of supportive relationships; timely access to services; reductions in incarceration; and reductions in involuntary services. Each enrolled individual has a personal services coordinator (PSC), and is supported by a staffing structure that insures 24/7 support.	http://www.tricitymhs.org/mhsa

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Los Angeles	Community Navigators	CSS - OESD	Tri-City Mental Health Center. Community navigators will be a crucial structure to help people find the formal and informal supports they need. The navigators will help build teams of volunteers and staff from other organizations and groups, including community workers, people who have received services, family advocates, family members, and mental health professionals. While the precise design of these teams will vary across the three cities, reflecting each city's particular local character, ethnic composition, and needs, each team will recruit members who together have substantial familiarity and expertise with all age groups, including the particular challenges facing those age groups and the distinct characteristics of the support networks for each. Community navigators and their volunteer teams will: Engage with people who need services and their families to help them quickly identify currently available services, including formal and informal supports and services tailored to the particular cultural, ethnic, age, and gender identity of those seeking them; Recruit community-based organizations, faith-based organizations, and other community groups to become part of an active and ever growing locally-based support network for people in the three-cities, including those most challenged by mental health issues; Follow-up with people with whom they have engaged to ensure that they have connected with support structures and received the help they need; Use information technology and other means to map and keep up to date about the current availability of services and supports in the Service Area; and Promote awareness of mental health issues, and the commitment to recovery, wellness, and self-help that lies at the heart of the Mental Health Services Act.	http://www.tricitymhs.org/mhsa
Los Angeles	Wellness and Recovery Center	CSS - OESD	Tri-City Mental Health Center. A new integrated services and supports site will focus on promoting recovery, resiliency, and wellness for people of all ages struggling with serious mental health issues and their families. Staff located at this site, including counselors, peer advocates, and others, will provide a range of culturally competent, person– and family-centered services and supports designed to promote increasing independence and wellness for people of all ages. Over time, we expect that most staff and management of the center will be people who have received services and family members. It will also be guided by an advisory council whose members will be predominantly people who have received services and family members. A special section of the site with a separate entrance, or a separate site very close by, will be dedicated to transition age youth. This part of the site will be staffed primarily by highly skilled peers who have life experience relevant to young people struggling with mental health issues. Professional staff will support the peer staff. Staff will offer a range of support and transition services to TAY. It will be open after-hours to provide a safe place for TAY to come who may have no place else to go. Staff will work to develop trusting relationships with these youth in order to support them in accessing the help they need.	http://www.tricitymhs.org/mhsa
Los Angeles	Supplemental Crisis Services	CSS - OESD	Tri-City Mental Health Center. Currently people in the three cities who have a mental health crisis after hours or on weekends, and who are not receiving mental health services, must wait for a response from Los Angeles County's Psychiatric Mobile Response Team (PMRT). Given the three cities' location at the eastern edge of the County, this can sometime take hours, leaving people at risk and often preventing police officers from returning to patrol duty. While Tri-City Mental Health System cannot replace LA County's PMRT system, we want to provide a clinician who is available after hours and on weekends. These clinicians (there will likely be several who will rotate availability) will be on call to support police officers and family members with a person in crisis. While they will not be LPS qualified, they will be able to meet the police officers, work with the person in crisis, and likely be able to decompress the situation in ways that will prevent a 5150 from being issued in many circumstances. As part of the mental health system in the three-city area, these clinicians will also be able to help with follow-up linkages to services once the crisis is averted.	http://www.tricitymhs.org/mhsa
Los Angeles	Field Capable Services for Older Adults	CSS - OESD	Tri-City Mental Health Center. Older adults are the fastest growing population in La Verne and Claremont, two of the three cities in the Tri-City area. They are also often underserved for many reasons, among them that they cannot get to services that would benefit them. Tri-City Mental Health system will hire or contract with a full-time clinician with expertise in older adult mental health issues. This clinician will spend much of his/her time engaging with seniors who have serious mental health issues in their homes, in senior centers, and other places where seniors are present. This clinician will integrate his/her work with other providers of senior services in the Tri-City area.	http://www.tricitymhs.org/mhsa

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Los Angeles	Administration	CSS - OESD	Tri-City Mental Health Center. While it may be unusual to treat Administration as a program, the investment we are making in administration has immense significance for the system of mental health services in the three cities. Tri-City has just emerged from bankruptcy. Prior to the bankruptcy Tri-City employed over 300 employees; it now has less than 80. The silver lining of this tragedy has been that other providers have emerged to provide services and meet needs of people in the three cities. Unfortunately, there is no real system in place to coordinate these various providers and their services; no data system to support planning, billing, and to track outcomes; no contract monitoring infrastructure to allow straightforward subcontracting of services. All of this infrastructure will have to be created, and will be through the CSS plan. It will pay enormous dividends across the system, and insure the efficient provision of effective services to Tri-City residents.	http://www.tricitymhs.org/mhsa
Los Angeles	Community Wellbeing Program	PEI	Tri-City Mental Health Center. The Community Wellbeing Program is a new program designed to help communities develop and implement community-driven plans to improve and sustain the mental and emotional wellbeing of their members, particularly unserved and under Tri-City Mental Health System's Prevention and Early Intervention Plan. Building on the principles and approaches of the CADMH recommended Asset Based Community Development (ABCD), the Community Wellbeing Program reflects several foundational premises: • Families and communities have primary responsibility for promoting and sustaining the mental and emotional wellbeing of their members; • Families and communities have strengths and assets that already support their members' health and wellbeing; and • With culturally appropriate support and training, communities can leverage their strengths and assets to improve and sustain the wellbeing of their members. TCMHC staff, with support from consultants in the first year, will identify a number of communities with strong community leadership and a commitment to improving the mental and emotional wellbeing of their members. The unserved and under-served communities who partnered with us in the community planning process are obvious candidates for this effort. Once identified, staff (and consultants in the first year) will work with community leaders to master the skills and frameworks needed to support their communities' actions to promote the mental health and wellbeing of their members.	http://www.tricitymhs.org/mhsa
Los Angeles	Mental Health First Aid	PEI	Tri-City Mental Health Center. Highlights: The Mental Health First Aid (MHFA) is a program to train scores of people in community-based settings to intervene quickly and effectively to offer support when someone is experiencing mental and emotional distress. This evidence-based program begins with a premise that just as people can master basic first aid for physical injuries—e.g., the Heimlich maneuver, CPR—without being doctors, people can also master basic mental health first aid without being clinicians. The components of this program are straightforward. An initial group of people successfully completes a five-day course to become certified MHFA instructors. We estimate that 25 people from the tri-city area will complete this instructor course in the first year: two will be new staff members from TCMHC; the others will come from the communities who participate in the Community Wellbeing Program, and a range of other partners, including schools, colleges, health clinics and other primary care providers, faith-based organizations, community organizations and collaboratives, community businesses, and other non-traditional partners. Each of these 25 people will then be certified to offer the 12-hour MHFA course to members of their community. The course provides knowledge and skills to people to help them learn how to help someone struggling with mental or emotional distress, or developing a mental health problem or crisis.	http://www.tricitymhs.org/mhsa

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Los Angeles	Peer Support Program (Older Adult Wellbeing)	PEI	Tri-City Mental Health Center. Highlights: Building on the success of the acclaimed senior peer counseling model from the Center for Healthy Aging in Santa Monica, California, the Peer Support Program will recruit and train volunteer peer counselors for older adults. These volunteers will be trained to assess the mental health and well-being of older adults, to provide 1-1 peer counseling, and to lead age- and issue-based peer support groups. Groups organized under this program will focus on providing support and creating opportunities for members to engage in projects that serve their communities and other wellness activities. Communities who have implemented the peer counseling program have implemented ratios of counselors to group members as low as 1-4 (Contra Costa county) and as high as 1-75 (Marin County). Our target is to recruit up to 30 volunteers for older adults (15 in the first 15 months), and for each volunteer to support up to 25 peers each (10 each in the first 15 months) through a combination of groups and 1-1 counseling. We expect that supports offered through this program will include both targeted prevention and early intervention	http://www.tricitymhs.org/mhsa
Los Angeles	Peer Support Program (Transition Age Youth Wellbeing)	PEI	Tri-City Mental Health Center. The Peer Support Program will recruit and train transition-aged young adult volunteers as peer counselors for this age group. These volunteers will be trained to assess the mental health and well-being of transition-aged young adults, to provide 1-1 peer counseling, and to lead age- and issue-based peer support groups. Groups organized under this program will focus on providing support and creating opportunities for members to engage in projects that serve their communities and other wellness activities. Communities who have implemented the peer counseling program have implemented ratios of counselors to group members as low as 1-4 (Contra Costa county) and as high as 1-75 (Marin County). Our target is to recruit up to 20 volunteers for transition-aged young adults (10 in the first 15 months), and for each volunteer to support up to 25 peers each (10 each in the first 15 months) through a combination of groups and 1-1 counseling. We expect that supports offered through this program will include both targeted prevention and early intervention supports.	http://www.tricitymhs.org/mhsa
Los Angeles	Family Wellbeing Project	PEI	Tri-City Mental Health Center. The Family Wellbeing Project will include only one staff member in the first year. This staff person will be located at the CSS-funded Wellness Center, and will identify existing community resources—e.g., NAMI programs, parent and family support groups, and others—and develop new programming to support family members and/or caregivers of people receiving supports through the other PEI projects. The new programming will reflect the culture and traditions of families who seek support through the project, and as with the Peer Support Program, will include a range of wellness activities—e.g., exercise, music, cultural awareness activities, and others. Some of this programming will occur in the Wellness Center; much of it, we expect, will be delivered in appropriate community locations for the families who are participating. In subsequent years, as we develop better understanding of family members' interests and needs, as well as better understanding of what future MHSA budget realities will be, we will explore additional programs to support family members in future years, including, e.g., Incredible Years, Nurturing Parenting Program, and others.	http://www.tricitymhs.org/mhsa

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Los Angeles	K-12 Student Wellbeing	PEI	Tri-City Mental Health Center. The three school districts are currently pursuing a range of strategies to provide support to students experiencing mental and emotional distress, including students at risk of suicide and students at risk of school failure. These include: • The Student Assistance Program (SAP) in Pomona Unified School District. This program provides support to students who are exhibiting signs of mental and emotional distress, including aggressive behaviors, self-injury behaviors, detachment from school, and others. SAP services are designed to reduce school violence and behavioral incidents, improve school attendance, improve academic performance, and increase access to community supports and services. Referrals to the SAP can come from teachers, parents, administrators, other students, or through self-referrals. Referred students receive a range of supports—e.g., individual, group, and/or family counseling, parenting programs, after school programs, tutoring, mentoring, and/or peer assistance. In addition, SAP Intervention Specialists facilitate a variety of informal support groups for students (e.g., grief and loss, anger management). • Claremont Unified School District has begun an Elementary School Counseling Program. Marriage and Family Therapy (MFT) graduate students from the University of La Verne provide counseling for 10 hours/week at each of seven elementary schools sites. The students are supervised by two licensed MFT's. This model is cost efficient as the district only pays for supervision and counseling materials, which amounts to approximately $10,000 per year. The graduate students use evidence-based practices including cognitive behavioral approach, play therapy and art therapy, to support children who are exhibiting signs of mental and emotional distress. The program's impact is evaluated using the Walker McConnell Scale of Social Competence and School Adjustment. • Current mental health programs in Bonita Unified School District (BUSD) for K-12 grade students include services provided by Tri-City Mental Health Center. Services are offered from August through June for students in grades 6-12, and from January through June for students in grades K-5. Services include Every 15 Minutes, parent education, Community Family Fairs, individual, group, and/or family counseling, parenting programs, and other supports. The K-12 Student Wellbeing Program will provide support for the three school districts, and representatives from private schools as well, to expand and better integrate their efforts to promote the mental and emotional wellbeing of their students.	http://www.tricitymhs.org/mhsa
Los Angeles	College Student Wellbeing	PEI	Self-Help Drop-In Centers that provide trained/supervisors peer counselors to students who need someone to talk to in a quiet, student-friendly place (see Peer Counseling Program below). Students can drop-in anytime, and peer counselors are available most days/evenings.	http://www.tricitymhs.org/mhsa
Los Angeles	Critical Future Policy/ Implementation Issues	INN	Critical Future Policy/Implementation Issues: A generation ago, carving out the mental health system was an important step in providing much-needed attention and resources to vulnerable populations. Now, health care integration figures heavily in the affordable care act efforts and in the renewal of the section 1115 waiver. The Los Angeles County Innovations Plan provides a remarkable opportunity to explore new frameworks of care for individuals who are uninsured, homeless, and members of UREP. We expect that it may shed light on methods for integrating mental health, physical health, and substance abuse services that can usefully inform much larger future integration policy and implementation. Development of INN models, specifically designed to overcome service integration limitations and system fragmentation would be of great utility. The stated learning objectives, if accomplished, could help intelligently guide both policy decisions and resource allocation for LAC-DMH for years into the future. Each model pilot could provide important service benefits to many people while we answer fundamental questions for the future of health care delivery in the United States.	http://dmh.lacounty.gov/wps/portal/dmh/mhsa
Madera	Children/TAY FSPs	CSS—FSP	This program serves a target population of ages 0-25 who due to their mental illness experience out of home placement, isolation, juvenile justice involvement, homelessness and/or failure in achieving educational milestones. Individuals in the FSP receive more frequent counseling services and more intensive case management.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	Adult/Older Adult FSPs	CSS—FSP	This program serves target population of ages 26 and over who due to their mental illness are at risk of becoming unserved or underserved, being placed out of home, experiencing increased levels of isolation, involved in the criminal justice system, homelessness, and receiving involuntary treatment or hospitalization. Individuals in the FSP receive more frequent counseling services and more intensive case management.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services

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Madera	System Development Expansion Services	CSS	This program serves a target of all ages and is designed to accommodate the increased demands for services because of the increased community education and outreach from the other MHSA components.	http://www.madera-county.com/index.php/bhsoverview/295-
Madera	System Development Supportive Services & Structure	CSS	This program provides staff support, data services, outcome management services and housing resource development.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	MHSA Housing Program-Supplemental Assignment Agreement	CSS -Housing	On June 3, 2010, the Madera County Housing Plan was approved contingent upon the submission of specific project information. There is a collaborative effort for this project between Madera County Behavioral Health and the Housing Authority of the City of Madera. They have joined together to form a non-profit organization named MMHSA Housing, Inc. Since the plan was approved, a four bedroom house that will accommodate four consumers in supportive housing in the city of Madera has been purchased and is operational. A four-plex in Chowchilla that accommodates eight consumers has been developed and is operational. We are seeking property and a property manager in the mountain area.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	PEI Community Outreach and Wellness Centers	PEI	Hope House (City of Madera) and the Mountain Wellness Center (Oakhurst) are two "drop-in-centers" with the primary goal of providing outreach and education services for community members who may be at risk of mental illness.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	PEI Community and Family Education	PEI	These programs offer training in specific educational curriculums, e.g., Mental Health First Aid, Los Niño's Bien Educados and the New Confident Parenting Program to any member of the public including clients, client family members, and staff. During FY 2012-2013, suicide prevention programs were implemented. Those programs include ASIST (Applied Suicide Intervention Skills Training) and SafeTALK (another suicide prevention skills training).	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	PEI Statewide Programs	PEI	Madera County PEI Statewide dollars have been assigned to the Department of Mental Health and California Mental Health Authority (CalMHSA). The three programs are CalMHSA Suicide Prevention, CalMHSA Stigma and Discrimination Reduction, and CalMHSA Student Mental Health Initiative. CalMHSA has been actively initiating state-wide and regional programs in response to the statewide dollars. One of the regional programs will be a suicide prevention hotline for this region of central California.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	PEI Regional Program Suicide Prevention Training	PEI	During FY 2011-12, Madera County BHS was able to tap into regional funds to have select staff trained in providing suicide prevention training. This training, ASIST (Applied Suicide Intervention Skills Training) is an evidenced-based training. The ASIST workshop is for caregivers who want to feel more comfortable, confident and competent in helping individuals to prevent the immediate risk of suicide.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	PEI Training, Technical Assistance and Capacity Building	PEI	Madera County PEI Training, Technical Assistance and Capacity Building is for training of staff, community stakeholders, and clients/family members in methods that have demonstrated the capacity to increase skills and promote positive outcomes consistent with the MHSA and PEI proposed guidelines. One-time funds for fiscal year 2013-14 will be available for training.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	WET Workforce Staffing Support	WET	This program focuses on developing the community's knowledge of mental health issues and helps community members to access appropriate mental health services. WET funds are used to help in the transformation the mental health system by educating and training staff and community members.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	WET Training, Specialty Skill / Practice Development & System Transformation Support	WET	This program provides the training to the community, clients and their family members, and stakeholders to support the concept of recovery principles within the mental health system. Madera County utilized WET dollars to pay for the training of staff for its PEI Prevention Programs, e.g., Mental Health First Aid, New Confident Parenting Program and Los Niño's Bien Educados. Madera County BHS has been able to utilize statewide dollars to have staff reimbursed for tuition costs for their advanced degrees. So far, MCBHS has had four staff partially reimbursed for their tuition costs through the statewide funds.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	Capital Facilities 7th Street Center	CFTN	All Capital and Technology funds have been allotted to a single Capital Faculty project. BHS has purchased a building that houses BHS Madera area services including Administration, MHSA, Mental Health Services and AOD Services. CFTN funds paid only for MHSA funded programs. BHS moved into this building during 2012. The CFTN funds have been expended.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services

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Madera	Increase Access into the System from Crisis Services through Peer Support Almond Access Center	INN	This program is a collaborative with the emergency room staff, mental health staff and peer/family members. This INN component hopes to learn if the use of peer counselors will aid in the reduction of hospitalizations or increase client follow through with mental health services at the time of release from a hospital setting. Mental Health crisis staff and hospital emergency room staff will focus on assessment of health problems, medication management, and crisis services. The peer/family staff will be linked to clients after the crisis has been resolved and the peer/family staff will provide follow-up services to engage the clients in recovery activities such as outpatient treatment or community support groups.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Madera	Linkage to Physical Health Services and Reverse Integration from Mental Health to Primary Care	INN	This INN component involves the contracted services of a pharmacist and a psychiatrist who will be available for consulting with emergency room staff and primary care providers to provide linkage of mental health and physical health. This model of using a pharmacist and psychiatrist to consult with health practitioners was developed based on mental health staff reports that health practitioners in general do not respond to their letters or phone calls but do tend to respond to contacts by pharmacists or psychiatrists. The INN component also is working with the contracted pharmacist to move stable, medication only clients back into Primary Care for their on-going medication needs.	http://www.madera-county.com/index.php/bhsoverview/295-welcome-to-behavioral-health-services
Marin	Children's System of Care (CSOC)	CSS - FSP	This program serves 40 youth with serious emotional disturbance who are involved with juvenile justice and/or attend County Community School, a continuation high school. Clinical staff work with trained family partners to meet the mental health, social, and developmental needs of each child or adolescent and their families in a culturally competent manner.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	TAY (Transitional Age Youth)	CSS - FSP	This integrated multi-disciplinary service team program for 20 Transition Age Youth (16- 25) with serious mental illness or serious emotional disturbance provides culturally competent mental health services, intensive case management, housing supports, psychiatric care, substance abuse counseling, employment services and independent living skills. Transition Age Youth who are aging linked to necessary services.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	STAR (Support and Treatment after Release) Program	CSS - FSP	This multi-agency, multi-disciplinary team provides culturally competent, community-based services to 40 adults who have serious mental illness and current involvement with the criminal justice system. Operating in conjunction with the STAR mental health court, the team provides comprehensive assessment, individualized client-centered service planning, psychiatric care, intensive case management, therapy and linkages to all needed services and supports. The goals of the program are to promote recovery and self-sufficiency, improve the ability to function independently in the community, reduce incarceration, and reduce hospitalization.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	HOPE (Helping Older People Excel) Program	CSS - FSP	This multi-agency, multi-disciplinary team serves 40 older adults, ages 60 and older, who have serious mental illness, and are isolated and at risk of out of home placement, hospitalization or homelessness. By providing a full range of integrated, culturally competent services including outreach, comprehensive assessment, individualized client-centered service planning, psychiatric care, intensive case management, therapy and linkages to needed services and supports, participants are assisted to better control their illness, reach their personal goals, lead more satisfying lives, and avoid higher, more restrictive levels of care.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	ODYSSEY Program	CSS - FSP	This multi-disciplinary, multi-agency team provides culturally competent intensive, integrated services to 60 adults with serious mental illness who are homeless or at-risk of homelessness. The program provides comprehensive assessment, individualized client-centered service planning, psychiatric care, intensive case management, supported housing and linkages to all needed services and supports in order to assist participants to achieve their individualized goals, as well as to promote recovery and self-sufficiency, improve the ability to function independently in the community, reduce homelessness, reduce incarceration, and reduce hospitalization.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm

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Marin	Enterprise Resource Center Expansion	CSS - OESD	This Outreach and Engagement project involved expanding and enhancing Marin's consumer-operated Enterprise Resource Center by adding consumer positions and establishing a Wellness/Recovery Center in central Marin through enlarging and co-locating the Enterprise Resource Center with housing, employment and clinical services at the new Health & Human Services Health and Wellness Campus. Known for its low-barrier access and welcoming environment, the Enterprise Resource Center plays a key role in Marin's efforts to outreach to and engage with adults with serious mental illness in the county who are disenfranchised and reluctant to seek help and services. Managed and staffed entirely by mental health consumers, the center promotes a strengths-based, harm-reduction approach and offers participants a one-stop central location to access and receive services such as socialization activities, peer counseling, mentoring, psycho-educational activities, and support groups. The goals of the program are to promote recovery and self-sufficiency, improve the ability to function in the community, increase social supports and reduce isolation.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Southern Marin Service Site	CSS - OESD	A community-based, culturally competent, easily accessible mental health service site was opened in Southern Marin, an underserved area. Clients and families benefit from easy access to an array of mental health services including individual, family, and group counseling along with support groups, and medication monitoring for seriously mentally ill adults with serious mental illness and youth with serious emotional disturbance.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	ASOC (Adult System of Care) Development	CSS - OESD	This System Development expansion project was designed to expand and enhance supports and services available in Marin's system of care for adults with serious mental illness and their families by: 1) increasing peer specialist services on the Adult Case Management team; 2) providing outreach and engagement and support services to Hispanics/Latinos; 3) increasing Vietnamese outreach and engagement services; and 4) adding family outreach, engagement and support services to the ASOC at large. The goals of the project are to promote recovery and self-sufficiency, improve the ability to function in the community, reduce isolation, and provide low-barrier access which welcomes unserved clients of Vietnamese and Hispanic/Latino origin.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Client Choice and Hospital Prevention Program	INN	The purpose of this project is to learn how to create a recovery-oriented, community-based response to psychiatric crises. This Client Choice and Hospital Prevention Program project will provide alternatives to hospitalization, both voluntary and involuntary, while supporting clients, families and communities to increase resiliency. Additionally, it will promote orientation of perception of how the mental health system and community can best respond to, and help prevent psychiatric crises. Marin's Client Choice and Hospital Prevention Program project seeks to increase the quality of care and services by combining three distinct strategies: 1)community-based crisis services in a homelike environment 2) the integrated use of peer and professional staffing and 3) the use of an individualized crisis plan (Prevention & Early Intervention funding).	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Early Childhood Health Consultation	PEI	Provides training and support to staff of early childhood education sites to identify children whose behavior indicates social/emotional difficulties, develop a plan for meeting the child's needs, and to assist the family. Training is provided to strengthen staff skills in working with all children and voluntary screening is available to families for adult depression.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Triple P - Parenting Education and	PEI	A broad range of providers working with at-risk families have been trained in an evidence-based method for educating and supporting families with parenting challenges. Goal is to reduce adverse childhood	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Across Ages Mentoring	PEI	Establishes an evidence-based mentoring program for at-risk middle school students in Southern Marin that includes mentoring, community service, social competence training, and family activities. Goal is to increase resiliency and school performance.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Transition Age Youth Prevention & Early Intervention	PEI	Provides mental health education, screening, and assistance in collaboration with agencies serving transition age youth (16-25 years old). Services include behavioral health screening and brief intervention at teen clinics, psycho-education groups for at-risk TAY and parents of TAY, and Teen Screen at participating high schools.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Canal Community-Based Prevention & Early Intervention	PEI	This program provides mental health education, screening, and assistance in a community-based organization in the Canal District. These services helps to bridge the cultural and language barriers that contribute to this neighborhood being underserved for mental health needs.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Integrating Behavioral Health in Primary Care	PEI	Expands the behavioral health services available within primary health care settings for underserved populations using a Stepped Care Model. Services include behavioral health education, screening, and assistance that is coordinated with physical health care services.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm

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Marin	Older Adult PEI	PEI	This program provides behavioral health screening and brief intervention to older adults who are experiencing transitions or other risk factor. In addition, a wide-range of providers are trained to identify and refer at-risk older adults.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Crisis Planning	PEI	Provides crisis planning services for those at risk of a psychiatric crisis. This is a component of the Innovation program: Client Choice and Hospital Prevention.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Vietnamese Community Connection	PEI	Provide behavioral health education, services and linkages, as well as assess the needs of the Vietnamese community.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Mental Health Community Training	PEI	Mental Health First Aid, an evidence-based training to educate about mental health and substance use signs and symptoms, helping somebody access services, and reducing stigma, is being offered to community members and frontline workers.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Mental Health Community Coalitions	PEI	Primary prevention strategy for engaging a range of community stakeholders in identifying mental health concerns and community solutions.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Legal Assistance	PEI	Assistance for clients referred by PEI programs whose MH issues are exacerbated by legal issues.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Southern Marin Community Connection	PEI	Brief intervention for high-risk individuals and families in Southern Marin.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Training Coordinator	WET	The Training Coordinator performs a number of key functions in coordinating the delivery of training, consultations, internships, and other capacity-building efforts. This includes coordinating the WET Advisory Committee, the Consumer and Family Subcommittees, and communication among stakeholders.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Targeted Training in Evidence Based Practices that Support System Transformation	WET	Trainings are provided in evidence-based practices identified by stakeholders as necessary for system transformation toward a more client-centered and evidence-based system. These include Motivational Interviewing, Group Therapy, and Harm Reduction in Case Managing Dually Diagnosed Clients.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Clinical Practice Forums	WET	Ongoing learning groups have been instituted to support and expand the learning provided by WET trainings.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Peer Consultation Network	WET	In order to ensure sustainability of new learning, experts, mentors, or "champions" in selected WET training topic areas will be identified to provide consultation to peers throughout the county on an ongoing basis.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Consumer Focused Training	WET	Trainings are provided in areas identified by consumers as necessary to increase consumers capacity to advocate for consumers, qualify for employment within the mental health system, and participate in planning and policy within the system.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Family Focused Training	WET	Trainings are provided in areas identified by family members as necessary to increase families' capacity to support consumers, qualify for employment within the mental health system, and participate in planning and policy within the system.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	CIMH Mental Health Directors Leadership Institute Training	WET	Each year, one person from Marin attends the California Institute of Mental Health (CIMH) Leadership Training to strengthen leadership and manage system transformation in the public mental health system. The group of alumni meets quarterly with the Mental Health Director to implement the knowledge learned and work towards creating a culture of leadership in the Marin Mental Health System.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Intern Stipend System	WET	Stipends are provided for mental health practitioner interns in order to fill hard-to-fill positions and to increase the diversity and inclusion of consumers and families in the workforce. Intern stipend funds have been split between County Mental Health and Community Based Organizations.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Psychiatric Nurse Practitioner	WET	Stipends or loan forgiveness for psychiatric nurse practitioners (PNPs) are provided in order to increase the number of PNPs serving Marin County and the cultural diversity of the PNPs.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Scholarships and Loan Assistance in Support of Education Related to Public Mental Health	WET	Scholarships for consumers, family members and members of under-represented populations are provided when the educational program will result in possible entry to or advancement within the public mental health system.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm

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Marin	Fireside Apartments	Housing	Community Mental Health participated in the development of a complex of 50 units of affordable housing. The MHSA Housing Program will provide 5 units of supportive housing for older adults (62 years and older) who, at the time of assessment for housing services, receive or qualify for Full Service Partnership (FSP) services and are either homeless or at-risk of homelessness. These are individuals with serious mental illness who have been unserved or underserved by the mental health system. Many of them have a co-occurring substance use disorder, as well as a myriad of complex and often untreated physical health disorders. Occupancy will be limited to those whose income is 30% or less of the Area Median Income (AMI) for the Marin HUD Fair Market Rent, which corresponds to the level of support that individuals can expect to receive from Supplemental Security Income or from the State Supplemental Program.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Proposed remodel of existing mental health facility	CFTN	Funds will be used to remodel an existing mental health facility. Details have not yet been determined.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	ShareCare	CFTN	Practice Management: Install ShareCare to modernize and transform clinical and administrative systems.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Scanning	CFTN	Provide the technology and training to allow paper records to be scanned and included in EHRs.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	E-Prescribing	CFTN	Install RxNT to provide e-prescribing capacity to Marin.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Electronic Health Record Upgrade	CFTN	Install Clinician Gateway to modernize and transform clinical and administrative systems.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Marin	Consumer and Family Empowerment	CFTN	Provide computers, software, and computer education at the consumer resource center and for consumers who need increased computer access for duties associated with participation on CMHS committees.	http://www.co.marin.ca.us/depts/HH/main/mh/mhsa_faq.cfm
Mariposa	Adult Full Service Partnerships	CSS - FSP	Provides "whatever it takes" to help adult consumers who have been diagnosed with a severe mental illness. Consumers and staff enter into a Full Service Partnership which has recovery as a goal.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	Children's Full Service Partnerships	CSS - FSP	Provides "whatever it takes" to help youth and families. Consumers, family members, and staff enter into a Full Service Partnership which has recovery as a goal. The program focuses on trauma-exposed individuals, individuals experiencing onset of serious psychiatric illness, children and youth in stressed families, children and youth at risk for school failure, children and youth at risk of juvenile justice involvement.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	Multi-disciplinary Teams	CSS - OESD	Provides multi-disciplinary teams.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	CARE Unit	CSS - OESD	Provides in-home case management services and in-home therapy sessions.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	ROAD House Community Drop-In Center	CSS - OESD	"R.O.A.D." stands for Recovery, Opportunity, And Development. The drop-in center offers mental health consumers peer support and a variety of activities, field trips, classes, and computers with internet access. The center is located at 5119 Jones St (on the corner of Jones and 12th Street). Hours M-F, 8-5.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	Friendly Visitor Program for Seniors	CSS - OESD	Matches isolated seniors with volunteers who want to help. (This program has been moved to John C. Fremont Health Care District.)	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	Parenting Classes	PEI	Free classes use modern approaches (That are Child Welfare approved) to improve parenting skills, with several, two-hour classes that we plan to teach concurrently among three age groups: parents of teenagers, parents of 5-12 year olds and parents of 1-4 year olds.	http://www.mariposacounty.org/index.aspx?NID=858

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Mariposa	SMILE and Respect	PEI	Project Smile – Our Prevention and Early Intervention (PEI) program is called Project Smile, a 12 month program that works closely with the Mariposa County School District, recruiting mentors from two Mariposa County High Schools and protégés from 4 Mariposa County K-8 schools. Mentoring encourages resiliency in youth by fostering caring, respectful relationships and by providing opportunities for meaningful involvement among the protégés. Mentors are selected based on compatibility with protégés' relative interests and the ability to be a positive role models. Protégés are selected from parent and school staff referrals of students who are beginning to show behavioral problems. The goal is to assist youth who are in need of stabilization in a critical life area that are not served by other community agencies. The staff for Project Smile provides transportation within the program as well as group activities and peer mentoring. There are two programs, Girls Talk and Boys Rock, which are geared for youth in the fourth through sixth grades. The lead coordinator for Project Smile travels to the four area grade schools teaching socialization skills to students in conflict, as identified by the principal and school staff. The youth who attend Girls Talk and Boys Rock are not necessarily involved as protégés in Project Smile.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	Family Services Center - Capital Facilities	CFTN	A stand-alone building creates a one one-stop service center for families, while decreasing the stigma associated with traditional mental health services. Provides a home-like environment where services can be provided, separate from the Behavioral Health office. Possible services: wraparound services, family counseling and groups, supervised visitation services, child care center, etc.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	Technology Component	CFTN	Uses one-time Information Technology funds to increase the capacity of MCBHRS to provide outreach and services to the community. Funds applied to: expanding tele-psychiatry to North County (equipment and installation); developing a network of care (a comprehensive, internet-based community resource for people with mental illness, as well as their caregivers and service providers). In addition to a behavioral health "channel", Mariposa County has established "channels" for numerous other topic areas, all related to the field of human services and prevention activities. Reimburses the Department for this one-time set-up cost. In addition, funds to outfit the new Human Services Complex with the necessary equipment and connectivity to provide optimal services to the community.	http://www.mariposacounty.org/index.aspx?NID=858
Mariposa	Team Decision Making	INN	Consumer-drive approach applies team decision making meetings with the adult population to achieve a more integrated approach to service delivery and improve mental health care, independent living and self-sufficiency for the adult mental health consumers. Key assumptions are that a group can be more effective in decision making than an individual; families are the experts on themselves; when families are respected and included in the decision making process they are capable of identifying and participating in addressing their own needs; and members of the family's own community add value to the process by serving as natural allies and experts on the community resources. The consumer is the center of the decision-making, although family/friends may contribute to the discussion leading up to the ultimate decision. Model allows Mariposa to build a system that improves accessibility; promotes effective services; reduces out-of-home and institution care; and reduces stigma toward the consumers of these services.	http://www.mariposacounty.org/index.aspx?NID=858
Mendocino	Full Service Partnerships for Children, Youth, and Families	CSS - FSP	Children 0-5 receive full services. All children and families with Full Service Partnerships, including those already in place through the wraparound services program, have the opportunity to benefit from the Parent Partners Program, the Family Respite Service Program, and if appropriate, the Bicultural Therapy services provided through contracts with Nuestra Casa and Consolidated Tribal Health Project.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Full Service Partnerships for Transition Age Youth	CSS - FSP	Strategies proposed for the Transitional Age Youth System of Care (TSOC) Program are available to transition age youth with Full Service Partnerships. TAYs living in the Congregate Living Facility in Fort Bragg and TAYs in the non-MediCal FSP slots have access to flex funding and use the services provided through the Peer Mentoring Program, the Supported Education Program and the Resource Centers.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Full Service Partnerships for Adults	CSS - FSP	Provides access to additional services: work recovery coach program, resource centers, warm line, mobile crisis response, and client empowerment Coordination. Serves participants in North County wraparound services for homeless adults, the forensic mental health program, and the health clinic-based program, as well as clients with existing FSPs.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Full Service Partnerships for Older Adults	CSS - FSP	All older adults enrolled in OASOC will have Full Service Partnerships. (In the past, older adults enrolled in OASOC have received a variety of support but have been underserved in that they did not receive the full array of needed supports.)	http://www.co.mendocino.ca.us/hhsa/mhsa.htm

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Mendocino	Bilingual and Bicultural Outreach and Engagement	CSS - OESD	Through a contract with Round Valley Tribal Health, four events promote mental wellness among tribal elders in this remote region of Mendocino County. Nuestra Casa, a community-based organization serving the Latino population, provides outreach and engagement services to assist isolated Latino seniors. Consolidated Tribal Health Project conducts outreach and engagement services to the Native American community.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Senior Peer Counseling	CSS - OESD	Provides training by qualified staff and a private geriatric specialist to individuals who make weekly visits to over 20 OASOC clients. The program has successfully improved the mental health status of many frail, home-bound older adults by the outreach of the peer counselors.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Recovery Coach Program - Community Action for Recovery and Empowerment (C.A.R.E.)	CSS - OESD	Conducts outreach to homeless and other chronically mentally ill individuals and provides peer support.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Resource Centers - (C.A.R.E.)	CSS - OESD	Establishes resource centers in up to 3 communities, with outreach services in outlying communities.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Warm Line - (C.A.R.E.)	CSS - OESD	A consumer-staff alternative to the existing HELP line provides support to prevent hospitalizations and other intensive interventions.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Mobile Crisis - (C.A.R.E.)	CSS - OESD	Partners trained peer support counselors with Ukiah Police Department officers to respond to mental health crisis calls.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Client Empowerment Coordination - (C.A.R.E.)	CSS - OESD	.5 FTE client empowerment position ensures continuous client input in the development of the recovery vision for Mendocino County Mental Health and all MHSA programs and strategies.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Mental Health Screening, Assessment & Treatment - MHSA Children and Family System of Care (CFSOC)	CSS - OESD	Provides 2.00 FTE clinicians, flexible funding for outreach and engagement of potential Full Service Partnership/SB 163 families.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Family Respite Program (CFSOC)	CSS - OESD	Funds 1.00 FTE senior program specialist.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Bilingual/Bicultural Therapy for Latino Children and Families (CFSOC)	CSS - OESD	Provides bilingual/bi-cultural therapy for Latino children and families.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Parent Partner Rural Area Expansion (CFSOC)	CSS - OESD	Funds 1.00 FTE social worker assistant and parent partner contracts.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Bicultural Therapy for American Indian Children (CFSOC)	CSS - OESD	Provides bi-cultural therapy for American Indian children.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Family Based Support for Rural Communities (CFSOC)	CSS - OESD	Predominately serves children under the age of 16.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Workforce Education and Training Staffing	WET	Provides WET coordinator development and implementation of the recruitment plan for the WET clerical support.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Workforce Education and Training Staffing Workgroup and Subcommittees	WET	Work group of community stakeholders and parties interested in mental health workforce development identified training priorities and three subcommittees to carry out the each of the actions of the WET component plan: • Training for co-occurring disorders • Scholarship and loan assistance • Electronic resources	http://www.co.mendocino.ca.us/hhsa/mhsa.htm

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Mendocino	Scholarships and Loan Assistance in Support of Education Related to Public Mental Health Services	WET	Funds scholarships and loan assistance to those willing to commit to working with the public mental health system. Funded coursework must be applicable to a certificate or degree related to the mental health field (e.g. human services, counseling, social work, psychology, etc.) Provides financial assistance to at least 5 students per year.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Education, Destigmatization, and Peer Support	PEI	Interactive education modules provide information about mental health issues common to all age groups, including signs and symptoms, red flags and intervention and treatment options. Designs interactive modules to make them replicable across the county and usable with a variety of audiences including the spectrum of age groups, the American Indian and Latino populations of our county, the medical community, the education community, law enforcement, mental health providers, public health nurses, social workers, paraprofessionals, parents, and others. Peer support project establishes support groups as needs surface through the educational sessions and links participants in the interactive education modules to any existing peer support groups as appropriate. Focuses on ongoing de-stigmatization of mental illness through supportive peers, along with encouragement and guidance to seek and accept treatment or other services that would contribute to emotional well-being. Provides trainer training on organizing and facilitating the interactive education modules, providing peer support, facilitating peer support groups.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Early Onset, Early Intervention: TAY	PEI	This implementation strategy uses “best practice” screening instrument to be used by care providers, school counselors, doctors and other service providers to identify prodromal symptoms and mental illness and suicide risk. Facilitates earlier referrals to the Mental Health from schools, community health centers, physicians, private therapists, organizational providers and parents.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Prevention: Older Adults	PEI	Revised implementation strategy includes a proposal to contract out all services including clinical supervision and program coordination and administration.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Prevention Collaboration: Children and Youth Age 0-17	PEI	Provides school-based screening, education and prevention services and community-based family support and education services in the catchment areas of two school districts with high concentrations of American Indian and Latino students.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Capital Facilities and Technology	CFTN	Capital Facilities and Information Technology component is in the pre-planning stage.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Mendocino	Innovation	INN	The Innovation component is the pre-planning stage.	http://www.co.mendocino.ca.us/hhsa/mhsa.htm
Merced	Wraparound, Empowerment, Compassion and Needs (WeCan) - Youth/TAY Full Service Partnership	CSS - FSP	The WeCan program is a WRAP program which was and is able to provide services to children and families outside of the "office" environment. Services are delivered in the clients' home, school, and community, thereby reducing stigma of coming to a facility and reaching many of the unserved and underserved population by reducing obstacles such as transportation, service location, standard "office hours" etc. WeCan provides services to family when and where services are needed anywhere in Merced County based on the client's own involvement and reports. Culturally and ethnically the WeCan program is made up of male and female English, Spanish, and Hmong speaking staff in order to address these threshold languages within Merced County. Services are also available in other languages through the use of interpreters and or Language Line when needed. The WeCan program collaborates with other Merced Community partners and attends to the Cultural Competency Oversight Committee to stay in touch with disparities and how to further overcome them. -	http://www.co.merced.ca.us/index.aspx?NID=486

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Merced	Community Assistance Recovery Enterprise (CARE) - Adult and Older Adult Full Service Partnership	CSS - FSP	CARE implements a 24 hours a day/ 7 days a week intensive case management approach. The multidisciplinary team comprised of case worker, clinicians, substance abuse specialist, housing and employment specialist, nurses, and psychiatrists to assist members with their psychiatric disabilities. The approach emphasis on integrated/wraparound service that follows an ACT (Assertive Community Treatment) model). Each case manager carries a caseload of 10 clients with primary goals of reducing hospitalization, reducing incarceration, reducing homelessness and institutionalization and increasing community integration. The program assists members with full service partners in different domains of their lives. These areas include education, family reunification, transitions into lower levels of care, life skills, drug and alcohol support, supplying for SSI, general assistance, spiritual support, legal affairs, access to primary health care are so on. CARE participates in the TAY Subcommittee and has ongoing meetings with TAY clinicians and other TAY providers to identify referrals. In addition CARE works with Spanish speaking clinicians to target individuals that may meet criteria for services.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Older Adult System of Care (OASOC)	CSS - OESD	The Older Adult System of Care focuses on individuals age 60 and over that are unserved, underserved, homeless, or at risk of homelessness, institutionalization or hospitalization. A primary focus of the OASOC is upon the Hispanic population with bilingual (Spanish-English) services provided. Services are provided at all clinic sites by dedicated staff as well as outreach and coordination with the community services, such as primary care, adult peer-support and education. Outreach and engagement services are provided to the home bound seniors and there is continued partnership with Meals on Wheels program to identify, assess and treat unserved seniors in their homes. OASOC continues to participate in the county-wide multidisciplinary team which includes Adult Protective Services, Mercy Medical Center, Public Health and other service providers.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Southeast Asian Community Advocacy	CSS - OESD	Southeast Asian Community Advocacy (SEACAP) - Outreach to underserved Southeast Asian population, linking them to unstructured support groups to increase participation, continuing necessary services with evaluation through assessment and completing plan of care that includes linkages to medication services and more intensive therapy. These individuals would not have participated with treatment without outreach efforts, transportation or introduction to mental health such as peer support groups. SEACAP contract is to provide services to 125 adults and 25 youths /TAY for 1 year period. Services are to target mainly Southeast Asian providing ethnic specific strategy. The array of services includes but is not limited to: 1) individual and group therapy; 2) Case management services; 3) Cultural consultation; 4) Outreach; 5) Rehab services; 6) Collateral.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	The Merced Wellness Center (WC)	CSS - OESD	The Merced Wellness Center (WC) continues in its commitment to reaching out to and serving all severely mentally ill consumers of Merced County in a culturally competent manner. In FY - 09-10 the WC has provided Consumer driven services that include, but are not limited to: Housing, Vocational, Socialization, Educational Assistance as well as a focus on social relationships and community integration activities. There is an active Consumer Advisory Committee (CAC) that meets on a weekly basis.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Westside Wellness Center	CSS - OESD	Component of the Los Banos outpatient mental health treatment program. The aim of the program is to serve mentally ill adults of Los Banos and the surrounding area including Santa Nella, Gustine, and Dos Palos. While the Westside Transitional Center is still evolving in its practical and philosophical direction, it is guided by the Recovery Principles as espoused by the MHA Village of Long Beach. Consistent with the Village Recovery Model is the notion that people coming in to the Westside Transitional Center will be offered an integrated program of services aimed at helping them improve their quality of life. This starts with providing a safe, supportive setting for consumers of the program to begin working on their personalized plan of recovery. Staff will ultimately assist consumers in establishing a greater sense of hope and empowerment in their lives. Hopeful and empowered consumers are more inclined to take reasonable risks in challenging themselves and have a greater sense of self-determination with regard to the future.	http://www.co.merced.ca.us/index.aspx?NID=486

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Merced	Community United by Empowerment (CUBE)	CSS - OESD	The CUBE is intended to build upon and operationalize the concepts of the MHSA. The performance of the CUBE has implemented the five essential principles inherent in the MHSA. The CUBE is fully youth-driven, sustains a wellness focus of recovery and resilience, partners with the community, welcomes and employs cultural competence activities and approaches, and has integrated services as demonstrated by the number of community partners embedded in the program. The CUBE's primary target population is TAY - youth between the ages of 16 and 25 who have emancipated, or will soon be emancipating, from Child Welfare dependency.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Community Outreach Program Engagement and Education (COPE)	CSS - OESD	COPE provides outreach to engage the unserved and/or racially disparate populations throughout Merced County. Priority populations to be served include children, youth (TAY), adults and older adults. The continued aim of COPE is on developing and maintaining a collaborative system that relies on community based organizations to engage individuals in racially and ethnically diverse communities. These individuals may not seek services at traditional MH sites. The emphasis of outreach is to engage homeless individuals, Hispanic, Southeast Asian populations as well as the Gay, Lesbian, Bisexual and Transgender communities. The intent is to identify children and youth who are seriously emotionally disturbed and adults with severe mental illness. Additional priority populations served are: Hispanic and SEA incarcerated youth, wards of the court and inmates released from jail who have mental illness and/or co-occurring disorders.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Adult Mental Health Court	CSS	The Adult Mental Health Court program is a problem solving court and release program that combines judicial supervision with community mental health treatment and other support services in order to reduce criminal activity and improve the quality of life of participants.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Workforce Education and Training Coordination	WET	Provides oversight and supervision to Merced County Mental Health Department MHSA education and training component as outlined in the State approved plan. Responsible for development and maintenance of all related activities ensuring contract compliance with the MHSA.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Training and Technical Assistance	WET	Provides Spanish language training; staff development training; e-Learning;	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Psychosocial Rehabilitation Certification Program	WET	Partners with Merced College to deliver CA Association of Social Rehabilitation Agencies (CASRA) curriculum. Participants include consumers, family members, county staff and community members.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Stipends and/or Scholarships and Grants	WET	Contracts with California State University, Stanislaus for educational stipends for first year and second year students pursuing a master's in social work. Students were placed throughout the Wellness Centers.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Clinical Social Worker/Marriage and Family Therapist Internship Program	WET	Partners with Dr. Juan Garcia from Fresno State to provide clinical supervision to our social workers and MFT interns, including individual supervision upon request. There are 8 participants in this program.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Caring Kids	PEI	Provides intervention services to promote the optimal social and emotional development of children ages 0-5 throughout Merced County. Provides parents, child-care providers, and teachers with the assistance needed to nurture and give positive social and emotional support to children, and to prepare preschool-aged children for the social demands of kindergarten.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Second Steps/iMatter1	PEI	Second Steps/iMatter 1 Program is a collaborative program between Merced County Office of Education and Sierra Vista Child & Family Services. iMatter 1 is a school based social skills program for school aged children that teaches social emotional skills aimed at reducing impulsive and aggressive behaviors, while increasing social competence aimed at skill development. Children are taught to identify and understand their own emotions as well as others around them. The students will learn to reduce impulsiveness, choose positive goals, manage their emotional reactions and decision making process when emotionally aroused. iMatter 1 provides social skills groups, whole classroom instruction, school staff consultation, parent training and staff training to the schools in Merced County. Services are provided in English, Spanish and Hmong at this time.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Middle School Mentoring	PEI	The Middle School Mentoring Program is an expanded State funded alcohol and drug prevention program for middle school children. The program works towards alcohol and drug prevention through a peer mentoring model, pairing trained high school leaders with at-risk eighth graders. Core curriculum activities include education about the ill effects of alcohol and drugs.	http://www.co.merced.ca.us/index.aspx?NID=486

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Merced	Transition to Independence (TIP)	PEI	Engage youth and young adults in their own futures planning process, provide them with developmentally-appropriate services and supports, and involve them and their families and other informal key players in a process that prepares and facilitates them in their movement toward greater self-sufficiency and successful achievement of their goals related to each of the transition domains -- employment, career-building education, living situation, personal-effectiveness and quality of life, and community-life functioning. The TIP system is operationalized through seven guidelines and their associated elements that drive the practice level activities and provide a framework for the program and community system to support these functions.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Los Banos Unified School District	PEI	School-based program that provides comprehensive mental health services; facilitates ongoing therapy for individual students in the school; group therapy based on the specific needs of students at multiple campuses; links students, parents, staff, and community partners with mental health programs and services.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Golden Valley Health Center Westside Integrated Primary Care	PEI	Integrates mental health and primary care. Bicultural, bilingual clinician sees patients who have never accessed and would not likely access traditional mental health settings. Relatively low stigma of primary care setting and high level of integration of behavioral health services in clinics. Patients frequently self refer because of joint waiting room and mental health pamphlets in the waiting room.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Golden Valley Health Center/Cultural Brokers - Hispanic Community	PEI	Provides prevention services (stress management) to students at Central Valley Opportunity Center. GVHC participated in community events such as "Celebration of Fatherhood" and Rock d Block" to provide early intervention services to help reduce cultural and ethnic inequalities in the community. Joined with Merced's Family Resource Council to partner with other community agencies to help the needy in all areas of Merced.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Merced Lao Family/Integrated Primary Care - Hmong Community	PEI	Outreaches to the unserved and underserved Southeast Asian adult population. Provides assessment or screening through PHQ-9. Clients who present mild mental health symptoms have the opportunity to receive brief counseling to reduce their symptoms.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Merced Lao Family/Cultural Brokers - Hmong Community	PEI	Provides outreach to the unserved and underserved Southeast Asian adult population so that they become more aware of and are more comfortable accessing mental health services. Delivers educational television segments on our Hmong television program. Continues to engage consumers in the community through community events to support mental health awareness.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	PEARLS Program/Human Service Agency	PEI	Provides outreach and prevention and early intervention services for homebound older adults (60+ years) at risk for depression or suicide. Uses Program to Encourage Active and Rewarding Lives (PEARLS) model. Increases knowledge of signs/symptoms of depression and suicide risk for those who live/work with older adults.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Veterans	PEI	The Veterans Office provides services to veterans of United States military services, their spouses, dependents, and/or survivors, to assist them in the prevention or treatment of mental health or substance abuse problems. Staff consults with veterans during scheduled appointments or walk-ins and identifies mental health issues or substance abuse problems. The office provides outreach to community veterans, service providers, veteran service organizations, or other outside agencies on benefits and mental health services.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Electronic Health Records (Technology)	CFTN	EHRs enable MCDMH and contract providers to offer mental health services to consumers and family members in a more cost-effective, efficient, and accountable manner while fulfilling state and federal mandates and to accomplishing MHSA goals of modernization and consumer and family member empowerment.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Expansion and Improvement of Telemedicine (Technology)	CFTN	Expands access to psychiatric services for County residents who live in rural or outlying communities, overcoming transportation-related access barriers and a shortage of qualified psychiatric staff in the County and region. Telemedicine, particularly technology that permits video teleconferencing between providers and consumers/family members, or between multiple providers, is an acceptable alternative when face-to-face communication is not possible. Expansion and improvement of the County’s telemedicine technology will significantly improve audio and visual quality of MCDMH telemedicine services and transmission speed.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Development and Implementation of a Virtual Office System	CFTN	Improves and modernizes consumer services by enabling mental health workers, operating in the field, to utilize laptop computers and the internet. Incorporates field services into MCDMH’s Integrated Information Systems Infrastructure plan.	http://www.co.merced.ca.us/index.aspx?NID=486

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Merced	Purchase a 5-acre lot and building at corner of B and Childs (Church lot) (Capital Facilities)	CFTN	Provides a single contiguous home from which to develop our future vision. Overcomes disconnection between MCDMH administration, programs and participant and current lack of permanent County-owned land and facilities dedicated to MHSA-related activities.	http://www.co.merced.ca.us/index.aspx?NID=486
Merced	Juvenile Behavioral Court	INN	The Merced County Juvenile Behavioral Health Court is a court-supervised program for minors diagnosed primarily with an Axis I mental illness and who are wards of the Juvenile Delinquency Court.	
Merced	Strengthening Families Project	INN	Recruits family and community partners to focus on the developmental milestones of life transitions in diverse and non-traditional settings. Strengthens families and builds on existing resiliency. Decreases risk factors and enhances nurturing and attachment; knowledge of parenting and/or child, youth and adolescent development; parental resilience; social connections; concrete supports for parents.	http://www.co.merced.ca.us/index.aspx?NID=486
Modoc	System Transformation - Full Service Partnership	CSS - FSP and CSS - OESD	Serves County residents 0-60+. Includes funding for client, family member and caregiver support, personnel, mental health clinician for crisis component, mental health services specialist for partnership with wraparound, mental health clinician coordinator for child/youth team, case managers/outreach for child/youth team, registered nurse/nurse practitioner for child/youth and adult/older adult team, case manager/mental health specialist for adult/older adult team, peer support position, and clerical support.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Modoc	Workforce Education and Training Project Support	WET	Provides staff support to implement and coordinate all actions funded by the Workforce Education and Training plan. Supports consumer and family member transitions to employment; strengthens the mental health workforce by strengthening recruitment efforts for all job levels for Modoc County Mental Health and partner agencies. Recruits for career pathways programs with a special focus on cultural and linguistic diversity.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Modoc	Collaborative Partnership Training and Technical Assistance	WET	Provides consultant and training resources to improve the capacity of Modoc County Mental Health staff, consumer and family member partners, and partner agencies to better deliver services. Expands capacity to provide services that support wellness, recovery and resilience; that are culturally and linguistically competent; that are client-driven and family-driven; that provide an integrated service experience for clients and their family members, and that are delivered in a collaborative process with our partners.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Modoc	Career Pathways	WET	Designs recruitment and training/educational programs that will engage and prepare individuals for a career in public mental health. Priority given to those with consumer/family member experience, Hispanic or Native American candidates, Spanish linguistic competence, and current employees of Modoc County Health Services.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Modoc	Financial Incentive Programs	WET	Funds educational stipends for up to two individuals seeking psychiatric nurse practitioner or graduate level social work education and licensing.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-
Modoc	Community Asset Building	PEI	Supports a community-wide prevention effort, using the Search Institute's 40 Developmental Assets, that focuses the widest deployment of community resources to build assets for children, youth and their families. The Prevention Collaborative has initiated and supported parenting education, youth development activities, including after-school programs, sports programs, health-based prevention education programs, and peer leadership programs.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Modoc	Primary Intervention Program	PEI	Supplements our broad community asset-building efforts, providing early intervention to children with early indications of trauma, school difficulties and family problems. The program covers children in grades K-6 in three school sites.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Modoc	Strengthening Families Program	PEI	Provides early intervention and support for adolescents and their parents through the Strengthening Families Program, a SAMHSA Model Program. Although the program is open to the community at large, special outreach is made to families involved in the juvenile justice system the Child Protective Services system.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Modoc	Taking Integration Personally Innovation Plan	INN	The Taking Integration Personally Innovation Plan relied on an Integration Team made up of mental health staff, consumers, family members and other stakeholders to design and implement the integration of Mental Health and Alcohol and Drug Services into Behavioral Health, and to design systems to improve collaboration with primary care.	http://hs.co.modoc.ca.us./recent-announcements/mhsaannualupdatefy2013-20014
Mono	Supported and Transitional Housing	CSS - OESD	Provides help with locating and/or securing affordable housing as needed and when possible.	http://www.monohealth.com/mental/mh.html

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Mono	Socialization and Wellness Centers	CSS - OESD	Three socialization and wellness centers spread throughout Mono County; (north, Mammoth Lakes, southeast region) serves transition age youth, adults and older adults. Allow for one-stop-shopping, meeting many of consumers' health, social service, mental health, case management, educational and social needs. Centers support improvements in employment, vocational training, education, social and community activities. Provides a network of social relationships, timely access to needed help, including during crisis, reduction in involuntary services and a reduction in out-of-home placements.	http://www.monohealth.com/mental/mh.html
Mono	MHSA Workforce Education and Training Coordination	WET	Funds clinical staff and support staff to coordinate the planning and development of the Workforce Education and Training component (WETC). Enables Mono County to effectively outreach to our diverse communities, coordinate a stakeholder input process, consolidate information, and craft a meaningful plan taking Mono County's specific needs into account.	http://www.monohealth.com/mental/mh.html
Mono	Ongoing Employment and Educational Staff Support	WET	Provides employment and educational supports to consumer and family members, including those from diverse communities. Focuses on essential skill sets and supports to promote success in employment. Emphasizes supporting consumer and consumer family member employees, promoting recovery, wellness and resilience, but this additional help is also available to all public mental health employees. Hires consumers into full-time paid and benefited County positions. Assists consumer employees to succeed on a day-to-day basis in the workplace. Reinforces and supports Mono County's commitment to retention of consumers and family members who enter the workforce. Prepares consumers and family members for successful employment in the public mental health system.	http://www.monohealth.com/mental/mh.html
Mono	Training and Technical Assistance to Implement Full Service Partnerships	WET	Provides training in a variety of skill sets necessary to address adapting the existing workforce to eventually match a transformed mental health system. Uses model that we have used successfully at our wellness centers, offering classes and activities are open to the general public as well as to our consumers. Helps to destigmatize mental illness while promoting recovery, wellness and resiliency.	http://www.monohealth.com/mental/mh.html
Mono	Student Loan Repayment Program for Professional Staff	WET	Links financial incentives to workforce development. The County makes student loan payments directly to the lending institution of eligible employees. Requires that the student loan was for the purpose of obtaining a degree that would make them license-eligible for work in the County's mental health service system.	http://www.monohealth.com/mental/mh.html
Mono	Tuition reimbursement of paraprofessional staff	WET	Expands existing program to include paraprofessional staff. Begins a local incentive program to encourage and support existing staff, consumers, and family members in seeking career development and advancement. Incumbents employed in a paraprofessional staff position at Mono County Mental Health, are eligible for Mono County Mental Health to pay for tuition and books for agreed-upon programs to further their education in the mental health field.	http://www.monohealth.com/mental/mh.html
Mono	Student Mental Health; Suicide Prevention; Stigma Reduction	PEI	Provide Prevention and Early Intervention in Mono County Schools regarding student mental health, healthy choices, and anti-bullying. Provides Crisis support and stabiliaztion for all county residents. Provides stigma reduction in each community with stakeholder influence.	http://www.monohealth.com/mental/mh.html
Mono	Peapod (Parenting) Program	INN	Provides two new parent support groups in Mammoth Lakes; one serves Spanish-speaking mothers. Provides a new parent support group in the Benton/Chalfant area of Mono County (southeast region) and similar support in the north end of the County. Peapod program focuses on new parents with funds to support mental health care. Curriculum is designed to de-stigmatize recognition of the early signs of mental health problems/issues and to encourage and normalize seeking assistance. Pilots a variety of strategies to see which is most effective at encouraging utilization of mental health services for different ethnic populations. The three populations we will focus mirror our county demographics and include Caucasian, Hispanic and Native American.	http://www.monohealth.com/mental/mh.html
Monterey	Family Preservation	CSS - OESD	Provides home partner services to youth at risk of being removed from their homes.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Crisis Intervention	CSS	Expansion of Crisis Intervention Training for Law Enforcement, Dispatch, ambulance, fire First Responders; On-Call Mental Health Consultation.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en

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Monterey	Workforce Support & Counseling	CSS	This program provides services to people with disabilities such as information and referral, housing assistance, individual advocacy, peer support, personal assistance services, independent living skills training, systems advocacy, assistive technology support (devices to help people with disabilities live independently) and benefits counseling.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Family Reunification Partnership	CSS - FSP	Provides intensive therapy and case management services for children in the foster care system.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Integrated Co-Occurring Treatment	CSS - FSP	Provides integrated treatment for youth with co-occurring mental illness and alcohol or other drug abuse.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	School Evidence-Based Practices	CSS - OESD	Provides counseling services at four pilot elementary school sites in Gonzales, Greenfield, King City, and Salinas.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Adoption Preservation	CSS - FSP and PEI	Provides parent training, mental health treatment and case management for adoptive families.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Early Childhood (0-5 yrs)	CSS - OESD	Provides counseling services for children in childcare and Head Start programs; mental health consultation and training to teachers, home visitation staff and other community partners.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Juvenile Justice: Mental Health Court	CSS - FSP	Community Action Linking Adolescents program provides mental health services and case management for youth in the juvenile justice system.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Supportive Housing	CSS - FSP	Provides supportive housing and case management services for youth exiting the Youth Center and/or who are served by the Behavioral Health Juvenile Justice Team.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Transition to Independence Process - Avanza	CSS - FSP	Provides comprehensive case management using an evidence-based model of treatment for Transition Age Youth.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Co-Occurring Integrated Care	CSS - OESD	Expands an existing dual recovery program.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Homeless Services and Supportive Housing	CSS - FSP	Expands existing McHome program serving the homeless mentally ill. Includes outreach and engagement, case management, and supportive housing services at Lupine Gardens.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Mental Health Court	CSS - FSP	Expands existing Creating New Choices program, providing mental health services and case management in collaboration with the Probation Department, District Attorney, Public Defender and the Court.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	HIV/AIDS Community Partnership	CSS - OESD	Provides mental Health services for persons with HIV or at high risk of HIV infection.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Integrated Care	CSS - FSP	Co-locates and coordinates mental health services with existing multi-disciplinary teams.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Supportive Housing	CSS - FSP	Provides 24-hour residential care and supervision for older adults with a serious mental illness.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Access	CSS - OESD	Addresses the barriers to accessing mental health services, especially for those who have been unserved or underserved.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en

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Monterey	Depression/Anxiety Screening Days	PEI	Addresses cultural and language barriers to accessing mental health services for individuals with unidentified or undiagnosed depression or anxiety disorders. BH staff collaborate with community based organizations, health care centers, and social service agencies to provide screening events as a vehicle to increase awareness about depression and anxiety, identify preventative and early intervention needs, perform diagnostic screening interviews and facilitate connection with service providers.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Early Intervention (0-5) Secure Families	PEI	The Secure Families/Familias Seguras program has, as its core value, the provision of culturally and linguistically appropriate behavioral health services geared toward providing children ages 0-5 and the family with the necessary resources required to support positive physical, emotional and cognitive development. Services include: Dyadic Therapy (parent/caregiver and child); Mental Health Consultation; Developmental and Social-Emotional Screenings. Services are provided in conjunction with Family Resource Centers	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	0-8 Mental Health Screening	PEI	Ensures that children 0-8 will have access to developmental screening and appropriate referral for services. This program extends the services provided by the Early Intervention program Secure Families to children through age 8 who are in need of screening, assessment and preventive/early intervention services.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	System Navigators	PEI	Improves access to mental health care, makes access more comprehensive and culturally sensitive, and facilitates more timely entry to care. Navigators are knowledgeable about treatment options, screening and assessment tools, individual education plans and other information to guide individuals who seek access to services. Navigators assess and assist clients in accessing screening service, inform of service options, advocate for the client, and follow up to ensure service access.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	African American Partnership: The Village Project	PEI	Provides professional development services, thereby increasing the availability of culturally competent services for the African American community. Partnership's work includes cultural competency development and systematic outreach activities. The Village Project also provides individual and family counseling, parenting groups and other prevention services.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Latino Community Partnership: Promotores	PEI	Health promoters or "Promotores de Salud" provide the Latino community with knowledge and skills about mental health services and access. The knowledge component focuses on health topics and behaviors that have been identified as relevant by Latino immigrants. The skills component focuses on skills necessary to carry out the outreach activities such as communication skills, problem solving and resource collaboration.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Multilingual Parenting Services - Parent Education Partnership	PEI	A lead agency works in collaboration with school districts and family resource centers to provide parenting skills development in an eight to ten week series, utilizing the Positive Parenting Program curriculum. Program increases parent awareness of mental health issues and community resources, providing culturally and linguistically appropriate parent education.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	LGBTQ Outreach and Counseling	PEI	Provides mental health outreach to LGBTQ individuals. Services are client engagement, early intervention and improvement in personal functioning through culturally competent mental health counseling services.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=e
Monterey	School Based Counseling	PEI	Using evidence-based practices, provides early intervention addressing the mental health needs of elementary school aged children and a prevention education for parents and school faculty. The program places mental health professionals in two elementary school sites where they offer immediate services in schools which have been identified as having the greatest need.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Peer to Peer Counseling	PEI	Provides adults with a structured form of mutual support in a setting of agreed confidentiality, allowing consumers a safe environment. Support groups are consumer driven with consumer leadership opportunities. Minimal guidance by a mental health clinician/advisor is available as needed. Offered on a weekly basis in non-traditional settings, this program promotes wellness and recovery, provides emotional support, and prevents psychiatric decompensation.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Family Support Groups	PEI	Offers support groups to families of individuals with mental illness so that they can be part of a stable community of persons living with similar problems and concerns. Groups enhance families' understanding of the signs and symptoms of mental illness. Offered in English and Spanish. Benefits of participation include making connections, improving coping skills, getting motivated and finding hope.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en

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Monterey	Adult Wellness Center (OMNI Resource Center)	PEI	The OMNI Resource Center is a FREE, peer and family member run mental health wellness center. The OMNI Resource Center (OMNI) offers innovative healing, leadership and supportive programs in a welcoming and inclusive environment that promotes personal connection and mutual support in order to increase the overall mental health of participants. There is no referral process and all services are completely free and voluntary. All staff and volunteers have personal experience with mental health issues and recovery and believe recovery is possible for everyone. OMNI's goal is to improve the quality of life and self-esteem of individuals with mental health or emotional issues by increasing the overall mental health of individuals and the community. OMNI serves all adults who are seeking peer support, personal empowerment, resource referral, advocacy and social activities on their journey towards mental health wellness and recovery. OMNI also offers skills training and tools to those who would like to become leaders and take an active role in the wellness and recovery movement. Center participants are given the opportunity to design and run OMNI programs, which reflect the suggestions, interests and talents of	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Senior Peer Counseling	PEI	Volunteers support their peers in meeting he challenges of aging, (e.g., dealing with depression, grief, loss, isolation and other stressors). Senior peer counselors go through an intensive training program and are supervised by professionals. The program also serves as a link for participants to access a variety of other support groups and services in the community. Expansion has enhanced efforts to reach Latino seniors in the Salinas Valley region.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	2-1-1 Program	PEI	The 2-1-1- system performs similarly that successfully operates in other California counties and reaches approximately 65% of the population nationwide. The system provides services in over 100 languages to residents of all age groups and race/ethnicities. Screening and referral of calls improves responsiveness of mental health crisis services, by diverting non mental health information calls to more relevant agencies. The 2-1-1 in Monterey County also operates a website.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Child Advocate Program/Probation	PEI	This program is a collaborative of 13 community partners. It provides community-based prevention and intervention services to families with children under the age of five who have witnessed or been subjected to domestic violence. Services include: home visits, social and emotional development screening, information and referrals to community services and emergency assistance.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	School Based Domestic Violence Counseling	PEI	Services are provided by licensed clinicians or qualified interns for schools for children who have witnessed violence or other traumatic events. Counselors provide individual and group therapy, utilizing various evidence based practice theories such as expressive arts, and make referrals to other resources.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Critical Incident Debriefing	PEI	This program provides individuals who have been traumatized by witnessing violence or a traumatic incident with needed professional assistance. Debriefings are conducted on or near the site of a violent or traumatic incident, usually within a 24 to 72 hour period.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Suicide Prevention	PEI	The expansion of the Suicide Prevention Line has increased the capacity for a 24-hour toll free multi-lingual suicide crisis line that ensures services are accessible to all residents at-risk of suicide. Services include: crisis intervention, information and referral, support group information and collaboration with community service agencies.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Alcohol & Drugs Early Intervention Services	PEI	This program provides mental health services for trauma-exposed parents in substance abuse treatment and their children, who are experiencing trauma-related mental health needs due to having parents with an addictive disorder. Individuals needing assessment services are referred by the Criminal Justice System to partner agencies for treatment or rehabilitation services.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Mental Health Services for the Archer Child Advocacy Center	PEI	This program serves as an early intervention effort to mitigate the long term effects of child abuse. This program provides mental health assessments, referral and brief therapy to children who have been sexually assaulted, and also provides crisis support to the child's family. Providing brief therapy at an early stage, immediately following the exposure to abuse and trauma, helps reduce the development of severe emotional disturbance or serious mental illness.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Pathways to Safety	PEI	This program has increased capacity and service availability for children who have been reported to Child Protective Services without substantiated abuse findings. Collaboration with community based agencies provides linking families to services and resources, case management support, assessment, and strengthening family functioning skills.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en

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Monterey	AVANZA	PEI	This program nurtures and empowers youth and young adults by providing comprehensive case management and assistance with employment, education, independent living skills, and personal functioning. The program connects Transition Age Youth (TAY) with community resources, jobs and educational opportunities. Collaborative partners are: TAY, organizations serving youth, juvenile probation, education, and social services.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Youth Diversion	PEI	This program is a partnership between law enforcement, schools and Behavioral Health to intervene in the early incidence of juvenile delinquency. The program serves youth at risk of school failure and/or juvenile justice system involvement by providing assessment of the emotional and mental health needs of youth, counseling and referrals to community resources.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Mental Health Services at Silver Star Resource Center	PEI	The program serves as a prevention effort to reduce the incidence of youth involvement in the juvenile justice system by providing mental health assessments, therapy and referrals to other resources in the community.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Workforce Staffing Support	WET	Workforce Education and Training Coordination: Each county is required to have an Education and Training Coordinator. The Coordinator administers and evaluates all of the programs in the WET Component. A full-time family member/office assistant continues to provide support and outreach for all programs. Workforce Development Specialist: This position promotes successful employment of clients/family members in the public mental health system. Duties include recruitment, training, and job coaching. Workforce Incentive Counseling Activities: This position aids clients/family members with assessing potential eligibility for work incentives programs, benefit analysis, counseling, and provides independent living skills training.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Training and Technical Assistance	WET	Staff Development and Support Training**:** Training is provided on evidenced-based models to offer more effective treatment options, promote wellness, recovery, and resiliency to support a recovery-based transformation, professional staff development, new staff orientation, licensure preparation, service integration trainings, and holistic healing seminars. Integrating cultural competence and increasing linguistic competency: Training develops skills, understanding, and strategies for increasing and integrating cultural and linguistic competency. Client and Family Member Training: The WET Coordinator collaborates with Working Well Together, NAMI, Supported Employment and Education, and the Recovery Task Force to determine which training needs will support client and family members' ability to work or volunteer in the public mental health system. Includes annual Wellness and Recovery Conference and monthly Mind - Body - Spirit clinics. Law Enforcement and First Responders-Crisis Intervention Training: Crisis intervention training was expanded to train additional law enforcement personnel, fire personnel, dispatchers, and other emergency responders. A volunteer Crisis Support Team (CST) provides preventive strategies designed to mitigate stress following stressful events. Interventions requested include incidents of sudden death, suicides, accidents, or shootings. We also have a Crisis Negotiation Team that works closely with law enforcement on hostage negotiation and crisis negotiation situations, which may include suicidal subjects, barricaded subjects, intelligence gathering, coaching, etc.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Career Pathways	WET	Local Graduate Social Work Program: We collaborate with California State University Monterey Bay on their Master of Social Work program by providing funding support, curriculum development, field placements, and fundraising efforts. Community College Initiative: We collaborate with the community colleges and community partners to identify career pathways for students and staff. High School Academy: In an effort to reduce mental health stigma, we collaborate with health academies to develop pathways into the mental health workforce. Participation includes career panels and fairs, presentations and internship opportunities.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Residency, Internship Programs	WET	Provides field placements, internship, and licensure opportunities at all levels -- high school, community college, bachelor level and masters level students -- as well as doctorate level psychologists.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Financial Incentive Programs	WET	Coordinates loan forgiveness opportunities and provides incentives for participation on special projects.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en

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Monterey	Positive Behavioral Intervention Supports	INN	Provides training on implementing the Positive Behavioral Intervention Supports (PBIS) framework to schools throughout Monterey County, in collaboration with the County Office of Education.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Juvenile Sex Offender Response Team	INN	A multi-disciplinary team consisting of the following agencies: Behavioral Health, Probation, Child Welfare, Law Enforcement, Victim Advocates and District Attorney provides oversight of a coordinated model of care for juveniles served through this project.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	Alternative Healing and Promotores de Salud	INN	Addresses the needs of the unserved and underserved Latino/Hispanic population in Monterey County by providing mental health outreach, engagement and referral through a Promotores Collaborative, consisting of Promotores de salud, mental health providers, and a Psychiatrist with experience in alternative healing practices.	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Monterey	TAY Housing: A New Approach	INN	Provides shared permanent supportive housing for Transition Age Youth (TAY).	http://www.mtyhd.org/index.php?option=com_content&view=section&id=28&Itemid=520&lang=en
Napa	Children's Full Service Partnership	CSS - FSP	The Children's Full Service Partnership (CFSP) Program is designed to assist underserved, primarily Latino at-risk youth ages 5 to 15 with intense emotional disturbance who demonstrate problems with functioning in at least two of the following areas: a) school; b) home; c) community; and d) peer relationships; and are either at risk for hospitalization, incarceration, suicide, homicide, removal from the home; or the mental disorder/impairments are likely to continue for more than a year without treatment. CFSP staff provides bilingual and bicultural services to 28 children and their families to improve mental health outcomes.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Transition Age Youth Full Service Partnership	CSS - FSP	The Transitional Age Youth Full Service Partnership (TAY FSP) is a program that is contracted out to Progress Foundation, which provides wraparound/intensive case management services and a comprehensive range of supports for youth ages 16 to 25 years old who struggle with emotional difficulties and/or mental illness, live in Napa County or who have been placed out of county and are at risk of incarceration, out of home placement, institutionalization or homelessness and are unserved or underserved.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Adult Full Service Partnership	CSS - FSP	The AFSP provides wraparound services to homeless mentally ill and other at-risk adult individuals ages 26-59 and assists them to obtain and maintain housing and to work toward recovery. The AFSP works within the Napa County Mental Health Division to coordinate all aspects of mental health treatment. The AFSP program is centered on individual needs and focused on engaging individuals in their own care. By meeting individuals "where they are" staff foster hope and build on the individual's own resiliency. Personal Service Coordinators (PSCs) guide individuals in the process of developing Wellness and Recovery Plans (WRPs) that will help them improve housing stability by preventing homelessness or moving individuals from homelessness into stable housing. Staff also works with individuals to connect them to counseling and support groups, improve access to medication services, obtain consistent income (SSI, SSDI, etc.), obtain health benefits, access substance abuse treatment programs if needed, connect to employment and work toward individual educational goals, and to have access to reliable transportation.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Adult Treatment Team Full Service Partnership	CSS - FSP	A multidisciplinary team will provide wrap around/intensive case management services to individuals identified as needing more specialized and individualized support with the goal of establishing a lower level of care and increase independence in the community. The project is designed to address the needs of more than 33 individuals who are at greater risk of acute inpatient hospitalization and/or institutional placements or frequently require crisis intervention services. (Not yet implemented as of 4/2012.)	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Older Adult Full Service Partnership	CSS - FSP	The Older Adult Full Service Partnership is a collaborative program of Napa County Comprehensive Services for Older Adults and the Mental Health Division. The OA FSP Program was designed for underserved, at-risk adults age 60 years and older, who would benefit from intensive wraparound case management. The OA FSP staff provides assistance in addressing an older adult's physical, emotional and living situation needs.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939

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Napa	Mobile Outreach, Response and Engagement (MORE)	CSS - OESD	The MORE program is a mobile mental health outreach service that provides crisis intervention, mental health assessment, assertive outreach, follow-up planning and referral to other mental health services responding to hundreds of calls and provides approximately 140 home or site visits to individuals on an annual basis. MORE services are available to any Napa County resident experiencing mental health distress. MORE serves all ages, backgrounds, and there are no income restrictions. MORE supports law enforcement and hospital emergency rooms, assuming a prominent role in first responses. MORE staff is highly trained and knowledgeable in crisis intervention as well as on culturally-appropriate bilingual (English/Spanish) crisis response to children, young adults, adults, older adults and their families. MORE provides direct service as well as linkage to mental health and other services in the community. The MORE program continues to focus on extending services to underserved in Napa County with focus on bilingual/bicultural outreach. There is emphasis on outreach to the schools and the lesser served areas of the county.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Project Access	CSS - OESD	Project Access Services include: • Client Travel and Transportation: Provides basic travel and transportation services to individuals that receive mental health services to ensure they are attending general health appointments, medication management appointments, case management meetings, conservatorship hearings, etc. • Co-Occurring Disorder Support Group: Support group for individuals with mental health and substance abuse co-occurring disorders. • Network of Care Program: Website for the community to learn about mental health services and wellness resources in the community. http://napa.networkofcare.org/mh/home/index.cfm • Flexible Funds for Family Services and Supports: Funds to support individuals, caregivers and families to prevent further onset of mental health illness. • System Navigators: System Navigators provide mental health outreach, service linkage, transportation, resources, and referral services to individuals and families throughout Napa County with a focus on the needs of the Latino community. They also provide support and guidance in connecting with mainstream resources such as Healthcare, MediCal, Food Stamps, Housing Services, and more. System Navigators are housed in the Mental Health Division and at various community locations throughout Napa County. A bilingual Licensed System Navigator also provides assessment and short-term therapy to monolingual Spanish-speaking individuals.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	American Canyon PEI Project	PEI	The AC PEI Project includes a Student Assistance Program (SAP) and Home Visitation program for youth and families specifically at Napa Junction Elementary School, American Canyon Middle School and American Canyon High School in American Canyon.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Domestic Violence PEI Project	PEI	The DV PEI Project provides services specifically for children exposed to domestic violence to prevent the onset of Post-traumatic stress disorder (PTSD) or other mental illness. The DV PEI Project includes tutoring, support groups (using specific curriculum), communication with schools, and referrals as appropriate. for children exposed to domestic violence.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	LGBTQ PEI Project	PEI	The LGBTQ PEI Project presents best-practice trainings for local community providers on relevant LGBTQ issues (Best Practice for LGBTQ 101, TAY and Older Adult Trainings). This project includes an LGBTQ Advisory Board to provide input and guidance to project staff.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Native American PEI Project	PEI	The NA PEI Project provides outreach, education, cultural events and provider training to develop and enhance prevention and early intervention resources for the Napa County Native American Community.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	St. Helena & Calistoga PEI Project	PEI	The SH/Cal PEI project focuses primarily on Latino youth and families in these underserved North County communities. The project has three components – a school-based group mentoring program, a Promotor/a component and a parent collaborative component to encourage community building in St. Helena and Calistoga.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Older Adult PEI Project	PEI	The OA PEI project is designed to support early identification of mental illness and early intervention among at-risk older adults and older adults who are experiencing early onset of mental health issues, particularly those who are isolated and underserved or unserved.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Functional Family Therapy (FFT) Pei Project	PEI	The FFT Training Project is an evidence-based program that is intended to serve youth ages 11-18 with mental health and/or drug abuse. A total of eight community providers will be trained in the FFT model. This program has obtained leveraged funding, so it will be discontinued in FY 13-14.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939

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Napa	Child Welfare Services Early Mental Health Assessment (CWSEMHA) PEI Project	PEI	The CWSEMHA Project provides funding for a full-time mental health clinician to work within the Child Welfare Division of Health and Human Services to provide universal screenings, mental health assessments and short-term trauma-focused cognitive behavioral therapy (as appropriate) of all children and youth who enter the Child Welfare system to determine what level, if any, of mental health services may be needed.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Mental Health Awareness and Response Training (MHART) PEI Project	PEI	The MHART PEI Project consists of two components – Mental Health First Aid trainings, which will be implemented by Aldea Children and Family Services; and Behavioral Health Integration Trainings, which will be implemented by Clinic Ole to provide trainings for primary care providers and Health and Human Services staff on mental health/behavioral health integration topics. These components will be completed in FY 12-13 and will not be funded in FY 13-14.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	School Climate Improvement (SCI) PEI Project	PEI	The Napa County Office of Education implements the SCI PEI Project which provides trainings for teachers, administrators, parents and others who have daily contact with youth in need of mental health support in order to improve school climate county-wide. It is anticipated that this program will be completed in FY 13-	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Court and Community Schools (CCS) Student Assistance Program (SAP)	PEI	The CCS SAP PEI Project expands the existing SAP services offered by the Napa County Office of Education to include screening, brief therapy, pro-social activities, and referral to youth are risk of involvement with or already involved with juvenile justice.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Strengthening Families at Risk (SFR) PEI Project	PEI	The SFR PEI Project addresses the prevention and early intervention needs of families at-risk of developing mental illness through the expansion of services provided by the existing network of community family resource centers. Priority is given to referrals from the Mental Health Division's PEI programs and projects. This project will be funded through FY 14-15.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	American Canyon Middle School (ACMS) and American Canyon High School (ACHS) SAP PEI Project	PEI	The ACMS and ACHS SAP PEI Project is an expansion of the existing American Canyon PEI Project and created a traditional evidence-based SAP program at both schools in order to provide prevention and early intervention services to this unserved/underserved population.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	PEI Parent Project	PEI	The PEI Parent Project is an evidence-based training for parents of at-risk youth or youth who have been involved with the juvenile justice system. This project will provide a 10-session program in the American Canyon area and will work with the Napa Police Department Diversion program. Classes will be offered in both English and Spanish. This project will be completed in FY 12-13 and will not be funded in FY 13-14.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	LGBTQ Gay-Straight Alliance (GSA) PEI Project	PEI	This capacity-building project focuses on providing training and capacity-building for faculty advisors to strengthen existing GSA chapters and develop new GSA chapters at four schools throughout Napa County. The LGBTQ GSA PEI Project is a one-time expansion of the LGBTQ PEI Project. This project will be completed in FY 12-13 and will not be funded in FY 13-14.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Support Group for Latino Fathers (SGLF) PEI Project	PEI	Curriculum and training for Latino Fathers both in St. Helena and Calistoga. The SGLF PEI Project focuses on providing services to the fathers of Latino children served in the St Helena and Calistoga PEI project's youth mentoring programs. Fathers were offered an eight week program that included sessions on communication, masculinity, emotions, work, intimacy, family origins and fathering. This SGLF PEI Project is a pilot project and an expansion of the current St. Helena and Calistoga PEI Project. This project will be completed in FY 12-13 and will not be funded in FY 13-14.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Asian/Pacific Islander (API) Needs Assessment PEI Project:	PEI	The API Needs Assessment PEI Project conducted a county-wide needs assessment to determine the needs of this under-identified population. American Canyon was a particular focus of the Asian/Pacific Islander Needs Assessment Project as 65% or 6,381 of the county's total API population of 9,691 live in that community. The Asian/Pacific Islander population in American Canyon is very diverse and anecdotal reports suggest that there may be 20 – 30 different A/PI cultures/ethnicities living throughout the county each with their unique language, culture, and health and parenting values. This project will be completed in FY 12-13 and will not be funded in FY 13-14.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939

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Napa	Native American (NA) Youth/Elders Enhancement (YEE) PEI Project	PEI	The NA YEE PEI Project builds on the work of the current Native American PEI Project and promoted an environment of rich opportunities to practice traditional activities and ceremony which includes but is not limited to cultural focus groups, talking circles, video projects with youth, land-based youth camps, ceremonies such as sweat lodges and vision quests; traditional healing practices, classes for language-based programs and regalia creation.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Consumer Training/ Work Experience Coordinator - Workforce Staffing Support	WET	The Consumer Training and Work Experience Coordinator (.5 FTE) will provide support and training to consumers and family members entering or exploring positions within the mental health workforce. Training and consultation on development of a consumer training curriculum will be purchased through the Psychosocial Rehabilitation (PSR) Certification Program and stipends for consumers will be provided through the Stipends, Employment, and Educational Incentives Program (see below for descriptions). (Not yet implemented as of 5/2013.)	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Staff Development/ Training of Trainers Academy -Training and Technical Assistance	WET	The Staff Development component provides local trainings for providers as well as interns, consumers and family working in the mental health workforce. Trainings contribute to developing and maintaining a culturally competent workforce that includes consumer and family-driven services that promote wellness, recovery and resilience and lead to measurable, values-driven outcomes. The Training of Trainers Academy (not yet implemented as of 5/2103) will help create a local resource pool of professional trainers who will have designated subject matter expertise and serve as trainers for the Napa County mental health workforce.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	E-Learning System - Training and Technical Assistance	WET	The E-Learning System is an invaluable resource that allow the Mental Health Division to develop, deliver and manage educational opportunities and distance learning for staff, consumers and family members, individual providers, and community based organizations while helping to reduce training costs. Additionally, the E-Learning System will provide a community access portal for consumers and family members and key stakeholders to meet their training and information needs.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Spanish Language Training - Training and Technical Assistance	WET	The Spanish Language Training program is implemented by Napa Valley Adult Education, which develops language trainings to improve the ability of staff (receptionists, mental health worker aides, case managers, psychiatrists, etc.), and providers to communicate more effectively with Spanish-speaking consumers and family members in order to improve the quality of services offered to this underserved/unserved population. The trainings offer intermediate and advanced levels for staff who have had previous experience speaking Spanish or Spanish language instruction and would benefit from a "refresher" course and specific Spanish mental health terminology and vocabulary instruction. A specialized training program will also be developed by a certified Medical Interpreter Trainer for MHD staff who have already been providing specialized Spanish medical interpreting services or already speak Spanish to individuals they serve so that they continue to improve their Spanish language skills.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Psychosocial Rehabilitation (PSR) Certification Program - Mental Health Career Pathways	WET	The PSR Certification Program will be a training and certification program designed to include consumers, family members, and individuals from underrepresented racial/ethnic and cultural groups, community mental health providers, and MHD staff. The curriculum will include topics such as Consumer Wellness and Recovery courses, Pre-Employment Skills, 30-hour Fundamentals of PSR training, Peer Train the Trainer workshops, etc. Educational stipends/scholarships will be provided through the Stipends, Employment, and Educational Incentives Program (see below for details). At the completion of PSR trainings, consumers/family members would receive additional stipends to participate in final certification exams. (Not yet implemented as of 5/2013.)	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Mental Health Division Internship Program - Residency, Internship Programs	WET	The Mental Health Division's Internship Program includes MSW, ~~ASW~~, and MFT Interns who are recruited from regional and state colleges and universities. The MHD Internship Coordinator works with HHS staff to develop field work placements for undergraduate students, clinical internships for graduate and post graduate students, and entry-level internships for consumers/family members who have completed the PSR Certificate program. The Internship Coordinator also develops, maintains, and/or expands relationships with the educational institutions providing students/interns with administrative support from the HHS Human Resources staff. Finally, the Internship Coordinator tracks the number of interns who obtain employment with Napa County or with local community based organizations and will begin to develop strategies for retaining interns in Napa County's publicly-funded mental health system.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939

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Napa	Stipends, Employment, and Educational Incentives - Financial Incentive Programs	WET	The Stipends, Employment, and Educational Incentives Program offers stipends and financial incentives to those individuals interested in pursuing an education and making a commitment to provide mental health services within Napa County. Through the WET Needs Assessment and WET Planning Workgroup stakeholder process, it was determined that Napa County is in need of licensed social workers, certified/trained para-professional staff to provide direct service and support who represent the diversity of the community, particularly Latinos who are bi-lingual/bi-cultural. By providing stipends/financial incentives for individuals who come from diverse educational, cultural and lived experience, the MHD anticipates that it will be able to recruit and retain a more diverse mental health workforce that will more appropriately serve the mental health needs of the Napa County community. Stipends offered may include consumer employment stipends, consumer trainer stipends, educational stipends, stipends for interns, license preparation for pre-licensed staff, and educational incentives for high school and community college students and other individuals wishing to pursue higher education and career opportunities in the mental health profession. Assistance is also provided for pre-licensed Associate Social Workers (ASWs) and Marriage and Family Therapist Interns (MFTIs) to become licensed.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Hartle Court Permanent Supported-Living Housing Project	Housing	After an extensive RFP process, the Mental Health Division awarded CSS Housing funds to Progress Foundation, which has partnered with the Gasser Foundation to finance acquisition and construction of the Hartle Court Housing Project, which includes 18 one-bedroom units of permanent supportive housing for homeless or at risk of homeless adults with mental illnesses and 6 two-bedroom units of transitional housing for homeless transition-aged youth (18 to 26 years) with mental illnesses. The Hartle Court Apartment complex is located on the south side of the town of Napa on a .68-acre plot next to the existing 59-bed South Napa Homeless Shelter. The land was donated through a 99-year $1 per year lease by the Gasser Foundation. The total value of the project is approximately $4 million with $1,218,600 in CSS Housing funds and an additional $609,300 in CSS Housing funds for operating subsidies.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Technology Needs	CFTN	The Mental Health Division's Technology Needs were identified with input from local stakeholders who were involved in the local TN planning process. The following items will enable the Mental Health Division to improve the delivery of mental health services to its clients regardless of whether they are seen at county facilities or at one of the many organization providers and/or members of the individual provider network. These items are required to achieve a more integrated Electronic Health Record (EHR) and include the following: 1. E-prescribing (Doctor's Home Page)/Upgrade to Personal Health Records 2. Wellness/Recovery Technology Project 3. Anasazi rollout to organizational providers 4. Additional Modifications to current EHR system	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Purchase and renovation of a local facility for People Empowering People (PEP) Adult Resource Center	CFTN	The recently renovated property is located at 3281 Solano Avenue in the City of Napa. The Center fills the gap in the service system by supporting relatively stable individuals with personalized socialization, relationship building, assistance with maintaining benefits, employment and educational referral opportunities, educational support sessions provided by County staff and community volunteers, and a range of weekend, evening and holiday social activities. The ultimate goal is to reduce dependence on the mental health system and increase self-reliance by building a healthy network of support systems. A key element of the program is the engagement and support offered by individuals recovering from mental illness. The implementation of PEP was so successful that they have outgrown their allocated space, and have not been able to accommodate the growing referrals and identified needs within the community. This proposal is consistent with the type of project that the former Department of Mental Health (DMH) had stated Capital Facilities funds may be used.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939
Napa	Innovation	INN	The primary purpose of the Napa County Mental Health Division's Innovations Plan is to develop a model, the Mental Health Equity Partnership, which will be composed of stakeholders and providers, is intended to change the relationships between mental health providers and the identified underserved communities and to increase the perceived and actual value of collaboration for all parties.Secondary purposes will be to increase access to underserved groups, increase the quality of services, and to increase access to services. This project is being implemented by On the Move, Inc. and was initiated in March 2013.	http://www.countyofnapa.org/Pages/DepartmentContent.aspx?id=4294967939

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Nevada	Four Full Service Partnership (FSP) Service Programs	CSS - FSP	Creates collaborative relationships between County and the client and, when appropriate, the client's family. Plans and provides the full spectrum of community services so that the client can achieve the identified goal. Two Children's FSP Service Programs: EMQ FamiliesFirst and Victor Community Support Services, Inc. Two Adult FSP Service Programs: Turning Point Providence Center and New Directions (Behavioral Health program).	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Community-Services-and-Support.aspx
Nevada	General System Development Programs	CSS - OESD	Improves the County's mental health services delivery system for all clients, and/or when appropriate, their families. Children's programs and adult programs. Some of our programs include: expansion of crisis services including using Peer Counselors to support individuals in the ER and to provide follow-up support; creating a co-occurring disorder program; creating a veterans program; increasing access by increasing the days services are available at a health clinic in North San Juan; expanding the number of network providers available throughout Nevada County; increase in the number of Interns providing services and increasing in the number of Psychiatrist hours.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Community-Services-and-Support.aspx
Nevada	Outreach and Engagement (O&E) Services	CSS - OESD	Programs to reach, identify and engage unserved individuals and communities in the mental health system and reduce disparities identified by the County. Children's programs and adult programs. Some of these programs include: Supporting SPIRIT Peer Empowerment Center which provides peer counseling, support groups, offers nutritious food and education, and they provide showers, food and clothing to the homeless; provides for a Care Coordinator to help manage the high need population at the health clinic in North San Juan; and funds NAMI peer and family support and advocacy services.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Community-Services-and-Support.aspx
Nevada	MHSA Housing	CSS - OESD	Nevada County is collaborating with Nevada County Housing Development Corporation (NCHDC). NCHDC has purchased a five bedroom home to provide permanent supportive housing to homeless or individuals at risk of homelessness who are enrolled in a FSP program. Additionally, Nevada County has a contract with NCHDC to have them implement both of our Housing and Urban Development grants, Shelter plus Care and Supportive Housing Program.	
Nevada	Workforce Staffing Support	WET	Supports a WET Coordinator.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Workforce-Education-and-Training.aspx
Nevada	Training and Technical Assistance	WET	Numerous training events have been offered by the County for staff, providers, and stakeholders (includes clients and family members).	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Workforce-Education-and-Training.aspx
Nevada	Our Voices Matter	WET	Consumers and individuals are trained to share their stories at trainings and County events.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Workforce-Education-and-Training.aspx
Nevada	Internships	WET	We provide supervision to interns and provide interns with a stipend.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Workforce-Education-and-Training.aspx
Nevada	Access to Services	PEI	Components include suicide prevention and intervention; 211 Nevada County; integrative behavioral health training for medical providers; first responder training which includes Mental Health First Aid training and Crisis Intervention Training.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Prevention-and-Early-Intervention.aspx
Nevada	Outreach Services	PEI	Components include Friendly Visitor Program; social outreach program; Latino outreach services; homeless outreach services; forensic liaison outreach program.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Prevention-and-Early-Intervention.aspx
Nevada	Early Intervention and Prevention for Children, Youth and Families at Risk Project	PEI	Components include mentoring program; school-based teen mental health screening and assessment, evidence-based therapy for high-risk youth and their families. Second step: teaching pro-social skills in schools.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Prevention-and-Early-Intervention.aspx
Nevada	Technological Needs	CFTN	Anasazi clinical management and billing system live. Billing and clinical management portion of the system implemented. Training contractor service providers to utilize the system in fiscal year 12/13 and 13/14.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Capital-Facilities-and-Technology.aspx
Nevada	Capital Facilities	CFTN	Components include renovated Turning Point space, renovated County Behavioral Health space and renovated Odyssey House space.	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Capital-Facilities-and-Technology.aspx

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Nevada	Innovations	INN	Plan #1: Veterans Family Wellness Plan #2: Rehabilitation and Behavioral Health Collaborative Plan #3: Primary Care Mental Health Integrated	http://www.mynevadacounty.com/nc/hhsa/bh/Pages/MHSA-Innovation.aspx
Orange	Children's Full Service Partnership	CSS - FSP	**Community Services Programs (CSP)- Collaborative Courts FSP:** This FSP works with the Juvenile Court, the Probation Department and the Social Services Department to provide a full range of Mental Health Services to serious emotional disturbance (SED) children and serious mental illness (SMI) Transitional Age Youth (TAY) and their families (where appropriate) who are involved with a number of Specialty Collaborative Courts. These program were designed to provide services into early adulthood when SSA Wrap programs no longer provide services. The FSP partners with Juvenile Drug Court where job training and post-program support are critical in maintaining sobriety. The Truancy Court focuses on SED/SMI youth with many needs who come to the attention of "the system" via a lack of school attendance. A wide variety of significant mental health needs has been encountered. The program also supports the 'Girl's and Boy's Courts which are focusing on the long term needs of dual jurisdiction youth and providing housing, job skills and educational opportunities. (Age range 10-23).	http://www.cspinc.org/
			Community Services Programs (CSP) Youthful Offender Wraparound: was designed to meet the long term needs of SED youth and SMI TAY who have had significant rehabilitation efforts while in custody of the probation Department. The program provides a full menu of FSP services so that youth can maintain their progress from their time in custody and build on those skills. The primary focus is to provide new skills to avoid reoffending. Youth generally begin the program with Probation and the DPO part of the treatment planning effort. Many stay after they have been released from supervision. Major efforts are aimed at gaining and maintaining employment. (Typical age range 14-24).	http://www.cspinc.org/
			PROJECT FOCUS – Full Service Partnership Wraparound: Utilizes a "whatever it takes," community-based and client-centered approach where individualized care plans are developed for individuals and families. This Full Service Partnership Wraparound program of Orange County Asian Pacific Islander Community Alliance (OCAPICA) provides mental health services and intensive case management services including support and assistance in obtaining benefits for low income families, health insurance, housing placements, parent education and support, tutoring, mentoring, youth recreation and leadership	http://ochealthinfo.com/docs/behavioral/mhsa/css/downloads/2011/MHSA_FY11-12_Annual_Update-Final.pdf
			Providence Community Services – Project RENEW (Reaching Everyone Needing Effective Wrap) Program: serves Orange County SED/ SMI children from birth to 18 years of age and their families who have been un-served or underserved, are homeless or at risk of homelessness. While the child is the identified participant, Project RENEW uses a Wraparound model, developing a team of individuals offering both formal and informal support to the entire family.	http://ochealthinfo.com/docs/behavioral/mhsa/css/downloads/2011/MHSA_FY11-12_Annual_Update-Final.pdf
Orange	Children's In-Home Stabilization	CSS - OESD	**Orange County Child Abuse Prevention Center – In-Home Crisis Stabilization Program:** provides in-home crisis response, short term in-home therapy, case management and rehabilitation services with a focus on maintaining family stabilization and preventing hospitalization and/or out of home placement.	http://www.brightfutures4kids.org/programs/suddenlyparents.php
Orange	Children's Crisis Residential Program	CSS - OESD	**Community Services Programs (CSP)-Children's Crisis Residential Program:** With the goal of reducing at-risk behaviors, peer and family problems, out-of-home placement, and involvement in the child welfare and juvenile justice system among adolescents, the Crisis Residential Program of the Children Provider-CSP offers a temporary, short-term, six-bed crisis stabilization home to adolescents who are in crisis. Admissions are voluntary and available on a 24/7 basis depending on bed availability. The program facilitates, educates coping strategies and promotes resiliency in diverse youth and their families. Staff involved in evaluating possible inpatient admissions or the Family Stabilization Teams (FST) identify youth who do not require hospitalization but will benefit from additional assessment and therapeutic respite.	http://www.cspinc.org

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Orange	Children's Mentoring Program	CSS - OESD	**Mental Health Association (MHA) – Project Together (PT) Mentoring Program:** provides mentoring services for SED children and youth and SMI transitional age youth who are receiving mental health treatment services through the County of Orange Health Care Agency/Children & Youth Services (CYS) operated or contracted programs. MHA-PT incorporates mentoring best practices as defined by the California Mentor Partnership into all aspects of the mentoring programs. Mentor services are initiated by the clinician of a child's/teen's CYS or CYS contract agency. All mentors are matched based on shared cultural and linguistic needs of the children, youth and families, and the clinician determines when a child/teen or parent/guardian will benefit from a mentor. Once a match becomes mutually agreeable to all parties involved, the clinician supports the mentor-mentee relationship, meets and advises the mentor on a regular basis during the child's/teen's process of forming a trusting, nurturing and one-to-one relationship.	http://www.mhaoc.org
Orange	Children's Centralized Assessment Team	CSS - OESD	**Orange County Health Care Agency/Behavioral Health Services, Children & Youth Services – Centralized Assessment Team:** CYS County staff provide crisis evaluations for minors under the age of 18 to determine if psychiatric hospitalization is required or if the minor can be safely referred to a lower level of care. This 24/7 mobile crisis team consists of psychologists, social workers, and marriage and family therapists. The program serves the unfunded and Orange County Medi-Cal Recipients. CYS CAT also has a rotations of Service Chiefs and Psychiatrists available 24/7.	http://ochealthinfo.com/mhsa/links
Orange	TAY Full Service Partnerships	CSS - FSP	**Community Services Programs (CSP)- Collaborative Courts FSP:** works with the Juvenile Court, the Probation Department and the Social Services Department to provide a full range of Mental Health Services to SED Children and SMI TAY and their families who are involved with a number of Specialty Collaborative Courts. A wide variety of significant mental health needs has been encountered. These program were designed to provide services into early adulthood when SSA Wrap programs no longer provide services. The FSP partners with Juvenile Drug Court where job training and post-program support are critical in maintaining sobriety. The Truancy Court focuses on SED/SMI youth with many needs who come to the attention of "the system" via a lack of school attendance. The program also supports 'Girl's and Boy's Courts which are focusing on the long term needs of dual jurisdiction youth, and providing housing, job skills and educational opportunities. (Age range 10-23).	http://www.cspinc.org/
			Community Services Programs (CSP) Youthful Offender Wraparound: was designed to meet the long term needs of SED youth and SMI TAY who have had significant rehabilitation efforts while in custody of the Probation Department. The program provides a full menu of FSP services so that youth can maintain their progress from their time in custody and build on those skills. The primary focus is to provide new skills to avoid reoffending. Youth generally begins the program on Probation and with the DPO part of the treatment planning effort. Many stay after they have been released from supervision. Major efforts are aimed at gaining and maintaining employment. (Typical age range 14-24).	http://www.cspinc.org/
			PROJECT FOCUS – Full Service Partnership Wraparound: Utilizes a "whatever it takes," community-based and client-centered approach where individualized care plans are developed for individuals and families. This Full Service Partnership Wraparound program of Orange County Asian Pacific Islander Community Alliance (OCAPICA) provides mental health services and intensive case management services, including support and assistance in obtaining benefits for low income families, health insurance, housing placements, parent education and support, tutoring, mentoring, youth recreation and leadership	http://ochealthinfo.com/docs/behavioral/mhsa/css/downloads/2011/MHSA_FY11-12_Annual_Update-Final.pdf
			Support Transitional Age Youth (STAY): of Providence Community Service is a recovery program for SED and SMI TAY, ages 16 through 25, who would benefit from increased integration into the community and support with skills building that are essential to being a self-sufficient adult. Found with a vision that all TAY have hope, are empowered, can be responsible for themselves and be engaged in meaningful adult roles, the program supports participants in discovering and deciding what they want for themselves, how to develop the strengths, abilities and skills applicable to many aspects of their adult lives.	www.provcorp.com/Locations/California.asp
Orange	TAY Outreach and Engagement	CSS - OESD	The **Outreach and Engagement** program of OCAPICA reaches out to the TAY of Orange County who are in need of mental health services. The program links them to a Full Service Partnership (FSP) or other mental health services in the community.	http://www.ocapica.org
Orange	TAY Crisis Residential	CSS - OESD	**South Coast Children's Society – Transitional Age Youth (TAY) Crisis Residential Program:** is a six-bed program for TAY who have experienced a mental health crisis but do not meet the criteria for inpatient hospitalization. The program provides assistance with stabilization and linkage to longer term supports.	http://www.sccskids.org

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Orange	TAY Mentoring Program	CSS - OESD	**Mental Health Association – Project Together Mentoring Program (MHA-PT)**: provides mentoring services for SED children and youth and SMI TAY who are receiving mental health treatment services through the County of Orange Health Care Agency, Children & Youth Services (CYS) operated or contracted programs. MHA-PT incorporates mentoring best practices as defined by the California Mentor Partnership into all aspects of the mentoring programs, and mentor services are initiated by the clinician of a child's/teen's CYS or CYS contract agency. All mentors are matched based on shared cultural and linguistic needs of the children, youth and families, and the clinician determines when a child/teen or parent/guardian will benefit from a mentor. Once a match becomes mutually agreeable to all parties involved, the clinician supports the mentor-mentee relationship, meets and advises the mentor on a regular basis during the child's/teen's process of forming a trusting, nurturing and one-to-one relationship.	http://www.mhaoc.org
Orange	TAY Centralized Assessment Team	CSS - OESD	**TAY Centralized Assessment Team (CAT):** provides mobile response, including crisis intervention, mental health evaluations/assessment, and initiation of 72 hour involuntary detention when necessary and appropriate, for TAY aged 18 to 25 years or older who are experiencing a mental health crisis. The program also provides follow-up services to assist clients with successful linkage to continuing care. The focus of the program is to provide timely crisis intervention and referral to the least restrictive level of care in order to avoid unnecessary inpatient hospitalization or incarceration, and to provide follow-up contact to assist linkage to appropriate services. Program staff work with family members to provide information, referrals, and community support services.	http://ochealthinfo.com/bhs/about/amhs/ces
Orange	TAY Program for Assertive Community Treatment	CSS - OESD	**Transitional Age Youth Program (TAY) for Assertive Community Treatment:** The Adult Outpatient Mental Health, TAY Program for Assertive Community Treatment (TAY PACT) provides voluntary, community based recovery mental health services to individuals age 18-25, who are living with a serious and persistent mental illness. The TAY PACT program was designed to specifically meet the unique developmental needs of young adults who are dealing with a mental illness, who are transitioning into adulthood. The PACT teams emphasize a "whatever it takes" approach, which values individual consumer needs, strengths, choice, and involvement in service planning and implementation. PACT provides intensive case management services, including linkage to entitlements, community social support, linkage to housing programs, and linkage/collaboration of services with primary medical care. The majority of these services are provided in the community in order to reduce any barriers to accessing services.	http://ochealthinfo.com/docs/behavioral/mhsa/css/downloads/2011/MHSA_FY11-12_Annual_Update-Final.pdf
Orange	Adult Full Service Partnerships	CSS - FSP	**Adult Full Service Partnership**: These programs provide a full array of services from outreach and engagement to community-based, client- centered care. Psychiatric services including medication and case management, housing, education, employment and community integration activities. All FSPs have been focused on data and outcomes as a way of assessing effectiveness and are now implementing best practices and measuring outcomes to ensure positive results. Integration of co-occurring disorders treatment and medical/health has been a primary focus in these programs. Adult FSPs primarily serve members from 18-59. The target population is the chronic mentally ill who are homeless or at risk of homelessness, and may also be diagnosed with co-occurring substance abuse or dependence disorder. These programs are linguistically and culturally responsive in providing services to the undeserved multi-ethnic populations in Orange County, such as Latinos, Vietnamese, Iranians, Koreans, monolingual non-English speakers, and the Deaf and Hard of Hearing.	http://ochealthinfo.com/bhs/about/pi/mhsa/fsp/adult
Orange	Centralized Assessment Team/Psychiatric Evaluation and Response Team	CSS - OESD	**Centralized Assessment Team (CAT) and Psychiatric Evaluation and Response Team (PERT):** **Centralized Assessment Team (CAT):** provides 24 hours per day/7 days per week mobile response, including mental health evaluations/assessment, for those who are experiencing a mental health crisis. In response to psychiatric emergencies, staff provides crisis intervention for hospital diversions, evaluations for involuntary hospitalizations, and assistance for police, fire, and social service agencies. Assessment /consultation services are provided in Hospital Emergency Departments (ED) for patients in need of, or waiting for, inpatient services. Culturally responsive bi-lingual/bi-cultural staff works with family members to provide information, referrals, and community support services. **Psychiatric Evaluation and Response Team (PERT):** is a partnership with law enforcement, which includes designated police officers and mental health staff that respond to calls from officers in the field. Mental health consultations are provided for individuals in an apparent mental health crisis. The program also provides outreach and follow up services to ensure linkage to ongoing services.	http://ochealthinfo.com/bhs/about/amhs/ces

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Orange	Adult Crisis Residential Program	CSS - OESD	**Telecare TREE House-Adult Crisis Residential Program:** The T.R.E.E. House (Total Recovery Enriching Experience) is an adult crisis residential program, offering a safe environment for adults experiencing a mental health crisis who need additional support to avoid hospitalization, to stabilize symptoms, and return to their previous level of functioning. The program also provides co-occurring services for people who are experiencing a mental health crisis and also have substance abuse issues. The T.R.E.E. House offers short-term, voluntary services, typically lasting 7 to 14 days with a client-centered, recovery focus and an underscored concept of personal responsibility for one's own illness and independence. The program is designed to enhance social connection with family or community so that program participant can move back into the community and prevent an inpatient stay. Services include crisis intervention, development of a Wellness Recovery Action Plan (WRAP), individual and family therapy, group rehabilitation treatment, assistance with self-administration of medications, case management and discharge planning.	http://www.telecarecorp.com/programs/116
Orange	Supported Employment	CSS - OESD	**Employment WORKS of Orange County Goodwill:** offers individuals who are seriously and persistently mentally ill the opportunity to participate in a supportive employment service. The program offers individualized job placement and supportive vocational services.	http://www.ocgoodwill.org
Orange	Adult Outreach and Engagement	CSS - OESD	**Outreach and Engagement**: provides outreach and engagement services to the un-served and underserved mentally ill adult population, who is homeless or on the verge of becoming homeless. The Children and Transitional Age Youth outreach team engages families with children and the transitional age youth population that are un-served or underserved who suffer from a mental illness with the goal of linking them to appropriate treatment services.	http://ochealthinfo.com/mhsa/links
Orange	Adult Program for Assertive Community Treatment	CSS - OESD	**Assertive Community Treatment:** The Adult Outpatient Mental Health Program for Assertive Community Treatment (PACT) provides voluntary, community based recovery mental health services to individuals who are living with a serious and persistent mental illness. The majority of PACT services are provided in the individual's home or community in order to reduce any barriers to accessing services. The PACT teams emphasize a "whatever it takes" approach, which values individual consumer needs, strengths, choice, and involvement in service planning and implementation. The staff provides mental health assessment, hospital diversion, crisis intervention, medication management, individual/collateral and group therapy, substance abuse assessment and treatment. Intensive case management services are provided, including linkage to entitlements, housing programs, community social support and primary medical care.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/css
Orange	Wellness Center	CSS - OESD	**Wellness Center**: is designed for members who have achieved a high level of recovery. The center offers programming that is culturally responsive and linguistically appropriate. Many groups and classes are focused on personalized socialization, relationship building, employment goals, exploration of educational opportunities and assistance to maintain benefits. The Wellness Center is grounded in the recovery model and facilitates and promotes recovery and empowerment through their staff and their interaction with members. The Wellness Center is a space for people to develop opportunities for socialization and growth in other areas of life outside the mental health system. It is a safe place there people can explore their potential in way that have been either inaccessible or perceived as impossible in the past. The members and staff are proof of recovery and represent a step towards a more transparent and transformative system.	https://media.ocgov.com/gov/health/bhs/about/pi/mhsa/default.asp
Orange	Adult Recovery Centers	CSS - OESD	**Adult Recovery Centers**: provide a lower level of care for consumers who no longer need traditional outpatient treatment but still need to continue receiving medication and episodic case management support. This program allows diverse consumers to receive distinct, mostly self-directed services that focus on consumer-community reintegration and linkage to health care. To a great extent, the program relies on client self-management. In addition, an important feature is a peer-run support program where consumers are able to access groups and peer support activities.	http://ochealthinfo.com/docs/behavioral/mhsa/css/downloads/2011/MHSA_FY11-12_Annual_Update-Final.pdf
Orange	Adult Peer Mentoring	CSS - OESD	**Adult and Older Adult Peer Mentoring:** is a peer run, contracted program with Horizons Cross Cultural Center. The program provides peer support activities and peer counseling in collaboration with the Regional Adult Outpatient Mental Health Clinics and Older Adult programs. Peer Mentors work with consumers in the community and in the consumer's homes in order to reduce any barriers to access services. Referrals are currently accepted from the Regional Adult Outpatient Mental Health Clinics, Older Adult programs, and Recovery Centers.	http://ochealthinfo.com/docs/behavioral/mhsa/css/downloads/2011/MHSA_FY11-12_Annual_Update-Final.pdf

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Orange	Older Adult Recovery Services	CSS - OESD	**Older Adult Outpatient Mental Health Recovery Program:** provides voluntary, community based recovery mental health services to individuals who are living with a serious and persistent mental illness. The individuals served by this program are primarily home bound with little access to other resources or supports. The majority of these services are provided in the individual's home or in the community to reduce any barriers to access services. The team provides in-home mental health assessment, hospital diversion, crisis intervention, medication management, individual therapy, collateral therapy, substance abuse assessment and treatment. They provide case management services, including linkage to entitlements, community social support, linkage to housing programs, and linkage/collaboration with primary medical care.	http://ochealthinfo.com/bhs/about/pi/mhsa/fsp/older
Orange	Older Adult Support and Intervention System (OASIS)	CSS - OESD	**Older Adult Support and Intervention System (OASIS):** Is an Older Adult Full Service Partnership Program that follows the Wellness, Recovery, and evidence-based model. The program focuses on the person rather than the illness, the consumer strengths, self-identified goals and objectives. Individuals from all ethnicities and cultures are served with an emphasis on client centered care. The program is comprised of an interdisciplinary staff of peer counselors/ life coaches, Personal Services Coordinator (PSC), a therapist, nurses, a nurse practitioner, a gero-psychiatrist, and a pharmacist. All staff members are familiar with the specialized needs of older adults.	http://ochealthinfo.com/bhs/about/pi/mhsa/fsp/older
Orange	Older Adult Peer Mentoring	CSS - OESD	The **Older Adult Peer Mentoring:** is a peer run, contracted program with Horizons Cross Cultural Center. The program provides peer support activities and peer counseling in collaboration with the Regional Adult Outpatient Mental Health Clinics and Older Adult programs. Peer Mentors work with consumers in the community and in the consumer's homes in order to reduce any barriers to access services. Referrals are currently accepted from the Regional Adult Outpatient Mental Health Clinics, Older Adult programs and Recovery Centers.	http://ochealthinfo.com/bhs/about/pi/mhsa/fsp/older
Orange	Workforce Staffing Support	WET	**Workforce Education Training (WET)** program coordination includes, but is not limited to: • Stakeholder meetings • Providing/facilitating a wide range of trainings and conferences including recovery from behavioral health issues, disparity and stigma reduction offered to the community, consumers, family members, primary care and behavioral health providers. • Updating the WET Plan These functions continue to require a training coordinator and support staff. This team continues to communicate with the identified crucial stakeholders, keep them apprised of the regulations/ guidelines related to Workforce Education and Training and any changes to the WET plan. This is done through a monthly steering committee meeting. WET Coordinator and staff assess the training needs of county/contract providers, community partners on an on-going basis and implement appropriate seminars, workshops, and conferences. County of Orange also participates in the Southern Region WET partnership to promote recovery in the work place.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/training
Orange	Training and Technical Assistance	WET	**Training and Technical Assistance:** have been implemented, and HCA is in the process of achieving the goals outlined in the Orange County WET Plan. Notable achievements include: · The graduation of more than 200 consumers and family members from the consumer training program that provides basic life and career management skills, and academic preparedness · The support of expansion of the National Alliance on Mental Illness (NAMI) Family-to-Family programs to the Vietnamese and Korean communities · Mental Health Training for Law Enforcement has trained more than 700 Law Enforcement officers to better understand the mentally ill and provide appropriate interventions · The Health Care Agency has started implementation on a contract with UCLA to provide training to staff, countywide on evidence-based treatment models for individuals with co-occurring disorders Staff trainings and conferences that are especially important to note include: · Understanding Disparities · Crisis Intervention Conference · Mental Health First Aid · Stigma Reduction · Consumer Employee Workforce Development · Peer Services Support Conference	http://ochealthinfo.com/bhs/about/pi/mhsa/components/training

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			· Spirituality Integration in Behavioral Health Conference · Immersion Training	
Orange	Mental Health Career Pathways	WET	**Mental Health Career Pathways:** Orange County's action items related to Mental Health Career pathways. The actions related to developing High School Academies, Community College and Undergraduate Certificate programs have been modified to reflect the fact that such programs were already being developed within the community. Therefore, the WET programs will provide support to complement their development. In June of 2010 and again in 2012, the County selected a contractor to implement the Recovery Education Institute to provide training to consumers on basic issues of life, career management and other skills enhancement to prepare for work in the public mental health system, as well as college	http://ochealthinfo.com/bhs/about/pi/mhsa/components/training
Orange	Residency and Internship and Financial Incentives	WET	**Residency and Internship and Financial Incentives**: The action items in support of this program continue to meet the objectives included in the Orange County WET Plan. Twenty nine staff members are currently funded to provide supervision to interns of all levels. The University of California, Irvine- School of Medicine provides a yearly clinical rotation for psychiatric residents and fellows with the Orange County Behavioral Health system.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/training
Orange	Crisis & Referral Services	PEI	**Warmline Network Services** (877) 910-WARM or (714) 991-6412**:** Warmline Network Services is telephone-based, non-crisis support for anyone struggling with mental health and substance abuse issues. The staff providing the services has been through a similar journey, either as a mental health or substance abuse services consumer, or as a family member of an individual receiving these services.	http://www.namioc.org/
			Crisis Prevention Hotline ((877) 7-CRISIS or (877) 727-4747)**:** Crisis Prevention Hotline provides toll-free, 24-hour, immediate, confidential, culturally and linguistically appropriate, over-the-phone suicide prevention services to anyone, who is in crisis or experiencing suicidal thoughts.	http://www.didihirsch.org/services/emergency/spc
Orange	Early Intervention Services	PEI	**First Onset Services and Supports:**	
			Orange County Postpartum Wellness (OCPPW) Program: The Orange County Postpartum Wellness (OCPPW) program provides early intervention services to new mothers, up to one year postnatal, experiencing mild to moderate postpartum depression. Services include assessment, case management, individual, family and group counseling, educational groups, wellness activities and coordination and linkage to community resources and community education.	http://ochealthinfo.com/bhs/about/pi/early/ppw
			Orange County Center for Resiliency, Education, and Wellness (OCCREW): First Onset of Psychiatric Illness Program: The Orange County Center for Resiliency, Education & Wellness (OC CREW) program provides early intervention services to transitional age youth, age 14-25, in the community experiencing their first onset of psychosis related to schizophrenia. Services provided by this program include assessment, individual and family counseling, psychiatric services, multifamily psycho-educational group, vocational and educational support, education about nutrition and fitness, socialization and wellness activities and community education. This program also provides trainings to persons and organizations most likely to encounter individuals presenting early signs of metal disorders warning signs of mental illness.	http://ochealthinfo.com/bhs/about/pi/early/crew
			Stress-Free Families Program: Stress Free Families is an early intervention program that addresses the needs of families that have been investigated by the Social Services and are experiencing current behavioral health problems impacting the family. Services are home-based and include family assessment, brief counseling, and case management services. Families are referred to this program through the Social Services Agency.	http://ochealthinfo.com/bhs/about/pi/early/stressfree
			Veterans College Services: The "Drop Zone"/ Veterans College Services is a collaborative with Santiago Community College District to assist Veterans/ Students with screening, assessment and a variety of interventions. Some of the interventions include: support groups, transitioning to college and civilian life, community resources, referral and navigation of the systems of care within Orange County.	http://ochealthinfo.com/bhs/about/pi/crisis/dropzone/
Orange	Outreach and Engagement Services	PEI	**Risk Reduction and Community Health (REACH):** REACH Outreach and Engagement Team provides behavioral health and wellness activities to adults in Orange County who are homeless/at risk for homelessness/in transitional housing, and who are at risk of behavioral health problems. Services include street outreach and engagement, wellness screens, case-management, psycho-educational groups, and linkage to community resources.	http://ochealthinfo.com/bhs/about/pi/outreach/reach

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Orange	Parent Education and Support Services	PEI	**Youth As Parents Program:** The Youth As Parents Program serves pregnant and parenting teens to prevent and intervene early in the onset of behavioral health issues in the parents, and to identify such issues in their children early in their development. Services are provided in the home and include screening and assessment, parent education, skills building, case management, linkage and collaboration with existing community resources.	http://ochealthinfo.com/bhs/about/pi/support/parent
Orange	Prevention Services	PEI	**Children's Support and Parenting Program (CSPP):** The Children's Support and Parenting Program (CSPP) is a prevention program serving a wide range of families from different backgrounds whose stressors make children more vulnerable to developing behavioral health problems. Program services focus on: families that have a common parental history of serious substance abuse and/or mental illness; children living with family members who have developmental or physical illnesses/disabilities; children living in families that are impacted by divorce, domestic violence, trauma, unemployment, homelessness, etc.; and families of active duty military/ returning. An 11- week psycho-educational group series is conducted in the community to eligible family members to increase parenting skills and support, increase child resiliency, and improve the overall strength of the family. Brief family intervention sessions and referrals to community services are available to all participants. Follow-up sessions are provided to graduates as an opportunity to reunite with other families and refresh their learned skills.	http://ochealthinfo.com/bhs/about/pi/support/cspp
			Stop The Cycle Program: Stop the Cycle is a prevention program serving youth involved in the juvenile justice system and their parents and siblings. A 12- week psycho-educational group series is conducted in the community to family members to increase parenting skills and support, increase child resiliency, and improve the overall strength of the family. Brief family intervention sessions and referrals to community services are available to all participants. Follow-up sessions are provided to graduates as an opportunity to reunite with other families and refresh their learned skills.	http://ochealthinfo.com/bhs/about/pi/support/stc
Orange	Screening & Assessment	PEI	**Veterans Combat Court:** The Veteran's Court Services provides case management to the Combat Veterans Court and the Veterans Non-Criminal Domestic Violence Family Court. This service provides case management for court-assigned Veterans who are in need of professional support, referral and linkage to community resources.	http://ochealthinfo.com/bhs/about/pi/screening
Orange	School-Based Services	PEI	**Transitions:** Transitions is a prevention program serving youth at a high-risk time in their lives when they are transitioning from elementary to middle school and from middle to high school. The goals of this program include reducing high-risk behaviors while developing protective factors and resiliency in these youth to better meet the new academic and social challenges. It also makes available educational support to the parents for assisting their transitioning youth. Services include classroom curriculum to educate students regarding high-risk behaviors, behavioral health conditions and healthy coping skills. Educational group sessions are also available to the parents of these students. The aim of this program is to increase awareness in these families to not only prevent behavioral health conditions in these youth but to remove any stigma in asking for help to prevent the devastating consequences of mental illness including teen suicide.	http://ochealthinfo.com/bhs/about/pi/school/transitions
			Connect the Tots: The Connect the Tots Program serves families with young children, ages 0 to 6, to promote wellness and reduce risk factors for emotional problems in children as they prepare to enter school. Supportive services are provided to the entire family with the goal of promoting healthy coping skills and strengthening the family's ability to meet the emotional needs of their children. Services are provided in the home and include social/emotional screening and assessment, parent education, skills building, case management, linkage and collaboration with existing community resources. The Connect the Tots program prioritizes homeless families and those at risk of homelessness.	http://ochealthinfo.com/bhs/about/pi/support/tots
Orange	Training Services	PEI	**Community Based Stigma Reduction Training**: In an effort to promote mental health awareness and reduce associated stigma in our community, especially among our youth, a "Dress Warm" play was developed and performed by a diverse group of consumers. "Dress Warm" is an interactive play about four people's journey with mental illness and recovery. Designed with youth in mind, "Dress Warm" toured middle and high school classrooms, as well as community agencies throughout the County. The play features a 30-minute performance and 20-minute dialogue. Materials about mental health resources are distributed at the end of the dialogue. "Dress Warm" is a shorter version of "Third Tree on The Left", which was also presented to the community in limited production during FY 09/10.	http://ochealthinfo.com/docs/behavioral/mhsa/css/downloads/2011/MHSA_FY11-12_Annual_Update-Final.pdf

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Orange	Integrated Services	INN	**Integrated Community Services (ICS)-**Community Home Pilot project provides outreach into the medical community to facilitate bi-directional services to fully integrate both physical and mental health care. This collaboration with community medical clinics and county mental health programs is a healthcare model that will prove to bridge the gaps in service for the underserved low-income community and increase better overall health outcomes for the patients involved. In the ICS Community Home project a Mental Health Team (Psychiatrist, BHS Clinician and Mental Health Caseworker) will be brought into existing community health clinics: Asian Health Center and Korean Community Services. Bringing in each team to complement existing patient services allows full integration of patient care in each location.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Orange	Collective Solutions (Family-Focused Crisis Management)	INN	**Collective Solutions:** is a family-focused crisis management program that provides supportive and counseling services to family members who struggle with managing the mental illness of a loved one. Peer mentors and clinicians deliver culturally and linguistically appropriate counseling, assessments, case management, and education related to mental health.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Orange	Volunteer to Work	INN	**Volunteer to Work**: This program is being implemented in the summer of 2013. It is a community-based, consumer-run program that uses trained consumer mentors to help prepare and involve program participants in volunteer and employment positions in the community. It assists consumers in building self-worth, gaining confidence, and cultivating interests and skills in order to comfortably enter the workplace. In addition, it establishes a new framework for building the collaboration and capacity of community partners by providing a flexible model to support the goal of consumer integration into society.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Orange	OC ACCEPT (OK to Be Me)	INN	**OC ACCEPT:** provides community-based mental health and supportive services to individuals struggling with and/or identifying as LGBTIQ (Lesbian, Gay, Bisexual, Transgender, Intersex or Questioning) and the people important in their lives. The program specializes in addressing issues that are common in the LGBTIQ community, such as confusion, isolation, grief and loss, depression, anxiety, suicidal thoughts, self-medicating with drugs and high risk behaviors, self-esteem challenges, victims of bullying, trauma, homelessness, and lack of familial support. OC ACCEPT seeks to provide a safe environment with acceptance and compassion for individuals to express their feelings, build resilience, become empowered and connected with others for support. The program also raises awareness and reduces stigma by providing education about the LGBTIQ population to the community at large.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Orange	OC4Vets (formerly known as Vet Connect)	INN	**OC4Vets**: The program examines whether co-locating services for veterans with the Veterans' Services Office will increase access to health and supportive services for veterans with post-traumatic stress disorder (PTSD), traumatic brain injury (TBI), and severe depression, including those dually diagnosed with substance abuse disorders. It facilitates access to a comprehensive array of treatment and supportive services for veterans and their families and provides assistance (a warm hand-off) to help those veterans who are too fragile to integrate into the VA system. Uses peer veterans to provide service system navigation and solid connection with existing community resources. This program provides an integrated, holistic approach to veteran behavioral health, recognizing that medical, as well as basic shelter, food, and job issues impact behavioral health.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Orange	Community Cares Program	INN	**Orange County Community Cares Project (OC CCP):** Orange County Community Cares Project (OC CCP) strives to improve access to mental health services and decrease the negative effects of untreated mental illness. The program provides a referral-based system for individuals to receive short-term *pro-bono* mental health treatment by a multidisciplinary team: project lead, clinicians, and peer mentors. Staff delivers culturally and linguistically appropriate assessments, case management, individual psychotherapeutic services, and follow-up services to evaluate effectiveness and satisfaction of services. All individuals who are referred to the OC CCP program will be initially evaluated by program staff during intake interview. If eligible, the participant will be linked to a provider who best meets their needs.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation

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Orange	Project Life Coach	INN	**Project Life Coach:** provides assessment and linkage to supported employment. Although available to others, the target population is underserved monolingual or limited English proficiency unemployed Latino, Iranian and Asian/Pacific Islanders with mental illness; it promotes employment and improves functioning. The program uses life-counseling (also called life coaching) techniques to promote self-esteem, help-seeking behavior, personal development, and family integration among clients who are monolingual speakers of languages other than English and who are not currently employed. It assists with job searching, placement, and retention, as well as linkage to mental health services. It also creates a community-based support network for individuals and families.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Orange	Training to Meet the Needs of the Deaf Community	INN	**Training to Meet the Needs of the Deaf Community:** The project provides education on mental illness and recovery for members from the Deaf and Hard of Hearing community. It uses an existing accredited Mental Health Worker Certificate training program to train individual consumers and family members using ASL as the primary language. Graduates of the program may assume mental health worker or peer mentor positions within the public mental health system, using their certificate to gain entry into employment and/or continue education to gain an AA degree, bachelor's or graduate degree in the mental health field. Training people who are Deaf and already know ASL to provide mental health services is expected to increase access to care and improve quality of life for this community.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Orange	Brighter Futures (Consumer Early Childhood Mental Health)	INN	**Brighter Futures:** (formerly Consumer Early Childhood Mental Health) provides community-based services to families with children who experience social, emotional, and behavioral health problems. The goal is to reduce isolation and form a supportive network with other families. The project offers brief interventions; helps build personal resiliency and healthy relationships between parents and children. A multidisciplinary clinical team provides culturally and linguistically appropriate peer-mentorships, case management, parent education, psychotherapeutic services and linkages to supportive community services. Services are provided to Orange County residents, parents/families with children ages 6-13 who are experiencing social, emotional, and behavioral health problems. The project provides services in English, Spanish, and Mandarin.	http://ochealthinfo.com/bhs/about/pi/mhsa/components/innovation
Placer	Rallying Around Families Together	CSS - FSP	Wraparound services to include children (17 years and under) with severe emotional disorders eligible for County Mental Health Services but who do not meet the Government Code 26.5 criteria for Special Education Services	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Placer Transitional Age Youth (PTAY)	CSS - FSP	Targets unserved, underserved and inappropriately served transition aged youth 17-24 with severe mental illnesses (SMI) transitioning from Children's System Of Care (CSOC) to Adult System Of Care (ASOC) or referred from the community.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Whatever it Takes (WIT)	CSS - FSP	Serves adults (18-60) with severe mental illnesses (SMI) who are homeless, leaving jail, hospitals or IMDs. Priority is given to unserved or inappropriately served clients who are at risk of psychiatric hospitalization, homelessness, and those ready to exit psychiatric health facilities, psychiatric hospitals, IMDs, or jail.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Older Adult FSP	CSS - FSP	Serves older adults (60+) who meet the previous criteria and those who are newly identified as needing services; older adults with severe mental illnesses (SMI) age 55 as they transition; and older adults 60+ with SMI in nursing homes.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Lake Tahoe Systems Development	CSS - OESD	Provides services that are culturally competent and focus on a welcoming system to increase access to mental health services for Latinos, focusing on the disparity of mental health services provided to Latinos. Additional bilingual/bicultural clinical and support staff allows staff to eliminate the waiting list for services.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Transforming Services through Co-Occurring, Resiliency, Recovery, Cultural Competency and Family/Client-driven System (Systems Development Strategy)	CSS - OESD	New designs of innovative ways to promote recovery and increase resilience of those we serve and have established community change agents to impact both County and provider-operated services. Support of consumer leadership and support through the Welcome Center, Cirby Clubhouse and Transitional Employees. Support of ethnically underserved through the Latino Leadership Council and the Sierra Native Alliance. Support transition age youth with a youth coordinator and youth advisory group, as well as training on positive interactions with the youth culture.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx

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Placer	Mental Health Crisis Response and Triage (Systems Development)	CSS - OESD	Provides crisis services at a new one-stop hospital site. This co-location increases the ability to provide timely and efficient crisis mental health services. This team also includes the Same Day Next Day and Family and Friend coordinator programs who meet consumers and their family in the emergency room, as well as providing follow up to those not hospitalized on the same or next day.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Training and Technical Assistance	WET	Provides consumer and staff development and leadership development through training, e-learning and implementation of evidence-based practices.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Mental Health Career Pathways	WET	Develops appropriate curriculum and training venues and stipends/scholarships to develop skills of individuals who have a desire to provide services in Placer Public Mental Health prevention and treatment programs.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Expanded Mental Health Internships	WET	New internships for master's levels (particularly bilingual-bicultural), consumer/family member, and/ or health care field, new internships for non-master's level, and supervision and support for individuals in these programs.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Stipends, scholarships and grants	WET	Stipends and scholarship programs for community members who are working in Placer County and want to develop their mental health skills. Must meet program requirements.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Functional Family Therapy	PEI	FFT helps families change the way they think about each other and their problems. Core principles of FFT include: families are unique and have their own cultures; problems are understood by how they function to maintain the family relational system; and behavioral change occurs in stages and are individualized and specific.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Parent Project- Tahoe	PEI	The Tahoe Parent Project engages parents to help foster positive relationships and communication between child and parents.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Life Skills Youth Program - Tahoe	PEI	The main goals of the LifeSkills Training program are to teach prevention-related information, foster the development of personal self-management skills, general social skills, promote anti-drug norms, and teach drug refusal skills.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Adventure Risk Challenge- Tahoe	PEI	The program was designed to provide outreach and engagement of underserved youth, primarily Latino, through positive recreation activities. The goals are to increase academic success, increase leadership and social skills, and to provide mental health services to youth and families through assessment and referral.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Incredible Years	PEI	Incredible Years is designed to strengthen children's social skills and emotional awareness through self-control strategies to boost academic success, reduce aggressive behavior, increase self-confidence and improve parental involvement and support.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Transition to Independence	PEI	Assists participants in establishing, developing, and obtaining goals related to their transition into adulthood, developing independent living skills, identifying and strengthening natural supports and developing a Wellness Recovery Action Plan.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Teaching Pro-Social Skills	PEI	Decreases antisocial/aggressive behaviors; low academic achievement; negative attitude toward school/truancy; suspension/expulsion; family management problems. Increases personal resiliency; social competencies and problem-solving skills;school motivation; positive parenting.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Parent Project & Latino Family Counseling	PEI	This program was designed, for Latino Families, to increase family function and wellness, improve school participation and decrease at-risk youth behaviors.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Positive Indian Parenting & Supports	PEI	This program provides parent education and support services, to families at-risk of or had children removed due to substance abuse and/or mental health concerns, including Positive Indian Parenting classes, White Bison recovery support groups, and Families of Tradition family education nights.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Native Youth Development/ Mentoring	PEI	This program engages youth in culturally relevant leadership, mentoring and advocacy services.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Social Marketing	PEI	Project included creation of the Campaign for Community Wellness website that includes an event calendar, starting conversation tips and resource links; brochures, posters and other social marketing efforts to spread information on mental health and resources for assistance; and cultural guides for Latino, Youth, African American, Asian American, and the elderly.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx

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County	Program Name	Component	Program Description	County/City MHSA Website or Program Contact Information
Placer	Outreach, Education and Stigma Reduction Activities	PEI	Supports efforts to increase mental health awareness, reduce disparities in access to care, and support statewide efforts in suicide prevention and stigma reduction projects.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Maternal Depression	PEI	The Maternal Depression program strives to decrease depression and increased screenings and awareness of community resources for mothers struggling with depression.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Community Culture Camp/Concert	PEI	This activity is to promote social and cultural connections within the Native American Community. Wellness education and cultural activities shall be provided to strengthen resiliency factors and decrease stigma.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Older Adult Program	PEI	Provides depression and suicide therapeutic intervention through screening to participants who are older adults 55+.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Timberline	Housing	Provides shared permanent supportive housing for 5 individuals in a remodeled home in Auburn.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	ATOU Youth F.O.R.C.E. (Friends Offering Respect ~ Creating Empowerment)	INN	Increase the wellness, self-respect and self-direction of persons with disabilities through Youth F.O.R.C.E recruitment and engagement of children and young people in Placer County.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Emmaus Community Garden	INN	Fosters social and community growth through interaction; further wellness within the community.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Active Parenting Now	INN	Delivers parenting classes and groups for parents of teens.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	El Rincon de las Comadres	INN	Offers crafting circles, business training and supportive networks for Latina women.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Lighthouse Family Support Services: Family & Community Wellness Program	INN	Provides family support services focusing on education, wellness decision making, peer support and empowerment.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Support and isolation reduction for adoptive families in Placer County	INN	Provides a family partner to conduct outreach and offer education and support services for adoptive families in Western Placer County.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Outdoor Youth Adventures	INN	Group meetings, relationship building and outdoor activities for underserved youth.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Middle School Truancy Program	INN	Reduces middle school truancy through peer-to-peer accountability.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Writing and Reciting: Healing through writing and spoken word	INN	Weekly peer-based spoken word workshops, mentoring and support for youth/young adults.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Seniors First GRIEF and CALM Programs	INN	Provides peer-based training and support for seniors who experience loss and/or suffer from dementia.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Support for Adoptive Parents in Placer County	INN	Provides wellness supports for parents who have adopted children and youth from foster care.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Sierra Vista Community Wellness Project	INN	Assesses wellness needs and produces pilot programs for aging and youth population in the Colfax area.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Family Ties - A Family Treatment Group for families of service members.	INN	Provides treatment and access to support services for returning soldiers and their families.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx

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Placer	Art Instruction Workshops	INN	Free art training workshops to increase mental wellness benefits.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Tahoe Titans Youth Boxing Gym	INN	Community boxing gym to connect under-served and at-risk youth with positive role models.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	The CORE Youth Program	INN	Nature-based therapy program for youth with mental health or behavioral issues, or substance abuse problems.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	KidsReach II	INN	Promotes social interaction and play with the goal of informing parents of coping strategies, effective child development and nutrition. Decreases isolation and other factors that can lead to child abuse and neglect.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Circle Project	INN	Training program for 8 to 10 current clients to become advocates for themselves and others.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Therapeutic Yoga and Meditation	INN	Develops and implements affordable therapeutic yoga and meditation programs for clients and families as an adjunct to psychotherapy.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Future Fair	INN	Hosts a one day event in which public and private vendors offer information and resources to seniors and their families.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	We CARE Program	INN	Creates a cancer peer navigator program to match newly diagnosed prostate and lung cancer patients with trained cancer survivors.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Breaking Barriers- A Wilderness Approach to MH	INN	Provides youth with rigorous outdoor challenges, setting the stage for significant personal transformation and helping participants develop resilience, emotional well-being, interpersonal communication skills, cooperation, and teamwork.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Young Life Truckee Camp	INN	Scholarship funds for middle/high school students to attend week-long summer camps and weekend school year camps.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Warrior Down Project	INN	Peer-based support group for relapse prevention and linkage to public and community-based services for native and non-native residents at risk of co-occurring mental health and substance abuse challenges who are transitioning from incarceration and residential treatment.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Peer Supported Transitional Housing	INN	Provides peer-supported transitional housing to resident adults with a mental illness who are not currently receiving mental health services through the County.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Creciendo Unidos/Growing Together	INN	Provides at-risk youth engagement, retiros (retreats), and a mobile youth club for Latino residents of the North Lake Tahoe region.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Project ALMA	INN	Provides prevention, intervention and support activities for Latino residents who may be impacted by youth with academic, probation, juvenile detention, gang-related, and mental health risks factors.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Tahoe Wellness Center Project	INN	Creates three Wellness Centers at North Tahoe High School, Sierra Continuation High School, and Truckee High School. Centers provide a single entry point for students to connect to a supportive adult and access wellness services at the school. Provides handoff to community resources of youth who have mental health concerns and provides QPR suicide prevention training.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Library and Support Program (LSP)	INN	The Library and Support Program creates a lending library of educational DVDs related to various mental health conditions for the community and creates a peer support program for individuals to connect with similarly lived experiences.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Home Start's Healthy Jump Start Program	INN	Funding expands Home Start's on-site Life Skills Classes, providing a Nutritionist, Exercise Instructor and Culinary Instructor to teach a new, weekly comprehensive Home Start Healthy Jump Start Program. Parents are given the tools to teach their children to eat and live healthily, preventing a lifetime of potential health issues.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	YOUTH for Youngsters	INN	This community-based group, Youth for Youngsters, provides older mentors for at-risk Latinos/Latinas in elementary and middle schools in Auburn, Roseville and Lincoln who are already emulating older siblings' gang activities. The mentors are youth that have left a gang, are attending college, have improved relationships with their parents, or are no longer taking drugs or alcohol and are consequently considered a success story.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Peace2ThaStreetz	INN	This community-based group, Peacemakers, expands its youth engagement activities to "Peace2ThaStreets," which is a mobile center that includes more activities for more low-income, at-risk and unserved youth in the Roseville and Lincoln communities. Peacemakers reaches out to youth, creating hip hop competitions throughout the year that helps keep youth motivated, gives them encouragement and education from older teens who can serve as mentors.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx

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Placer	Monday Night Feast	INN	To enrich the lives of residents of Lincoln and South Placer County with a monthly free dinner. To help those in need, Granite Springs Church provides a free meal on the last Monday of every month offering a time of relaxation, fellowship and conversation.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Placer Wellness Navigator	INN	Funding supports a part-time, peer-based Navigator to help people with Mental Health/Co-Occurring Disorder to navigate the Placer County services continuum in order to achieve full recovery. This includes non-traditional services (peer support groups, recreation, parenting, etc.). The approach is recovery principled, client centered and client driven, and culturally competent.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	South Placer Mini-Grants Program	INN	To provide mini-grants to non-traditional partners in the South Placer region to form new relationships and networks that would allow great access and better services to those with mental health needs.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Placer	Lake Tahoe Mini-Grants Program	INN	To provide mini-grants to non-traditional partners in the Lake Tahoe region to form new relationships and networks that would allow great access and better services to those with mental health needs.	http://www.placer.ca.gov/Departments/hhs/adult/mhsa.aspx
Plumas	Full Service Partnerships	CSS - FSP	Provides Full Service Partnerships "whatever it takes" services for adults, older adults, children (Wraparound) and transition age youth.	http://www.countyofplumas.com/index.aspx?NID=235
Plumas	Access and Coordination	CSS - OESD	Continues the prior work of Access and Coordination clinician and clinical case manager, and regionalization of staff leaders working to ensure other outreach efforts and referrals are given quick attention to assessment, determination of service plan, etc.	http://www.countyofplumas.com/index.aspx?NID=235
Plumas	Expansion of Children's System of Care	CSS - OESD	Provides for the Children's System of Care (CSOC) service delivery to increase number of MHSA-eligible youth (typically non-MediCal).	http://www.countyofplumas.com/index.aspx?NID=235
Plumas	Supportive Employment	CSS - OESD	Continues supportive employment for both adult and youth clients.	http://www.countyofplumas.com/index.aspx?NID=235
Plumas	Sierra House	CSS - OESD	Maintains support for homeless (and at-risk of) individuals to housing at the Sierra House facility with funds available for 1.5 beds usage and additional funds for services and supports anticipated to be utilized by individuals, previously unserved.	http://www.countyofplumas.com/index.aspx?NID=235
Plumas	Family Therapy	PEI	Provides services to families that have "cycled" in the systems for many years; now with older children and the behavior disruptions at risk of involvement or involved with in Juvenile Justice.	http://www.countyofplumas.com/index.aspx?NID=235
Plumas	Workforce Staffing Support	WET	Facilitates staff access to training to support clinical services integration of MHSA philosophy into services. Loan repayment - no one yet eligible.	http://www.countyofplumas.com/index.aspx?NID=235
Plumas	Training and Technical Assistance	WET	Provides staff training on mind, body, spirit integration of services.	http://www.countyofplumas.com/index.aspx?NID=235
Riverside	Children's Integrated Services Program	CSS - FSP-01	The Children's Integrated Services Program provides a broad array of integrated services and a supportive system of care for minors ages 0–18 years and their families. Priority populations identified for Children/Youth were those with Serious Emotional Disturbances (SED) under the jurisdiction of the juvenile court (wards and dependent) and those suffering from a co-occurring disorder. This Work Plan provides an array of services through interagency service enhancements and expansions; evidence-based practices in clinic expansion programs and full service partnership programs; and continued support of Parent Partners employed as permanent County employees. **Full Service Partnerships:** Multi-Dimensional Family Therapy (MDFT), Multi-Dimensional Treatment Foster Care (MTFC), Parent Child Interaction Therapy (PCIT). **System Development:** Social Service Redesign, Team Decision Making, Therapeutic Behavioral Services, Co-Occurring Disorders, Evidence-Based Practice Models, Central Parent Support Unit and Parent Partners.	http://rcdmh.org/opencms/english/mhsa/
Riverside	Services for Youth in Transition	CSS - FSP-02	Promotes meaningful and successful transitions to youth by reducing hospitalizations, homelessness, out-of-home placement and incarceration, decreasing isolation and promoting independent living. **Full Service Partnerships:** Integrated Services Recovery Centers (ISRC). **System Development:** Peer Support and Resource Centers, Crisis Residential Services, Evidence Practice Models, including the Transition to Independence Process (TIP) model.	http://rcdmh.org/opencms/english/mhsa/

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Riverside	Comprehensive Integrated Services for Adults (CISA)	CSS - FSP-03	Provides a combination of program expansion, new full-service partnership programs and program enhancements throughout the Adult System of Care. Includes: Adult Integrated Services Recovery Centers Housing Programs - Housing Development and Support - Crisis Residential Programs - Expanded Capacity-Specialized Residential Care Facilities Mental Health Court Program (including Veteran's Court) Detention (Jail) Mental Health Outreach Peer Support and Resource Centers Family Advocate Program Outreach Enhanced Outpatient Services Veteran's Liaison	http://rcdmh.org/opencms/english/mhsa/
Riverside	Older Adult Integrated System of Care	CSS - FSP-04	Provides a comprehensive range of service options that encourages utilization of least-restrictive alternatives, including field-based options that bring services closer to the older adult's living situation. **Full Service Partnerships:** SMART (Specialty Multi-Disciplinary Aggressive Response Team) **System Development:** Peer/Family Support, Housing, Network of Care, Family Advocacy, Specialized Training	http://rcdmh.org/opencms/english/mhsa/
Riverside	Peer Recovery Support Services	CSS - SD-05	Ensures employment and utilization of consumers and family members in all aspects of service delivery and in the administrative structures associated with: Peer Support and Resource Centers – Consumer-operated centers offering a variety of support services including vocational, educational, resources and referrals, warm line, anti-stigma and peer-to-peer support activities. Peer Support to Clinics/Programs – Employ consumers to provide peer support services, outreach, orientation, advocacy, support groups, resource/referral information to peers at mental health clinics and programs. Family Advocate Program Expansion – Expansion of existing program to dedicate one advocate per each of the three regions county-wide. Consumer, Family and Parent Support Advocates in Administration Consumer/Family Representatives on Boards and in Training Educational Efforts Hiring Consumers, paid stipends, job training and internships	http://rcdmh.org/opencms/english/mhsa/
Riverside	Outreach and Engagement	CSS - OE-06	Supports activities needed to identify populations that are currently unserved or reluctant to receive mental health services and reduce ethnic disparities. **General Community Outreach and Engagement** - Network of Care - Informational/Educational Materials - Outreach Efforts to Jails, Juvenile Hall, Hospital, Probation - Outreach to Gay/Lesbian /Bisexual/Transgender Organizations - Outreach to Deaf/Hard of Hearing Community - Inland AIDS/Community Health Agencies - Peer Support and Resource Center (Funded through Peer Recovery and Support Services Budget) - Women's Mental Health Policy Council Champions Project	http://rcdmh.org/opencms/english/mhsa/

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Riverside	Outreach and Engagement	CSS - OE-06	**Specific Outreach and Engagement for Ethnic Population** - Outreach Coordinators - Targeted Networking With Organizations Who Work Predominantly With Ethnic Populations o Indian Behavioral Health Community Events o Faith-Based Organizations o Community Organizations (Hispanic) o Public Health Clinics/Low Cost Health Services - Community Events - Recruitment, Training, and Practice Change - Ethnic Members on Boards and Committees - Advisory Committee - Identification of Target Areas - Monitoring Progress	http://rcdmh.org/opencms/english/mhsa/
Riverside	Housing	CSS	The Department of Mental Health operates two Safehaven facilities that follow a low demand drop-in model for providing outreach and housing support services to chronically homeless individuals. The MHSA permanent supportive housing program partners with developers and housing providers across the continuum of housing options to promote housing development, improve access to housing, and ensure supportive services are available to serve TAY, adults and older adults throughout the County.	http://rcdmh.org/opencms/english/mhsa/housing_program.html
Riverside	Workforce Staffing Support	WET-01	Centrally coordinates, develops and implements the training, recruitment and retention strategies identified in the WET Plan. The goal of the unit is to enhance the recovery practice skills of the public mental health workforce as well as assist in the development of career pathways for qualified staff into the public mental health service system. Recruitment and retention is focused on reducing the disparities between our workforce and the diverse clientele that we serve, as well as integrating employees with consumer lived experience and their family members into public mental health service.	http://rcdmh.org/opencms/english/mhsa/WET.html
Riverside	Training and Technical Assistance	WET-02	Provides recovery-oriented skill development within Riverside's public mental health service system and with our partner agencies that assist consumers and their families. Education and training strategies focus on improving cultural competency, and enhancing the service delivery of mental health providers, allied service professionals, and first responders that assist people who experience mental health needs.	http://rcdmh.org/opencms/english/mhsa/WET.html
Riverside	Mental Health Career Pathways	WET-03	Develops and implements outreach and support programs that encourage people with lived experience to enter into the public mental health workforce; identifies strategies for both preparation and excellence in public mental health service delivery. Also includes programs that assist in the clinical development and retention of public mental health professionals.	http://rcdmh.org/opencms/english/mhsa/WET.html
Riverside	Residency / Internship Programs	WET-04	Centrally coordinates the selection and placement of behavioral science students into our Department programs either as the part of a learning objective or a degree requirement, provides mental health career outreach and education to promote public mental services career pathways, and encourages mental health career development of students from underserved communities or who have lived experience.	http://rcdmh.org/opencms/english/mhsa/WET.html
Riverside	Financial Incentives to Workforce Development	WET-05	Provides or supports academic incentive programs designed to recruit or retain a qualified workforce dedicated to public mental health service and that address the unmet needs of Riverside County consumers and their families. Strategies are tailored to the current and anticipated needs specific to Riverside County Department of Mental Health.	http://rcdmh.org/opencms/english/mhsa/WET.html
Riverside	Media and Mental Health Promotion and Education Materials (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	Prepares media and mental health promotion and education materials for all community events, media efforts, and outreach to engage hard-to-reach populations, countywide. The goal is to increase mental health awareness and acceptance, reduce mental health stigma, and reduce suicide. This campaign will impact knowledge and attitudes about mental illness to include: mental health literacy, social distancing, mental health openness, knowledge of resources and willingness to seek help.	http://rcdmh.org/opencms/english/mhsa/PEI.html

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Riverside	Parents and Teachers as Allies (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	This program, created by the National Alliance on Mental Illness (NAMI), is designed to help families and school professionals identify the key warning signs of early-onset mental illnesses in children and adolescents in school and increases understanding of how best to intervene so that youth with mental health treatment needs are linked with services. This two-hour in-service program also includes participation from a mental health consumer, who has experienced the early onset of mental illness, and shares their view from the inside. Discussions include the positive and negative impact that their school experience has had on	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	In Our Own Voice (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	This program, developed by NAMI, is an interactive public education program in which two trained consumer speakers share their personal stories about living with mental illness and achieving recovery. Presenters of the program are reflective of the audience (i.e., transition age youth and older adult consumers present to individuals within their age group or to providers of service representing their age group). The program is focused on spreading the message of recovery. It provides hope and opportunity to both the audience and the presenters.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Dare to be Aware Conference (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	This is a full-day conference for middle and high schools from across the County that began in 2002 due to stigma against individuals with mental illness, which was preventing them from seeking early intervention and treatment. The goal of the conference is to present an accurate picture of mental illness to the youth of Riverside County in order to reduce stigma. Our intervention efforts target high-risk youth and the community to teach them what stigma means, how it negatively impacts individuals, take steps to minimize stigma at school, home and community. We strive to bring awareness of available community resources and how to access services. We also strive to raise awareness about mental illness, which will make it easier for those with mental illness to seek appropriate help.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Breaking the Silence (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	This NAMI-developed program teaches students in upper elementary school, middle school, and high school about serious mental illness.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Toll-Free, 24/7 Helpline (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	The “HELPLINE” provides crisis and suicide prevention services, including counseling and emergency assistance 24/7. Callers receive (when appropriate) referrals to ongoing services both in Riverside County Department of Mental Health (RCDMH) and outside agencies as well as Riverside County 211.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Network of Care (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	The Network of Care for Behavioral Health is a user-friendly website that serves as a resource for consumers, community members, community-base organizations and providers interested in behavioral health. The website provides easy access to information regarding behavioral health services, laws, news, education, recovery management tools, and resources to increase mental health awareness. The Network of Care for Behavioral Health is a practical tool that hopes to ensure that there is "No Wrong Door" for those	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Call to Care (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	Provides outreach to, trains, and assists lay persons to initiate and maintain understanding, caring relationships with persons of their religious communities, and to volunteer to use their lay counseling skills in their communities.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Outreach Activities (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	Outreach and engagement staff provide community outreach and engagement activities targeting those populations that are currently receiving little or no service. Increases awareness and knowledge of mental health and mental health resources, such as PEI programs, and increases community readiness to address mental health issues and eliminates stigma associated with mental health issues. Staff provide community education and referral and linkage.	http://rcdmh.org/opencms/english/mhsa/PEI.html

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Riverside	Ethnic and Cultural Community Leaders in a Collaborative Effort (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	This collaborative effort continues relationships with community leaders from ethnic and cultural populations who were hired during the Prevention and Early Intervention (PEI) Program Planning Process. These consultants continue to work within local communities to identify key community leaders and build a network of individuals from these communities whose primary goal is to promote the dissemination of mental health information, to create awareness and reduce stigma, encourage community engagement to take advantage of resources and education available, and promote participation in PEI services.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Promotores de Salud (Mental Health Outreach, Awareness and Stigma Reduction Project)	PEI	Addresses needs within the large number of Hispanic communities in Riverside County. Promotores are health workers who work and are from the community they serve. They provide health and mental health education and support to members of their communities.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Triple P Positive Parenting (Parent Education and Support)	PEI	A multi-level system of parenting and family support strategies for families with children from birth to age 12. Triple P is designed to prevent social, emotional, behavioral, and developmental problems in children by enhancing their parents' knowledge, skills, and confidence.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Strengthening Families Program (Parent Education and Support)	PEI	Family skills training intervention designed to increase resilience and reduce risk factors for behavioral, emotional, academic, and social problems in children. This program brings together the family for each session. This program in currently in development (as of April 2013).	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Parent Child Interaction Therapy (Parent Education and Support)	PEI	An intensive, short-term, evidence -based intervention that helps families with children aged 2-8 who exhibit a number of chronic disruptive behaviors at home, in school, preschool or daycare (e.g., aggression, defiance, frequent temper tantrums, refusing to follow directions, talking back, swearing).	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Families and Schools Together (Early Intervention for Families in Schools)	PEI	The FAST program is an outreach and multi-family group process in schools designed to build protective factors in children, empower parents to be the primary prevention agents for their children, and build supportive parent-to-parent groups. The overall goal is to intervene early to help at-risk youth succeed in the community, at home, and in school, thus avoiding problems such as school failure, violence, and other delinquent behaviors.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Depression Treatment Quality Improvement (TAY Project)	PEI	Provides evidence-based early intervention to treat depression, based on the concepts of Cognitive-Behavioral Therapy (CBT). Services provided in multiple locations in each service delivery region through organizations that serve youth and young adults in a setting where the youth feel comfortable. Services targeting LGBTQ youth provided at an organization that serves LGBTQ youth and young adults.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Peer to Peer Services (TAY Project)	PEI	Peer-to-Peer Services – This service connects to DTQI. As an organization provides DTQI, their outreach and engagement efforts will be specific to the target population. Leveraging with existing agencies, this project employs youth speakers' bureaus to outreach and educate at-risk youth and the community at large on the unique issues each group of identified at-risk youth experience as they relate to mental health and interpersonal issues.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Outreach and Reunification Services to Runaway TAY (TAY Project)	PEI	Provides crisis intervention and counseling strategies to facilitate re-unification of the transition age youth with an identified family member. Follow up referrals assist with stabilization of the living situation for the youth. RCDMH collaborates with community providers to identify specific outreach strategies to reach runaway TAY and to reach unserved and underserved populations, including LGBTQ youth.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Digital Storytelling (TAY Project)	PEI	Provides a three-day workshop for individuals during which they identify a "story" about themselves that they would like to tell and produce a 3-to-5-minute digital video to tell their story. This activity gives the individual a unique way to communicate something about their life experiences, which could include trauma, loss, homelessness, etc. (This program is in development.)	http://rcdmh.org/opencms/english/mhsa/PEI.html

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Riverside	Active Minds (TAY Project)	PEI	This national organization works to use the student voice to change the conversation about mental health on college campuses. Increases student awareness of mental health issues, provides information and resources regarding mental health and mental illness, encourages students to seek help as soon as it is needed, and serves as a liaison between students and the mental health community. The student-run chapters organize campus-wide events to remove the stigma that surrounds mental health issues and create an environment for open conversations about mental health issues.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	QPR for Suicide Prevention (First Onset for Older Adults)	PEI	QPR stands for Question, Persuade, and Refer. People trained in QPR learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone for help. The QPR for Suicide Prevention model will be used to train gatekeepers who interact with seniors in order to look for depression and suicidal behavior. This program is in development (as of April 2013).	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Cognitive-Behavioral Therapy for Late-Life Depression (First Onset for Older Adults)	PEI	This program focuses on early intervention services that reduce suicidal risk and depression through an active, directive, time-limited, and structured problem-solving approach. A highlight of this model is its portability, which allows implementation in a variety of settings, including places where older adults are likely to go (senior centers and senior workforce centers).	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Program to Encourage Active, Rewarding Lives for Seniors (PEARLS) (First Onset for Older Adults)	PEI	This is an intervention for people 60+ who have minor depression or dysthymia and are receiving home-based social services from community services agencies. Designed to reduce symptoms of depression and improve health-related quality of life.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Caregiver Support Groups (First Onset for Older Adults)	PEI	Partners with local community-based organizations and social service agencies to develop psychoeducation curriculum and supportive interventions and provide support groups for caregivers. Specific outreach, engagement, and linkage to the support groups for individuals and caregivers/family members of individuals receiving prevention and early intervention services, caregivers of seniors with mental illness, and caregivers of seniors with dementia.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Cognitive Behavioral Intervention for Trauma In Schools (Trauma Exposed)	PEI	CBITS is a cognitive and behavioral therapy group intervention to reduce children's symptoms of Post Traumatic Stress Disorder (PTSD) and depression caused by exposure to violence.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Safe Dates (Trauma Exposed)	PEI	A dating violence prevention program for middle and high school students, Safe Dates works as both a prevention and early intervention tool for teens who have already begun to date and those who have not yet started dating. This program has not yet been implemented (as of April 2013).	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Seeking Safety (Trauma Exposed)	PEI	This program is a present-focused, coping skills program designed to simultaneously help people with a history of trauma and substance abuse. Can be conducted in group or individual format; for female, male or mixed gender groups; for people with both substance abuse and dependence issues; and for people with PTSD and for those with a trauma history that do not meet criteria for PTSD.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Prolonged Exposure Therapy (Trauma Exposed)	PEI	Early intervention cognitive-behavioral treatment program for adult men and women with PTSD who have experienced single or multiple/continuous traumas. Provides individual therapy designed to help people process traumatic events and reduce their PTSD symptoms along with depression, anger, and general anxiety.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Mamás y Bebés (Mothers and Babies) (Underserved Latinos)	PEI	Evidence-based mood management perinatal group intervention for women.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Cognitive-Behavioral Therapy for Depression (Underserved Latinas)	PEI	Provides Cognitive-Behavioral Therapy (CBT) for depression (with antidepressant medication). This program was developed for use with low-income Latina women. It uses an adapted format of CBT to address cultural issues associated with the Hispanic culture. This program has not yet been implemented (as of April 2013).	http://rcdmh.org/opencms/english/mhsa/PEI.html

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Riverside	Effective Black Parenting Program (Underserved African Americans)	PEI	The EBPP has been shown to be effective with parents of African American children, including teenage African American parents and their babies, and with African American parents of adolescent children. It includes culturally specific parenting strategies; general parenting strategies; basic parenting skills taught in a culturally sensitive manner using African American language expressions and African proverbs; and special program topics such as single parenting and preventing drug abuse.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Africentric Youth and Family Rites of Passage Program (Underserved African Americans)	PEI	Designed for African American male youth ages 11-15. The goal of the program is empowerment of black adolescents through a nine-month rites of passage program. A major component of the program is the after-school program that offers modules on knowledge and behaviors for living. Another component of the program includes casework and counseling with linkage to needed services.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Cognitive-Behavioral Intervention for Trauma in Schools (CBITS) (Underserved African Americans)	PEI	A cognitive and behavioral therapy group intervention for reducing children's symptoms of post-traumatic stress disorder (PTSD) and depression caused by exposure to violence that has been used successfully in inner city schools with multi-cultural populations.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Incredible Years (Underserved Native Americans)	PEI	Incredible Years is a parent training intervention which focuses on strengthening parenting competencies and fostering parents' involvement in children's school experiences to promote children's academic and social skills and reduce delinquent behaviors. SPIRIT is a culturally-tailored evidence-based practice that was adapted by Dr. Renda Dionne for the Riverside County Native American community.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Guiding Good Choices (Underserved African Americans)	PEI	This prevention program provides parents of children in grades 4 through 8 (aged 9-14) with the knowledge and skills to guide their children through early adolescence. It seeks to strengthen and clarify family expectations for behavior, enhance the conditions that promote bonding within the family, and teach skills that allow children to resist drug use successfully. Addressing substance abuse prevention is essential to the prevention of mental health problems.	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Strengthening Intergenerational/ Intercultural Ties in Immigrant Families (Underserved Asian American/Pacific Islanders)	PEI	Strengthening Intergenerational/Intercultural Ties in Immigrant Families (SITIF): A Curriculum for Immigrant Families – The target populations of the SITIF program are Asian American/ Pacific Islander immigrant parents and/or caregivers with inadequate parenting skills to effectively discipline and nurture their children. The primary strategies of the program are: community education/outreach workshops, a bicultural parenting class, and family support service linkage. The activities are delivered at locations that are natural congregation places for the immigrant families: school sites, community service delivery settings, community-based and culturally competent behavioral healthcare center. This program is currently in development (as of April 2013).	http://rcdmh.org/opencms/english/mhsa/PEI.html
Riverside	Children's Outpatient Program Consolidation Project	CFTN	Project includes the purchase of two existing structures at a combined capacity of 78,116 square feet, centrally located at 3075 & 3125 Myers Street, Riverside, CA 92503. Renovations consist of program operational and administrative needs and required updates to the data communications system.	http://rcdmh.org/opencms/english/mhsa/CapFac.html
Riverside	Recovery Arts Core Project	INN	Increase the quality of services, including the development of more systematic outcomes, to measure the effectiveness of the program. Measures the impacts of peer-delivered arts services on consumers receiving services through the Riverside County Department of Mental Health (RCDMH).	http://rcdmh.org/opencms/english/mhsa/Innovation/
Riverside	Recovery Learning Center	INN	Creates a new service delivery model, one that is consumer-driven, not just consumer-enhanced. The full design of the RLC. including program philosophy, physical plant, structure and service delivery, were envisioned by people with lived experience who are dedicated to improving the lives of consumers. Establishes a program rooted in recovery philosophy and operated by people with lived experience.	http://rcdmh.org/opencms/english/mhsa/Innovation/
Riverside	The Family Room	INN	Provides a new program choice for consumers and family members. Empowers family members to become the primary support person in facilitating recovery for their loved one. Emphasizes support for families who are in crisis and enhancing family members' knowledge and skills so they can better assist their loved one. The Family Room is developed with the hypothesis that if family members are identified, active, and supported in the recovery and treatment process, then they will feel empowered to chose this treatment option and achieve better outcomes. "Family member" is defined as any other person identified by the consumer to help in their recovery, including blood relatives, friends, neighbors, and roommates should be included among others as potential family members.	http://rcdmh.org/opencms/english/mhsa/Innovation/

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Riverside	Older Adult Self Management	INN	Enables the psychiatrist, along with a team of mental health professionals, to improve the overall functioning and sense of well-being of older adults with serious and persistent mental illness receiving medication management. Older adults receive assistance in the following areas: coordinating their own care, developing skills to better communicate with physicians, effectively monitor and self-report their own general health and skills to improve their social activities and community supports.	http://rcdmh.org/opencms/english/mhsa/Innovation/
Sacramento	Transitional Community Opportunities for Recovery and Engagement (TCORE)	CSS	Offers low-to-moderate intensity community-based services for individuals being released from acute care settings or who are at risk for entering acute care settings and are not linked to ongoing mental health services. The program also includes a peer partner component and operates at contracted and county-operated sites.	www.sacdhhs.com/mhsa
Sacramento	Sierra Elder Wellness	CSS - FSP	Provides specialized geriatric services including psychiatric support, multidisciplinary mental health assessments, treatment, and intensive case management services with persons who have co-occurring mental health, physical health, and/or substance abuse and social service needs that require intensive services in order to remain living in the community at the least restrictive level of care. The goals of the program are to improve psychiatric and functional status, increase social supports, decrease isolation, reduce trips to the emergency room and/or hospital, reduce homelessness, and improve overall quality of life.	www.sacdhhs.com/mhsa
Sacramento	Permanent Supportive Housing	CSS - FSP	Includes three programs: 1) PSH-Guest House is the "front door" and has same-day access to service and limited temporary housing. Services include triage, comprehensive mental health assessments and evaluations, assessments of service needs, medication treatment, linkages to housing, and application for benefits. 2) PSH-New Direction provides permanent supportive housing and an FSP level of mental health services and supports for adults, including older adults, and their families. The program provides integrated, comprehensive services utilizing a "whatever it takes" approach to support consumers in meeting their desired recovery goals. New Direction provides services at two permanent supportive MHSA-financed housing developments, permanent supportive housing within TLCS permanent housing sites, and utilizes community-based housing vouchers and limited subsidies. Additionally, New Direction Palmer Apartments Brief Interim Housing provides services and supports in short-term housing, focuses on rapid access to permanent housing within 30 days once income is secured. Longer term temporary housing is available for individuals awaiting openings in MHSA-financed housing developments. 3) PSH-Pathways program provides permanent supportive housing and an FSP level of mental health services and supports for children, youth, adults, older adults and families. The program provides integrated, comprehensive services utilizing a "whatever it takes" approach to support consumers and their families in meeting their desired recovery goals. Pathways provides services at six permanent supportive MHSA-financed housing developments, community-based housing vouchers and utilizes limited subsidies.	www.sacdhhs.com/mhsa
Sacramento	Transcultural Wellness Center	CSS - FSP	Designed to increase penetration rates and reduce mental health disparities in the Asian/Pacific Islander communities in Sacramento County. The program serves children, families, transition age youth, adults, and older adults. It is staffed by clinicians, consumers, family members, and community members and provides a full range of services with interventions and treatment that take into account the cultural and religious beliefs and values, traditional and natural healing practices, and associated ceremonies recognized by the API communities. Services, including psychiatric services, are provided in the home, local community and school with an emphasis on blending with the existing cultural and traditional resources so as to reduce stigma. Staff assignments are made taking into consideration the gender and specific cultural and linguistic needs of the client. The goals of the TWC are to increase timely and appropriate mental health services to API populations and to decrease the number of individuals utilizing social services, acute care, or public safety providers as a component of untreated mental illness.	www.sacdhhs.com/mhsa

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Sacramento	Wellness and Recovery Centers	CSS - OESD	Includes three components: 1) Wellness and Recovery Centers (WRCs) - Community-based multi-service centers that provide a supportive environment offering choice and self-directed guidance designed to support clients in their recovery goals. They employ consumers and train individuals for peer counseling, peer mentoring, advocacy, and leadership opportunities throughout Sacramento County. WRCs provides curriculum driven and evidence-based skill building activities, vocational supports, family education, self help, peer counseling and support and alternative therapies. Key assets include a library, a resource center, and a computer lab that can be utilized by center participants and the general public interested in learning more about mental health and recovery. 2) Peer Partner Program (Peer Partners) - Provides peer support services to adults and older adults, from diverse backgrounds, linked to the APSS clinics. Peer Partners (consumers and family members) are integrated staff members of the APSS multidisciplinary team. and provide peer-led services that support APSS participants and their family in their recovery process. Individual support, peer-led support groups, mentoring, and benefits acquisition are key strategies contributing to successful outcomes. 3) Consumer and Family Voice Program - Promotes the DBHS mission to effectively provide quality mental health services. The consumer and family member advocates promote and encourage parent/caregiver, youth, adult, and older adult consumer involvement in the mental health system from program planning to program participation. This program provides a wide array of services and supports to all age groups including, but not limited to, advocacy, system navigation, trainings, support groups, and psycho-educational groups. This program also coordinates and facilitates the annual Consumer Speaks Conference.	www.sacdhhs.com/mhsa
Sacramento	Adult Full Service Partnership	CSS - FSP	Provides an array of FSP services to adults with persistent and significant mental illness that may also have a co-occurring substance use disorder and/or co-morbid medical concerns, many of whom are transitioning from long-term hospitalizations. The programs provide a continuum of integrated, culturally competent services that includes case management, benefits acquisition, crisis response, intervention and stabilization (including a 24/7 response), medication evaluation and support, and effective ongoing specialty mental health services. The program assists clients transitioning into the community from high-cost restrictive placements, such as psychiatric hospitals, incarcerations, or other secured settings. In addition, family members and/or caregivers are engaged as much as possible at the initiation of services and offered support services, such as education, consultation and intervention, as a crucial element of the client’s recovery process.	www.sacdhhs.com/mhsa
Sacramento	Juvenile Justice Diversion and Treatment	CSS - FSP	Provides screenings, assessments and intensive mental health services and FSP supports to eligible youth and their families involved in the juvenile justice system. Preadjudicated youth are screened and given an assessment. With court approval, the youth have the opportunity to avoid incarceration and voluntarily participate in this program, as long as clinically necessary, up to their 26th birthday. Adjudicated youth are referred, assessed, and have the opportunity to receive intensive, evidence-based services that are delivered in coordination with a specialized probation officer. Family and youth advocates complement clinical services.	www.sacdhhs.com/mhsa
Sacramento	Suicide Prevention	PEI	Creates a system of suicide prevention through training, education, and system accountability. Services include a suicide prevention crisis line, postvention services, field-based flexible services to community members experiencing a crisis and community support services targeting specific racial, ethnic, and cultural groups.	www.sacdhhs.com/mhsa

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Sacramento	Strengthening Families	PEI	Includes five components: 1) Quality Child Care Collaborative (QCCC) - Early Childhood Consultation to preschools and early care learning environments for children from birth to age five. Consultation is designed to increase teacher awareness about the meaning of behavior to ensure the success of the child while in a daycare and/or preschool setting. 2) HEARTS for Kids - Provides a comprehensive menu of services (health exams, assessments, referrals and treatment services) for children ages birth to five (5) who come to the attention of Child Protective Services or are placed into protective custody. 3) The Bullying Prevention Education and Training Project – A Training of Trainer (TOT) model uses evidence-based practices to train school staff, who then educate other school staff, students, and parents/caretakers on anti-bullying strategies. The project is primarily being implemented at elementary school demonstration sites; however, it is intended to expand to other grades by leveraging school district resources. The long-term goal is to change school climates across all 13 school districts. 4) Early Violence Intervention Begins with Education (eVIBE) – Uses universal and selective evidence-based prevention approaches to target children and youth ages six (6) to eighteen (18) and their family members/caregivers to improve social skills, increase protective factors, prevent youth violence, and reduce or eliminate family conflict. 5) Independent Living Program (ILP) 2.0 - Expands the Independent Living Program for foster youth to non-foster, homeless, and LGBTQ youth ages sixteen (16) to twenty-five (25) to gain positive, proactive, successful life skills either through a classroom setting or through individual life skills counseling.	www.sacdhhs.com/mhsa
Sacramento	Integrated Health and Wellness	PEI	Includes three programs: 1) Assessment and Treatment of Onset of Psychosis Early Diagnosis and Preventative Treatment (SacEDAPT) – focuses on early onset of psychosis. It is a nationally recognized treatment program utilizing an interdisciplinary team of physicians, clinicians, support staff, consumers and family advocates to provide assessment, early identification and treatment of the onset of psychosis. The program continues to engage in outreach services throughout Sacramento County with a particular focus on underserved populations. 2) SeniorLink – Provides community integration support for adults aged 55 and older who are demonstrating early signs of isolation, anxiety and/or depression. Paraprofessional Advocates outreach to individuals in their homes or other community-based settings. Based on participant needs, program services include home visits; collaboration with and linkage to health care providers, socialization opportunities, transportation, service coordination, advocacy, information and referral, skill-building groups and liaison to community services. 3) Screening, Assessment, and Brief Treatment - This program will be further implemented in fiscal year 2013-14. There are five Federally Qualified Health Care Centers that will participate. The purpose of this program is to integrate medical and behavioral health services in a community health care setting. Services can include: (a) screening and assessment in a primary care clinic setting designed to increase early detection and treatment of depression, anxiety, substance use/abuse and symptoms related to trauma; (b) brief treatment when clinically indicated; (c) case management and follow-up care; and (d) linkages to individual counseling, support groups and other kinds of supports.	www.sacdhhs.com/mhsa
Sacramento	Mental Health Promotion	PEI	Increases community awareness about mental health issues and reduces stigma and discrimination toward individuals and families living with mental illness. This project includes a culturally and linguistically appropriate multi-media campaign with specific efforts toward educating and engaging unserved and underserved cultural and ethnic communities, as well as a Speakers Bureau. The County is partnering with Consumer and Family Member advocacy groups, system partners, agencies and groups that work with culturally and ethnically diverse communities, and other stakeholders who can be instrumental in increasing awareness of mental health issues and reducing stigma and discrimination in Sacramento County.	www.sacdhhs.com/mhsa
Sacramento	Workforce Staffing Support	WET	The WET Coordinator assists in the facilitation and implementation of previously approved WET Actions. The Coordinator attends and participates in statewide WET Coordinator Meetings; twice monthly WET Coordinator Conference Calls; and the WET Central Region Partnership, including the Transitional Age Youth (TAY) Workgroup, Training Sub-Committee, and the Community College Workgroup. The WET Coordinator will continue to assist in the evaluation of WET plan implementation and effectiveness; coordinate efforts with other MHSA and Division/Department efforts.	www.sacdhhs.com/mhsa

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Sacramento	System Training Continuum	WET	This Action expands the training capacity of mental health staff, system partners, consumers, and family members through a Training Partnership Team, Train the Trainer models, and training delivery. A Crisis Responder Training Workgroup was established as the first Training Partnership Team and resulted in the development of a 2 hour mental health training education program that trained Sacramento City Police Department (SPD) and Citrus Heights Police officers and supervisors. The training component has now been added to SPD's annual required training. Additionally, the training program was updated this year, expanded to 3 hours and now meets Police Officer Standards and Training (POST) certification requirements. Currently all Sacramento County Sheriff's Department officers and supervisors as well as some officers and supervisors from other law enforcement agencies including Rancho Cordova are receiving the training which will be conducted through 2014. Plans are underway to formally extend the training to other local law enforcement agencies that have expressed interest as resources are available. Through our established relationship with California State University, Sacramento (CSUS), two professors in the CSUS Social Work Department participated in the WET Community Planning Process several years ago and have participated at various points in other MHSA planning processes. Since then, DBHS staff members have been invited to speak to graduate students who are recipients of the MHSA Stipend Program in the University's Social Work Department. A DBHS senior manager presents once per year to address the issue of documentation in the public mental health system and acts as an available resource for consultation, when needed. This training provides examples of services provided and how to write a progress note that is in compliance with federal, state and county guidelines and in alignment with the wellness and recovery principles of MHSA. The information provides students with unique insight into Sacramento County's mental health system and addresses a gap in student training, as this information is not adequately addressed in typical graduate school curriculum.	www.sacdhhs.com/mhsa
Sacramento	Office of Consumer and Family Member Employment	WET	This Action was designed to develop entry and supportive employment opportunities for consumers, family members and individuals from Sacramento's culturally and linguistically diverse communities to address occupational shortages identified in the Workforce Needs Assessment. Due to budget reductions and lack of employment opportunities over the last several years, implementation of this Action has been delayed. While employment has been challenging across the state, Sacramento County ranked second for the highest unemployment in the state. However, efforts to train existing Consumers, Family Members, and Caregivers to ensure successful service delivery and employment have taken place through other efforts. In anticipation of improving job market conditions, current job market indicators and data from the upcoming 2013 Sacramento County Human Resources Survey will be used to guide planning and implementation of this Action	www.sacdhhs.com/mhsa
Sacramento	High School Training	WET	This Action will be further implemented in fiscal year 2013-14 and builds upon a foundation developed through partnerships between Mental Health Plan providers and the Cultural Competence Committee, including community partners and other interested stakeholders. The curriculum will focus on introducing mental health to high school youth (9th through 12th grade) during the time they are typically considering career opportunities. Additional focus will include, but not be limited to, addressing issues of stigma and discrimination toward individuals and family members living with mental illness; increasing understanding of mental health issues from diverse racial and ethnic perspectives; exploring mental health issues across age groups; exploring the various career opportunities in public mental health; and other areas. Sacramento County serves on the Community Advisory Committee and advises on student projects related to mental health and cultural competence delivery in healthcare services. Sacramento County works with the selected school with on-the-job training, mentoring, existing Regional Opportunity Programs (ROP), and experiential learning opportunities for public high school youth possibly interested in learning more about mental health and public mental health as a health career option	www.sacdhhs.com/mhsa

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Sacramento	Psychiatric Residents and Fellowships	WET	Through this action, interested psychiatric residents and fellows are placed at public/community mental health settings with accessible and dedicated supervision and support to ensure a positive community mental health experience. Additionally, residents, fellows, and other team members continue to receive in-service trainings on wellness and recovery principles, consumer movement and client culture, and an integrated service delivery system. Targeted activities to promote holistic services while coordinating services with the primary care needs of consumers are a part of this integrated service delivery experience. In fiscal year 2013-14, residents and fellows will be involved in California Brief Multi-cultural Competence Scale (CBMCS) training, as well as the Use of Interpreters in a Mental Health Setting for Mental Health Providers training	www.sacdhhs.com/mhsa
Sacramento	Multidisciplinary Seminar	WET	This Action increases the number of psychiatrists and other non-licensed and licensed practitioners working in community mental health that are trained in the recovery and resiliency and integrated service models; improves retention rates; supports professional wellness by addressing work stressors and burn-out; and improves quality of care. Implementation of this Action was delayed due to budget reductions and the focus on billable services. We recognize this is an important strategy and have sent staff to training that supports staff in the delivery of effective mental health services. Given early indications that the economy is stabilizing, DBHS will further assess the design of the program in light of current market trends and available resources and move towards formal implementation of this Action.	www.sacdhhs.com/mhsa
Sacramento	Consumer Leadership Stipends	WET	This Action provides consumers and family members from diverse backgrounds with the opportunity to receive stipends for leadership or educational opportunities that increase knowledge, build skills, and further advocacy for consumers on mental health issues. Educational opportunities include, but are not limited to: the California Association of Social Rehabilitation Association (CASRA) social rehabilitation certificate and certification in group facilitation. Sacramento County is providing funding support to attend trainings/conferences that provide leadership training. Sacramento County is also exploring other strategies to further implement this Action to address logistics that are challenging for the county to manage. The county will continue to work with diverse stakeholders to determine an array of leadership and training opportunities that would be beneficial for consumers and also establish fair and equitable selection criteria for the awarding of Stipends	www.sacdhhs.com/mhsa
Sacramento	Stipends for Individuals, Especially Consumers and Family Members for Education Programs to Enter the Mental Health Field	WET	This Action supports efforts to develop a diverse, culturally sensitive and competent public mental health system by establishing a stipend fund to allow individuals to apply for stipends to participate in educational opportunities that will lead to employment in Sacramento County's mental health system. Sacramento County is working with the Central Region Partnership Collaborative and other community partners to develop a Financial Incentives Pilot Project to potentially leverage county WET and Central Region funds	www.sacdhhs.com/mhsa
Sacramento	Technological Project	CFTN	Consists of five phases over a five-year period which began in fiscal year 2010-11 to build the infrastructure necessary to meet Sacramento's goals of the Community Services and Supports Plan by improving integrated services that are client and family driven, meet the needs of target populations and are consistent with the recovery vision in Sacramento County. This project will also further the County's efforts in achieving the federal objectives of meaningful use of electronic health records to improve client care. Sacramento County is currently through phase 3 and is in the process of implementing phase 4 of the SacHIE (Sacramento's Health Information Exchange) project. To date, over half of our contracted outpatient providers are utilizing an electronic health record that allows them to collect client demographics, complete assessments, progress notes, client plans as well as electronic prescribing of medications and claiming for services provided.	www.sacdhhs.com/mhsa

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Sacramento	Capital Facilities Project	CFTN	Approved in July 2012, the project involves renovations and improvements to the county-owned complexes at 2130, 2140, 2150 Stockton Boulevard. The renovations and improvements of these complexes will allow for the co-location of the MHSA-funded Adult Psychiatric Support Services (APSS) and Peer Partner programs and consolidating its current two APSS program into one location. Currently, the Department of General Services (DGS) and the County Architects are developing a Scope of Work that incorporates feedback from the community, the necessary Americans with Disabilities Act (ADA) requirements, and cost estimates for this project. In April and May 2013, DGS will release a request for project proposals to interested contractors. The County Architects will review project proposals, select a contractor and execute a contract by July 2013. It is anticipated that the project construction timeline will be established by and construction will begin in September 2013.	www.sacdhhs.com/mhsa
Sacramento	Respite Partnership Collaborative	INN	The objective of the Respite Partnership Collaborative (RPC) is to increase voluntary community-based local mental health respite service options to offer a variety of alternatives to psychiatric hospitalization for community members experiencing a crisis in Sacramento County. It is doing this by providing time-limited funding for the sole purpose of developing and trying out new respite practices and/or approaches. There are many types of mental health respite ranging from planned respite with scheduled events and/or programming which offer limited time outs from the triggers that may lead to mental health crisis to 24/7 crisis respite which is available at all hours and designed to help those experiencing a mental health crisis transition to stabilization. Respite programs for different populations exist in many communities and are neither new nor innovative on their own. Therefore, the respite services are ancillary to this project. The learning objective for the innovation project in Sacramento County's plan is to explore having an administrative entity implement the project to determine if a public-private partnership can lead to new partnerships, increased efficiencies and, ultimately, improved services to community members. The RPC is a new public-private partnership of the County of Sacramento, Division of Behavioral Health Services, Sierra Health Foundation: Center for Health Program Management (SHF) and the community-at-large. The Sacramento County Board of Supervisors approved Sierra Health Foundation to be the administrative entity for this project in November 2011.	www.sacdhhs.com/mhsa
San Benito	MHSA System Transformation Program	CSS	Provides services to all ages: children (ages 0-17), transition age youth (ages 16-25), adults (ages 18-59), older adults (ages 60+); all genders; and all races/ethnicities. Embraces a 'whatever it takes' service approach in helping all populations reduce ethnic disparities, offer peer support, and promote values-driven, evidence-based practices to clients of all ages and their families. Program includes comprehensive assessment services; wellness and recovery action planning; case management services; individual and group mental health services; crisis services; education and employment support; anti-stigma events; linkages to needed services; and housing support. Adult Wellness Center (Esperanza Center) provides adults and older adults with necessary services and supports in a welcoming environment. Esperanza Center also provides transition age youth with a safe, comfortable place to receive services and participate in age-appropriate activities.	http://sanbenito.networkofcare.org/mh/home/news_announcements.cfm
San Benito	Children and Youth PEI Services	PEI	Hollister Youth Alliance provides prevention and early intervention activities in the schools and community. Youth and families involved in the Joven Noble program have achieved positive outcomes, and youth are developing positive leadership skills and reducing involvement in gangs. Program reduces cultural and ethnic disparities in our mental health system. Improves access to services for the Latino community.	http://sanbenito.networkofcare.org/mh/home/news_announcements.cfm
San Benito	Suicide Prevention Training for First Responders	PEI	Trainings held at a local high school, the Hollister Police Department, Chamberlain's Children Center, the San Benito County jail, the County Office of Education, and a local nursing facility.	http://sanbenito.networkofcare.org/mh/home/news_announcements.cfm
San Benito	Older Adult PEI Services	PEI	Helps seniors reduce their feelings of isolation and develop a social support network with their own community. An SBCBH clinician or mental health rehab specialist regularly visits the local senior center, Jóvenes de Antaño. Offers informative material, coordinates services with allied agencies (e.g., Meals on Wheels; visiting nurse), and offers supportive groups to caregivers. Provides outreach and supportive services to seniors in local senior living apartments. These services have helped seniors who feel isolated in their homes by offering discussion and support groups, as well as individual services. Outreach to women and older adults has also been successful.	http://sanbenito.networkofcare.org/mh/home/news_announcements.cfm

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San Benito	Women's PEI Services	PEI	Serves women who come from situations of domestic violence. Services provided at the Women's Domestic Violence Shelter in Hollister and at convenient locations through the community. Following a curriculum, support groups learn key independent living skills, including budgeting, finding a job, and managing resources. These services provide outreach and linkages to a traditionally underserved population. Outreach to women and older adults has also been successful.	http://sanbenito.networkofcare.org/mh/home/news_announcements.cfm
San Benito	Primary Care Integration Project	INN	Reduces the stigma of mental health service and improves timely access. Coordinates and services, co-locates mental health and physical health care services. Referral from the physical health care physician validates mental health as an essential health care need and increases the likelihood that the client will follow through. Expands access to San Benito County's more than 50% Latino population and others in the community who are unserved or underserved because they are not accessing mental health services.	http://sanbenito.networkofcare.org/mh/home/news_announcements.cfm
San Bernardino	Comprehensive Children and Family Support Services (CCFSS)	CSS - FSP	Wraparound and Wrap-informed Full Service Partnerships are community-based, family-centered, strength-based, needs-driven planning interventions designed to maintain seriously emotionally disturbed children in their community at the lowest level of care possible. MHSA Success First/Early Wraparound is specifically designed to assist children and their families who would not normally qualify for SB 163 services. CCFSS's third program, Children's Intensive Residential Services (ChRIS), focuses on modifying the provision of group home care for youth by incorporating elements of wraparound and emphasizing community and family reintegration.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Integrated New Family Opportunities (INFO)	CSS - FSP	This National Association of Counties (NACO) award-winning program serves minors coming out of the Central Valley Juvenile Detention and Assessment Center. INFO uses evidence-based models for reducing the involvement of mentally ill minors in the juvenile justice system by providing assertive family and community involvement in treatment, case management and support 24 hours a day, 7 days a week, behavioral therapy, and peer counseling.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Transitional Age Youth (TAY) One Stop Centers	CSS - FSP	Provide services to Transition-Age Youth (TAY), ages 16-25 years old, from underserved and unserved ethnic and lower socio-economic populations with alcohol and other drug abuse issues, mental health, homelessness, abuse, non-traditional lifestyles and/or single family issues. TAY services include employment assistance, educational opportunities, shelter bed housing, psychiatric therapy and counseling, medication supports, groups and activities with the goal of independence. There are four (4) centers located in San Bernardino, Rancho Cucamonga, Victorville and Yucca Valley.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Consumer-Operated Peer-Support Services and Clubhouse Expansion	CSS - OESD	Clubhouses are recovery-oriented centers for members, ages 18 and older, that operate with minimal support from staff. Consumers and family members offer guidance to peers for assistance with employment, housing, recreation, social activities and education. There are ten (10) contract and County-operated clubhouses located throughout the County.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Forensic Integrated Mental Health Services (STAR, FACT)	CSS - FSP	The Supervised Treatment After Release (STAR) and Forensic Assertive Community Treatment (FACT) programs are voluntary Mental Health Court programs for defendants who agree to make mental health treatment part of the terms and conditions of their probation. STAR services include day treatment for the most serious disorders, and FACT provides three-quarters of its services in the community. Services at both include intensive case management, medication support, residential placement/housing assistance, drug and alcohol treatment and periodic court reviews.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Members Assertive Positive Solutions (MAPS) / Assertive Community Treatment Team (ACT) for High Utilizers of Hospital and Jail Services	CSS - FSP	The ACT program provides total and intensive care 24 hours a day, 7 days a week for seriously and persistently mentally ill adult consumers who are ready to transition from a locked facility into a lower level of care. Additionally, the MAPS program provides the same services to clients who have been identified as high recidivists of hospital and crisis services. Both programs provide the tools and personal support needed to embrace recovery and self-sufficiency in the community, providing access to medical care, housing, employment or volunteers activities, along with intensive case management and medication support services as needed.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Crisis Walk-In Centers (CWIC)	CSS - OESD	Provides a location to conduct psychiatric assessment and crisis stabilization for those clients who are in acute psychiatric distress, or a danger to themselves or others, or gravely disabled. The CWIC provides a much needed location for County residents who are in need of emergency psychiatric services 24 hours a day, 7 days a week. Crisis Walk in Centers are located in Rialto, Victorville and Yucca Valley.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#

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San Bernardino	Psychiatric Triage Diversion Team	CSS - OESD	Provides screening and assessment services to clients who present to the County psychiatric emergency room but do not require inpatient treatment. Services include crisis stabilization, placement, transportation, advocacy and case management. Every effort is made to maintain the client safely in the community and avoid unnecessary hospitalizations.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Community Crisis Response Teams (CCRT)	CSS - OESD	Serves adults, children and youth County-wide in the least intrusive, restrictive and disruptive manner to promote client resiliency and recovery. A multidisciplinary team of mental health professionals provides crisis intervention services where individuals are located, 24 hours a day, 7 days a week. Staff conduct clinical consultations, provide referrals and case management services for clients and families, in an effort to avoid hospitalization.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Homeless Intensive Case Management and Outreach / Full Service Partnership (FSP)	CSS - FSP	Provides mental health and shelter services to the adult homeless mentally ill population. The program partners with the homeless mentally ill in transitioning from a homeless state into eventual self-supported or MHSA permanent housing via intensive case management, residential shelter services, assistance in accessing entitlements, and ongoing mental health counseling and other services.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Alliance for Behavioral and Emotional Treatment (ABET)	CSS - OESD	The Big Bear Mental Health Alliance was formed from five (5) mountain community agencies, which then developed the Alliance for Behavioral and Emotional Treatment (ABET), a contract with the County of San Bernardino Department of Behavioral Health, which is a Full Service Partnership (FSP). This collaboration combines the strengths and resources of its members, to increase access to treatment options for the underserved/unserved members of the community who are experiencing severe and/or disabling mental illness and are at-risk of hospitalization, incarceration, and/or homelessness.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Age Wise Older Adult Services	CSS - OESD	The Age Wise program is the Department of Behavioral Health's flagship program, providing mental health and case management services to the older adult population. The Age Wise program works with seniors to maintain maximum independence and health in their own homes.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Age Wise Mobile Response	CSS - OESD	The Age Wise Mobile Circle of Care provides mobile responses to the mental health needs of older adults in the High Desert Region of San Bernardino County. The Circle of Care team works closely with community stakeholders in responding to the needs of older adults through assertive outreach and engagement, full service partnerships, mental health counseling services, and case management linkages and consultations.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Child and Youth Connection	PEI	Provides assessment, early intervention services, and connects foster care and juvenile justice-involved children and youth and their families with resources, mentors and mental health services.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Community Wholeness and Enrichment	PEI	Provides mental health treatment for individuals first experiencing a behavioral health issue, support for their families, and community education.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Family Resource Centers	PEI	Community-based centers offering parenting education, short-term counseling services and programs for transition aged youth, after-school activities, and life skills enhancement programs.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Lift – Home Nurse Visitation Program	PEI	Connects first-time, low-income mothers with a registered nurse who conducts education and wellness checks from the third trimester of pregnancy through the child's second birthday, via a home visitation process.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Military Services and Family Support	PEI	A collaborative program that provides screening, assessment, short-term counseling, and support for military personnel and their self-defined families.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	National Crossroads Training Institute (NCTI)	PEI	Curriculum-based educational program targeting children and transition age youth at risk of or involved in the juvenile justice system through a cognitive behavioral change process.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Native American Resource Center	PEI	This center functions as a one-stop for Native American families and youth. Offers an extensive array of culturally based services, including outreach and education, family support, parenting, youth empowerment, workforce development, and education assistance, utilizing strength-based traditional Native American programs.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Older Adult Community Services	PEI	Provides older adults with mobile screening services, wellness services such as senior activities, home safety education, and suicide prevention services.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Preschool PEI Program	PEI	Provides mental health support for diverse preschool children and education for parents and teachers to prevent and reduce the occurrence of aggressive and oppositional behavior in an effort to reduce the chance of delinquent behaviors later in life.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#

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San Bernardino	Promotores de Salud/Community Health Workers	PEI	A community education program designed to promote mental health awareness, educate diverse cultural populations on substance abuse and mental health topics, and provide information on available resources throughout the County in a culturally and linguistically appropriate manner.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Resiliency Promotion in African American Children	PEI	Provides prevention and early intervention services to African-American children, youth, and their families. Incorporates African-American values, beliefs and traditions in mental health educational programs in a culturally and linguistically appropriate manner.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Student Assistance Program	PEI	A school-based approach to providing focused services to diverse students needing preventative education and interventions for substance abuse, mental health, academic, emotional and social issues.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Expand Existing Training Program	WET	Responsible for all aspects of implementation of the Workforce Education component. Includes development of a training institute, a training unit, and coordination with other MHSA components and programs.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Training to Support Fundamental Concepts of Mental Health Services Act (MHSA)	WET	Helps meet the needs of several areas that empower DBH and contract agency staff to provide services that are based in the wellness, recovery and resiliency model, are culturally competent, support the philosophy of a client/family driven mental health system, integrates services and includes community collaboration.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Development of Core Competencies	WET	Develops core competencies for each job classification title tied to employee work performance evaluations. Categorizes training to reflect the competency areas needed within the department.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Outreach to High School, Adult Education, Community College and ROP Students	WET	Collaborates with high school, adult education, community college and Regional Occupational Program (ROP) students to increase awareness of the opportunities in the public behavioral health System.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Leadership Development Program (LDP)	WET	Develops leaders from existing staff, begins succession planning for future leadership of DBH, begins to make leadership-based assignments, and builds leadership into supervisory training.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Peer and Family Advocate (PFA) Workforce Support Initiatives	WET	Provides training for consumers and their family members as well as volunteers who want to become Peer and Family Advocates. Provides training for newly hired Peer and Family Advocates to assist them in making the transition from consumer to provider in the mental health system. Provides training for current Peer and Family Advocates to further develop and enhance their skills.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Expand Existing Internship Program	WET	Provides clinical supervisors to the internship program to further enhance supervisor competencies, supplement supervision of interns created by staff shortages, provide licensing preparation support to pre-licensed clinicians, and create an employee internship program for current DBH staff who have been accepted into a master's level program in behavioral health. All three (3) disciplines, psychology, marriage and family therapy, and social work internship supervisors work with universities to recruit interns from underrepresented populations.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Psychiatric Residency Program	WET	WET staff works with the DBH Medical Director to implement psychiatric residency programs through a collaboration with the County hospital Arrowhead Regional Medical Center and Loma Linda University Medical Center, providing a community mental health setting. Additionally, medical students participate in rotations to learn about psychiatry as a specialty.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Scholarship Program	WET	Implements an employee scholarship program to help DBH and contract employees continue their education and advance their careers in behavioral health professions. The majority of scholarship funding will be aimed at lower level employees to assist them in moving up the career ladder.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Increase Eligibility of Federal Workforce Funding	WET	Obtains and maintains Mental Health Profession Shortage Area (MHPSA) and site designations to assist in the recruitment and retention of mental health providers in the County system.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Interagency Youth Resiliency Team (IYRT)	INN	Provides intensive, peer-driven, trauma-informed mentoring services to system-involved youth (foster care or juvenile probation) and their caregivers/resource providers from mentors with similar lived experience, as well as providing related training to child-serving staff within the community. Services focus on supporting the youths to successfully transition out of care, while strengthening five (5) critical life domains: physical/psychological well-being, forming/maintaining enduring relationships, education, employment and housing.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#

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San Bernardino	Online Diverse Community Experiences (ODCE)	INN	Establishes a presence on social networking sites such as Facebook and Twitter to disseminate behavioral health information and resources, promote upcoming events, as well as share news and information on related topics. The project seeks to continue to reach consumers, family members, community members and professionals in order to provide ongoing resources to increase access to services.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Coalition Against Sexual Exploitation (CASE)	INN	The CASE program is a collaborative partnership among child-serving agencies. It is a culturally appropriate collaborative model of interventions and services for diverse children to reduce the number of those exploited and drawn into prostitution. This model will also address outreach and education for those who interact with victims of sexual exploitation in hopes to increase the quality of services received to achieve greater outcomes.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Community Resiliency Model (CRM)	INN	The CRM program is intended to reach out to the County's diverse unserved, underserved, and inappropriately served communities, by offering biologically based resiliency techniques and skills for individuals who have, or will experience traumatic events. This community train-the-trainer model is specifically designed to address the needs of community members by providing mental health education, training and mentoring of CRM trainers, including coping skills, trauma response skills and resiliency techniques. CRM trainers are selected leaders within their community so that they may pass the skills along to community members, friends, and family members.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	Holistic Campus	INN	Brings together a diverse group to create their own resource networks and strategies, growing out of cultural strengths. The Holistic Campus is 80% peer run by community members, cultural brokers, individuals representing the County's cultures, ethnic communities, LGBTQ community, and military veterans and their families in one location. The Holistic Campuses are accessible, culturally/linguistically competent/relevant, and community friendly. By offering services specifically requested by the community and welcoming all to the Campus, diverse individuals will receive wellness and recovery services as needed, without stigma.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Bernardino	TAY Behavioral Health Hostel	INN	A peer-driven, voluntary, short-term, 14-bed, crisis stabilization/residential program for at-risk Transition-Age Youth (TAY), from 18-25 years old, with particular focus on the needs of diverse youth (African American, Latino, LGBTQ) with a history of system-involvement (former foster or probation youth), who are experiencing an acute psychiatric episode or crisis and are in need of a higher level of care than a board and care residential, but a lower level of care than psychiatric hospitalization. Services will be culturally and linguistically appropriate to help TAY safely and successfully transition back to community living after a period of psychiatric crisis and recovery.	http://www.sbcounty.gov/dbh/mhsa/mhsa.asp#
San Diego	Services for Deaf & Hard of Hearing	CSS - OESD	A specialized outpatient service for underserved/unserved individuals of all ages who are deaf or hard of hearing, including those who may have a co-occurring substance use disorder. Assist clients who are deaf and hard of hearing to achieve a more adaptive level of functioning. Services Offered: • Assessment • Assessment • Crisis intervention • Individual therapy • Collateral contact • Group therapy services	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Services for Victims of Trauma and Torture	CSS - OESD	Countywide specialized outpatient mental health services to unfunded clients who are victims of trauma and torture. Increases specialized services to uninsured, unserved clients who are victims of trauma and torture. • Mental health assessment • Dual diagnosis services • Individual and group therapy • Case management and referrals	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Mental Health & Primary Care Services Integration	CSS - OESD	Increases countywide access to mental health services to unserved and uninsured people who have SED/SMI. • Mental health assessment • Dual diagnosis screening • Information • Brief mental health services • Referrals as needed	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Interpreter Services	CSS - OESD	Increases services to non English speaking populations and improve quality of these services to consumers and families. • Interpretation for all mental health and case management services • Additionally, linkages with families in need of language translation	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Psychiatric Emergency Response Services	CSS - OESD	The service pairs law enforcement officers with psychiatric emergency clinicians to serve children and adults throughout the County. Goal: To expand program into unserved areas and improve collaboration between the mental health and law enforcement systems with the goal of more humane and effective handling of incidents involving law enforcement officers and mentally ill and developmentally disabled individuals. • Provide mental health consultation, case coordination, linkage and limited crisis intervention services to mentally ill clients who come in contact with law enforcement officers. • Provide mental health consultation, case coordination, linkage and limited crisis intervention services to mentally ill clients who come in contact with law enforcement officers. • Provide a training program for law enforcement personnel. • Develop a neighborhood outreach program.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Chaldean Outpatient Services	CSS - OESD	Outpatient mental health services for Chaldean and Middle Eastern populations in SD County. Provide culturally appropriate mental health, case management and linkage to services to Iraqi refugees and other Middle Eastern populations. • Medication management • Individual and group treatment. • Case management and linkage to other needed services. • Acculturation groups in schools	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Cultural Language Specific Outpatient	CSS - FSP	Culturally competent Full Service Partnership mental health services to Latino and Asian/Pacific Islander children, youth and their families. Services "do whatever it takes" to assist clients in meeting their mental health goals. Culturally and linguistically competent services, including: • Outreach & engagement • Parent Partners • Mental health education • Crisis intervention • Individual, group and family counseling • Trauma focused CBT (EBP) • Case management • Psychiatric services including medication • Full Service Partnership services and supports • Treatment plans for obesity and diabetes	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Homeless/ Runaway	CSS - FSP	A team-based approach to "do whatever it takes" to support homeless and runaway children and youth in attaining mental health services. Provide Assertive Outreach, Full Service Partnership (FSP) services and strong connections with community resources. • Outreach and engagement • Crisis intervention • Individual, group and family counseling • Case management • Rehabilitative services • Psychiatric evaluation, medication monitoring and pharmaceuticals • FSP services and supports • Assertive Outreach Model • Co-occurring disorders • EMDR trauma intervention • EBP: Trauma Focused CBT	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Wraparound Services	CSS - FSP	Provides wraparound mental health services to clients and their families to transition children/ youth currently in Child Welfare Services custody and residential placement back to a home environment. Provide FSP services to children, youth and families receiving TBS services and connection of clients to a primary care provider • Full Service Partnership • Assessment • Treatment • Case Management • Dual Diagnosis services • TBS services enhanced • Connection to primary care provider and development of a wellness notebook to assist families in organizing children medical information	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Child/Youth Case Management	CSS - FSP	Enhance outpatient services to children, youth, and families in eight outpatient clinics to provide full service partnership services. These clinics are located in all six regions of San Diego County and their clients reflect the diversity of each region. Enhance services to clients and families by providing case management in clinics in addition to the services. Eight clinics were further enhanced with Alcohol and Drug Counselor who serves existing program clients who are at risk or present with alcohol and drug issues. • Case management • Alcohol and Drug counseling. • Consultation, • Coordination, referral, and linkage. • Family outreach through home visits. • Rehabilitation groups • Individual, group and family therapy. • Psychiatric services including medication. • Full service partnership services.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	School Based Mental Health Services	CSS - FSP	Mental health services provided on over 300 school sites across the County. Expands Medi-Cal funded programs to include unserved clients (those with no access to services). • Outreach & engagement • Crisis intervention • Individual, group and family counseling • Case management • Rehabilitative Services • Psychiatric evaluation, medication monitoring and pharmaceuticals. • Integrated co-occurring disorders treatment • Incredible Years EBP for preschoolers.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Mobile Adolescent Services Team (MAST	CSS - OESD	Mental health assessment and treatment services located at Juvenile Court and Community School (JCCS) sites countywide. Expands Medi-Cal funded program to include unserved clients (those with no access to services).Individual, group and family therapy • Individual, group and family therapy. • Medication monitoring • Integrated services to youth with co-occurring disorders. • Use of Cognitive Behavioral Therapy as an evidence based practice for this population.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Family and Youth Information/ Education Program	CSS - OESD	Conducts forums in each of the six regions emphasizing education and information regarding the de-stigmatization of mental illness and the use of psychotropic medication. • Educational forums • Encourage youth/family to assume leadership role in training • Develop training plan for children/youth and families • Provide outreach and training to under served and unserved population	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Family/Youth Peer Support Services	CSS - OESD	Provides support and linkage to services and community resources to children/youth and their families who are being served by the Homeless Outreach program or currently receiving mental health treatment. Assist with continuity of treatment and transition from program to program or community resources. • Support services provided by family and youth partners • Coordinated and integrated with County of San Diego, HHSA regions, Probation, Child Welfare Services, Regional Center, Education, physical health providers, community resources. • Case management	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Mobile Psychiatric Emergency Response & North County Walk-In Assessment Clinic	CSS - OESD	Provides mobile crisis mental health response in conjunction with a Walk-In Assessment Clinic for the North County. An assessment team of licensed clinicians will respond to client calls within four hours and provide voluntary services. • Assessment • Information • Referral • Medication management • Linkage to hospital when required • Follow-up visits	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Medication Support for Wards and Dependents	CSS - OESD	Provides short-term (no more than 3 months) stabilization with psychotropic medication and linkage to community-based or private facility for on-going treatment. • Assessment • Medication management services • Case management • Linkage and referral for on-going care including one-to-one therapy and family counseling when required	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Early Childhood Mental Health Services/ChildNet SED	CSS - OESD	Mental health outpatient services to SED children ages birth through 5 years and their families using the "Incredible Years" evidence based practice model and a family approach. • Assessment • Behavioral intervention • Teacher intervention at designated preschools • Implementation of Incredible Years. • Expansion of services to preschool on Pendleton Marine base due to problems with children whose parents are deployed to Iraq or returning home.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Placement Stabilization Services	CSS - OESD	Provides mental health services to clients and their families to stabilize and maintain children and youth in home-like settings. Provide peer mentorship services to CWS youth in placement. • Assessment • Evaluation • Case management • Treatment (including evidence based practices) • Case consultation and other needed mental health interventions • Peer mentorship • Life skills-building EBP • Integrated EBP Incredible Years and Family Visitation model	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Juvenile Hall Mental Health Re-Entry Program	CSS - OESD	Provides mental health screening of all youth detained in the Kearny Mesa Juvenile Detention Facility to identify youth with a diagnosed mental illness that can be released with appropriate mental health services. • Screening • Evaluation • Referral • Case management • Assertive Community Treatment • Multi Systemic Therapy	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Integrated Services and Supported Housing	CSS - FSP	A team-based approach to “do whatever it takes” to support clients in attaining housing and employment. Full Service Partnership (FSP) for TAY and housing services are offered. Outreach • Crisis intervention • 24/7 intensive case management • Mental health services • Supported education, employment and housing services (short-term, transitional and permanent supported housing) • Rehabilitation and recovery services • Liaison with Justice system • FSP services and supports	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Justice Integrated Services and Supported Housing	CSS - FSP	A team-based approach to “do whatever it takes” to support justice system clients in attaining housing and employment (TAY, Adults and Older Adults). Assertive Community Treatment (ACT), Full Service Partnership (FSP) and housing services are offered. • Outreach • Crisis intervention • 24/7 intensive case management • Mental health services • Supported education, employment and housing services (short-term, transitional and permanent supported housing) • Rehabilitation and recovery services • Liaison with Justice system • FSP services and supports • Diversion, re-entry and probation services	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Integrated Services and Supported Housing	CSS - FSP	Provides Intensive Assertive Community Services (ACT) including Full Service Partnership services and supports. (TAY, Adults and Older Adults) Housing options will be provided, including short term housing, transitional and permanent supported housing. • Outreach and engagement • Crisis intervention • Intensive case management • Supported education/ employment and housing services • Rehabilitation and recovery services • Care coordination • Skill development • FSP services and supports	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Intensive Case Management	CSS - FSP	To provide short-term intensive case management services to help individuals connect with relevant resources, which include housing and employment. (TAY, Adults, Older Adults). • Outreach and engagement • Mental health counseling • Intensive case management • Short-term rehabilitation services • Linkage and care coordination • Transition to longer-term case management as indicated	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Dual Diagnosis Residential Treatment Program	CSS - FSP	Alpine STC Comprehensive, 24/7, residential dual diagnosis, Full Service Partnership services that are individualized, culturally competent and linguistically appropriate with integrated mental health and substance abuse services and supports. Casa Pacifica Comprehensive, 24/7, residential and biopsychosocial rehabilitative services, Full Service Partnership (FSP) program offering services including medical support, case management/brokerage, crisis intervention, rehabilitation, and recovery interventions. • Mental health and recovery counseling groups, Peer support services. • Care coordination & linkage to physical health. • Independent living skill development. • Services and supports under Full Service Partnership. • Psycho-education, wellness, employment, education, skill development, peer support, and mentoring. Alpine STC •Dual diagnosis treatment in a residential facility. Casa Pacifica • Residential and In-House psychosocial rehabilitative services	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Higher Utilizer Comprehensive Integrated Services and Supported Housing	CSS - FSP	Comprehensive housing and mental health services and Full Service Partnership services to Older Adults who have a SMI. The program establishes linkages and care coordination to physical healthcare providers. Individuals receive an array of housing options. • Unserved Latino, Asian/Pacific Islander Older Adults, age 60 and over with any of the following: • History of repeated emergency mental health or inpatient services during the year prior to program admission • At risk for institutionalization • Homeless or at risk for homelessness. • Outreach and engagement • 24/7 intensive case management/wraparound services • Community-based outpatient services • Rehabilitation and Recovery Services • Supported employment/education • Peer and family (respite) support • Family Services • Transportation	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Housing Trust Fund	CSS - FSP	Increases permanent supportive housing opportunities for clients in the five Full Service Partnership (FSP) Integrated Homeless Programs. • Transition age youth, 18 to 24 years • Adults, 18 to 59 years • Older adults, 60+ years old • With SMI • Enrolled in one of the Full Service Partnerships. • This trust fund provides funding to increase permanent housing opportunities for clients enrolled in the Full Service Partnership programs.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Mental Health Court Calendar Diversion and Supported Housing	CSS - OESD	Provides comprehensive, integrated culturally competent mental health services for individuals with a SMI who have been found guilty of a non-violent crime and are awaiting sentencing. Reduce incarceration and institutionalization, increase meaningful use of time and capabilities, reduce homelessness, and provide timely access to needed services. • Diversion and re-entry services utilizing 24/7 intensive case management/wraparound services • Community-based outpatient services • Rehabilitation and recovery oriented services • Housing options	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Client Operated Peer Support Services	CSS - OESD	Client-driven and client-operated countywide support services in a variety of settings. Increase client-driven services to empower people with SMI by decreasing isolation and increasing self-identified valued roles and self-sufficiency. • Peer psycho-education, support & advocacy • Employment support services • Skill development • Social/ recreational activities delivered by peer counselors	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Family Education Services	CSS - OESD	Family-centered education about mental illness, stigma reduction and resources to improve access to care. • Family education curriculum taught by families • Outreach to and engagement with family members of persons with SMI. NAMI San Diego 4480 30th St., San Diego, CA 92116 - (619) 584-5563 - www.namisandiego.org	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Clubhouse Enhancement and Expansion for Employment Services	CSS - OESD	Expandes capacity for social and community rehabilitation activities and employment services. • Skill development classes • Social rehabilitation and symptom management. • Employment screening, job placement and support • Peer support services • Psycho-education, wellness, fitness, smoking cessation, and illness management classes	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Supported Employment Services	CSS - OESD	Supported employment services and opportunities for Transition Age Youth, Adults and Older Adults with SMI. • Job screening, preparation, development, supports, coaching and placements • Employment opportunities • Supports for educational/vocational training.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Patient Advocacy Services for Board and Care Facilities	CSS - OESD	Provides Patient Advocacy Services for mental health clients residing in County-identified Board and Care facilities without Augmented Services Programs (ASP) throughout San Diego County. • Investigate problems/ issues at Board and Cares. • Provide annual training to staff and residents at these facilities. • Facilitate Grievance and Appeals process for those clients. • Report on visits to Board and Care facilities with ASPs. • Review LPS facilities	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Clubhouse and Peer Support Services	CSS - OESD	A member-run Clubhouse for TAY who has a SMI and is in need of social and recreational activities, skill development and employment and education opportunities. • Peer education and support • Advocacy • Employment and educational support services • Skill development classes • Age appropriate social and recreational activities	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Enhanced Outpatient Mental Health Services for TAY	CSS - OESD	Enhanced outpatient mental health services for TAY in need of mental health, rehabilitation and recovery services. • Mobile outreach and engagement • Mental health assessment & treatment • Rehabilitation and recovery services • Linkage to community services and care coordination • Employment & Education Support	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Mobile Outreach at Home and in the Community	CSS - OESD	Comprehensive housing and mental health services and Full Service Partnership services to Older Adults who have a SMI. Countywide 24/7 mobile outreach services to identify Older Adults in the community who are in need of mental health intervention and provide access to services at the most appropriate level of care. • Mobile Outreach • Benefits eligibility information • Linkages and referrals to clients, family and care providers • Services are offered through outreach to isolated seniors in home • Outreach to senior centers, nutrition sites, churches, and other community sites	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Strength-based Care Management Services	CSS - OESD	Countywide, client-centered culturally/linguistically and age appropriate Care Management and Recovery & Rehabilitation services following the Strength-based Care Management model. Provides Full Service Partnership (FSP) services to Older Adults who have a SMI. • Transition age adults, age 55-59 years • Older adults, 60+ years • With SMI • Including those with co-occurring substance abuse disorders' • Strength-based assessment and treatment • Rehabilitation and support services • Outreach and engagement • Crisis intervention	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Enhanced Outpatient Mental Health Services	CSS - OESD	Increases access to mental health services and overcome barriers such as language, wait times, lack of knowledge or awareness of available services. • Adults, ages 25-59, • Older adults, ages 60 and above • With SMI (Severe Mental Illness) • Targets Asian/Pacific Islanders and Latinos • Mobile Outreach • Bio-psychosocial assessment • Dual diagnosis screening & treatment • Crisis intervention and prevention • Medication support services • Individual and group therapy • Rehab & Recovery Services • Employment Support • Primary care integration • Psycho-education classes • Integrated co-occurring disorders treatment • Telepsychiatry services offered at MHS, Inc. Kinesis North Ramona and Fallbrook satellites.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	SSI Advocacy/Legal Aid Services	CSS	Review and submittal of SSI applications to SSA that Clubhouse SSI Advocates have completed with nonGeneral Relief clients. • SSI application training and consultation for peer SSI Advocates employed at Casa del Sol, Friend-to-Friend, The Meeting Place, East Corner, Mariposa and Escondido Clubhouses. • Review and submittal of applications to the Social Security Administration	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	North County Walk-In Assessment	CSS	Provide urgent mental health services to Adults and Older Adults in the North County at a voluntary walk-in assessment center. • Crisis intervention • Triage, screening and assessment • Medication support • Case Management and community referrals • Telepsychiatry	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf
San Diego	Peer Telephone Support	CSS	Provide phone support services to young adults and adults who desire support from their peers regarding mental health issues/services, social concerns, housing, vocational interests, and benefits. • Phone support services • Self-help for consumers through support, referrals, and reassurance from a Peer. • Transition age youth (TAY) counselors for TAY clients. • Evening and weekend hours.	http://sandiego.camhsa.org/files/CSS-Program-Services-Summary-Current.pdf

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San Diego	Workforce Staffing Support	WET	The WET Consultant assists the WET Coordinator with meeting the primary objectives outlined in the San Diego WET Plan. Special emphasis was placed on assisting in the development of the San Diego County WET Collaborative which initially convened on August 6th, 2010. In addition, the WET Consultant has researched data collection and evaluation plans, participated in career pathway program development, networked with stakeholders and provided subject matter expertise in assessing WET Plan implementation and effectiveness.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Training and Technical Assistance	WET	BHETA is a training and development service program. It is designed to provide continuing education and training to the staff of Behavioral Health Services, County and contract staff. BHETA provides instructor led, eLearning and conferences on topics that address recovery, resiliency, cultural competence and family integration. BHETA also provides the Geriatric Certificate Training.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Training and Technical Assistance	WET	The Early Childhood Socio-Emotional & Behavior Regulation Intervention Specialist (EC-SEBRIS) program is an exciting new certificate program in the Department of Child and Family Development at San Diego State University. Our clinically-based program is an interdisciplinary program focusing on professional preparation and skills enhancement of early childhood educators who work with young children who demonstrate socio-emotional and behavioral problems and their parents. This is a one-year program designed for working professionals, and courses taken for the ECSEBRIS certificate can be applied towards a Master's degree in Child Development.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Family & Youth Roundtable, CMHS Family Youth Partners Employment Training Academy, Consumer/Family Academy	WET	Provides basic employment training for youth and family members/caregivers of youth who are or have been consumers in a public agency serving children to prepare them to work as partners at the practice, program and policy levels. FYRT also provides the following service components: Training of program staff/administrators on how to work with and support family/youth partners. Which includes the County of San Diego CMHS Principals to Family Youth Professional Partnership (PFYPP) This workshop offers CEU for MFT and LCSW and is offered in two models A) Online 1 hour introduction to PFYPP offers one CEU. B) A 4 hour workshop offering 4 CEU and 4 hours Cultural Competency training. FYRT also provides individual life coaching to both family/youth partners and program staff to assist and support both partners and programs in incorporating family/youth partners into program design, evaluation and/or policy functions.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Recovery Innovations of California, Consumer/Family Academy	WET	Recovery Innovations, Inc. provides peer specialist training, peer advocacy training, and support for conference attendance to persons age 18 and over, including transitional age youth (TAY), adults and older adults, who have experience with their own mental illness and recovery process to prepare them to work as partners at the practice, program and policy levels. The Peer Specialist Training is a 75-hour training for people with lived experience of recovery from mental health challenges to work in the service system as a peer support specialist; people may also have lived experience with recovery from addiction challenges. Training focuses on ways to use personal experience and skills to inspire hope in the lives of individuals receiving services.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Public Mental Health Academy	WET	NAMI San Diego will be a gateway for family members to find paid work in the public mental health field, obtain promotions, find volunteer opportunities and/or go back to school. We will conduct or host special workshops for presentations from County Public Mental Health, schools with specialized programs, and Mental Health Organizations that have volunteer or employment opportunities. NAMI San Diego offers Peer to Peer Recovery Education Program which is a FREE ten week course, for people with any serious mental illness who are interested in establishing and maintaining their wellness and recovery. This class course provides a catalyst to graduates interested in seeking and maintaining paid employment or volunteer opportunities in public mental health or other sectors of interest.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Public Mental Health Academy	WET	San Diego City College will establish a Public Mental Health Academy embedded within the Institute for Human Development at City College. The Academy will initiate a career pathway for a diverse population of students by establishing a 19 unit Mental Health Worker Certificate of Achievement Program. The Certificate program will serve as both workforce development for entry level positions in the mental health and human services field and as an academic stepping stone toward higher academic degrees in the field of mental health. The Academy will also establish a pre-certificate preparation course for potential students who are non-native English speakers. Other community services offered by the Academy will include an annual conference for mental health workers and a mental health career fair.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf

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San Diego	Public Mental Health Academy	WET	The Mental Health Pathway: A Community Academy is a partnership between the Family Youth Roundtable (FYR), The National Alliance on Mental Illness (NAMI), Recovery Innovations of California (RICA), and the California School of Professional Psychology (CSPP) at Alliant International University. Together, we are committed to supporting six existing Partner certification programs and translating these certificates into academic credit, training a workforce with the skills needed to understand and practice evidence based resilience and recovery-oriented practices, and bringing individuals from culturally diverse communities into the workforce, all in order to increase the number of skilled mental health workers in the county workforce.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	School-Based Pathways/Academy	WET	Health Sciences High School and Middle College (HSHMC) is a public charter high school that provides students an opportunity to explore advances and opportunities in healthcare through its college preparatory curriculum, specialized electives and four year work-based internship program. As a new WET program, HSHMC has the opportunity to create a specialized mental health worker career track that will serve 50 students per year in a two-year certificate program. In addition, curriculum and specialized activities will be offered school-wide in order to teach all 500 students to take steps to end the stigma associated with this disease and its manifestations, to know more about seeking services for their own needs and, to consider this area of development as part of their own career exploration.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Nursing Partnership for Public Mental Health Professions	WET	An integrated Psychiatric/Mental Health Clinical Nurse Specialist and Nurse Practitioner program at CSU San Marcos School of Nursing. This Advance Practice Nurse will receive a Master of Science in Nursing, be eligible for national certification, and may practice in inpatient, outpatient or community settings with prescriptive authority and skills in psychotherapy and other treatment modalities.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Residency, Internship Programs; Community Psychiatry Fellowship	WET	UCSD School of Medicine provides a training programs for child and adolescent psychiatry residents and fellows. The program fosters the development of leaders in Community Psychiatry and provides medical students and general psychiatry residents with instruction on the principles of Community Psychiatry and exposure to the unique challenges and opportunities within this context. UCSD School of Medicine provides a training program for child psychiatry residents and fellows. The program fosters the development of leaders in community child psychiatry and provides medical students and general psychiatry residents with instruction on the principles of Community Psychiatry and exposure to the unique challenges and opportunities within this context.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Residency, Internship Programs; LCSW/MFT Residency/Intern	WET	Alliant International University, on behalf of San Diego MFT Educators' Consortium that represents all the MFT programs in San Diego County, is the host of the San Diego County MFT Residency/Internship Program. The program provides 3 educational stipends each year.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Residency, Internship Programs; LCSW/MFT Residency/Inter	WET	The Linguistically and Ethnically Diverse (LEAD) Project is designed to lead to a dramatic increase in the numbers of linguistically and ethnically diverse San Diego State University Marriage and Family Therapy (MFT) Interns gaining licensure in a timely manner. This project engages the LEAD Trainees and Interns in collaborations with mental health county agencies, and offers trainings, programs and experiences that will ultimately lead to more than doubling the numbers of SDSU MFT Interns entering into the County workforce over the next five years. Specifically, the LEAD Program addresses these discrepancies by partnering with the San Diego County to provide MFT internship positions to students who will receive compensation in exchange for their commitment to practice in San Diego County's public mental health workforce. We will build the capacity in our SDSU MFT program to train, mentor, coach and guide both our Trainees and Interns onto a trajectory that fulfills the purpose of this grant.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Residency, Internship Programs; LCSW/MFT Residency/Inter	WET	San Ysidro Health Center, Inc. will provide group supervision, individual supervision, clinical training, introduction and practice of the integrated behavioral health model to four Master of Social Work graduates each year to prepare them for licensure. Each participant will receive a stipend. In exchange, each participant will provide direct services at an approved site, attend supervision, attend weekly trainings, conduct outreach, and provide mentoring.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	The Centre for Organization Effectiveness	WET	A thorough assessment of trauma-informed care competency in the County's behavioral health programs.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf

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San Diego	The Cultural Competence Academy (CCA)	WET	The Cultural Competence Academy (CCA) provides training to further the objectives identified by San Diego County Behavioral Health Service's Cultural Competency Resource Team (CCRT) and the Cultural Competence Plan while advancing MHSA and BHS principles of wellness, recovery, resilience and family integration for ethnic and non-ethnic culturally diverse populations. The CCA provides awareness, knowledge and skill based trainings that focus on clinical and recovery interventions for multicultural populations while ensuring that all trainings focus on being trauma informed from environmental to clinical applications. Training is provided for all levels in programs and organizations, including supervisors, clinicians, and administration support staff.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Financial Incentive Programs	WET	Multiple Programs: Health Science High and Middle College (High School Students) Alliant International University (Public Mental Health Academy-targeted to Consumer and Family Members) Alliant International University (MFT) San Diego State University-LEAD (MFT) San Diego State University-School of Social Work Advance Standing Program (LCSW) San Diego State University-Interwork Institute-Masters in Rehabilitation Counseling San Ysidro Health Center (LCSW) This action is designed to aid in the recruitment and retention of culturally, linguistically and/or ethnically diverse public mental health staff to work in both the County and contracting community-based organizations (CBOs). Stipends for both students and faculty are provided through WET contractors. Recipients of larger stipends will be contractually obligated to work for Mental Health Services or contracting CBOs after completing studies for a period of time equal to the period in which they received support, with a minimum commitment of two years.	http://sandiego.camhsa.org/files/WET-Program-Services-Summary-Current.pdf
San Diego	Primary & Secondary Prevention - Public Outreach, Education and Support Lines	PEI	County-wide public media campaign geared towards suicide prevention and stigma and discrimination reduction via education and outreach. Campaign also raises awareness of new PEI programs. In addition, this program provides County-wide, confidential, peer-staffed support phone lines for youth, adults, and families. Public media campaign to education and promote mental health concerns • Print, radio, and TV ads -(It's Up to Us - www.Up2SD.org and Housing Works - www.HousingWorksSD.org) • Printed materials - (Fotonovela) • Non-crisis, peer phone support and referrals • Mental health education • Cultural brokers	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Families as Partners	PEI	Services and engagement with community resources and supports for families in the South Region in order to assist in maintaining a safe home for children and reducing the effects of trauma exposure. • Safety and risk assessment for children conducted in the home • Caregiver stress assessment • Linkage and referral to appropriate services	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	South Region Trauma Exposed Services	PEI	Services and referrals to prevent re-traumatization of children and families who experience trauma related to exposure to domestic and/or community violence. • Short-term services • Referrals for comprehensive services • Family education Target Population: Children identified as at risk of being removed from their home • Located in the South Region of San Diego • Polinsky Children's Center residents	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf

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San Diego	Alliance for Community Empowerment	PEI	Community violence response team and services to siblings of identified gang members in an effort to increase community resiliency and combat the negative effects of violence. • Home-based services • On-going family supports • Positive peer-based services • Anger management • Conflict resolution	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Collaborative Native American Initiative	PEI	Urban Youth Center, elder services/navigator program, suicide prevention program, and outreach and prevention program for the Native American community. • Youth center • Elder programs and activities • Suicide prevention • Outreach and education	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Positive Parenting Program (Triple P)	PEI	Strengthens the skills of parents, staff, and educators to promote the development, growth, health, and social competence of young children. Reducing behavioral/emotion problems in children. • Positive Parent Program (Triple P) • Early intervention services • Referrals and linkage	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	School-Based Program	PEI	Family-focused approach that engages families in their child's school success. School-based interventions with families are coordinated and designed to improve child/parent social and emotional skills. • Positive Behavioral Support (PBS) • Screening and early identification of at-risk children • Community outreach to families • Education and support Target Population: • School-age children and their families • Underserved Asian/Pacific Islanders and Latinos	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Suicide Prevention Education Awareness and Knowledge (SPEAK)	PEI	Suicide prevention program to serve students through education, outreach, screening, and referrals in schools. Includes education to school staff and families. • Education and outreach • Screening • Crisis response training • Short-term early intervention • Referrals D182 Target Population: Children, youth, and transition age youth (18 to 24 years) • School staff and gatekeepers • Families and caregivers	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Kick Start	PEI	Services for individuals at-risk for developing or experiencing a first break of serious mental illness that includes outreach, education, and intervention. • Assessment • Family education • Mobile outreach • Early intervention • Information and linkage Target Population: • Youth (14 to 17 years) • Transition age youth (18 to 24 years) • Central region of San Diego	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf

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San Diego	Elder Multicultural Access and Support Services (EMASS)	PEI	Peer-based outreach and engagement to older adults to support prevention of mental illness and increase access to care. • Outreach and education • Referral and linkage • Benefits advocacy • Peer counseling • Transportation services • Home and community based services Target Population: • Older adults (60+ years) • Focus on Hispanic, African refugee, African American, and Asian/Pacific Islander individuals	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Positive Solutions Program	PEI	Outreach, and prevention and early intervention services for older adults who receive meals delivered through the Aging and Independence Services program by using Program to Encourage Active and Rewarding Lives (PEARLS) model. Increase knowledge of signs/symptoms of depression and suicide risk for those who live/work with older adults. Reduce stigma associated with mental health concerns and disparities in access to services. Screening/assessment • Brief intervention (PEARLS and/or Psycho-education) • Referral and linkage • Follow-up care Target Population: Homebound older adults (60+ years) at risk for depression or suicide	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	REACHing Out	PEI	Reduces incidence of mental health concerns in caregivers of Alzheimer's patients. Improve the quality of well-being for caregivers and families. Provide services to an underserved/unserved population. Personalized intervention • Home visits • Telephone support • Education • Skills training • Stress management education Target population: • Hispanic caregivers of older adult Alzheimer's patients • South Bay region of San Diego	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Salud	PEI	Integrated treatment of depression and diabetes in primary care settings for Hispanic older adults by assigning one care provider for both health concerns. • Outreach in the primary care clinic and in community settings • Integrated diabetes and depression care Target population: • Hispanic older adults (60+ years) • With a diagnosis of diabetes • Exhibiting symptoms of or at-risk of depression	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Rural Integrated Behavioral Health and Primary Care Services	PEI	Assessment and short-term interventions in rural community clinics for individuals who may be at risk for or in the early stages of mental illness. • Assessment • Brief intervention • Education • Mobile outreach	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf

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San Diego	Bridge to Recovery	PEI	Early intervention services to individuals presenting at crisis emergency facilities who have high substance use issues and early mental health concerns. Screening • Brief intervention • Referral and linkage • Psycho-education groups • Training for law enforcement on co-occurring issues Target population: • Transition age youth (18 to 24 years), adults and older adults (25 to 60+ years) with substance use issues and emerging mental health issues • Referred from crisis emergency facilities	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Courage to Call Program	PEI	Confidential, peer-staffed outreach, education, and training services for active Military, Veteran, Reserve, Coast Guard populations, their families and their service providers. Increase awareness of the prevalence of mental illness in this community. Reduce mental health risk factors or stressors. Improve access to mental health and PEI services, information, and support. • Education • Debriefings • Peer counseling • Linkage to mental health services • Mental health information • Support Hotline	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Co-Occurring Disorder - Screening by Community-Based ADS Providers	PEI	Addition of mental health counselors to residential and outpatient Alcohol and Drug Services programs to identify and screen clients with or exhibiting mental health concerns. • Screening • Education • Brief counseling • Referral and linkage • Prevention groups • Family education Target population: • Individuals residing in contracted residential and outpatient substance abuse programs with or exhibiting mental health concerns	http://sandiego.camhsa.org/files/PEI-Prg-Serv-Summ-Current.pdf
San Diego	Wellness and Self-Regulation for Children and Youth	INN	Integrated therapeutic experience for children in an existing program (e.g., residential or day treatment, school site) that uses a number of innovative activities to address overall mental and physical wellness. The goal is to positively impact arousal level, mood, appetite and eating behavior, sleep patterns, physical health, and social interactions in order to increase wellness and self-regulation and healthy lifestyle changes. • Physical fitness • Relaxation training • Spirituality and mindfulness education • Nutritional education • Social skills activities • Gardening • Other activities TBD • Integrated with usual mental health services Target population: • Children and youth, age 0-16 years • Diagnosed with Serious Emotional Disturbance	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf

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San Diego	Hope Connections Peer and Family Engagement Project	INN	Integrated teams of transition age youth, adult, older adult and family peer support specialists that provide a number of services to new mental health clients at the clinic site. One team also serves individuals in the County Emergency Psychiatric Unit. The goal is to provide peer and family support to individuals and families at or prior to their first mental health visit. The support teams also focus on providing wellness and recovery support and education throughout service utilization. Initial engagement and orientation • Outreach • System navigation • Ongoing support and education groups • Referral and linkage with community supports and options for school and employment Target population: • Transition age youth, age 18-24 years • Adults, age 25-59 years • Older adults, age 60+ • Individuals receiving services at the Emergency Psychiatric Unit	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Diego	Physical Health Integration Project	INN	Integrated approach to mental and physical health services through two program sites – a primary care clinic and a mental health clinic. Eligible clients receive ongoing behavioral health services at a primary care location. In addition, a Behavioral Health Consultant and an Alcohol and Drug Consultant offer services at the primary care site. A Nurse Care Coordinator provides physical health information and screening at the partnering mental health clinic. • Mental health and substance use support and services • Physical health services • Recovery-oriented individual and group wellness education • Chronic disease management • Peer support and recovery groups	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Diego	Mobility Management in North San Diego County	INN	Provides peer-based information sharing and support to assist clients with transportation options. A volunteer peer ride share program also enhances client mobility. The program lead coordinates resources and collaborates with the transportation community. • Peer-based information sharing and support (Travel Buddy) • Transportation resource coordination • Peer ride share program	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Diego	Positive Parenting for Men in Recovery	INN	Offers a unique parenting enrichment program for fathers in Alcohol and Other Drug treatment programs in order to improve their parenting skills, provide education on mental health, and understand the impact of trauma and violence on their children and families. • Parenting education and skills training • Education on co-occurring disorders • Wellness and recovery support • Education on prevention of family trauma and violence • Mental health counseling and referrals	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Diego	After School Inclusion	INN	Provides Inclusion Aides at existing integrated community-based after-school programs throughout the County to allow youth with social-emotional/behavior issues access to after-school programs that same-aged typical (i.e. non-disabled) peers attend. The goal of the program is to increase access to after-school programs to youth with social-emotional/behavioral issues who have been prevented from attending, discharged from, or at risk of discharge from inclusive after-school programs. • Motivational engagement • Inclusion Aide support • Referrals to mental health and community services • Integration with after-school program Target population: • Youth, age 5-14 years with social-emotional/behavioral issues • Enrolled in after-school program sites located at elementary and middle school throughout the County	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf

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San Diego	Transition Age and Foster Youth	INN	Enhances life skills, increase self sufficiency and self esteem, improve behavioral and mental health conditions, and overall wellness for TAY and Foster Youth. Three interactive components: Coaching, Mentoring and Teaching • Activities focusing on education/higher education, vocational training, comprehensive independent living skills, employment preparation and supports • Support with peer, parent, life skills coaches and older adults • Housing and flex fund support	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Diego	Independent Living Facilities	INN	Creates an Independent Living Facility (ILF) Association with voluntary membership. The goal of this program is to promote the highest quality home environments for adults with severe mental illness. • Community collaboration • ILF Directory • Education and Training to Clients and ILF Operators	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Diego	Health Literacy	INN	On hold.	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Diego	In Home Outreach Teams	INN	Operates up to three regional mobile teams that will be clinic-based and provide mobile in-home outreach and engagement services to individuals with SMI who are reluctant to seek outpatient mental health services and their family members. • In-home assessment • Crisis intervention • Case Management • Support Services • Peer and Family member engagement • Linkages to outpatient programs Target population: • TAY • Adults • Older adults • In the North County and Central Region • Special outreach and engagement with African American individuals with SMI that have not been in the outpatient mental health system and are being released from the jail system	http://sandiego.camhsa.org/files/INN-Prg-Serv-Summ-Current.pdf
San Francisco	Seneca SF Connections	CSS - FSP	Serves children and adolescents (up to age 18) with challenging behaviors in high level group homes, with the goal of supporting these young people to live in a family setting. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Family Mosaic Project (FMP)	CSS - FSP	Serves children and their families who do not have MediCal insurance and would not otherwise be served by this program without MHSA funding. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Family and Youth Involvement Team - FSP Support Program	CSS - FSP	Assists clients from the Family Mosaic Project (FMP) and the Children's System of Care to navigate the network of services available to children, youth, and families. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp

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San Francisco	Family Service Agency (FSA)	CSS - FSP	For TAY - serves individuals who highly utilize the public health systems, yet they remain underserved because they either refuse services or their life circumstances do not allow them to successfully engage in services. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Community Behavioral Health Services – Transitional Age Youth (CBHS-TAY)	CSS - FSP	Serves youth transitioning out of foster care or other public systems. Most often, these youths have a difficult time transitioning to adulthood and can be very emotionally and psychologically fragile. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Family Service Agency (FSA) - Adults	CSS - FSP	Primarily serves high utilizers of public systems that remain underserved either because they refuse services or because their life circumstances are such that they have not successfully engaged in services. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	UCSF Citywide Case Management Forensics	CSS - FSP	Primarily serves individuals who are followed by the Behavioral Health Court and/or mandated by the courts to engage in mental health services. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Hyde Street Community Services	CSS - FSP	Primarily serves homeless individuals in the Tenderloin, who have not successfully engaged with outpatient services and frequently experience multiple co-occurring disorders (diagnosed or undiagnosed). Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	SF Fully Integrated Recovery Service Team (SF First)	CSS - FSP	Previously an AB2034 funded program, primarily focuses on individuals with serious mental illnesses who have been homeless for a long time. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	FSP SUPPORT PROGRAM Pathways to Discovery	CSS - FSP	A peer-run wellness and recovery team supporting FSPs, mental health clinics and housing providers -- by facilitating therapeutic art activities, conducting one-to-one peer counseling, escorting clients to other services and assisting with daily living. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Family Service Agency (FSA) Older Adults	CSS - FSP	Serves older adults aged 60 and above who need specialized geriatric mental health services to address multiple disabilities, complex medical needs, or other specialized needs related to mental health and aging. Treatment and supportive services with a client and family centered philosophy grounded in the belief that individuals can overcome their mental illness and live fulfilling and productive lives. Services include integrated, recovery-oriented mental health treatment; intensive case management and linkage to essential services; housing and vocational support; and self-help.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp

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San Francisco	Integration of Behavioral Health in Primary Care	CSS - OESD	Primary Care Clinics: Behavioral health service incorporated into primary care settings in order to provide early identification of mental health and psychiatric problems. • Juvenile Justice Center Clinic • Cole Street Clinic • Tom Waddell Health Center Chinatown North Beach Clinic and Chinatown Community Development Center: serves Asian children(ages 2 to 18) who have been diagnosed with Autism or Pervasive Developmental Disorder. The integrated clinic staffing of this program includes a nurse practitioner, pediatrician, and child psychiatrist who 1) speak the native languages of their consumers and their families; and 2) have special sensitivity to and understanding of their consumers' special medical and mental health needs and experience.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Capacity to Increase Cultural Competency	CSS - OESD	Community Youth Center: works to increase the number of Asian & Pacific Islander (API) youth who access early intervention services, especially those who are demonstrating symptoms of Seriously Emotionally Disturbed and other Mental Health disorders and increase participation of youth & their families in peer-led activities & other support services.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Integrated Access and Medication Delivery System	CSS - OESD	Behavioral Health Access Center (BHAC): centralized referral and linkage to services through the co-location of five behavioral health programs including, 1) Mental Health Access, for authorizations into the Private Provider Network, 2) the Treatment Access Program, for assessment and placement into addiction and dual diagnosis treatment, 3) the Offender Treatment Program, (formerly SACPA Prop 36), for placement of mandated clients into addiction and dual diagnosis treatment, 4) COPE/OBIC for evaluation and placement into Opiate Replacement Therapy, and 5) the CBHS Pharmacy.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Peer Based Centers - Central City Hospitality House	CSS - OESD	Central City Hospitality House: two peer-run centers -- one in the Tenderloin and the other on Sixth Street -- providing a range of holistic health and wellness services, including access to behavioral health services, acupuncture, self-care practices, and socialization services using a low-threshold, self-help, peer-based, harm reduction model.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Peer Based Centers - Curry Senior Center	CSS - OESD	The Peer Based Center at the Curry Senior Center is operated by Family Service Agency (FSA); and over the years it has been very successful in serving the underserved individuals of the Tenderloin community.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Peer Based Centers - Office of Self-Help	CSS - OESD	Provides socialization, recreational activities, employment development and a warm-line.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Peer Based Centers - Larkin Street Youth Services	CSS - OESD	Provides socialization, recreational activities, and employment development to at-risk transition age youth.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Walden House	CSS - OESD	Provides dual diagnosis residential treatment for individuals without MediCal coverage.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Larkin Street Youth Services	CSS - OESD	Supportive Services For Housing And Transitional Residential Housing Programs help individuals to obtain or retain permanent housing - serves Transition Age Youth.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Central City Hospitality House	CSS - OESD	Supportive Services For Housing And Transitional Residential Housing Programs help individuals to obtain or retain permanent housing - serves Adults and Older Adults.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Trauma and Recovery Project	CSS - OESD	Trauma and Recovery Project: addresses the need for community-based, client-driven prevention and early intervention for individuals, families and communities who are impacted by violence. The project consists of two community-based trauma and recovery programs: (1) La Cultura Cura Trauma Recovery & Healing Services administered by the Instituto Familiar de la Raza and (2) YMCA Trauma and Recovery Services administered by the Urban Services YMCA. • La Cultura Cura provides trauma recovery and healing services to youth under 18 years old & their families, with an emphasis on Latinos and multicultural youth & families living in the Mission district. La Cultura Cura established a behavioral health team within the Community Response Network (CRN), a partnership of agencies serving youth and their families affected by street and gang violence. • YMCA Trauma and Recovery Services gives comprehensive behavioral health, case management, and outreach services to youth & their families affected by violent events. Trauma and recovery Clinical Case Managers (CCMs) work with YMCA's network of behavioral health counselors, case managers, community organizers and family advocates to provide mental health services and comprehensive clinical case management services to youth & their families.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp

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San Francisco	CBHS - Crisis Response Team (CRT)	CSS - OESD	Focuses on the loved ones & families (of victims of gun violence and homicides), the CRT provides immediate crisis care and follow-up case management services, in conjunction with the SFPD and other city agencies. Services include: crisis support; short term case management; and brief therapy to victims and families who have been impacted by violence.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Vocational Rehabilitation - Department of Rehabilitation (DR)	CSS - OESD	Services are leveraged through CBHS' cooperative agreement with DR to match every dollar of MHSA money devoted to vocational rehabilitation with an additional $3 to create an expanded continuum of vocational services, such as: intake vocational assessments, vocational training, sheltered workshops and other employment opportunities, job development and placement, and job coaching and retention services.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Vocational Rehabilitation - Richmond Area Multi-Services	CSS - OESD	Provides computer classes in basic Microsoft Office applications and internet and website design, basic typing skills, access to computers with specialized software for clients with learning disabilities, and supported employment services.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Vocational Rehabilitation - Central City Hospitality House - 6th Street Center	CSS - OESD	Employment resource center (ERC) providing job search support and assistance. Access to computers, job leads, internet, copying and faxing; staff support for job search, creation of resumes and cover letters, and completing job applications.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	School-Based Youth-Centered Wellness	PEI	Prevention and early intervention services at seven school sites. Services address non-academic barriers to learning at K-12 schools – e.g., crisis management, family support and engagement, school climate activities, teacher training and support, direct early intervention services. • Edgewood Center for Children and Families at Charles Drew College Preparatory Academy • Instituto Familiar de la Raza at Paul Revere School • Bayview Hunters Point Foundation at Balboa High School • Bayview YMCA at Burton High School • Richmond Area Multi-Services at SFUSD High School Wellness Centers	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Screening, Planning and Supportive Services for Incarcerated Youth	PEI	Screening, early intervention services, case planning and direct service and resource linkages during and after detention for youth incarcerated in the S.F. Juvenile Justice system with moderate mental health needs.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp

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San Francisco	Holistic Wellness Promotion	PEI	Community-based, ethnic or cultural organizations providing wellness services, designed to address the impacts of trauma, including outreach and education, pro-social community building events, community wellness promotion activities and traditional healing, and service linkages to individuals and families. • Bayview YMCA's African American Holistic Wellness Program: seeks to decrease the impact of trauma of the low income African American community by increasing its holistic wellness approaches and practices toward healing Program seeks to identify early signs of mental health problems and provide mental health supports or link participants to needed services. Holistic wellness approaches & practices are achieved through the following strategies: Wellness workshops, Community events, Healing Circles, Support groups and individual therapy • Central City Hospitality House's Holistic Violence Prevention and Wellness Promotion Project: seeks to ameliorate the negative impact of trauma exposure on community members through increasing access to a range of services. This program is community-based and peer-led Phases of Treatment range in services and activities designed to engage a very hard to reach community of homeless individuals living in the Tenderloin neighborhood of San Francisco (e.g. support groups, creative writing classes, employment workshops & socialization events) The program's Mental Health Assessment component expands upon the on-site behavioral health clinic services provided by licensed or license-eligible clinicians: services include substance abuse & mental health assessment, medical triage, psychiatric care, individual & group counseling & linkage to residential and outpatient treatment programs. • Instituto Familiar de la Raza's Indigena Health and Wellness Collaborative: a partnership between Instituto Familiar de La Raza and Asociacion Mayab:, Program seeks to improve the health & wellbeing of Indigena immigrant families by increasing access to health & social services, supporting spiritual & cultural activities that promote community building, strengthening social networks of support and providing opportunities for healing as well as creating opportunities for early identification & interventions in families struggling to overcome trauma, depression, addictions and other health & mental health problems. Program's Wellness Promotion Activities give opportunities for spiritual & emotional enrichment & healing by organizing & sponsoring ceremonial, cultural & social gatherings & providing group education to families & individuals. Individual/Family Therapeutic Services cover Screening & Assessment, Care Plan development & Health Education/Harm and Risk Reduction counseling and linkage to outpatient services. • Native American Health Center's Living in Balance program: Program utilizes holistic wellness approach in the context of community by providing outreach & engagement, wellness promotions activities, individual & group therapeutic services, pro-social community building events and service linkage to reduce risk factors,	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Early Childhood Mental Health Consultation (ECMHC)	PEI	An expansion of mental health consultation services to 21 new sites including ten (10) child care centers, five (5) family resource center, three (3) family day care networks, and three (3) substance abuse day treatment programs. Child-trained, behavioral health professionals provide on-site professional development, child observation and individual/group consultation to teachers and staff; service linkage; and limited direct services to children and families.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Older Adult Behavioral Health Screening and Response	PEI	Behavioral health screening, care coordination, and early intervention services for older adults struggling with behavioral health risk factors in community-based settings. Services include screening, patient education, symptom tracking, multidisciplinary communication, and brief cognitive-behavioral interventions	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Mental Health Consultation for Organizations Serving Youth	PEI	Building on the proven Early Childhood Mental Health Consultation (ECMHC) model, this consultation and training program helps community-based organizations bolster their capacity to identify and understand behavioral health issues.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp

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San Francisco	Early Intervention and Recovery for Young People with Early Psychosis	PEI	Serves young people with or at risk for early psychosis by building community capacity to identify and intervene early and effectively. • Prevention and Recovery in Early Psychosis (PREP) a community partnership between The University of California at San Francisco, The Family Services Agency of San Francisco, The Mental Health Association of San Francisco, Sojourner Truth Foster Family Service Agency and Larkin Street Youth Services. Services include outreach and consultation, intake and assessment, treatment and training. Treatment services include: algorithm based medication management, cognitive rehabilitation, evidence-based individual therapy, multifamily groups, strength-based care management: and neuropsychiatric and other advanced diagnostic services as needed. • Comprehensive Child Crisis (CCC): a 24 hours 7 days a week, mobile crisis response unit. All children and youths needing a comprehensive psychiatric assessment from CCC are provided with a face to face assessment on the same day of request made. PREP trained CCC providers refer young people to PREP if the need is identified.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Transition Age Youth (TAY) Multi-Service Center	PEI	The first ever multi-service center designed to address the complex needs of the TAY population with holistic age-specific programs. Huckleberry Youth Programs, Larkin Street Youth Services and Community Health Programs for Youth provide outreach, direct services and linkage to services outside of the center.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Community-Based Trauma and Recovery	PEI	Behavioral health and case management services for youth and their families through a coordinated network of community-based providers. The target populations for these community-based violence and trauma recovery services are children, youth, young adults and communities that have been seriously impacted by community and gun violence.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Peer Outreach and Training	PEI, CSS, WET	Efforts to increase the public's understanding of mental illness, to improve the capacity of behavioral health providers and to carry out consumer-run education that focuses on recovery.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Mental Health Career Pathway Programs	WET	Summer Bridge Program: is an eight-week summer program for high school students, where they explore their interests in behavioral health careers and learn about entry points into post-secondary education tracks to behavioral health fields. Peer Specialist Mental Health Certificate Program: is a 12-week certificate program for consumers, family members and members of underrepresented communities to learn basic skills & knowledge for entry-level employment in the behavioral health system. Mental Health Certificate Program: is a multi-semester program, for consumers, family members and individuals from underserved and underrepresented groups, which allows them to obtain the skills and training needed to provide clinical and supportive services to those affected by mental illness. Supportive Services for Consumers Enrolled in Public Universities or Private Colleges (combines WDET and PEI funding): Grants to support universities and colleges.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	WDET Training and Community-Based Cultural Sensitivity Trainings	WET	• Family Support via Family-Friendly Practices in the Workplace • Crisis Intervention for Consumers in the Workplace • Integration of and Professional Development of Consumers • Community Violence • Culturally competent training programs to improve understanding of the cultural and linguistic issues and needs that affect recovery and resiliency in the following ethnic and cultural groups: African Americans; Hispanic/Latinos/as; Asian/Pacific Islanders; Native Americans; Russians; LGBTQQ consumers; transition age youth; and older adults.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Mindfulness-based Intervention for Youth and their Providers	INN	A 10-week, practice-based group intervention for high-school-age youth that teaches strategies to reduce stress and reactive behaviors while gaining greater self-control. Adult youth workers (therapists, social workers, nurses, outreach workers, etc.) will receive a similar group intervention. A select number of participants will receive additional train-the-trainer instruction, thereby allowing them to carry the intervention to staff at home agency and to other youth groups in the City.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Supported Employment & Cognitive Training (SECT) Project	INN	Goal to empower consumers with serious mental illness to obtain competitive jobs in the community by combining Supported Employment (SE) practices with cutting-edge computerized cognitive training (CT) that sharpen clients' thinking, memory, and problem-solving skills.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp

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San Francisco	Peer-Led Hoarding and Cluttering Support Team	INN	The Peer Led Hoarding and Cluttering Support Team (PLST) will serve to increase access to services for the underserved group of San Franciscans with serious hoarding and cluttering issues via a peer-based model of care in which Peer Responders with first-hand experience of hoarding and cluttering collaborate with support staff to provide interventions and access to therapeutic services while avoiding eviction and maintaining consumers in their housing.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Adapt the WRAP (Wellness Recovery Action Plan)	INN	Outreach and trainings to educate TAY and about the WRAP tool; TAY develop an adaptation of the WRAP tool, incorporating youth friendly media, for a TAY audience.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	990 Polk	Housing	Construction of 9-story senior housing; 110 units of which 10 are dedicated to MHSA clients; studios and one bedroom units; community garden; onsite nurse and supportive services; first MHSA Housing to be built in the State.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Richardson Apartments	Housing	A 4-story 110 studio units housing for extremely low income and chronically homeless; located at 365 Fulton; onsite support services; 10 dedicated for MHSA clients	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	220 Golden Gate	Housing	Rehabilitation and operating subsidy of Central YMCA, a 9-story 174 studio unit apartment building for chronically homeless adults; onsite HUH clinic and support services; 17 units dedicated for MHSA clients.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Phelan Loop	Housing	*Pending app to CalHFA* - Construction and operating subsidies for 60 family units consisting of studios and 1 bedroom; 21 units dedicated for Transition Aged Youth, 6 of which will be MHSA; including supportive services.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Aarti Hotel	GSD Housing	Funds carved out from community services & supports component to renovate/master lease building for housing. Rehabilitation of a 3-story 40 studio unit building for TAY housing; including onsite supportive services, counseling rooms, replacement of doors/windows, kitchen upgrades.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Silver Avenue Health Center	CFTN	(Completed March 2010) renovations resulting in five new counseling offices, a large group room, separate behavioral health reception area, and locked medical records room.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Sunset Mental Health Clinic	CFTN	Renovations allowing for improved access; structural upgrades.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Southeast Health Center	CFTN	Renovation resulting in a new Southeast Health Campus providing integrated services, co-location of Five DPH programs: Child Crisis, Foster Care Mental Health; Family Mosaic Project; Children's System of Care; and the Health and Environment Resource Center (HERC).	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Central YMCA	CFTN	Renovation of the ground floor of a low-income housing project to accommodate the Integrated Housing and Homeless Clinic (IHHC). IHHC will provide integrated physical, mental, and substance abuse services	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Vocational IT	CFTN	Program with three components: 1) Desktop and Help Desk Project, a single point of contact for end users to receive support and maintenance within CBHS computing environment; 2) Train the Trainer Project, is a tailored training for consumers on the utilization of the CBHS Electronic Health Record (EHR) portal and World Wide Web, who then provide trainings to other consumers and family members on these topics; and 3) Document Imaging Project, providing IT support in the transition from paper to an electronic health record system. Providing the front line of support are (Consumer) Technician Assistants who are receiving paid, part-time work experience and on-the-job training.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Francisco	Consumer Connect	CFTN	A consumer portal within AVATAR, CBHS's clinical and financial information system, which will enable mental health clients to view their electronic health records at 40 pilot sites. The secure system will have translation capability in five threshold languages (Spanish, Tagalog, Russian, Vietnamese, and Cantonese) and appointment scheduling features.	http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp
San Joaquin	Full Service Partnership Programs	CSS - FSP	Ten sites provide Full Service Partnership (FSP) services, with specialty focuses including children and youth (Child Welfare and Juvenile Justice), transition age youth, adult, older adult, adult forensic, homeless, African-American, Native American, Muslim/Middle Eastern, gay, lesbian, bisexual, transgender, Southeast Asian and Latino. FSP supports include resources for housing, employment and other consumer needs.	http://sjmhsa.net/
San Joaquin	Community Behavioral Intervention Services	CSS - OESD	Provides brief behavioral interventions with referred consumers. The consumer's personal strengths are incorporated to increase desirable behavioral skills.	http://sjmhsa.net/
San Joaquin	Crisis Community Response Team	CSS - OESD	Responds to calls from mental health consumers, family members, law enforcement, hospitals and community. Outreach, education and early intervention are provided to respond to mental health consumers and support persons and decrease the necessity for emergency calls to law enforcement and emergency medical response.	http://sjmhsa.net/

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San Joaquin	Consortium	CSS - OESD	A collaborative partnership, including county staff, community-based organizations, consumers and family members. Transforms and supports the implementation and evaluation of the Mental Health Services Act process. Through planned meetings, trainings and other joint activities, Consortium participants develop a greater understanding of behavioral health, the MHSA philosophy, and the cultural groups served in the county.	http://sjmhsa.net/
San Joaquin	The Wellness Center	CSS - OESD	Provides a supportive community environment with an emphasis on recovery, empowerment, mentoring, stigma reduction and participation in classes and events. The Wellness Center is designed as a consumer-run and self-help program	http://sjmhsa.net/
San Joaquin	Workforce Education and Training Coordination	WET	Provides staffing to coordinate and conduct assessments and evaluations to successfully accomplish our WET objectives.	http://sjmhsa.net/
San Joaquin	Medical Staff Development	WET	Focuses on attracting and retaining qualified medical providers and work to eliminate stigma by ensuring that the medical staff have the necessary training, education and background to appropriately serve the diverse client population.	http://sjmhsa.net/
San Joaquin	All Workforce Training in Co-Occurring Disorders and other Core Competencies	WET	Provides workforce training in treating individuals with co-occurring mental health and substance abuse disorders in a culturally competent manner to all staff, volunteers, contracting CBOs, consumers and family members.	http://sjmhsa.net/
San Joaquin	Mental Health 101 (basics) for Community Providers	WET	Provides basic training in mental health signs and symptoms, crisis intervention and de-escalation, and how to best access mental health services and supports to those in our partner organizations and agencies that may have first or ongoing contact with individuals experiencing the onset of severe emotional disturbances or with serious mental illness.	http://sjmhsa.net/
San Joaquin	Mental Health 101 (basics) for Primary Care Providers	WET	Provides mental health training in primary care settings to doctors, pharmacists, interns, nurses and support staff.	http://sjmhsa.net/
San Joaquin	Entry Level Career Pathways	WET	Reduces barriers to employment and creates opportunities for consumer and family member participation in the public mental health workforce.	http://sjmhsa.net/
San Joaquin	Entry Level Employee Support	WET	Provides additional peer networks that support consumers and family members as they progress along career pathways. Helps reduce stigma and discrimination in the workplace. Helps increase retention of skilled and experienced staff who have valuable experience as consumers and family members.	http://sjmhsa.net/
San Joaquin	Career Incentives	WET	Provides a variety of methods for recruiting and retaining employees for positions which are deemed hard to fill.	http://sjmhsa.net/
San Joaquin	Reducing Disparities in Access Project	PEI	Seeks to change public perceptions and knowledge of mental health services. This multi-pronged approach provides education and training to community professionals and engages cultural brokers to spread information about mental heath throughout San Joaquin's diverse cultural communities. It is a joint strategy offered with support from Workforce Education and Training (WET) funding.	http://sjmhsa.net/
San Joaquin	School Based Prevention Efforts	PEI	Focuses on children and youth ages at three different stages: early development, elementary school, and middle school, based on a twofold approach to school-based prevention: training and direct services.	http://sjmhsa.net/
San Joaquin	Connections for Seniors and Adults	PEI	Designed to help identify adults and older adults with mental health concerns and connect them to appropriate support services to overcome moderate mental health issues or to transition to more extensive mental health services that are linguistically appropriate and culturally competent.	http://sjmhsa.net/
San Joaquin	Empowering Youth and Families	PEI	Incorporates programs and activities including job training, parenting classes, recovery groups, other support groups and life skills classes for at-risk youth and family members to empower and strengthen youth and families.	http://sjmhsa.net/
San Joaquin	Suicide Prevention and Supports	PEI	Plans includes a multi-pronged approach to suicide prevention. Provides direct services to at-risk youth experiencing juvenile justice involvement and improves the capacity of professionals to identify suicide ideation and mitigate actual suicide risk.	http://sjmhsa.net/
San Joaquin	Innovation	INN	Examines how residential learning communities for high-frequency users of unplanned mental health services increase consumer engagement in their own recovery.	http://sjmhsa.net/

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San Luis Obispo	Children and Youth Full Service Partnership (FSP)	CSS - FSP	The Children and Youth Full Service Partnership program is modeled and built upon the strengths and success of the Children's System of Care program and the Wrap-Around Program. San Luis Obispo County Behavioral Health Department partners with Community Action Partnership of San Luis Obispo (CAPSLO) and Family Care Network to provide a wide array of culturally and linguistically appropriate services. All services are family driven and may include: individual and family therapy; rehabilitation services focusing on activities for daily living, social skill development and vocational/job skills; case management; crisis services; and medication supports.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Transitional Aged Youth Full Service Partnership (and Housing)	CSS - FSP	SLOBHD and Family Care Network collaborate to provide the Transitional Aged Youth Full Service Partnership. These Partnerships are wrap-like and include 24/7 availability, intensive case management, housing, employment linkages and supports, independent living skill development and specialized services for those with a co-occurring disorder.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Adult Full Service Partnership	CSS - FSP	The Adult Full Service Partnership team is a community and wellness approach to engage persons at risk. SLOBHD and Transitions Mental Health Association (TMHA) offer intensive services to enable individuals to remain in the community, and live full, productive, self-directed lives. The FSP Program for Homeless Individuals focuses on outreach to unserved, difficult-to-reach populations, and seeks to engage clients in health care, mental health treatment, and housing. Program participants are assisted in their efforts to gain the skills needed to make choices that reflect their own values, preferences, and goals; supports are developed to meet each person's needs and to empower each individual to attain their highest level of independence possible. Behavioral Health Treatment Court (BHTC) provides services for individuals on probation, and who have had mental health treatment as part of their probation orders. These individuals have been previously underserved or inappropriately served because of lack of effective engagement or in meeting their needs.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Older Adult Full Service Partnership	CSS - FSP	The goal of the Older Adult Full Service Partnership team is to offer intensive, individualized interventions to ensure that participants remain in the least restrictive setting possible. SLOBHD partners with TMHA to provide client driven services to Older Adults who are at risk of inappropriate or premature out-of-home placement due to a serious mental illness and, in many instances, co-occurring medical conditions that impact their ability to remain in home/community environments.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Client and Family Wellness Supports	CSS - OESD	This work plan provides an array of services designed to facilitate and support wellness, recovery, and resiliency. This is done in partnership with Transitions Mental Health Association (TMHA). Supportive Employment and Vocational Training includes a partnership with the Department of Rehabilitation to provide employment readiness classes, on the job training, and job placement. Client and Family Run Support provides both peer mentoring and peer and family educational and support groups focused on wellness, recovery and resilience. Wellness Centers are a peer-run and professional-staff supported to offer support groups, socialization activities and sponsored educational activities in comfortable, welcoming settings throughout the county. Client & Family Partners act as advocates, to provide day-to-day, hands on assistance and recovery services and supports. Services include assistance with individual and family needs such as health care, food, short-term housing, transportation, and education. Caseload Reduction Therapists have been established in the Adult outpatient clinics as well as a Co-occurring Specialist. These system additions facilitate a "no wrong door" approach and ensure that every participant receives appropriate services regardless of how they enter the system. The Co-occurring Specialist provides individualized substance use disorder intervention, intense treatment and education.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Latino Outreach and Engagement (Therapy Services)	CSS - OESD	The primary objective of the Latino Outreach and Engagement Program is for bilingual/bicultural therapists to provide culturally appropriate treatment services offered in both community and clinic settings.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Enhanced Crisis and Aftercare	CSS - OESD	Mobile Crisis provides responders and regionalizes care to decrease response time. Responders provide wellness-focused interventions, such as in-home crisis stabilization and next day follow up to person and family. Clients in need are transported to the psychiatric health facility and aftercare upon discharged is provided.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Community School Mental Health Services	CSS - OESD	The Behavioral Health Department and the County Office of Education have partnered with the community schools in the county to provide mental health services to seriously emotionally disturbed (SED) youth, engaging SED youth and their families in services that enable them to stay in school.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm

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San Luis Obispo	Peer Advisory, Mentoring, and Advocacy Team	WET	The Peer Advisory, Mentoring, and Advocacy Team (PAAT) provides formalized collaboration between members of PAAT, clients, family members, and SLOBHD staff members.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	E-Learning	WET	The E-Learning program assists employees, contracted employees and volunteers to meet training and licensing requirements and to ensure our workforce's ability to provide quality of care and culturally and linguistically competent services to the community.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Law Enforcement, First Responders and Crisis Intervention Training (CIT)	WET	SLOBHD provides Law Enforcement, First Responders and Crisis Intervention Training to increase the capacity of first responders to handle crisis situations involving individuals with mental illness in a culturally competent, recovery and resilience-focused manner.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Integrating Cultural Competency in the Public Mental Health System and Increasing Linguistic Competency of Staff	WET	Integrating Cultural Competency in the Public Mental Health System and Increasing Linguistic Competency of Staff focuses on training and policy development, including the establishment of a Cultural Competence Committee	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	All Workforce Training in Co-Occurring Disorders	WET	SLOBHD provides All Workforce Training in Co-Occurring Disorders in order to equip staff with the tools needed to serve individuals with co-occurring mental health and substance abuse disorders in a culturally competent manner.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Psychosocial Rehabilitation Certification Program	WET	The Psychosocial Rehabilitation Certification Program provides an increase in client education opportunities and certification support for careers in the behavioral health field	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Stipends & Scholarship Program	WET	The Stipends & Scholarship Program provides support for current students currently enrolled in behavioral health college programs.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Mental Health Awareness and Stigma Reduction Project	PEI	The Mental Health Awareness and Stigma Reduction is a county-wide universal and selective prevention project for all ages that includes both a media campaign (www.SLOtheStigma.org), social marketing strategies, and targeted outreach to underserved cultural populations, including outreach to the homeless population.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	School-based Wellness Project	PEI	School Based Wellness is a comprehensive, multiage approach to building resilience among all service recipients and includes the following: • The Positive Development Program is in collaboration with CAPSLO to provide side by side facilitation of a Pre-K life skills and student development curriculum for private daycare/preschools. • The Student Wellness Strategy is a collaboration with multiple schools and districts countywide to provide a 5th grade, countywide, mental health wellness and life skills curriculum. • Sober School Enrichment is a partnership with the San Luis Obispo Office of Education to provide a Student Support Counselor specializing in substance abuse and dependence who also possesses experience in youth development and prevention practices on the Sober School campus. The counselor conducts prevention groups, provides short term interventions for students experiencing a crisis, and provides referrals to long term services when needed. • The Middle School Comprehensive project is an integrated collaboration between schools, SLOBHD staff, and community based organization, The Link. Six selected middle schools operate a Student Assistance Program on campus, which includes counseling, resource specialists (for the student and the family), youth development, and education. The Youth Development program provides educational opportunities for all middle schools.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Family Education and Support Project	PEI	Family Education and Support is a collaboration with the San Luis Obispo Child Abuse Prevention Council. This program provides coordination and provision of bilingual and bicultural parenting classes and resources for all county parents, selective prevention education for parents of at-risk youth, and "on demand" coaching for parents facing specific challenges.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm

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San Luis Obispo	Early Care and Support for Underserved Populations	PEI	Early Care and Support for Underserved Populations is a multi-focus effort to address the needs of three distinct underserved populations: • Successful Launch Program for at-risk TAYs, is an expansion of the Cuesta College Independent Living Program to include graduating community school youth, and Wards of the Court, and other high risk Transitional Aged Youth. The emphasis of this program is to provide TAY development opportunities and support to ensure that as participants enter adulthood, they are stable, have housing, and momentum for school or work. • Older Adult Mental Health Initiative is conducted in partnership with Wilshire Community Services to expand the caring callers Caring Callers and Senior Peer Counseling programs, provide depression screenings for older adults, and community outreach and education regarding older adult specific mental health challenges. • The Latino Outreach and Engagement Program provides targeted outreach and education to populations in underserved Latino communities. Latino individuals and families are provided mental wellness education, and given information on available services.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Community Wellness Project	PEI	Community Wellness seeks to maximize the opportunity for a large number of diverse individuals to access services • SLOBHD increases availability and access to community based therapy by partnering with The Community Counseling Center and Wilshire Community Services to provide low and no cost counseling to underserved populations. • Community provider, Transitions Mental Health Association, provides resource specialists to link people in need of mental health and social supports, and provide community outreach, education and advocacy for mental health issues. • Enhanced Crisis Response provides mobile crisis response, aftercare, and forensic reentry services.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	System Empowerment for Consumers, Families, and Providers	INN	System Empowerment for Consumers, Families, and Providers, is an effort to engage and increase understanding amongst consumers, family members, and providers. This project creates an approach to mutual learning and enhanced collaboration, including: a trust-building retreat designed to engage providers, consumers and family members in building literacy amongst their respective needs and issues. This project also develops core training for all participants within the public mental health system.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Atascadero Student Wellness Career Project	INN	The Atascadero Student Wellness Career Project is a partnership with Atascadero Unified School District to test a peer counseling model with a public health emphasis focused on reducing stigma and increasing exposure to behavioral health education and careers.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Older Adult Family Facilitation	INN	Wilshire Community Services is testing the Older Adult Family Facilitation model which is a blend of two distinct models successful with children and older adults. This model addresses the need for integrating system supports when engaging seniors in mental health care.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Nonviolent Communication (NVC) Education Trial	INN	Nonviolent Communications Education Trial brings the most recent partner, United Way of San Luis Obispo County to test an early intervention practice for transitional age youth with serious mental illness and their families, by utilizing a known communication method in businesses and mediation.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Wellness Arts 101	INN	Cuesta college administers the Wellness Arts 101 class; a for-credit college course designed by students with mental illness for students with mental illness to develop art and whole wellness skills while meeting in a safe environment and building academic capacity.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Warm Reception and Family Guidance	INN	Warm Reception and Family Guidance adapts the Stanford Cancer Center's patient, family and caregiver programs in a mental health clinic setting and examines new customer service practices to improve engagement and outcomes.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Operation Coastal Care	INN	Operation Coastal Care is an innovative approach to veteran services utilizing the popularity of local surf academies to embed therapists in non-military or clinic settings with the goal of determining how best to treat returning soldiers to the County.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Luis Obispo	Outreach Play Therapy Trial	INN	Community Action Partnership is testing the Multi-Modal Play Therapy Outreach Trial, a parent-led multi-modal play therapy approach using three evidence based practices to increase access and services to rural and remote areas of the county.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm

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San Luis Obispo	The Behavioral Health Electronic Health Record (BHEHR)	CFTN	Behavioral Health Electronic Health Records (BHEHR) Project: The County's CF/IT Project replaces the legacy Insyst Administrative and Billing software and provides a fully integrated Electronic Health Record including Practice Management, Clinical Documentation, Computerized Physician Order Entry exchanges and a Personal Health Record. This project, approved in June 2009, includes a contract with Anasazi Software, Inc. for software licensure and implementation.	http://www.slocounty.ca.gov/health/mentalhealthservices/mhsa.htm
San Mateo	Full Service Partnership - Children, Youth and TAY	CSS - FSP	Priority populations to be served by the program are: 1) Seriously emotionally disturbed children, youth and their families, who are at risk of out-of-home placement or returning from residential placement, with juvenile justice or child welfare involvement; 2) Seriously emotionally disturbed and dually diagnosed transition age youth at risk of or returning from residential placement or emancipating, with juvenile justice or child welfare involvement; 3) Seriously emotionally disturbed children, youth and transition age youth with multiple psychiatric emergency services episodes and/or frequent hospitalizations and extended stays are also eligible, including homeless youth and youth exiting school-based, IEP-driven services; 4) In addition to these children and youth that are known to one or more of the systems, the program also serves newly identified transition age youth that are experiencing a "first break". The programs are open to all youth meeting the criteria described above, but targeted to Asian/Pacific Islander, Latino and African American children/youth /transition age youth as they are over-represented within school dropout, child welfare and juvenile justice populations. Asian/Pacific Islander and Latino populations are underrepresented in the behavioral health system. This program helps our highest risk children and youth with serious emotional disorders (SED) remain in their communities, with their families or caregivers while attending school and reducing involvement in juvenile justice and child welfare. Specialized services to transition age youth (TAY) aged 16 to 25 with serious emotional disorders are also provided to assist them to remain in or return to their communities in safe environments, support positive emancipation including transition from foster care and juvenile justice, secure safe and stable housing and achieve education and employment goals. The program helps reduce involuntary hospitalizations, homelessness, and involvement in the juvenile justice system. The 80 initial slots were divided between two 40-slot teams, one for children/youth and one for transition age youth. Supervision of both teams by a single person assures consistent vision across both teams and collaboration between them, which intends to create a more seamless relationship between services for children and services for adults. Enrollees do not experience multiple transitions between programs as they age; they have access to the expertise across teams and the entire continuum of resources for children, youth and transition age youth as their needs change over time. Enrollees benefit from the shared resources across the program including the cultural and linguistic diversity of staff, parent partners, existing collaborative relationships with Juvenile Justice, Child Welfare, Education, Housing and Employment Services, and the expertise of individual clinicians in co-occurring disorders as well as on other evidence based practices. The program reflects the core values of the Wrap Around model: to partner with families and other important people in developing service strategies and plans; to assess family, child/youth and community strengths rather than weaknesses; to assist children/youth and families in becoming the authors of their own service	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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			plans; to encourage and support a shift from professionally-centered to family-centered practice and resources; and to also assess child/youth and family needs and areas of growth. Embedded in these core values is recognition of the importance of the family's cultural values as a strength, a source of resilience, and an integral component of service delivery. It is worth noting that the transition age youth team emphasizes the individual consumer's role in developing their own wellness and recovery plan. This FSP also offers a drop-in center and supported education to engage TAY, which serves the FSP participants as well as other SED transition age youth in the community that are receiving mental health services. The focus is to provide self-help supports, social activities, and skill building, as well as support for those seeking to enter the college system, all aimed at enhancing ability to manage independence. Emphasis is placed in outreaching to LGBTQQI SED youth. The FY 09/10 approved expansion allowed for a new focus on San Mateo County youth ages 6 to 17 placed in foster care temporarily outside of the County. Services are designed to support and stabilize youth in the foster home, support the foster family, and facilitate the return of the youth to the family of origin in San Mateo County when feasible. This FSP also supports older adolescents transitioning out of foster care (18 years old and above), while assisting them in their journey towards young adulthood.	
San Mateo	Full Service Partnership - Children, Youth and TAY (cont.)	CSS - FSP	The program design allows BHRS to serve more youth while providing a fuller array of intensive services. The FY 09/10 approved expansion also allowed the provision of integrated clinic-based FSP services for the Central/South Youth Clinic (outpatient), as well as the integrated FSP for our intensive school based services, which are provided in the Therapeutic Day School (TDS) setting, school-based milieu services, and the Non-Public School setting. Youth served are 6 to 21 years old. These two integrated FSPs provide a full array of wraparound services to support our existing mental health teams. In addition, with the expanded FSPs a second a drop-in center for children ages 6 to 15 operates in San Carlos, supplementing the existing one in San Bruno for youth 16 to 24 years old. The drop-in centers provide a full array of social and therapeutic activities that support children and families. The FSP for TAY includes enhanced supported education services for approximately 20 transition age youth with emotional and behavioral difficulties. Outreach to TAY who are still in high school or who have dropped out is provided. The focus of these services will be to engage each TAY in educational or vocational activities that lead to completion of educational plans and employment. The FSP for TAY includes a contract with a community based provider to secure and manage 20 units of high quality housing for TAY FSP enrollees.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Full Service Partnerships - Adults	CSS - FSP	Seriously mentally ill adults who may also have co-occurring disorders to be served by the FSP include: those eligible for diversion from criminal justice incarceration if adequate multi-agency community supports can be provided; currently incarcerated individuals for whom early discharge planning and post-release partnership structure and support may prevent recidivism and/or re-hospitalization; individuals placed in locked mental health facilities who can succeed in the community with intensive supports; and individuals whose mental illness results in frequent emergency room visits, hospitalizations, and homelessness that puts them at risk of criminal justice or institutional placement. The program focuses on engagement of Latino, African American and Pacific Islander populations that are over-represented in the criminal justice system and underrepresented in the mental health system. The Full Service Partnership for Adults offers "whatever it takes" to engage seriously mentally ill adults, including those who are dually diagnosed, in a partnership to achieve their individual wellness and recovery goals. Services are focused on engaging people on their terms, in the field and in institutions. While services provided through this program address the individual's underlying mental health and behavioral health problems that may have led or contributed to involvement in the criminal justice system and institutionalization, a wide range of strategies and supports beyond mental health services are essential. The overall goal of the program is to divert from the criminal justice system and/or acute and long term institutional levels of care (locked facilities) seriously mentally ill and dually diagnosed individuals who can succeed in the community with sufficient structure and support. The program is grounded in research and evaluation findings that demonstrate that diversion and post incarceration services reduce incarceration, jail time and re-offense rates for offenders whose untreated mental illness has been a factor in their criminal behaviors. The program also follows the model and philosophies of California's AB2034 Homeless Mentally Ill Adult programs and the assertive community treatment approach, aiming to use community-based services and a wide range of supports to enable seriously mentally ill and dually diagnosed adults to remain in the community and to reduce incarceration, homelessness, and institutionalization. The Full Service Partnership provides the full range of mental health services including medication support with a focus on co-occurring mental health and drug and alcohol problems. Staff are trained in motivational interviewing and develop dually focused programming, including groups. Medication services include psychiatry and nursing support for ongoing dialogues with consumers about their psychiatric medication choices, symptoms, limiting side effects, and individualizing dosage schedules.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Full Service Partnerships - Adults (cont.)	CSS - FSP	Staff is available to consumers 24/7, and service plans are designed to utilize exceptional community relationships. Peer partners play a critical role, modeling personal recovery, helping consumers establish a network of peer, family, and cultural supports and, in particular, helping consumers connect with a non-profit network of peer-run self-help centers. The FY 09/10 approved expansion allowed for the introduction of the concept of integrated FSPs, in response to the need to be flexible in our step-up/step-down processes in order to create a more seamless service delivery experience for our clients. The word "integrated" reflects the FSP staff from community based organizations in our County-operated South/Central and North County clinics. Three levels of care are included in our redesigned FSP: an intensive level "1 to 10" (1 staff per 10 consumers/clients), a community case management level "1 to 27" (1 staff per 27 consumers/clients), and a wellness level of care.	

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San Mateo	Full Service Partnership – Older Adults/Medically Fragile Individuals Community Services and Supports	CSS - FSP	This Full Service Partnership serves seriously mentally ill older adults and medically fragile individuals who are either at risk of institutionalization or currently institutionalized and who, with more intensive supports, could live in a community setting. In many instances these individuals have co-occurring medical conditions that significantly impact their ability to remain at home or in a community-based setting. The program outreaches especially to Asian, Pacific Islander and Latino individuals, as these populations are under-represented in the current service population. Similar to the FSP for Adults, the goal of this program is to facilitate or offer "whatever it takes" to ensure that consumers remain in the least restrictive setting possible through the provision of a range of community-based services and supports delivered by a multidisciplinary team. The program targets seriously mentally ill older adults and medically fragile individuals who either would be at risk of placement in a more restrictive setting without intensive supports or who could be moved to a less restrictive setting with these additional supports. The program works with board and care facilities and with consumers living in the community to prevent them from being placed in locked or skilled nursing facilities, and with residents of skilled nursing and locked facilities to facilitate their returning to a less restrictive setting. Referrals to the program are received from locked facilities, skilled nursing facilities, acute care facilities, board and care facilities, primary care clinics, Aging and Adult Services, community agencies, and from individuals/family members themselves. Services are available around the clock. For many of the consumers targeted by this Full Service Partnership, their mental illness impedes their ability to adhere to essential medical protocols, and their multiple medical problems exacerbate their psychiatric symptoms. As a result, these individuals need support and assistance in following up on medical appointments, medical tests/treatments, and close day-to-day supervision of medications. Difficulties managing these issues as well as shopping, meal preparation and other routine chores often lead to institutional placements so that these basic needs can be met. The goal of the FSP is to make it possible for the consumer's care to be managed and his/her needs to be met in a community setting. A full-time nurse enables the treatment team to more effectively collaborate with primary care providers and assist consumers in both their communications with their primary care doctors and in their follow-up on medical procedures and treatments. The licensed clinicians in the team oversee the completion of the multidisciplinary assessment and the development and implementation of a comprehensive service plan that involves all members of the team, the consumer and the family, contingent on the consumer's wishes. Peer Partners provide support, information and practical assistance with routine tasks, and cultivate a system of volunteer support to supplement what the Peer Partner can provide. Similarly, when a family is involved and the consumer is supportive of their involvement, a Family/Caregiver Partner works with the family to build their capacity to support the consumer. With these strategies, the Full Service Partnership helps to mobilize natural supports in the consumer's system and contributes to building those natural strengths to maintain the consumer in the least restrictive setting. In addition to the FSP staff, each FSP member receives the supports of their "virtual team" that includes the individuals/family members in their lives as well as any other needed health or social services supports for which they are qualified such as In-home Supportive Services, Meals on Wheels, senior centers/day programs, etc. These formal and natural supports are identified and integrated into the consumer's individual service plan. Similar considerations apply as with the previous program regarding integrated services.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Outreach and Engagement - Community Services and Supports	CSS - OESD	Targeted populations include African-American, Asian, Filipino, Pacific Islander, and Latino individuals. Strategies include population-based community needs assessment, planning and development of materials to identify and engage diverse populations in services. Special emphasis is given to building relationships with neighborhood and cultural leaders to ensure that un-served and underserved communities are more aware of the availability of behavioral health services, and so that these leaders and their communities can have more consistent input about how their communities are served. This program strategy identifies and engages individuals by building bridges with ethnic and linguistic populations that experience health disparities and may experience behavioral health services as unresponsive to their needs. Strategies include population-based community needs assessments, planning and materials development as well as hiring of community based "navigators", and primary care-based behavioral health services to identify and engage diverse populations. Initially fully funded through the Community Services and Supports (CSS) component of the MHSA, in FY 09/10 we commenced a redirection of the services within this program that are fundable under the Prevention and Early Intervention component.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Pathways, a Mental Health Court Program	CSS - OESD	The Pathways Mental Health Treatment Court Program is a partnership of San Mateo County Courts, the Probation Department, the District Attorney's Office, the Private Defender Program, the Sheriff's Department, Correctional Health, and the Behavioral Health and Recovery Services Division. It is comprised of key people in each of these organizations who play an active role in the planning and support of the Pathways clients including participating in special yearly activities for the clients. The Pathways Program serves seriously mentally ill (SMI) nonviolent offenders with co-occurring mental health and substance use/abuse. The program was designed to be appropriate to the issues and needs of Latino, African Americans and Pacific Islander populations, as they are over-represented in the criminal justice system. The goal of the Pathways Program is to avoid incarceration for individuals with severe mental illness and help them to live more successfully in the community. Defendants who are eligible are admitted after they enter a guilty or no contest plea, but prior to sentencing on their charges. People who are on Probation with modifiable sentences and who meet the criteria for the program may also be considered for participation. Program eligibility criteria include: a. Statutorily eligibility for probation b. Resident of San Mateo County c. Age 18 years or older d. Axis I mental illness diagnosis that is not substance induced but significantly impairs their ability to function e. Voluntarily agree to participate in the Pathways Program Coordinated and Supervised Treatment, Recovery, and Behavior Programs: • Treatment plan and medication services • Housing plan and supportive services • Employment, education or community services support • Dual diagnosis treatment and recovery support • Psycho-educational/recovery services • Case management services (including assistance linking clients to health care) • Peer support/mentoring services • Family support services	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Older Adult System of Care Development	CSS - OESD	Population served: Older adults at risk of becoming or seriously mentally ill (SMI), including those served by specialty field-based outpatient mental health team, County clinics, community-based mental health providers, mental health managed care network providers (private practitioners and agencies), primary care providers, Aging and Adult Services, and community agencies that provide other senior services. There is an emphasis on specific ethnic/linguistic populations for different regions of the County. For example, in the Coast region the focus is on Latino populations, while in North County the focus is on Asian populations, and in South and Central County the focus is on African American, Latino, and Asian and Pacific Islander populations. This program focuses on creating a coherent, integrated set of services for older adults, in order to assure that there are sufficient supports to maintain the older adult population in need in their homes and community, and in optimal health. The intent is to assist seniors to lead dignified and fulfilling lives, and in sustaining and maintaining independence and family/ community connections to the greatest extent possible. Peer Partners provide support, information, consultation, peer counseling, and practical assistance with routine tasks such as accompanying seniors to appointments, assisting with transportation, and supporting social activities. They also recruit and participate in training volunteers to expand our existing senior peer counseling volunteer-based program in order to build additional bilingual/bicultural capacity. Senior peer counseling works with individuals and groups. Senior Peer Partners serve homebound seniors through home visits and create or support the development of activities for mental health consumers at community sites such as senior centers. In addition, and as desired by SMI older adults, Senior Peer Partners facilitate consumers to attend client-run self-help centers. Staff are bilingual and bicultural. In addition to a long established Spanish speaking component, the Senior Peer Counseling program expanded to include Chinese and Tagalog capacity as well as a LGBT- focused component. The field-based mental health clinical team provides in-home mental health services to homebound seniors with SMI. The team consists of psychiatrists, case managers, and a community mental health nurse, and provides assessment, medication monitoring, psychoeducation, counseling and case management. The team partners with other programs serving older adults such as Aging and Adults Services and the Ron Robinson Senior Care Center with the goal of providing comprehensive care and to help consumers achieve the highest possible quality of life and remain living in a community-based setting for as long as possible. The program has a very significant and robust outreach and engagement component that aims at identifying seniors in need through the various avenues described in this program.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	System Transformation and Effectiveness Strategies	CSS - OESD	All populations served by Behavioral Health and Recovery Services benefit, with an emphasis on improving services to ethnic and linguistic populations that experience disparities in access and appropriateness of services, and assuring integrated and evidence-based services to those with co-occurring disorders. The System Transformation and Effectiveness Strategies program includes a focus on recovery/resilience and transformation; increased capacity and effectiveness of County and contractor services through bilingual/bicultural clinicians, Peer and Family Partners; job coaching and job placement through Human Service Agency's Vocational Rehabilitation Services; and co-occurring contracts with alcohol and other drug community based providers. This program also partially funds a clinician and psychiatrist at the Puente Clinic, a specialty clinic sponsored by Behavioral Health & Recovery Services, Golden Gate Regional Center and Health Plan of San Mateo and serves the special mental health needs of clients with developmental disabilities.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	MHSA Housing Program	Housing	MHSA Housing funds provide permanent supportive housing through a program administered by the California Housing Finance Agency (CalHFA) to individuals who are eligible for MHSA services and meet eligibility criteria as homeless or at-risk of being homeless. The County's Behavioral Health and Recovery Services Division (BHRS) collaborated with the Department of Housing and the Human Services Agency's Shelter Services Division (HOPE Plan staff) to plan the MHSA Housing program in the County. BHRS worked with MidPen Housing and Mental Health Association(MHA)for the development of the following projects. Services for the MHSA tenants are provided by MHA, Telecare and Caminar. Approved projects include: Cedar Street Apartments (14 units); El Camino Apartments (20 units); and Delaware Street Apartments (10 units).	

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San Mateo	Workforce Education and Training Plan Coordination and Implementation - Workforce Staffing and Support	WET	The plan and all BHRS Training activities are overseen by a Workforce Development Director. The Director supervises a .5 FTE Community Resource Specialist. This team serves as staff to the BHRS Training Committee and has system-wide responsibility for: Managing implementation of the MHSA Education and Training Plan, and of the BHRS Training Plan; • Managing the BHRS training budget; • Providing research, data, and communication to the BHRS Training Committee to assist in oversight of the annual work plan; • Recruiting and orienting Training Committee members to ensure that the Committee includes both, consumers and family members, and that it represents the cultural composition of the population served; • Developing, maintaining and strengthening relationships with a wide range of regional stakeholders in education and training and workforce development, as well as among the provider, consumer and family communities, and cultural communities; • Organizing and scheduling training events, including identifying trainers and consultants; • Collaborating with consumer and family members staff to expand availability of consumer-family • Developing strategies and modalities to provide training to staff, including use of team-based training experiences, the use of consultants, and electronic training resources (video/web) to expand access to training; • Managing intern recruitment, placement, and training; • Liaising with the Bay Area Regional Collaborative and other regional and statewide relevant bodies and initiatives; this includes collaborating to expand training resources available locally; • Collaborating with the MHSA Coordinator regarding relevant cross-cutting MHSA activities and reporting requirements. • Participating in the development of pipeline workforce development strategies; • Evaluating training activities and reporting outcomes to the Training Committee; • Developing an annual report for staff, clients and family members to determine the extent to which training and workforce development activities are contributing to the transformation of the system of services and supports. • Preparing and submitting periodic reports to all internal and external organizations to ensure compliance with existing guidelines.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Targeted Training for and by Consumers and Family Members - Training and Technical Assistance	WET	This program aims at providing a range of trainings activities, as follows: A. Trainings delivered by and for consumers and family members. Examples include Paving the Way, a San Mateo model that provides training and supports for consumers and family members joining our workforce, and that also supports existing staff to welcome new consumer/family staff; Hope Awards, which highlight personal stories while educating consumers, families, staff, and the general public about recovery and stigma; Inspired at Work, which provides a framework for consumers and family members to get support and to explore issues involved with entering and remaining in the workforce. B. Trainings provided by consumers and family members to providers and the general public designed to increase understanding of mental health issues and to reduce stigma. Examples include Stamp Out Stigma, a community advocacy and educational outreach program dedicated to eradicating the stigma associated with mental illness through forum-type presentations in which individuals with mental illness share their personal experiences with the community at large; Breaking the Silence, a training activity designed to address issues of gender identification in youth and the effects of community violence; consumer-led trainings by youth/TAY, directed to audiences of all ages. Youth/TAY will be targeted as an audience for these trainings as well. C. Trainings provided by consumers and family members to increase understanding of mental health issues and substance use/abuse issues, recovery and resilience, and available treatments and supports. Examples include NAMI's Provider Education Training, an intensive training to providers led by consumers, family members, and experts; In Our Own Voice, NAMI-sponsored consumer-to-consumer presentations about their experiences, which is usually presented in a number of settings, including hospitals; Family to Family, a NAMI-sponsored 12-week course taught by families to families of consumers about mental health, treatments, and how to focus on self-care; Peer to Peer, a NAMI-sponsored 9-week course taught by consumers to consumers about mental health, treatments, and recovery; Voices of Recovery, a client and family driven-advocacy and support effort for those who have been affected by addiction. D. In addition, this program also provides for selected consumers and family members to attend leadership trainings to support increased involvement of consumers and family members in various committee, commission, and planning roles. Examples include: CMHACY (California Mental Health Advocates for Children and Youth) Conference; educational visits to The Village; attendance to NAMI, Heart & Soul, and other community-based training activities to help perfect the leadership skills of consumers and family members. E. Trainings for the community to reduce stigma and increase understanding of behavioral health consumer and family issues. One example is the Crisis Intervention Training (CIT), which provides training to police officers in local communities about the nature of behavioral health issues, and is designed to increase understanding, reduce stigma, and lay the groundwork for more appropriate responses to consumers and family members by local police. Consumers and family members present to first responders regarding their experience of mental illness, as well as the role and concerns of family members and consumers in promoting wellness and working with law enforcement. Consumers and family members also address issues of stigma, and raise awareness regarding appropriate law enforcement interventions for consumers and their families.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Training to Support Wellness and Recovery - Training and Technical Assistance	WET	San Mateo County BHRS engages in training to extend and support consumer wellness and recovery. An example of an activity to this end is the implementation of Wellness Recovery Action Plan Trainings (WRAP). WRAP is a self-help approach to achieve and maintain wellness that has been used successfully with mental health consumers and consumers with co-occurring disorders. With a train-the-trainer approach, consumers, family members, and selected staff (County and contracted providers) are trained as Master Trainers. The "Master Trainers" then provide training and support in developing WRAP plans for consumers and staff throughout our system.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Cultural Competence Training - Training and Technical Assistance	WET	Training in the area of cultural competence is designed to reduce health disparities in our community, to provide instruction in culturally and linguistically competent services, and to increase access, capacity, and understanding by partnering with community groups and resources. Educational and training activities are made available to consumers, family members, providers, and those working and living in the community. The Training Plan has identified a number of components designed to address these issues, such as the use of the CA Multi-Cultural Scale to assess our system of services; trainings to increase the effective use of interpreters in service delivery; creation of a clinical consultation resource for providers working with Filipino consumers; addressing cultural issues when providing services to consumers suffering from co-occurring disorders and domestic violence. Trainings are also used to help support key cultural disparity initiatives currently underway as part of our work on reduction of disparities. The different cultural disparity initiatives funded through CSS have been focused on the following populations: Chinese; Filipino; Pacific Islander; African American; Latino; LGBTQQI.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Evidence-Based Practices Training for System Transformation - Training and Technical Assistance	WET	System transformation is supported through an ongoing series of trainings that increase utilization of evidence-based treatment practices that better engage consumers and family members as partners in treatment and that contribute to improved consumer quality of life. Recommendations for training on evidence-based practices to incorporate into the different series may come from consumers, family members, or public and private agency staff by submitting a form to the Workforce Development Director, who then submits the request to the Training Committee for consideration. Suggested trainings shall be consistent with the values of the MHSA and shall contribute to the creation of a more culturally competent system. The Workforce Development Director routinely contacts participants in various EBPs (and other) training activities six-months after training has been completed to assess the degree to which the training has resulted in changed treatment practice.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Attract prospective candidates to hard to fill positions via addressing barriers in the application process - Mental Health Career Pathways Programs	WET	Multiple workgroup discussions concluded that strategies are necessary to address ongoing vacancies in positions which are difficult to fill. Psychiatry and community mental health nurses were identified as job classifications in which qualified staff has been challenging to obtain and retain. Cultural diversity in all positions across the board was also identified as an ongoing deficit. Consideration was given to how to address these shortages in partnership with the County's Human Resources Division in order to strategize solutions. Strategies include creating an expedited application process by: • working with the County's Human Resources Division to remove barriers to the application process e.g. the protracted length of time between recruitment, interviewing, and hiring • designating hard to fill positions for a fast track application process • reviewing and revising current job classifications/descriptions as necessary, in partnership with the County's Human Resources Division • identifying barriers in the application process including: where and how positions are advertised; elimination of duplications in fingerprinting requirements whenever possible; streamlining of civil service requirements as permitted; and broadening employment opportunities for targeted hard-to-fill disciplines such us child and gerontology psychiatrists, nurses, etc.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Attract prospective candidates to hard to fill positions through incentives - Mental Health Career Pathways Programs	WET	San Mateo County competes with other similar organizations and the private sector to hire employees with specialized, needed skills into a number of positions that are difficult to fill. Offering financial incentives to attract and retain candidates to these positions was identified as an important tool, since such incentives increase the appeal of working for community mental health services among potential job candidates. Strategies include the development of incentives to encourage the application and retention of qualified individuals into hard to fill positions by: • prioritizing hard to fill applicants in the loan assumption approval process • supporting child and gerontology psychiatry positions with part-time work as they complete fellowship • encouraging nurse employees in direct service and contract provider agencies to take advantage of MHSA statewide stipend program for advanced nursing training • being flexible when tailoring practicum requirements to the needs of candidates for hard to fill positions (in coordination with contracted educational agencies).	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Promote mental health field in academic institutions where potential employees are training in order to attract individuals to the public mental health system in general, and to hard to fill positions in particular - Mental Health Career Pathways Programs	WET	In addition to incentives and breaking down application barriers, workgroup members identified positive marketing of mental health careers as an important objective in attracting qualified individuals to hard to fill positions. Strategies include increasing exposure to the mental health field and to County employment opportunities, by: ☐ working with institutions of higher education such as UCSF, Cal State East Bay, and San Mateo Community College system –among others, to coordinate direct and indirect outreach including tailoring recruitment information and participation at career fairs ☐ expanding and/or creating pipeline relationships between prospective feeder institutions (high school, undergrad, grad) and providers ☐ strengthening partnerships with professional development programs (i.e., Nursing, MSW, MFT, etc.) ☐ promoting County placements to fulfill practicum requirements ☐ partnering with nurse practitioner student practicum to promote the mental health field, and provide career mentoring ☐ Program: Promote interest among and provide opportunities for youth/Transition Age Youth (TAY) in pursuing careers in mental health Focus groups and informal discussions have revealed a consistent interest in mental health careers among youth, including TAY youth. Through these discussions, youth/TAY youth revealed the barriers to entering mental health field, and were able to describe ways in which they believed youth could be engaged and retained in the mental health pathways. Such barriers included TAY not knowing what jobs are available in mental health settings, what such jobs entailed, what positions they qualified for, and how to train/apply for such positions. Once youth interest in the mental health field has been achieved, youth have indicated it is essential for them to have ongoing learning experiences to deepen their understanding and commitment to the field. Such experiences also provide early training, and assist with creating a more competent and diverse pool of trainees and applicants to the field.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Promote mental health field in academic institutions where potential employees are training in order to attract individuals to the public mental health system in general, and to hard to fill positions in particular - Mental Health Career Pathways Programs (cont.)	WET	Strategies include informing youth/TAY, including those not in school, of opportunities to engage in exploring a career in mental health, by: ☐ promoting BHRS activities, including workforce development activities on social networking and popular blog sites ☐ providing information and shadowing to high school students regarding careers in mental health ☐ delivering BHRS presentations in schools, promoting BHRS's campus tours, providing fliers promoting careers in mental health ☐ developing informational materials that reflect youth informed language and learning styles ☐ establishing mental health job fairs for middle and high school youth ☐ connecting with high school community service programs to provide BHRS site opportunities that meet the community service requirements ☐ providing opportunities for youth to be trained by and work with seasoned professionals ☐ broadening outreach to community colleges outside San Mateo County e.g. Foothill, San Francisco City College Strategies also aim at creating exposure to BHRS programs and providing work experience opportunities for youth/TAY by: ☐ developing mental health training academies in high schools to include psychology, health and/or rehab/social work course work, and internship placements ☐ implementing a mentoring/summer internship program similar to local summer jobs programs already established in the community ☐ working with High School Career Centers on pipeline strategies ☐ providing management and leadership skills development opportunities ☐ building on existing peer education programs in High Schools ☐ connecting with School counselors ☐ attending schools' career and job fairs to do outreach ☐ sponsoring summer internships ☐ developing a list of internships/volunteer experiences ☐ developing a paraprofessional training program for youth (e.g., conflict resolution for youth)	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Increase diversity of staff to better reflect diversity of client population - Mental Health Career Pathways Programs	WET	A concentrated effort needs to be made to create a workforce that is more reflective of the communities served, and that has the skills and knowledge needed to best provide services to these individuals. Traditional efforts to attract diverse workers into mental health jobs have had limited success, and it has become clear by discussions with relevant stakeholder groups, that strategies can be employed to increase interest in these positions. Some of these strategies include recruiting diverse populations (targeting language skills in addition to specific minority groups), by: • utilizing existing cultural initiatives and outreach collaboratives to deliver information regarding potential career opportunities • developing appropriate recruiting materials relevant to specific populations • utilizing media outlets that target specific populations • creating structures/processes to oversee implementation of recruiting efforts • contacting and engaging with culture-specific organizations such as the Historically Black Organizations or HBOs regarding career opportunities • outreaching to college fraternities and sororities with diverse memberships • targeting schools that have a high concentration of students of color for outreach and recruitment • ensuring diverse hiring and promotion panels (for both recruitment and retention) • participating in community events, i.e. health fairs, county fairs, ethnic events, to promote BHRS career	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Retain diverse staff - Mental Health Career Pathways Programs	WET	Current input from existing diverse staff, as well as from the participants in the workforce development group, indicate that diverse staff want to promote in mental health care, but are not always sure how, or if they have the skills necessary to move up in the organizations. The following interventions are designed to address the issue of ongoing skills development as well as staff understanding of the systems and opportunities to participate in these systems. Strategies include achieving diverse staff retention by: •creating exposure and interest across job classes, including administrative/clerical staff, via mentoring • promoting cross-training and temporary job changes • providing exposure to management and executive level staff • developing a leadership academy for supervisors • offering "promotion readiness" workshops for current staff • re-examining workload distribution and bilingual pay differential of staff receiving such differential.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Expand existing effort and create new career pathways for consumers and family members in the workforce to allow for advancement within BHRS and in other parts of the County system - Mental Health Career Pathways Programs	WET	San Mateo County BHRS and contracted agencies have been successful in hiring, promoting and fully utilizing dozens of community workers and family partners into their respective systems of care. In addition to providing essential practical support, guidance and training, recruitment and hiring teams have also worked hard to battle stigma, and to create a safe working culture for these essential new employees. That said, much more work remains to be done in relation to the issue of stigma and how it impacts the recruitment and retention of consumers and family members. As consumers and family members become more fully integrated into the system, it is imperative that these valuable workers be retained, and that their skills and leadership needs be brought to all levels of their respective organizations. Strategies include enhancing current and creating new professional development opportunities for consumers and family members –from entry level to top leadership positions, by • considering consumer and family member role in developing career paths (e.g. personal experience) • using youth/young adults as peer partners in order to help with engagement, support, and peer education • providing financial support for consumers and family members pursuing education, in order to assist with expenses not covered by other sources • creating a mentorship program especially developed for consumers and family members, with participation from supervisors and management • broadening employment opportunities • offering and supporting consumer and family volunteer opportunities • providing technical assistance to BHRS contractors not currently employing consumer/family members • building upon/expanding existing collaborations (i.e., College of San Mateo), and creating new ones, to support consumers and family members in their pursuit of certifications and advanced degrees • offering paid or unpaid internships for consumers/family members • creating a Family Partner Certification Program • empowering current and former mental health consumers to seek employment opportunities in the BHRS system • expanding support of consumers and family members during the application process in order to guide them through it by providing assistance on how to understand the HR lingo, and/or by conducting "mock interviews" to assist in the development of interviewing skills	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Ongoing engagement and development of client and family workers - Mental Health Career Pathways Programs	WET	Consumer and family member employees are a precious resource within the behavioral health system of care. They are not only essential in providing sensitive, appropriate services to highly diverse populations, but they are also inherently transforming the systems of care by their presence in the workforce. Their empathy, experience and advocacy skills are creating the shift toward total health and wellness which reinforces every aspect of the San Mateo County mission to provide high quality, community based health care. Strategies include increasing retention rates for consumer and family partner employees, by • building upon/expanding WRAP and similar current initiatives to support physical and emotional health of consumers and family members • building upon/expanding BHRS's efforts to successfully integrate consumer and family members in the workforce as essential to providing meaningful services and supports • utilizing the BHRS Stigma Initiative as a vehicle to address workplace issues • supporting flexible work schedule.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Stipended internships to create a more culturally competent system - Financial Incentive Programs	WET	This action provides stipends to trainees from local universities who contribute to expand the diversity as well as the linguistic and cultural competence of our workforce. Our stipend program for interns offers a fixed amount to students in our system to assist in covering their expenses in hopes they will pursue careers in public mental health. The Workforce Development Director conducts the outreach to graduate schools to identify a diverse pool of trainees, and works with mental health programs to develop placements and provide ongoing training. The objectives of this program include increasing the availability of culturally and linguistically competent services to all consumers and family members of BHRS; and increasing the knowledge and understanding of trainees of the values and commitments of recovery-based, strength-based services offered in BHRS.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Early Childhood Community Team	PEI	The Early Childhood Community Team project incorporates several major components that build on current models in our community, in order to support healthy social emotional development of young children. A Team comprises a community outreach worker, an early childhood mental health consultant, and a licensed clinician and targets a specific geographic community within San Mateo County, in order to build close networking relationships with local community partners also available to support young families. Per the recommendation of our planning workgroup, the initial BHRS PEI team site was targeted to serve communities with a high proportion of Latino and/or isolated farm worker families, and communities or a communities experiencing a significant degree of interpersonal violence, which has significant impact on families and young children. The community outreach worker is a key team member, who networks within the community and community based services to identify young families with children between birth and three and connects them with necessary supports. Another role includes offering groups for families with young children, using the Touchpoints Program. This approach, developed by Brazelton, is based on the concept of building relationships between children, parents and providers around the framework of "Touchpoints," or key points in early development. Participants learn how to use relationship-building and communication strategies when they deliver care and interact with children and families. The second team member (Early Childhood Mental Health Consultant) focuses on supporting social emotional development in child care settings by providing early childhood mental health consultation. This service typically consists of the following activities: • Observing the interaction of the caregiver(s) with young children • Observing a child's interaction with caregiver(s) and other young children • Consulting with the caregiver(s) regarding overall support of positive social emotional development • Consulting with the caregiver(s) on developmental or behavioral concerns regarding a specific child • Facilitating family and caregiver meetings • Facilitating referrals for additional services for children and families Child care is provided by licensed family day care providers, license exempt providers, and family/friends/neighbors. The child care resource and referral agency in San Mateo works with all of these types of child care settings and manages a database with all types of providers, searchable by specific community. It provides support for the county's child care providers and preschool programs, investing in professional development and helping improve program quality through a variety of workshops, programs and support services—however, most services are offered in central San Mateo and may not be attended by providers from other parts of the County. By making early childhood mental health consultation available to more child care providers, the team reaches families at risk and in distress at an early point in the developmental process. The outreach worker is also able to identify and connect with family/friend/neighbor providers that may not have been previously known to the resource and referral agency and facilitate their connection to ongoing supports. The third team member is a licensed clinician who provides brief, focused services to families that are identified with a need by the community outreach worker, the early childhood mental health consultant or partners in the network of community services such as primary care providers (note that brief services are defined as less than one year). The clinician screens for postpartum depression and facilitates appropriate service plans with primary care and/or mental health services.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Community Interventions for School and Transition Age Youth	PEI	This project focuses on school age and transition age youth, reaching out to them in non-traditional settings such as schools and community based agencies, such as substance abuse programs, drop-in centers, youth focused and other organizations operating in communities with a high proportion of underserved populations. The project provides population and group based interventions to at-risk children and youth 6-25. The first intervention, Teaching Prosocial Skills (TPS), addresses the social skill needs of students who display aggression, immaturity, withdrawal, or other problem behaviors. Students are at risk due to issues such as growing up poor; peer rejection; low quality child care and preschool experiences; after-school care with poor supervision; school failure, among others. Teaching Prosocial Skills is based on Aggression Replacement Training (ART). ART was developed by Arnold P. Goldstein, Barry Glick and John C. Gibbs, and takes concepts from a number of other theories for working with youth, and incorporates them into a comprehensive system. Peer learning and repetition are elements of the model. ART is an evidence based program broadly utilized. Social skills training, anger control, and moral reasoning are the main components of both ART and TPS. The second intervention, Project SUCCESS (Schools Using Coordinated Community Efforts to Strengthen Students), is considered a SAMHSA model program that prevents and reduces substance use and abuse and associated behavioral issues among high risk, multi-problem adolescents. It works by placing highly trained professionals (Project SUCCESS counselors) in the schools to provide a full range of prevention and early intervention services Project SUCCESS is a research-based program that builds on the findings of other successful prevention programs by using interventions that are effective in reducing risk factors and enhancing protective factors. Project SUCCESS counselors use the following intervention strategies: information dissemination, normative and prevention education, problem identification and referral, community based process and environmental approaches. In addition, resistance and social competency skills, such as communication, decision making, stress and anger management, problem solving, and resisting peer pressure are taught. The counselors primarily work with adolescents individually and in small groups; conduct large group prevention/education discussions and programs, train and consult on prevention issues with alternative school staff; coordinate the substance abuse services and policies of the school and refer and follow-up with students and families needing substance abuse treatment or mental health services in the community. The third intervention, Seeking Safety, is an approach to help people attain safety from trauma/PTSD and substance abuse. It targets Transition Age Youth through their contacts with community based organizations. Seeking Safety is a manualized intervention (also available in Spanish), providing both client handouts and guidance for clinicians. It is conducted in group and individual format; with diverse populations; for women, men, and mixed-gender groups; using all topics or fewer topics; in a variety of settings; and for both substance abuse and dependence. It has also been used with people who have a trauma history, but do not meet criteria for PTSD. The key principles of Seeking Safety are: 1) Safety as the overarching goal (helping clients attain safety in their relationships, thinking, behavior, and emotions). 2) Integrated treatment (working on both PTSD and substance abuse at the same time) 3) A focus on ideals to counteract the loss of ideals in both PTSD and substance abuse. 4) Four content areas: cognitive, behavioral, interpersonal, case management. 5) Attention to clinician processes (helping clinicians work on countertransference, self-care, and other issues) A fourth intervention, the Middle School Initiative, utilizes a variety of strategies to assist children and youth in the middle school setting who are having behavioral issues. The program works not only with the students, but with parents and teachers, providing technical assistance to the teachers, and support and education to the parents. A notable characteristic of this program is that many students refer their peers to the program., which indicates a high level of buy-in on the part of the clients.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Prevention and Recovery in Early Psychosis (PREP)	PEI	PREP aims at achieving remission through early detection, meticulous diagnosis and an array of evidence-based treatments, rehabilitation by providing clients with the tools that they need to manage their symptoms, recovery by assisting clients in obtaining the lives that they desire, and respect by promoting a collaborative relationship between the client, his or her family, and the treatment team, as well as providing services in a culturally sensitive manner. The PREP Program is one of the most the comprehensive programs of early diagnosis, treatment, and rehabilitation services for psychosis available in the United States. Unlike older treatments—which aim primarily at palliative care—the PREP Program aims to remit psychosis and to rehabilitate cognitive capacities damaged by the disease. PREP combines several evidence-based interventions into one integrated treatment approach and provides community education and outreach to facilitate early identification of individuals, experiencing a recent onset of psychosis. Once clients are engaged, PREP provides Cognitive Behavioral Therapy to help them manage their symptoms and better understand their condition. When medication is needed, PREP uses algorithm medication management to identify the lowest possible dosage creating the least possible side effects. PREP engages the client and family in Multifamily Groups that create a support system and promote a positive therapeutic community within the family. PREP uses Strength-Based Care Management to help the client and family develop relapse prevention plans and a life plan that builds upon strengths and provides goals for the future. Finally PREP provides vocational planning that reinforces the life plan with tangible goals for a career.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Primary Care/Behavioral Health Integration	PEI	This program supports BHRS' efforts towards becoming more effectively integrated to better serve our clients. Services funded include system-wide co-location of BHRS practitioners in Primary Care settings to facilitate referrals, perform assessments, and refer to appropriate behavioral health services if deemed necessary. The model utilizes essential elements of IMPACT model to identify and treat individuals in primary care who do not have Serious Mental Illness, and are unlikely to seek services from the formal mental health system. Some of these elements are listed below. Collaborative care, which functions in two main ways: • The individual's primary care physician works with a care manager/behavioral health consultant to develop and implement a treatment plan (medications and/or brief, evidence-based psychotherapy) • Care manager and primary care provider consult with psychiatrist to change treatment plans if individuals do not improve Care Manager/Behavioral Health Consultant. The care manager: • Educates the individual about depression/other conditions • Supports medication therapy prescribed by the individual's primary care provider if appropriate • Coaches individuals in behavioral activation and pleasant events scheduling/self management plan • Monitors symptoms for treatment response • Completes a relapse prevention plan with each individual who has improved Psychiatrist, who consults to the care manager and primary care physician on the care of individuals who do	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Total Wellness for Adults and Older Adults	PEI	Prevention and Early Intervention funds a few key program elements of a larger initiative called Total Wellness. More details of the Total Wellness project can be found under the Innovation Component program description below. Included in the Total Wellness project is an integrated training piece; it entails a universal prevention strategy that focuses on education of professionals on co-morbidity and related issues. The trainings target all types of providers (county clinics and contract providers serving that population.) The trainings aim at providing professionals with the necessary information to help them understand the interconnectedness and the interdependence between mental and physical health. Such trainings help bridge a much needed gap in knowledge.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Community Outreach and Engagement and Capacity Building	PEI	Efforts in the area of cultural competence and cultural humility are designed to reduce health disparities in our community, to provide a framework for culturally and linguistically competent services, and to increase access, capacity, and understanding of community needs and services through partnering with community groups and resources. Psycho-educational and training activities are made available to consumers, family members, providers, and those working and living in the community. Additional efforts used to help support key health equity initiatives, include Mental Health First Aid and Parent Project, with a focus on stigma reduction in cultural communities. The BHRS Health Equity Initiatives have been in existence since 2009 and have been focused on the following populations: Chinese; Filipino; Pacific Islander; African American; Latino; LGBTQQI. These Initiatives are under the auspices of the Office of Diversity and Equity. This Outreach and Engagement and Capacity Building program includes two regional community collaboratives, One East Palo Alto and the North County Outreach Collaborative; a multi-cultural peer-run wellness center in East Palto Alto; and various AOD contracts. This program funds a mental health clinician at a crisis hotline provided by a community based organization to provide referrals for community resources and services. PEI Outreach and Engagement provides funding to SMART, a program developed by the San Mateo County Health System and American Medical Response West in December 2005 in which a specially-trained paramedic responds to law enforcement Code 2 EMS requests for individuals having a behavioral emergency. This SMART paramedic performs a mental assessment, places a 5150 hold if needed and transports the client to Psychiatric Emergency Services, or, in consultation with County staff, arranges for other services to meet the individual’s needs. Access to the SMART program is only through the County’s 9-1-1 system. Commencing in FY 09/10, MHSA funds a clinical liaison position and a portion of this critical program.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Anti Stigma Initiative	PEI	There are several components to this initiative regarding stigma, which is designed to form the foundation for a long term effort to focus specific activities within San Mateo County, and not duplicate MHSA statewide initiatives and media campaigns. Areas of focus are: • Coordination and oversight of local anti-stigma initiatives, as well as coordination and alignment with state level campaigns, media, and other projects. • Development of educational materials to dispel myths and misperceptions about mental illness, substance use, or co-occurring conditions. • Participants in the PEI planning process agreed that within schools, health, human services, criminal justice and benefits organizations (social security, health plans), there is stigma that needs to be addressed through staff development and training. BHRS has already identified stigma as an issue in its overall MHSA training plan. Through this Anti Stigma Initiative the intention is to expand access to the planned BHRS training, engaging individuals employed in schools health, human services and benefits agencies throughout the San Mateo community. • This program also supports anti-stigma programs that provide trainings and presentations featuring consumers and family members as presenters. This includes partnership with Stamp Out Stigma, a community-based, and consumer-driven educational program designed to improve public perception of those	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	Training, Technical Assistance and Capacity Building	PEI	Three areas of focus for this component were identified through our stakeholder process: The first area involves training BHRS and contractors' staff to become trainers in the ASIST model. The funding for this training for trainers allows such staff to provide clinical and "Gatekeepers" training for providers and community members in San Mateo and neighboring communities. Making these training opportunities available has greatly increased the capacity of community members and providers to respond, among other things, to suicidality. BHRS has been able to provide a great deal of community education and promotion for the ASIST model, including media on CalTrain, Reach Out text campaigns, and webinars for staff. The second area involves an outreach and education effort aimed at providing primary care practitioners with training in Evidence Based Practices, in order to help them address in their offices an array of mental illness identification strategies including suicidality. This area of focus recognizes the fact that that individuals across cultural groups and ages tend to have a connection with a primary care provider; it also recognizes that the majority of individuals who completed suicide had a recent primary care visit. The third area of focus involves technical assistance collaboration with stakeholders from non-traditional mental health settings in order to develop community capacity building strategies targeting broad audiences through different topics addressing public perception on behavioral health issues (stigma, suicide, etc.). All three areas have created and realized opportunities for neighboring counties to participate and benefit.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
San Mateo	Total Wellness	INN	We build on several emerging, innovative practices for this program we have called TOTAL WELLNESS. Research shows that people with serious mental illness have a range of healthcare issues that compromise their ability to pursue recovery, and the behavioral health system should function as their entry point into primary healthcare --if they are not already being served or if they are underserved. Building on learnings from practices that have been successful in the primary care setting, Total Wellness aims at improving the health status of seriously mentally ill individuals who suffer chronic health conditions, adapting some of the strategies in those practices for use in the behavioral health system. Total Wellness also builds upon and supports the practices of the Primary Care Nurse Practitioners that for almost two decades have been located in BHRS clinics, providing assistance and backup to their provision of general healthcare services in the behavioral health setting. Total Wellness has increased Primary Care hours in the BHRS clinics from 1.5 days a week to 5 days a week. Moreover, the incorporation of Nurse Care Managers assures smooth and seamless collaboration among all care providers, ensures that pertinent health and clinical information is disseminated to the client and to providers, and allows for monitoring of progress and appropriate referrals to various wellness services. Lastly, the addition of Peer-led health and wellness services aims to support participating clients in their wellness journey through individual coaching, groups, or classes led by peers who have lived experience with behavioral health issues. To facilitate a coordinated wellness and service experience for clients, the Nurse Care Managers work closely with Peer Wellness Coaches, Primary Care, Behavioral Health Providers, and other care providers as needed to help improve individuals with behavioral health issues who also have elevated blood pressures, elevated glucose or hemoglobin A1C, elevated lipids, or who use tobacco, assuring that: • they are connected to ongoing healthcare in a primary care medical home within our BHRS clinics • they get clinical preventive screenings (for example, mammograms and other cancer screenings), as well as appropriate primary and specialty healthcare for chronic health conditions (by coaching and/or supporting them in primary care visits or arranging for peers to accompany them) • they follow up on medications prescribed for physical health conditions • they engage in chronic disease self management training The Nurse Care Managers also link people to benefits counseling, the Smoking Cessation classes, and plan and co-lead with Peer Wellness Coaches ongoing groups that support healthy lifestyle changes. A key feature of this innovative approach is the utilization of peers as health and wellness coaches, assisting seriously mentally ill individuals in the management of their health conditions. Peer Coaches are invaluable in that they use their lived experience and wellness success to inspire and support clients going through their own wellness journey.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding

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San Mateo	eClinical Care	CFTN	San Mateo County has had no viable opportunities under the Capital Facilities section of this component due to the fact that the guidelines limit use of these funds only to County owned and operated facilities. Virtually all of San Mateo's mental health facilities are not owned but leased by the County, and a considerable portion of our services is delivered in partnership with community-based organizations. Through a robust stakeholder process it was decided to focus the resources of this component to fund eClinical Care, an integrated business and clinical information system (electronic health record) as well as ongoing technical support. The system continues to be improved and expanded in order to help BHRS better serve the clients and families of the San Mateo County behavioral health stakeholder community.	http://www.co.sanmateo.ca.us/portal/site/health/menuitem.e61f1c321415a767a181dda7917332a0/?vgnextoid=71393b5678f75210VgnVCM1000001937230aRCRD&vgnextfmt=DivisionsLanding
Santa Barbara	Assertive Community Treatment (ACT)	CSS - FSP	Evidence-based approach helps people with severe mental illness who have co-occurring life issues, including alcohol and drug use. Deploys multidisciplinary teams responsible for providing services, including housing assistance; supported employment and education; vocational skills enhancement; medication support; counseling; peer support and social skills development.	http://www.countyofsb.org/admhs/
Santa Barbara	SPIRIT	CSS - FSP	Provides a family-centered, strength-based, highly individualized service to help children and their families meet unmet needs both within and outside of formal human services systems while children remain in their neighborhoods and homes whenever possible. Two staff operate at each of the three regional ADMHS Children's service sites. Staff have been enhanced by adding parent partners who reflect the culture and language of those being served. SPIRIT staff ensure that care is available 24/7 to families to keep youth and families stable and safe.	http://www.countyofsb.org/admhs/
Santa Barbara	Supported Housing	CSS - FSP	Provides intensive, multidisciplinary services to adults and older adults who require a higher level of care than offered by mental health clinics, but less than that provided by ACT programs.	http://www.countyofsb.org/admhs/
Santa Barbara	CARES Mobile Crisis Team	CSS - OESD	A mobile crisis team available 24/7 was added to the ADMHS CARES (Crisis and Recovery Emergency Services) program to provide clients in crisis appropriate alternatives to hospitalization. Mobile crisis response teams collaborate with law enforcement crisis calls to reduce incarceration or involuntary care. The goal is to increase access to care by extending comprehensive services to underserved individuals.	http://www.countyofsb.org/admhs/
Santa Barbara	New Heights	CSS - SD	Based in Lompoc and Santa Maria, this program assists transition age youth in making the successful transition into adulthood with tools necessary for ongoing wellness and recovery. Offers an array of recovery-focused services, including mental health services, employment and education support and referrals, linkage to other service providers and community resources and socialization support. New Heights uses the Transition to Independence Process (TIP) that stresses the importance of providing access to community-based outreach and support, engages transition age youth in shaping their own future planning process and adopts a focus on each individual's strengths.	http://www.countyofsb.org/admhs/
Santa Barbara	Partners in Hope	CSS - OESD	This resource includes family partners, peer recovery staff and alcohol and drug treatment specialists who provide outreach, linkage to care and recovery-oriented activities in Lompoc, Santa Maria, and Santa Barbara. In addition, Recovery Learning Centers (RLCs) in each region of the County provide peer-run, recovery-oriented activities.	http://www.countyofsb.org/admhs/
Santa Barbara	The Justice Alliance	CSS - SD	Emphasizes treatment, not punishment, for people with mental illness in the justice system. A licensed mental health professional in each region of the County provides linkage to mental health services for individuals with serious mental illness who have had interactions with the legal system including the courts, probation, public defender, and district attorney. Services are provided in the jail, at court, in the community, at acute care facilities, and/or at regular service delivery sites. Treatment and services are wellness- and recovery-oriented.	http://www.countyofsb.org/admhs/
Santa Barbara	Bridge to Care	SD	Program serves adults in the Lompoc area. Bridge to Care provides psychiatric medication evaluation, prescriptions and medication monitoring to stabilize people in treatment with drug and alcohol programs who have co-occurring mental illnesses or trauma.	http://www.countyofsb.org/admhs/
Santa Barbara	MHSA Housing	MHSA Housing	Provides funding for capital costs and operating subsidies to develop permanent supportive housing for persons with serious mental illness who are homeless, or at risk of homelessness. Supports 10 units in the Garden Street Apartments in Santa Barbara, eight units in Homebase on G Street in Lompoc and 12 units in Rancho Hermosa in Santa Maria. Additional housing projects are currently under development.	http://www.countyofsb.org/admhs/

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Santa Barbara	Consumer Empowerment Manager and Workforce Education and Training Program Manager	WET	ADMHS recognizes the value and richness that consumer and family member employees bring to the workplace, whether in direct service capacity or in other positions of interest. To address barriers to obtaining and sustaining employment, ADMHS established the positions of Consumer Empowerment Manager and WET Program Manager to build a supportive and success-driven infrastructure for consumers and family members choosing to enter or reenter the workforce.	http://www.countyofsb.org/admhs/
Santa Barbara	Consumer and Family Member Training and Employment Opportunities	WET	ADMHS seeks to provide consumers and family members with opportunities to build skills that will prepare them for entering and/or re-entering the workforce. These opportunities include a 10-day training including an overview of the public mental health system and workforce entry/reentry skills as well as internships for both consumers and family members.	http://www.countyofsb.org/admhs/
Santa Barbara	Crisis Intervention Training	WET	Intended for law enforcement officers who are often the first point of contact for people in crisis and psychiatric emergency. Training prepares law enforcement professionals to recognize the signs and symptoms of severe mental illness, with or without the co-occurring condition of substance abuse, and provides them with the skills and knowledge to respond effectively.	http://www.countyofsb.org/admhs/
Santa Barbara	Support to Culturally Underserved Communities	PEI	Community health educators from culturally underserved communities offer educational workshops, discussion groups and support groups to address individual and family member mental and wellness topics. Provides culturally appropriate training sessions for community leaders and service providers. Culturally and linguistically appropriate case management to ensure linkages to services. Cultural wellness practices are integrated into outreach, consultation and early intervention activities.	http://www.countyofsb.org/admhs/
Santa Barbara	Integrating Primary and Mental Health Care in Community Clinics	PEI	Community health clinics throughout the County provide bilingual training and education to clinic visitors in mental health, resiliency and risk factors. Helps identify individuals who may be experiencing trauma, a mental health condition and/or other emerging mental health conditions. The evidence-based IMPACT program screens older adults for depression and provides follow-up as needed. Expanded mental health resources in each community health clinic strengthen the capacity of each facility to assess, treat and refer individuals at risk for the development of a serious mental health condition.	http://www.countyofsb.org/admhs/
Santa Barbara	Early Childhood Mental Health Services	PEI	Provides in-home support, health and development screening, parent education and skills training, infant parent psychotherapy, advocacy, resources and referrals, postpartum support groups and father outreach. Implements problem-solving and capacity-building interventions within a collaborative relationship between a professional consultant with mental health expertise and family resource staff, preschool teachers, families and programs.	http://www.countyofsb.org/admhs/
Santa Barbara	Prevention/Early Intervention Services for Children and TAY	PEI	Includes mental health assessment, screening and treatment, home visits, school collaboration, family interventions, respite, multi-agency linkages, child abuse prevention education. A school-based program offers prevention and early intervention mental health services to students in Carpinteria public schools experiencing emotional and/or behavioral difficulties. In addition, specialized teams in Santa Barbara and Santa Maria offer evidenced-based interventions for adolescents and young adults, including family psychoeducation, education and employment support, family-aided assertive community treatment, and medication, if needed	http://www.countyofsb.org/admhs/
Santa Barbara	CARES (Crisis and Recovery Emergency Services)	PEI	Consolidates crisis stabilization, intake, mobile crisis response and access to service for mental health and alcohol and drug emergencies. Staffed by mental health professionals, CARES provides crisis support on a 24/7 basis, serves children and adults, and works closely with the SAFTY program.	http://www.countyofsb.org/admhs/
Santa Barbara	MHSA Innovation	INN	Innovation funding supports specialized benefits acquisition teams based in CARES North (Santa Maria) and CARES South (Santa Barbara). These teams assist high-risk, indigent adults with severe mental illness in obtaining benefits. While the individuals are engaged in the benefits application process, peer and treatment services will be available. In addition, a new part-time position will be created to link individuals with severe mental illness leaving the county jail to the benefits acquisition teams.	http://www.countyofsb.org/admhs/
Santa Barbara	Client/Family Access to Computer Resources	CFTN	Focuses on training and access to technology in each of the three primary population centers in Santa Barbara County: Santa Barbara, Santa Maria, and Lompoc. Consumers will have access to computer resources and tools to gather information, research mental health conditions, and gain knowledge to become a well-informed and active partner in their own treatment. Makes training resources available to promote the well-being of consumers by enabling them to acquire skills to improve their opportunities for education and employment.	http://www.countyofsb.org/admhs/

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Santa Barbara	Electronic Health Records Enhancement	CFTN	Builds on the currently operational Integrated Information System at Santa Barbara County ADMHS. The project creates system wide access to clinical, administrative and financial information in digital format. Trains staff to access and record accurate and timely data. The project allows for the capture of digital information and eventual elimination of a paper-based system.	http://www.countyofsb.org/admhs/
Santa Barbara	Consumer Security and Confidentiality	CFTN	Builds on the security efforts currently in place at ADMHS. The security standards will match other Santa Barbara County Departments to meet the state-mandated requirements. The project facilitates secure system wide access to clinical and administrative information, ensures the security of data, and reduces the risk of potential identity theft. The project also provides access to the consumer health data system and improves continuity of care on a daily basis and in case of an emergency.	http://www.countyofsb.org/admhs/
Santa Clara	Child FSP	CSS - FSP	Intensive all-inclusive age-appropriate program for up to 60 seriously emotionally disturbed ages 0-15 that combines critical core services within a wraparound model. Target population is juvenile justice-involved and SED African-American, Native American and Latino youth at risk of, or returning from, out-of-home placement and youth.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Child System Development	CSS - OESD	Establishes systems of care for at-risk young children and families through key Santa Clara County child-serving agencies involved in zero to five-age services. The objectives are to put into place quality screening, assessment, services linkage and parent support models that achieve the outcomes of increased school readiness and success among at risk young children; and to establish early identification and treatment and support interventions with children with significant developmental, behavioral and emotional challenges.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Children and Family BHOS Redesign	CSS - OESD	Researches, designs and implementation of system-wide level-of-care screening, assessment, practice guidelines and treatment services to improve the system of care for children and youth, particularly those from unserved and underserved ethnic and cultural populations. Services include: screening, assessment and linkage for young children; services for SED youth involved in the juvenile justice system; redesign of service system for foster care youth; partially funds independent living programs, which provide services to TAY foster youth; Services to Uninsured Youth; Juvenile Competency Restoration program; funding for one Family Affairs coordinator and approximately 4 FTE family partners.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	TAY FSP	CSS - FSP	Intensive all-inclusive age-appropriate 100 TAY consumers with high levels of need are enrolled in an FSP Program that targets youth "aging out" of other child-serving systems.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Behavioral Health Services Outpatient System Redesign / TAY Crisis and Drop-In Services	CSS - OESD	Expands system of care for TAY youth through a continuum of programs that includes specialized outreach, crisis intervention, linkages, self-help, peer support and case management through a 24-hour Drop-In Center and a community center serving the LGBTQ community (500 served).	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Adult FSP	CSS - FSP	Intensive all-inclusive program for 175 highest risk SMI adults who are frequent users of involuntary care; and underserved homeless populations consumers with high levels of need. Based on the AB2034 philosophy, the program provides treatment, case management and community resources necessary to meet the needs of each individual's life circumstances.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Adult BHOS Redesign	CSS - OESD	This plan expands self-help and peer-support services; redesigns outpatient clinics toward a recovery model; incorporates consumer involvement; modifies levels of care to appropriately meet consumers' level of need, and works with system partners (e.g., law enforcement) to improve the care consumers receive when they interface with multiple systems. The service expansion component addresses specific population disparities in the adult system for co-occurring mental health/substance abuse disorders, co-occurring mental health/developmental disabilities, and unserved and underserved ethnic and cultural groups.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Criminal Justice System Jail Aftercare Program	CSS - OESD	This program serves 486 adults 18 to 59 years old with concurrent mental health and substance abuse problems who also are involved in the criminal justice system. A continuum of intensive all-inclusive services, residential, outpatient, and aftercare linkage and case management is offered to clients based on individual need.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx

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Santa Clara	Urgent Care	CSS - OESD	Provides consumers and individuals with emergent needs with critical services and is an alternative to Emergency Psychiatric Services (EPS). MHUC services include crisis counseling, referrals, education, medications, as well as intensive follow-up in the community for a short period of time. This service is available to individuals who walk in for assistance. The program is open from 8AM to 10PM each day, 7 days a week and works closely with EPS staff. On a limited basis, the staff provide mobile crisis response and telephone consultation to the police as they are called to highly emotionally charged situations.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Consumer and Family Wellness and Recovery Services	CSS - OESD	Transforms the outpatient services of County- and CBO-operated clinics. The initiative provides clinics with the training and practical skills to move towards a recovery and wellness oriented service model, which emphasizes the consumer's principal role in his or her own recovery, appropriate levels of care, and infuses and expands the role of peer mentors, peer-directed services and self-help programs throughout the system.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Older Adult FSP	CSS - FSP	Offers up to 25 enrollees with intensive wraparound services including. FSPs for older adults are designed to meet the comprehensive needs of seriously mentally ill older adults 60+ years of age. These include psychiatric needs, homelessness or the risk of homelessness, hospitalization or other institutionalization, and the risk of being harmed physically, financially or psychologically.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Older Adult Behavioral Health Outpatient Services Redesign	CSS - OESD	Design for age-appropriate access, engagement, screening, assessment, and level of care system assignment for outpatient services; and training and staff development plans to ensure incorporation of core transformation principles and new intervention models throughout the system, including recovery focused services, consumer/family member involvement, and cultural competency.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Housing Options Initiative	CSS - OESD	Helps the MHD and the County directly address the housing needs of consumers through housing development, services, and interagency collaboration. The Office of Housing and Homeless Support Services (OHHSS) was created to oversee MHD's housing development, programs, and services for unserved and underserved consumers of all age groups and their families, particularly those who are homeless or are at-risk of homelessness, have co-occurring disorders, suffer from abuse or are involved in the criminal justice system. Using County General Funds, the OHHSS supports the County's effort to address homelessness throughout the County. The goals and strategies of this program intersect and are coordinated with those of agencies addressing homelessness throughout Santa Clara County.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Behavioral and Primary Health Care Partnership	CSS - OESD	Improves the interface between behavioral health and local medical primary care in collaboration with mental health and substance abuse providers. The program incorporates key evidenced-based administrative and direct service strategies that will improve service access, care coordination and care delivery across healthcare systems. A new Mental Health Specialty Assessment Center (MHSAC) offers mental health assessments and assistance in linking to needed services, enrollment in the VMC primary care system, annual health screenings with pharmacy education for enrolled consumers, and increased pharmacy consultation to improve primary care with psychiatric medication management.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Learning Partnership	CSS - OESD	Is a Division of the SCCMHD comprised of three Units, Decision Support (the Department's research and evaluation unit), Cultural Competency (ensures that cultural needs of the County's ethnic and racial populations are met by the Department) and Continuous Learning (responsible for staff development and consumer and family member workforce education and training). These units are tasked with working together to aid and support the transformation of the Department to a client driven/family supportive wellness and recovery system.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Administration	CSS - OESD	Includes support staff positions and contracts for Administration, Contracts, Finance and Quality Improvement.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Workforce Education and Training Coordination	WET	Positions budgeted for Workforce, Education and Training infrastructure and are charged entirely to this budget. The infrastructure is to support the education and training for underrepresented populations to enter the Mental Health Workforce and advance within the system as desired.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Promising Practice-Based Training in Adult Recovery Principles & Child, Adolescent & Family Service Model	WET	Expands training for SCCMHD and contract CBO management and staff, consumers and family members and other key stakeholders. The training will promote and encourage the integration of Wellness and Recovery methods and the value of providing peer support and the use of staff with "lived experience" via a continuous learning model.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx

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Santa Clara	Improved Services & Outreach to Unserved and Underserved Populations	WET	Expands specialized cultural competency training to all staff to improve services to ethnic and cultural populations. Ethnic and Cultural populations are broadly defined to include marginalized populations such as, People of Color, the Elderly, Youth, People with Disabilities, LBGTQ individuals, Immigrant and Refugee Populations.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Welcoming Consumers and Family Members	WET	Develops and implements training, workshops and consultations that create an environment that welcomes consumers and family members as contributing members of the public mental health system. It creates a Consumer/Family Member Training Coordinator whose focus will be to advance the educational, employment, and leadership opportunities for consumers and family members public mental health.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	WET Collaboration with Key System Partners	WET	Builds on the collaboration between the Mental Health Department and key system partners to develop and share training and education programs so that consumers and family members receive more effective integrated services.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	A Comprehensive Mental Health Career Pathway Model	WET	The model supports SCCMHD commitment to developing a workforce that can meet the needs of its diverse population and is trained in the principles of recovery and strength-based approaches and culturally competent interventions. The needed "cultural change" in the transformation process is expected to occur as the workforce's composition changes to include more individuals who have "lived experiences" as consumers and family partners, and who come from the diverse cultural, ethnic and linguistic underserved and unserved communities that SCCMHD seeks to serve.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Stipends and Incentives to Support Mental Health Career Pathway	WET	Provides financial support through stipends and other financial incentives to attract and enable consumers, family and community partners to enroll in a full range of educational programs that are prerequisites to employment and advancement in public mental health.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Administration	WET	Represents the indirect administrative overhead costs for Mental Health Administration, County's Health & Hospital System Overhead (e.g. Information Systems, Patient Business Services, Finance), County Overhead, and other Mental Health wide administrative functions (e.g. Quality Improvement).	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Community Engagement and Capacity Building for Reducing Stigma and Discrimination	PEI	Improves the interface between behavioral health and local medical primary care in collaboration with mental health and substance abuse providers. The program incorporates key evidenced-based administrative and direct service strategies that will improve service access, care coordination and care delivery across healthcare systems. A new Mental Health Specialty Assessment Center (MHSAC) offers mental health assessments and assistance in linking to needed services, enrollment in the VMC primary care system, annual health screenings with pharmacy education for enrolled consumers, and increased pharmacy consultation to improve primary care with psychiatric medication management.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Strengthening Families and Children	PEI	This initiative is divided into two components; component 1 is intended to prevent or intervene early in the development of emotional and behavioral problems in young children by providing the parents with outcome-based parenting strategies, support services, and access to screenings to identify developmental delays, and component 2 builds upon the first by implementing a continuum of services targeting four geographic areas of high need (Investment Communities) for children and youth ages 0-18 who may be experiencing symptoms ranging from behavioral/emotional distress to depression and anxiety caused by trauma or other risk factors.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Prevention and Early Interventions for Individuals Experiencing Onset of Serious Psychiatric Illness with Psychotic Features	PEI	The REACH (Raising Early Awareness Creating Hope) program implements a continuum of services targeting youth and transition age youth (TAY) (ages 11 to 25) who are experiencing At Risk Mental States (ARMS) or prodromal symptoms. The service model is based on the Early Detection and Intervention for the Prevention of Psychosis (EDIPP) program, which is currently a replication study occurring at six sites nation wide to build research evidence on the effectiveness of preventing the onset and severity of serious mental illness with psychosis.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Primary Care / Behavioral Health Integration for Adults and Older Adults	PEI	This program has two major components: 1) services to new refugees drawing upon outreach and focus groups with refugees and organizations serving refugees; and 2) implementation of integrated behavioral health services within local non-profit Federally Qualified Health Centers (FQHCs) that serve underserved ethnic communities.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Suicide Prevention Strategic Plan	PEI	Initiated a county-wide strategic planning process to develop a strategic action plan to prevent suicide. The plan was completed in August 2010 and is now in the stages of implementation.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx

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Santa Clara	Administration	PEI	Represents the indirect administrative overhead costs for Mental Health Administration, County's Health & Hospital System Overhead (e.g. Information Systems, Patient Business Services, Finance), County Overhead, and other Mental Health wide administrative functions (e.g. Quality Improvement).	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Early Childhood Universal Screening Project	INN	Develops a model to increase access to services and improve outcomes by strengthening the screening and referral process for young children with developmental concerns and social-emotional delays. This project will test whether the implementation of multi-language electronic developmental screening tools and audio/visual components in a pediatric clinic provides an economic, low cost, and effective method for linking parents and their children to mental health and other indicated services.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Peer Run TAY Inn	INN	Increases access to services and improve outcomes for high-risk, transition age youth in a voluntary 24-hour care setting. The project model proposes the implementation of an innovative 24-hour service that involves a significant expansion of the role of TAY employees in decision-making and provision of program services.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Co-Occurring Mental Health Disorders in Adults with Autism & Developmental Disabilities	INN	Tests an assessment model for determining the extent of concurrent psychiatric and developmental disabilities and will explore models of effective treatment for individuals challenged by these dual conditions.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Elders' Storytelling Project	INN	Develops a model to increase the quality of services for isolated older adults by adapting a culturally-based "story-telling" approach that capitalizes on the traditional role of older adults as transmitters of cultural wisdom and values. The core service will be provided by community workers through a 12-week curriculum where the older adult, in the company of family members and caregivers, is elicited to reminisce on his/her life and express and capture significant memories and personal accomplishments.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Multi-Cultural Center (MCC)	INN	Increase access to underserved and inappropriately served ethnic minorities by housing activities and services for multiple ethnic communities in Santa Clara County. MCC will provide an opportunity for ethnic minority community coordinators to collaborate in identifying and initiating multi-cultural approaches to successfully engage individuals in mental health services in a culturally sensitive manner and find sensitive ways to combat stigma and internalized oppression.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Transitional Mental Health Services for Newly Released Inmates	INN	Develops a model that examines whether the organizational support of the Mental Health Department provided to an inter-faith collaborative and coordination and collaboration with other service providers/advocacy groups increases the capacity of faith organizations to serve newly-released inmates and improve outcomes (symptom management; relationships; work/meaningful activities; and satisfaction with service).	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Mental Health / Law Enforcement Post Crisis Intervention	INN	Develops a model to improve mental health crisis resolution and engagement in services for individuals and their families who experience law enforcement-involved acute mental health crises through the provision of compassionate and timely post-crisis services that include post-event visits (within 24-hours) from a team that includes a peer/family mentor and mental health clinician; follow-up support and linkage services; and de-briefing with law enforcement liaisons, consumer/family mentors and clinical staff to continually inform the effectiveness of service.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Interactive Video Scenarios Training	INN	A unique new application of Interactive Video Simulation Training (IVST) to teach police officers to recognize mental illness, de-escalate mentally ill people in crisis, and increase access for these people to services. In IVST applications, students interact with a life-sized video projection that actually changes based on the students statements and decisions. Project 8 will produce six interactive video simulations depicting mentally ill people in crisis. The IVST will be used in conjunction with lecture and discussion to increase the awareness and proficiency of police officers encountering people with mental illness.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Administration	INN	Represents the indirect administrative overhead costs for Mental Health Administration, County's Health & Hospital System Overhead (e.g. Information Systems, Patient Business Services, Finance), County Overhead, and other Mental Health wide administrative functions (e.g. Quality Improvement).	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Electronic Health Record	CFTN	Provides a comprehensive electronic mental health medical record of consumer data that can be shared in a secure and integrated environment across service providers. The project will reduce paper medical charts, improve coordination of care, streamline and automate clinic operations.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx

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Santa Clara	Enterprise-wide Data Warehouse	CFTN	Creates a single data repository for all County mental health information including clinical, financial and administrative data. The EDW will integrate information for local, state and federal reporting and support treatment decisions, program design or re-design, and management decision-making to achieve improved client care and outcomes.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Consumer Learning Center	CFTN	Provides support for consumers by setting up supervised computer labs and training in basic PC skills in established self-help and wellness centers throughout the County.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Website Redesign and Consumer Portal	CFTN	Improves services for consumers and their families by enhancing the current MH website and developing a secure consumer portal. The website and portal will provide access to information on wellness and recovery, support and advocacy groups, and service providers. It will also provide limited access to clinical and outcome information.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Bed and Housing Exchange	CFTN	Provides a data base with posting and query tools that will allow operators of inpatient and residential mental health facilities to post open beds as they become available. Case managers and clinicians will be able to query the data base and act on behalf of their clients to secure the appropriate level and type of housing and associated service needed by their clients.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	County Health Record Integration Initiative	CFTN	Creates an electronic system to provide secure, real-time combined county-wide records of clients registered in the VMC system. These records will be accessible to various service providers to view demographics, services and care profiles, medications, physical health services and results (e.g. lab reports), insurance status, employment, housing and other information critical to client care decisions.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	F&C Screening, Assessment & Tx. Center	CFTN	Renovation will consist of redesigning and reconstructing the space formerly used for medical office suites into space appropriate for individual and group counseling with separate reception and waiting areas for young children and TAY. MD offices will exist within the suite along with rooms for individual counseling and group work. Counseling rooms will be large enough for the client and family members as appropriate.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Clara	Downtown Mental Health Renovation	CFTN	Renovation will consist of improving the Self Help Center by designing activity and training rooms. The current space consists of one large activity room and a coordinator's office. The remodeled space will have a computer training room, and several activity rooms to allow multiple groups to be simultaneously.	http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx
Santa Cruz	Community Gate	CSS - OESD	The services of this program are designed to create expanded community-linked screening/assessment and treatment of children/youth suspected of having serious emotional disturbances—but who are not referred from our System of Care public partner agencies (Probation, Child Welfare, Education). Particular attention is paid to addressing the needs of Latino youth and families, as well as serving Transition-age youth. Services are offered to males and females, and are primarily in English and Spanish. The Community Gate is designed to address the mental health needs of children/youth in the Community at risk of hospitalization, placement, and related factors. This is achieved by: • Improvements in our system so that at-risk youth are identified earlier and can get help before problems get serious • Increased service capacity for youth with both mental health and substance abuse issues. These services include assessment, individual, group and family therapy with the goal of improved mental health functioning and maintaining youth in the community.	http://www.santacruzhealth.org/prop63/index.htm

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Santa Cruz	Probation Gate	CSS - OESD	Designed to increase dual diagnosis (mental health/substance abuse) services to youth and families involved with the Juvenile Probation system, or at risk of involvement. This includes Transition-age youth aging out of the system, with particular attention paid to addressing the needs of Latino youth and families. Services are offered to males and females, and are primarily in English and Spanish. The Probation Gate is designed to address the mental health needs (including assessment, individual, group, and family therapy) of youth involved with, or at risk of involvement, with the Juvenile Probation system. The System of Care goal (shared with Probation) is keeping youth safely at home, rather than in prolonged stays of residential placement or incarcerated in juvenile hall. To achieve our goal we have increased dual diagnosis (mental health/substance abuse) services for youth that are: • Identified by Juvenile Hall screening tools (i.e., MAYSI, California Endowment Grant) with mental health and substance abuse needs that are released back into the community. • In the community and have multiple risk factors for probation involvement (with a primary focus on Latino youth). • Transition-age youth (TAY) in the Probation population (particularly as they age out of the juvenile	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Child Welfare Services Gate	CSS - OESD	Designed to increase dual diagnosis (mental health/substance abuse) services to youth and families involved with Child Welfare Services, as well as Transition-age youth (particularly those aging out of foster care, but not limited to this population). Particular attention will be paid to addressing the needs of Latino youth and families. Services are offered to males and females, and are primarily in English and Spanish. The Child Welfare Gate goals were designed to address the mental health needs of children/youth in the Child Welfare system. We: • Have developed consultation services for parents (with children in the CPS system) who have both mental health and substance abuse issues. • Have increased services to Transition age youth (18-21 years old) who are leaving foster care to live on their own (as well as other youth with SED turning 18). • Have increased our service capacity, including expanded services for the 0 to 5 child population. These services include assessment, counseling, family therapy and crisis intervention. • Provide services for general foster children/youth treatment with a community-based agency, as well as county clinical capacity.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Education Gate	CSS - OESD	Designed to create new school-linked screening/assessment and treatment of children/youth suspected of having serious emotional disturbances. In addition, specific dual diagnosis (mental health/substance abuse) service capacity will be created and targeted to students referred from Santa Cruz County's local schools, particularly those not referred through Special Education. Particular attention will be paid to addressing the needs of Latino youth and families. Transition-age youth will also be served. Services are offered to males and females, and are primarily in English and Spanish. The Education Gate goal is to address the mental health needs of children/youth in Education system at risk of school failure by • Providing mental health services to children/youth with serious emotional disturbance (SED) at school sites, particularly at the County Office of Education's alternative schools. • Providing consultation and training of school staff in mental health issues regarding screening and service needs of students with SED Note: The Education gate is different from the school treatment team which serves only AB3632 youth - special education identified students who need mental health services to benefit from their education. The Education gate was intended to provide mental health services to mostly non-special education identified youth who were primarily at alternative education sites. In June 2011 the California Senate passed AB98 which transitions the responsibility of educationally related mental health services from counties to schools. Education will contract with the County to provide these services, at least for this fiscal year). Referrals are payer source blind and are a mix of Med-Cal and private pay.	http://www.santacruzhealth.org/prop63/index.htm

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Santa Cruz	Special Focus: Family Partnerships	CSS - OESD	Designed to expand Family and Youth Partnership activities provided by parents, and youth, who are or have been served by our Children's Interagency System of Care. This has increased the capacity of two existing community-based agencies experienced in providing consumer-run and delivered services. The support, outreach, education, and services include: • A community-based agency contract to provide parent and youth services in our System of Care, and • Capacity for youth and family advocacy by contracting for these services with a community bases agency. Emphasis is on youth-partnership activities.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Enhanced Crisis Response	CSS - OESD	The Santa Cruz County Mental Health and Substance Abuse Program is committed to a person-centered recovery vision as it's guiding principles and values; central to this is the notion that every individual should receive services in the least restrictive setting possible. Every effort will be made to avoid or minimize the disruption and trauma of psychiatric hospitalization and/or incarceration while maintaining consumer safety in a supportive, safe and comfortable environment. To accomplish the above, we will: • Maintain a crisis residential program as an alternative to acute psychiatric hospitalization. • Maintain mobile Enhanced Support Service (ESS) team to provide adult Transition Age Youth, Adult and Older Adult Full Service Partnerships and other System of Care consumers with wrap around services to maintain placement in the least restrictive setting. • Maintain South County Access services and mobile crisis support. • Maintain residential treatment beds at the El Dorado Center to be used as step down from locked care. The focus of these beds is to re-integrate individuals back into the community and prepare them to live in the least restrictive setting. • Maintain Mental Health Client Specialist to focus on heavy utilizers of inpatient and locked care. Emphasis will be placed on supporting individuals in the community and focusing on goals of recovery.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Consumer, Peer, & Family Services	CSS - OESD	The Consumer, Peer and Family Service work plan expanded countywide access to culturally competent, recovery-oriented, peer-to-peer, community mentoring, and consumer-operated services. This plan includes • The Wellness Center located in Santa Cruz at the Mental Health Client Action Network (MHCAN) self-help center • The Wellness Center located Watsonville referred to as "Mariposa" and operated by our contractor Community Connection • Peer supports	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Community Support Services	CSS - FSP	Advance recovery goals for all consumers to live independently and be to engaged in meaningful work and learning activities. Participants will be enrolled in Full Service Partnership (FSP) Teams. FSPs are "partnerships" between clients and clinicians that include opportunities for clinical care, housing, employment, and 24/7 service availability of staff. To accomplish the above, we will: • Continue integrated team to provide housing support. Team consists of County Housing Coordinator, Front Street staff (housing case management, OT, RN, and peer counselor), and Community Connection staff (employment specialist and peer counselor). • Supportive employment and education activities, including development of job options for clients, competitive and non-competitive options, and volunteer opportunities. • Maintain 8 Dedicated beds at the River Street Shelter for Homeless individuals. • Maintain 16 beds, 24/7, adult care facility with bi-lingual, bi-cultural services. (Wheelock). • Benefit support.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Supportive Housing	CSS - Housing	Offers permanent supportive housing to the target population, with no limit on length of stay. The target population is defined as very low-income adults, or older adults, with serious mental illness, and children with severe emotional disorders and their families who are homeless or at risk for homelessness. The County developed housing on Bay Avenue, Capitola. The Bay Avenue project was recently approved in the City of Capitola and will provide five MHSA units for seniors. Meanwhile, staff continues to work with Planning staff to explore non-profit or county ownership of scattered site housing opportunities that could replace supportive housing units currently made available to clients and subsidized through the Redevelopment Agency.	http://www.santacruzhealth.org/prop63/index.htm

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Santa Cruz	Early Intervention Services for Children	PEI	Addresses three priority populations: children and youth from stressed families, onset of mental illness, and trauma exposed children and their families. Of particular concern are families needing parental/supervision skills affected by substance use/abuse, and/or are exposed to violence, abuse, and /or neglect. The desire is to decrease the negative impact of these factors by offering mental health services to youth and their families. This project also addresses disparities in access to services by including a focus on the needs of Latino children/families, as well as lesbian, gay, bisexual, transsexual, and questioning (LGBT) youth and their families. PEI Project #1 has three proposed strategies: 1. 0-5 Screening and Early Intervention 2. County-wide Parent Education and Support 3. School-based Prevention and Early Intervention	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Culture Specific Parent Education and Support	PEI	Decreases the risk of violence, suicide, and other traumas that children and youth age 0 – 17 may be exposed to by providing education, skills-based training, early intervention and treatment referrals to parents, families, and children, that are in need of parental/supervision skills, are affected by substance abuse, and/or are exposed to violence, abuse, or neglect. We have chosen Cara Y Corazón and Jóven Noble. Cara Y Corazón is a culturally based family strengthening and community mobilization approach that assists parents and other members of the extended family to raise and educate their children from a positive bicultural base. Jóven Noble is a youth leadership development program.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Early Onset Intervention Services for Transition Age Youth and Adults	PEI	Provides education, training and treatment by expanding mental health awareness and services through traditional and non-traditional settings, Community Entry Points, (CEP), Professionals and Family members. This will be achieved by developing a network of care for use prior to being formally "diagnosed" at the earliest signs of possible serious mental illness. Through consultation, training and direct service delivery, a broad menu of services will be offered by Peer Counselors, Family Advocates, and Licensed counselors and psychiatrists to transition age youth and their families. This program will integrate evidence-based practices that are client-centered. This program addresses transition age youth and adults who are trauma exposed and are experiencing (or at risk of experiencing) the onset of serious mental illness. This project also addresses disparities in access to mental health services by including a focus on the needs of Latino youth as well as Lesbian, gay, bisexual, transsexual (LGBT) individuals and their families. PEI Project #3 has the following four strategies: 1. Early Onset Intervention Services utilizing licensed mental health clinicians, psychiatry, Peer and Family Advocates, Peer Respite, and Employment Services for Individuals 2. Veterans' advocacy and service coordination 3. Suicide Prevention services 4. Peer Respite	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Early Intervention Services for Older Adults	PEI	Addresses the high rates of depression, isolation and suicides of Older Adults in Santa Cruz County. Strategies are aimed at identifying older adults at risk of trauma-induced mental illness, depression, anxiety, suicidal ideation, and late onset mental illness, as well as undiagnosed and misdiagnosed seniors. This group has been identified as an underserved population, often due to senior's isolation and challenges in accessing appropriate care. PEI Project #4 has three proposed strategies: 1. Field Based Mental Health Training and Assessment Services to provide mental health assessment and short-term services to older adults where they reside 2. Senior services and outreach including brief therapy and peer companions 3. Warm line providing quick telephone screening and referrals to senior resources for persons seeking service to older adults at risk of mental illness	http://www.santacruzhealth.org/prop63/index.htm

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Santa Cruz	Avenues: Work First for Individuals with co-occurring disorders	INN	Increases access to underserved groups; to increase the quality of services, including better outcomes; to promote interagency collaboration; and/or to increase access to services. A requirement of the component is to try a new approach, and to "learn" from it. The County's work plan name is "Avenues: Work First for Individuals with co-occurring disorders". The target population for this program is transition age youth and adults. This includes persons with severe and chronic mental illness; persons who abuse alcohol and drugs whose mental health issues interfere with their ability to achieve stable recovery and put them at risk of jail and hospitalization or homelessness; and transition age youth with co-occurring disorders of mental illness and substance abuse. Referrals for Avenues: Work First for Individuals with Co-Occurring Disorders come from the jail, court, probation, proposition 36, hospitals, shelters, outreach, and Santa Cruz County Mental Health (Access and "system of care"). Avenues: Work First for Individuals with Co-Occurring Disorders is a "Work First" approach as a core treatment modality for co-occurring disorders. The innovation is to engage people in active work related activities as an alternative to traditional mental health and/or substance abuse treatment modalities, rather than focusing primarily on the individuals' symptoms. It is designed after a philosophy and model known as "Housing First." The Housing First approach centers on providing homeless people with housing quickly and then providing services as needed. In this proposal we will take a similar approach emphasizing work as a motivating and protective factor. This innovative program expects to have more positive outcomes by offering "natural" activities, e.g., work or career paths that will provide individual incentives for success. These incentives are person centered, designed by each participant based on their own self described goals.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	WET Program #1: Workforce, Education and Training Coordination & The Training Academy	WET	Purpose: To implement and coordinate the Santa Cruz County WET plan and to create a well-run welcoming environment for all training audiences. We established a Workforce Education & Training ("WET") Task Force with representatives from children's mental health, adult mental health, alcohol & drug services, community based agencies, consumers, families and community college. The WET Task Force oversees the Training Academy, including creating and/or contracting for trainings that are needed, and assessment of the trainings provided. In order to increase the quality and success of educating and training the public mental health workforce to better serve unserved and underserved populations, the Training Academy has offered trainings to multiple audiences. The overarching goal is to increase skills in order to improve public mental health services. Trainings reflect the needs identified in the assessment of paid public mental health (County and Contractor) staff, volunteers, consumers and family members. All training courses include evaluation, and results are used to contribute toward decision-making regarding future trainings. The Academy offers workshops and on-going classes of varying sizes, areas of focus and depth and support for pertinent application of knowledge gained. The Workforce Education & Training Task Force (WET-TF) advises the WET Coordinator regarding the assessment tool to be used to evaluate training needs, effectiveness of the trainings, and establishment of priorities based on the five fundamental MHSA concepts (consumer and family driven, community collaboration, recovery/resiliency strength-based services, integrated services, and culturally competency). The WET Task Force also serves as our "Cultural Competence Committee" overseeing not only the Cultural Competence Trainings, but also addressing issues of integrating cultural competence practicing through out the work force, including how to create welcoming environments for our consumers and families. (See appendix for list of trainings offered.) The Training Academy has the following goals: 1. To regularly offer orientations (or overviews) of the public mental health system to consumers, family members, new employees, potential employees, interns, and community members. 2. To offer trainings on how to create a respectful, welcoming, and "customer service" attitude towards consumers and families. 3. To develop the skill sets of consumers and family members to participate more effectively in treatment and recovery.	http://www.santacruzhealth.org/prop63/index.htm

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Santa Cruz	WET Program #1 (cont.)	WET	4. The WET-TF will ensure involvement of consumers and families, as both participants and trainers at educational events. 5. Offer training modules on topics as a broad overview to be accessible to a larger audience and to progress to more skilled, in-depth techniques. 6. To utilize local education providers to deliver in-service education where doing so will result in cost savings through leveraging existing public investments in education.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	WET Program #2: Consumer "Culture" Trainings	WET	Purpose: To educate providers about the important role that consumers play in their wellness and recovery, and to foster consumer involvement and participation in primary clinical decision-making. To support our commitment of creating a public mental health system that truly understands the consumer's needs and perspectives, the MHSA Coordinator contracts and/or partners with persons and/or organizations to provide educational services to public mental health. This is an integral part of the Training Academy. The goal is to educate providers about the important role that consumers play in their wellness and recovery, and to foster consumer involvement and participation in primary clinical decision-making.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	WET Program #3: Family "Culture" Trainings	WET	Purpose: To educate the providers about the important role that families can play in wellness and recovery, and to foster family involvement and participation in primary clinical decision-making. To support our commitment of creating a public mental health system that truly understands the family's needs and perspectives, the MHSA Coordinator contracts and/or partners with persons and/or organizations to provide educational services to public mental health. This is an integral part of The Training Academy. The goal is to educate providers about the important role that families can play in wellness and recovery, and to foster family involvement and participation in primary clinical decision-making. We have established a collaborative partnership with NAMI of Santa Cruz to provide an educational program for mental health service providers co-taught by consumers and family members. Additionally, we have supported "What Is NAMI?" trainings to educate staff about NAMI.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	WET Program #4: High School Outreach	WET	Purpose: To foster knowledge and create interest in mental health as a career path amongst high school students, with a focus on bilingual (Spanish) and bicultural students. The public mental health system needs to conduct targeted 'outreach' to high school students to provide information about mental illness, resources and to promote the idea of employment in public mental health. One way to accomplish this is by partnering with existing ROP programs currently in the local high schools. The Workforce Needs Assessment for Santa Cruz County reflects that there is a lack of sufficient mental health providers. Outreach focuses on Spanish speaking communities. Additionally, the local community colleges have been encouraged to target this same population in order to inform the students about the application process and supports available for students interested in pursuing higher education.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	WET Program #5: Entry Level Employment Preparation	WET	Purpose: To develop an entry-level preparation program (for consumers and family members and the general public) for services in the public mental health sector which incorporates the five fundamental elements of MHSA (consumer and family driven services, community collaboration, recovery/resiliency strength-based, integrated services, and culturally competent services) into the courses offered. The goal of this program was to develop an entry-level preparation program (for consumers and family members and the general public) for services in the public mental health sector, which incorporates the five fundamental elements of MHSA (consumer and family driven services, community collaboration, recovery/resiliency strength-based, integrated services, and culturally competent services) into the courses offered. In order to achieve our objectives we have adapted the Community Mental Health Aide position to encourage consumer and family members to apply, and revised the application review in order to give "credit" for lived experience as a consumer, or family member, as well as credit for obtaining a Human Services Credential and/or a consumer peer training certificate. We have a strong collaboration with Cabrillo College certificate program, to support consumers expressing interest in working in public mental health. This program also supports the Cabrillo "College Connection" program.	http://www.santacruzhealth.org/prop63/index.htm

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Santa Cruz	WET Program #6: Public Mental Health Internship Program	WET	Purpose: To create a more cohesive internship program for trainees at county mental health, and to foster greater support for registered interns on licensure track. The goal of this program is to create a more cohesive internship program for trainees at county mental health, and to foster greater support for registered interns on licensure track. We have established a single point of contact for educational institutions regarding internship placements within the County. We provide and coordinate group supervision for all trainees placed within the public mental health sector. We provide license track education & support to all public mental health registered interns for license examination preparation, and offer funds for public mental health employees for purchase of license exam preparation materials and/or test fees. One of the benefits of the funding for WET has been that it has allowed Santa Cruz County Mental Health and Substance Abuse Service to encourage unlicensed staff to pursue their MFT or LCSW licenses by: 1) Reimbursing County and contract employees for AATBs and Gerry Grossman workshops and materials and other related expenses 2) Offering in-house license preparation/support groups 3) Providing weekly individual and group supervision.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Increase Consumer and Family Empowerment - Information Technology	CFTN	1. To regularly offer orientations (or overviews) of the public mental health system to consumers, family members, new employees, potential employees, interns, and community members.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Modernize and Transform Clinical Administrative Systems	CFTN	2. To offer trainings on how to create a respectful, welcoming, and "customer service" attitude towards consumers and families.	http://www.santacruzhealth.org/prop63/index.htm
Santa Cruz	Improvement of Capital Facilities	CFTN	3. To develop the skill sets of consumers and family members to participate more effectively in treatment and recovery.	http://www.santacruzhealth.org/prop63/index.htm
Shasta	Shasta Triumph and Recovery (STAR)	CSS	Shasta Triumph and Recovery (STAR) is a Full Service Partner program that serves all age groups. The STAR program is an enrollment program that is wellness, recovery, and resiliency based and practices the "whatever it takes" model to provide access to services including supports for housing, employment or employment preparation, medication, transportation, peer relations, social activities, and education for those individuals with severe and persistent mental illness who are at risk of homelessness and/or hospitalization. There is a focus on wellness and recovery using a Wellness Recovery Action Plan (WRAP) jointly developed with the individual involved and any family or support individuals she/he chooses. Another aspect of STAR is an Access Team that evaluates all people who request new services for appropriateness for the STAR program. Those individuals who meet FSP criteria are provided with outreach until they either become an FSP or are transferred to other appropriate programs.	http://www.shastahhsa.net
Shasta	Rural Health Initiative	CSS	The Shasta Rural Health Initiative initiated recovery-based service agreements with Federally Qualified Health Centers (FQHC) in the community to provide integrated primary health care and mental health care to priority populations. Services include Full Service Partnerships, telepsychiatry, intensive case management, co-occurring groups, and crisis support. The programs concentrates on individuals of all ages.	http://www.shastahhsa.net
Shasta	Older Adult Services	CSS	The Older Adult Services Program is a system of interagency services for adults 60 years and older who have serious and persistent mental illness. Older adults are identified and provided services that are comprehensive, age appropriate, culturally competent, and accessible. Services support recovery or rehabilitation as deemed appropriate by the client and his or her natural support system of family and community. In order to address the needs of this population, the program collaborates with multiple agencies and conducts intensive resource and program development. Multiple agencies/partners are convened with the support of the existing Shasta County Older Adult Policy Council in order to identify collaborative resources and outreach engagement strategies.	http://www.shastahhsa.net

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Shasta	Crisis Services	CSS	The Crisis Services Program completes the transformation of Shasta County Mental Health's crisis and short-term treatment system, which for many is the initial access point into the public mental health system. A multiple-level array of services is provided for those persons with mental illness in crisis or emergency. Services are available 24/7 and include telephone crisis services. The Crisis Residential Recovery Center (CRRC), which provides services for up to 30 days for adults, permits individuals to move from crisis into short-term transitional housing and stabilization or to intensive case management and support, as needed. The goals of this program are to reduce acute hospitalizations, and allow individuals to receive treatment within their community.	http://www.shastahhsa.net
Shasta	Children and Youth in Stressed Families: Triple P- Positive Parenting Program	PEI	Shasta County coordinates with and leverages the efforts of First 5 Shasta to provide county-wide implementation of the Positive Parenting Program (Triple P). Triple P is a multi-level, parenting and family support strategy that aims to prevent behavioral, emotional and developmental problems in children by enhancing the knowledge, skills and confidence of parents. Triple P incorporates five levels of intervention of increasing strength for parents of children from birth to age 18 years. Triple P interventions can also be tailored in such a way as to respect and not undermine the cultural values, aspirations, traditions and needs of different ethnic groups. It has been proven effective for use with various underserved geographic and cultural populations.	http://www.triplepshasta.com
Shasta	Children and Youth in Stressed Families: Trauma Focused Cognitive Behavioral Therapy	PEI	A short-term treatment approach that addresses the unique needs of children with PTSD, depression, behavior problems, or other difficulties related to traumatic life experiences. This evidence-based practice is a components-based psychosocial treatment model that incorporates elements of cognitive-behavioral, attachment, humanistic, empowerment, and family therapy models. It includes several core treatment components designed to be provided in a flexible manner to address the unique needs of each child and family.	http://www.shastahhsa.net
Shasta	Children and Youth in Stressed Families: Community Programs for At-Risk Middle School Students	PEI	Shasta County Mental Health, through a negotiated contract with a local school district(s), will implement the Positive Action program which focuses on children at high risk for school failure. Positive Action is an evidence-based program designed to build self esteem and good communication skills, as well as other psychosocial skills. The curriculum has 6 units covering the following concepts: self concept, positive actions for your body and mind, managing yourself responsibly, being honest with yourself and others, and improving yourself continually.	http://www.shastahhsa.net
Shasta	Older Adult: Older Adult Gatekeeper Program	PEI	The Older Adult Gatekeeper Program provides trainings for community members and groups to act as non-traditional gatekeepers to identify solder adults at risk and connect them to appropriate services in the community. Trainings are provided to community members that review the effects of trauma, recognize signs and symptoms that may indicate an elderly person is in need of help and how to refer that individual to the Gatekeeper Program's Referral System. Community members and gatekeepers can call the referral phone number to have the older adult assessed and referred to treatment if needed. Special efforts are made to prepare culturally appropriate training and training materials for underserved cultural populations.	http://www.shastahhsa.net
Shasta	Individuals Experiencing the Onset of Serious Psychiatric Illness: Reduce Duration of Untreated Psychosis	PEI	Shasta County's Individuals Experiencing the Onset of Serious Psychiatric Illness Project targets individuals who are between the ages of 15 and 25 who have early symptoms that might indicate the start of a serious and persistent mental illness. Activities include outreach and engagement to patients and their families, assessment, treatment, case management, and family support.	http://www.shastahhsa.net
Shasta	Stigma & Discrimination	PEI	This program aims to build awareness of and eliminate the discrimination and stigma associated with mental illness. It includes the following strategies: public education, media campaigns, direct contact with mental health consumers, and recognition for positive portrayals of people with mental health problems.	http://www.standagainststigma.com
Shasta	Suicide Prevention	PEI	This program is based on the local level recommendations which coincide with the California Strategic Plan on Suicide Prevention. This program includes local and culturally appropriate activities, including creating a system of suicide prevention, implementing training and workforce enhancements to prevent suicide, and improving suicide program effectiveness and system accountability. It was through this program the Shasta County Suicide Prevention Workgroup was formed. This workgroup coordinates local suicide prevention efforts including assessment, planning, implementation of evidence-based programs, and evaluation.	http://shastasuicideprevention.com

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Shasta	Comprehensive Training Program	WET	A comprehensive training program that provides training on specific strategies and skills to achieve the values of cultural competence, recovery, and integrated services. Trainings are available to department staff, contract providers, private practice professionals, consumers, family members, and students, and provide opportunities to increase competencies of the community public mental health workforce.	http://www.shastahhsa.net
Shasta	MSW/MFT Internship Program	WET	This program provides clinical support and supervision hours to MSW and MFT candidates to gain experience/knowledge in working in the public mental health field with a recovery approach and assist them in achieving licensure.	http://www.shastahhsa.net
Shasta	Consumer and Family Member Volunteer Program	WET	The MHSA Volunteer Program is for consumers and family members who would like to explore a career in the public mental health field. The programs addresses the priority workforce education and training need to establish a career pathway and responds to the identified need to increase the public mental health workforce capacity while involving the community in a meaningful way in the delivery of services. The program seeks to both enhance the capacity of the public mental health system in Shasta County to provide services and support to individuals with serious mental illness while collaborating with and accessing the use of natural community supports – community members with an interest in volunteering to serve.	http://www.shastahhsa.net
Shasta	MHSA Capital Facilities Project	CFTN	This project involves improvements to the main county-owned mental health facility and include a lobby redesign, as well as various upgrades throughout the building. The goal of this project is to make the facility more welcoming and to enhance its utilization.	http://www.shasta.hhsa.net
Shasta	Community Intervention Pre-Crisis Team (CIPT)	INN	The Community Intervention Pre-Crisis Team (CIPT) is a 2-year program that started January 2013 that is run through the Second Home wellness and recovery center. The CIPT is a tiered-response team designed to help consumers and their families prevent situations from escalating into crisis. Team members include consumers (with a focus on those with experience with homelessness), family members, and mental health educators. Teams have partnerships with clinicians, medical staff, and law enforcement, with services being offered in the home or at other locations within the community. Services are provided to both consumers and family members and vary depending on the level of help requested. Services include homeless outreach, education about psychiatric illnesses, peer support, respite care, in-home mental health services, and crisis aftercare.	http://secondhome@nvcss.org
Sierra	Combined Programs	CSS	Sierra County continues to partner with Plumas Crisis Intervention and Resource Center (PCIRC) in the operation of the Crisis Line which operates 24/7, and provides 24/7 access to a mental health professional. Targeted populations are specified as all underserved/un-served persons in the County, which has essentially been the majority of the county population (3200). The Crisis Line phone number has been disseminated to nearly all community agencies . Wraparound services are provided for children and youth in the behavioral health system; Full Services Partnerships are provided for transition age youth, adults, and older adults. Services are provided for any person demonstrating need, regardless of gender, race/ethnicity, or language spoken.	http://www.sierracounty.ws/index.php?module=pagemaster&PAGE_user_op=view_page&PAGE_id=18&MMN_position=24:24
Sierra	Training and Technical Assistance	WET	Training and Technical Assistance is offered via the Essential Learning online Learning Management System. The LMS is offered to all Human Services staff (35 total employees, with adjustments as staffing levels change). Goal remains to maintain staff development progress. Community Access Site provides free online courses to community with a focus on mental health issues, treatment and recovery topics. The only change is the purchase of a base laptop and Rosetta Spanish software to provide agency staff with the opportunity to learn the language and increase and improve outreach capabilities to the7% Spanish-speaking population.	http://www.sierracounty.ws/index.php?module=pagemaster&PAGE_user_op=view_page&PAGE_id=18&MMN_position=24:24
Sierra	MH Career Pathway - Peer Mentor/ Parent Partner	WET	There are two Peer Support staff that are currently employed with Sierra County Health and Human Services. Each position, one Parent Partner and one Peer Mentor, is part-time. The Peer Support staff are part of the interdisciplinary Mental Health team and support any individual that might experience a need during their treatment and/or services.	http://www.sierracounty.ws/index.php?module=pagemaster&PAGE_user_op=view_page&PAGE_id=18&MMN_position=24:24
Sierra	Residency Internship: Clinical Supervisor	WET	The contracted psychologist has been able to increase hours by one full day, thereby extending access and supervision for therapy interns. The LCSW contract was rolled into the time and services provided by the contracted psychologist.	http://www.sierracounty.ws/index.php?module=pagemaster&PAGE_user_op=view_page&PAGE_id=18&MMN_position=24:24
Siskiyou	Personal Service Coordinators	CSS - FSP	Siskiyou County provides personal services coordinators/case managers to provide MHSA Community Services and Supports. Outreach, Engagement, and Full Services Partners services will be provided to all four MHSA age groups.	http://www.co.siskiyou.ca.us/BHS/MHSA/MHSA.aspx

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Siskiyou	Regional Clinical Services	CSS	This program provides clinical services to clients regionally.	http://www.co.siskiyou.ca.us/BHS/MHSA/MHSA.aspx
Siskiyou	Transportation	CSS - OESD	Funding for the Special Transportation. These funds serve MHSA consumers, candidates, and Full Service Partners by providing transportation to and from Behavioral Health for services.	http://www.co.siskiyou.ca.us/BHS/MHSA/MHSA.aspx
Siskiyou	Community Resource Centers	PEI/CSS	9 centers throughout the county provide MHSA Prevention and early intervention services and provide linkage to behavioral health for mental health services.	http://www.co.siskiyou.ca.us/BHS/MHSA/MHSA.aspx
Siskiyou	Access Line Utilization Project	PEI/TN	Increase consumer's access to mental health services including crisis.	http://www.co.siskiyou.ca.us/BHS/MHSA/MHSA.aspx
Siskiyou	Workforce Education and Training Subcommittee	WET	Approved WET funds are used to develop and provide education and training for County Behavioral Health Staff, agency partners, consumers and consumer family members.	http://www.co.siskiyou.ca.us/BHS/MHSA/MHSA.aspx
Solano	Children's Multi-Disciplinary Intensive Services (FSP)	CSS - FSP	Provides a continuum of services through a collaborative relationship between the client, parent/caretaker, other family members as appropriate, and the Primary Services Coordinator. An Individual Service Plan is developed in partnership with the client and the family. A full spectrum of services is available to assist the client in successfully meeting their treatment goals. Services may include: medication management, individual and/or group therapy, case management, collateral, wellness and recovery skills building, and referral and linkage to community resources. Clients receive services that are culturally and linguistically appropriate. A multi-disciplinary team approach is utilized consisting of a mental health clinician, mental health specialists, parent partner, and a psychiatrist (as appropriate). Also utilizing the "whatever it takes principle," collaboration is paramount with community partners in addressing such basic areas as housing, social/recreational, vocational, medical, and educational needs. The Children's Intensive Services program is operated by Solano County Mental Health staff that directly provide the mental health treatment and care. Enrollees in the Children's FSP also have access to a full array of services due to SCMH's partnerships with a wide variety of community agencies and organizations. The FSP was doubled in size in 2012 and serves at least 80 eligible children and families.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Foster Family Bilingual (FSP)	CSS - FSP	Builds system capacity to serve children birth to age 21 that may be at risk for or part of the foster care system, and children birth to age 21 that may live in monolingual or bilingual households, providing mental health services in the consumers or family member's preferred language. These services are provided to at least 30 consumers and their families by county staff.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Transition Age Youth (FSP)	CSS - FSP	Provides a continuum of services through a collaborative relationship between the client and the Primary Services Coordinator. As appropriate and with the consent of the transition age youth, natural supports such as parents and other family members may also become part of the client's treatment and service plan development. A full spectrum of services is available to assist the client in successfully meeting their treatment goals as outlined in their Individualized Plan. Services may include: Medication evaluation and management, individual and/or group therapy, case management, collateral, rehabilitation services, psycho-educational services with symptom's management, and referral and linkages to community resources. Transitional age youth receive services that are age, culturally and linguistically appropriate with an emphasis on transition to adulthood. These services are provided through a contractual partnership between 2 agencies. One agency is tasked with the provision of mental health services that may range from weekly contact to extremely intensive services resulting from the assessed need of the client. The second contractor addresses vocational, educational, peer counseling, supportive housing, and all aspects of independent living skills. Services are offered in the home, community, and other venues. Clients have access to crisis services 24 hours per day. A Transitional Age Youth Collaborative has also been developed to enhance the accessibility, continuum of care, and quality of services to this target population. This Collaborative is made up of a variety of agencies and disciplines such as public health, school districts and special education, homeless shelters, vocational rehabilitation services, probation, child welfare services, transitional age youth representation, county mental health, etc. The Transitional Age Youth (TAY) FSP serves at least 12 young adults.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp

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Solano	Adult Community Treatment - Forensic Assessment Community Treatment	CSS - FSP	Provides a continuum of services through a collaborative relationship between the consumer and care provider (coordinated by a Primary Service Coordinator), through which the client has available a full spectrum of services so the consumer may achieve identified goals stated in the Individual Service Plan. The full spectrum of services includes: • Medication management: provision of or plan for medication management services, including health education topics such as medication, chronic disease, and etc. • Mental health therapy: Short-term, goal focused individual mental health therapy will be offered with the goal of transitioning consumers to group therapy. Short-term, goal-focused group mental health therapy should be transitional, supporting consumers until they are ready to transition to other appropriate services. • Case management: Short-term, intensive wrap-around case management will be offered to mitigate crisis situations and consumers should have access to services 24 hours per day. Also, transitional case management will be provided, focusing on ensuring that consumers are linked to appropriate services. • Wellness and recovery skills building: provision of and/or plan for linkage to wellness and recovery skills and services to support return to everyday life. All consumers should be supported to develop and monitor a Wellness and Recovery Action Plan (WRAP). Furthermore, the full spectrum of services will be provided in culturally and linguistically appropriate manner, and will collaborate with organizations and agencies to provide a continuum of care to the target population. The spectrum of services may also include: behavioral health and primary care collaboration; supported vocational and educational services; supported housing and other services. Also, the Forensic Assessment Community Treatment Full Service Partnership services are provided by the county.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Adult Full Service Partnership	CSS-FSP	In October of 2012, 3 regionalized teams were put in place to provide full service partnership services to individuals at high risk for hospitalization (multiple), incarceration, and IMD placement. The teams are focused on targeting a whatever it takes, person-centered, flexible approach to help individuals stay in the community and out of more restrictive care settings.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Older Adult (FSP)	CSS - FSP	Provides a continuum of services through a collaborative relationship between the consumer and care provider (coordinated by a Primary Service Coordinator), through which the client has available a full spectrum of services so the consumer may achieve identified goals stated in the Individual Service Plan. The full spectrum of services includes: • Medication management: provision of or plan for medication management services, including health education topics such as medication, chronic disease, and etc. • Mental health therapy: Short-term, goal focused individual mental health therapy will be offered with the goal of transitioning consumers to group therapy. Short-term, goal-focused group mental health therapy should be transitional, supporting consumers until they are ready to transition to other appropriate services. • Case management: Short-term, intensive wrap-around case management will be offered to mitigate crisis situations and consumers should have access to crisis services 24 hours per day. Also, transitional case management will be provided, focusing on ensuring that consumers are linked to appropriate services. • Wellness and recovery skills building: provision of and/or plan for linkage to wellness and recovery skills and services to support return to everyday life. All consumers should be supported to develop and monitor a Wellness and Recovery Action Plan (WRAP).	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Crisis Stabilization Unit (CSU)	CSS - OESD	Provide services to at least 1500-2000 consumers in Solano County. They Psychiatric Emergency Team (PET) serves children, transition aged youth, adults and older adults from various racial and ethnic backgrounds, as well as provides services in a consumer's primary language. PET is an integral component to the continuum of care in public mental health services. PET provides intervention services; collaborates with agencies and community based organizations; and conducts outreach, education and training to partner agencies. Additionally, PET supports full service partnerships by providing crisis intervention services to consumers during non-traditional working hours (5:00 PM – 8 AM, weekends, and holidays). The Crisis Stabilization Unit has replaced the PET as our provider for crisis services.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp

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Solano	Wellness & Recovery/Consumer Operated Recovery	CSS - OESD	Augmented the Wellness and Recovery program to include case management support to consumers, including assessment referral and linkage to appropriate community resources and levels of care. The aim of this activity is to facilitate the stability of individuals within the community at the least restrictive level of care. The Wellness and Recovery Centers afford consumers an opportunity to benefit from structured activities, medication management support, recovery and rehabilitative skill acquisition.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Outreach & Engagement	CSS - OESD	Outreach and Engagement as a set of functions was incorporated into other CSS contracts as a set of stipulations that contractors provide culturally competent services in community oriented manner. One example of this is the hiring of MHSA funded staff to work in FQHC's to promote linkage of underserved individuals with a psychiatrist, and promote follow-up as well. The Continuum of Care Collaborative is a network of community based providers who meet monthly to improve upon mental health service delivery through extensive collaboration.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Workforce Staffing and Support	WET	The Solano County Mental Health (SCMH) WET programs include a stipend program for interns and comprehensive training aimed at ensuring a culturally competent workforce. Solano is recruiting interns for 2013-14 and has contracted with CIMH to manage the stipend process in order to simplify implementation. Staff and provider training in cultural competence continues as well.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Improve Mental Health Workforce Clinical and Administrative Competence	WET	Planned, organized and provided several trainings to County and contract agency managers and supervisors focusing on building administrative and clinical competencies. Among these are the California Brief Multicultural Competence Scale (CBMCS), Depression Treatment Quality Improvement (DTQI), translation trainings, performance outcome measure training, and others.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Develop Recruitment Retention Plans for Underserved Populations	WET	SCMH continues to increase its outreach efforts to Latino residents, the most underserved population in Solano County relative to State trends. As part of it's effort to expand the presence and availability of services to Latino's, two community federally qualified health centers were engaged to offer early intervention services to monolingual and bilingual Latinos within the health clinic setting, above and beyond the traditional behavioral medicine model. This results in more Latino's being seen for mental health problems in a non-stigmatizing venue and has proved very successful as it builds upon the heavily Latino client base of the clinics and their strong cultural identity while reaching out with mental health services for mildly to moderately mentally ill clients.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	ESL, Spanish, Tagalog Linguistic Development	WET	Network providers have received training on how to use an interpreter to ensure that providers use interpreters as necessary consistent with standards of practice rather than family members or others to enhance treatment access and improve clinical outcomes for non-English speaking beneficiaries. Conducted analysis of county and contract ethnic/linguistic composition of workforce. Hosted training on how to use the CTS language link service.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Training for Law Enforcement (CIT), CSS Mobile Crisis Response	WET	Solano County Mental Health (SCMH) in partnership with Solano Sherriff's, National Alliance for Mental Illness and mental health consumers developed Crisis Intervention Training (CIT) curriculum for Solano County law enforcement units. Solano County submitted the CIT curriculum to the California Peace Officers Standard and Training (POST) certification for peace officers and developed curriculum outlines for the training. Solano County Sherriff Officers will be the first unit to receive the intensive training upon approval of the curriculum. Other Solano County law enforcement agencies also expressed interest in receiving the training. CIMH was engaged to provide the training service and CIT trainings were begun in Fall of 2012, and continue. In response to community feedback, we are implementing community CIT training to inform and empower the community to respond to mental health crises as part of a collaborative team effort.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Mental Health Career Pathway	WET	A Peer consumer training program was piloted for which a curriculum was developed based on national standards, and six recruits were trained over a number of weeks. This pilot will be replicated with modifications to ensure that Solano County is building a peer and consumer network that can provide Peers with an opportunity to give back and ultimately, enter the work force at a para-professional level.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Expand Internship Supervision and Training	WET	A supervisor has been designated as lead in developing the Solano Internship Program. Under this program, a part-time coordinator is working with local schools to set up agreements so that individuals can be recruited from local programs at the graduate level.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp

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Solano	Early Childhood Mental Health	PEI	The Early Childhood Mental Health PEI collaborative program in Solano County is known the partnership for Early Access for Kids (PEAK) and is comprised of five organizations in the county that serve children ages 0-5 and their families. The program is a partnership between Solano County Mental Health and the Children's and Families commission (First 5 Solano). The PEAK partnership uses a collaborative approach to identify, screen and provide early intervention for childhood mental health issues affecting children and their families. In addition, the partnership provides parent education classes that support early childhood care and development while also working to connect parents to community resources.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	School Age Program	PEI	Provides teacher support and group and individual counseling at school to students at risk of school failure due to social/emotional issues. The program also provides case management to students at risk of juvenile justice involvement.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Education, Employment & Family Support for Transition Age Youth	PEI	Provides individualized, enriched education and employment support to youth 16-25 who have experienced or are at risk of a first mental health "first break".	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Older Adult Identification and Linkage Program	PEI	Trains and supports community members and case managers as Gatekeepers to identify and link older adults who exhibit signs of early onset of mental illness or are at risk of developing mental illness, to appropriate community resources through system Navigators.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Primary Care Behavioral Health Integration	PEI	This is a new strategy in PEI which provides limited-term funding to community health centers in implementing or expanding behavioral services, including screening, assessment, referral, and support groups, at primary care sites.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Early Intervention Wellness Services	PEI	Links those at risk of mental illness or in early illness with community resources and peer support with the goal of preventing early mental illness from progressing. This includes learning about mental illness, acquiring skills for coping with the effects of mental illness, successful fulfillment of constructive roles in the community, and the development of supports. Activities include: support groups, wellness skills development, and peer mentoring. This activity is carried out by the Consumer Affairs Liaison, as well as other designated staff.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Community Access to Resources and Education (CARE)	INN	Solano County Mental Health's Innovation program is entitled Community Access to Resources and Education (CARE), and is administered by Aldea Children and Family Services. The CARE Plan was developed using consumer and stakeholder input gathered at community planning meetings. The CARE program brings mental health services, including assessment, medication support, case management, and brief treatment, to locations throughout Solano County where people are already accessing other health and social services, such as family resource centers, homeless shelters, and primary care sites. CARE services are provided by a mobile mental health team that can travel to community locations throughout the county to provide mental health services. By taking mental health services out of the clinic and into the community, CARE aims to eliminate the barriers that many underserved groups have in accessing services, including transportation to distant cities for services and the stigma associated with visiting a mental health clinic. In addition to co-locating with community agencies to provide services, Aldea facilitates Mental Health First Aid trainings in Solano County to educate and build provider capacity to respond to mental health crises. This year, MHFA trainings were expanded to include youth and Spanish-speaking trainings. This program was renewed for one year through June 30, 2014, with the permission of the Mental Health Oversight and Accountability Commission.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Housing	Housing	Solano County's MHSA Housing Program has funded two projects. Signature at Fairfield, which opened in May 2012, provides 7 two bedroom units for families in which one member qualifies for MHSA services and 3 units to be shared by two unrelated individuals. Heritage Commons in Dixon, which will open in June 2013 provides 7 units for older adults who qualify for MHSA housing services.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp
Solano	Technology Needs	CFTN	Solano County identified implementation of a Electronic Health Record, including, e-prescribing and a consumer portal as the County's primary Technology Need. The County will "Go Live" with the first phase of the EHR system on July 1, 2013. Implementation is proceeding on time as of May 20. Users are being trained in May and June, 2013.	http://www.co.solano.ca.us/depts/hss/mhs/mhsa/default.asp

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Sonoma	Services to Populations who experience disparity in Access - Latinos: Latino Service Providers Sonoma County (LSP-SC)	PEI	Latino Service Providers - Sonoma County (LSP-SC), supported by West County Community Services, serves to and strengthen Hispanic families and children by building healthy communities and reducing disparities in access to mental health services in Sonoma County by offering a variety of mechanisms for networking, collaboration, information exchange, enabling all groups to work together to leverage resources and influence service delivery and promote professional development. LSP focus is to raise awareness about mental health and provide information and education about mental health and mental health services specifically to Sonoma County Latinos.	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Services to Populations who experience disparity in Access: Native Americans	PEI	SCIHP implements the Aunties and Uncles Program, a mentoring program the provides workshops, social connections, and builds self esteem in transition age youth ages 16 to 25; depression screening to all youth ages 12 to 25, and workshops and training to providers to better understand how to work best with Native Americans.	
Sonoma	Workforce Education and Training Coordination	WET	The current WET Coordinator role will be divided into two positions in order to provide increased public mental health system workforce and training coordination and enhanced student/intern program supports. This position is responsible for: • Assuring that all WET planning and programs adhere to the values, principles, and goals of the MHSA • Developing and coordinating the Workforce Needs Assessment • Developing and coordinating the WET planning process • Developing and coordinating the WET plan • Providing internship supervision • Developing relationships with educational and training partners • Participating both at the state and regional level to ensure coordination of training and to maximize training opportunities.	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Workforce Development	WET	Provides trainings and ongoing consultations to develop staff competencies in identified training need areas. Incorporates effective, evidence-based, and best/promising practices in provision of mental health services, including the use of consumers as trainers and best practices for including and working with consumers and family members as peers. Promotes mental health career paths for consumers, family members, and ethnically diverse communities. Provides supports (including stipends when necessary) and coaching on and off the job to ensure greater success for recruitment and job retention of consumer and family members. Uses plans, techniques, and knowledge on independent living skills to support clients toward recovery. Develops a new workforce (current workforce and new professional pathways) in leadership and management.	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Consumer and Family Member Mental Health Career Pathways	WET	Buckelew Programs, Inc. Peer-to-Peer was funded to provide training, employment, and support for consumers to help other mental health consumers toward recovery by helping them to develop and maintain independent living skills; incorporating effective, culturally responsive evidence-based, or best/promising practices in mental health services provision. Goodwill Programs of the Redwood Empire – Consumer Relations Program was funded to provide: outreach, education and employment coordination, peer mentoring and counseling, consumer satisfaction projects, and quality improvement. Education and employment coordination encompasses strengthening links between local education programs and interested mental health consumers; promoting internships/externships and certificate programs; collaborating to design job openings that accept and are reflective of consumer experience; and promoting relevant training, evaluations and announcements about workforce training and education developments. Additionally, in order for consumers of public mental health services to be successful as providers of public mental health services, they need specialized support and training.	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Postgraduate Internships and supervision	WET	Lomi Psychotherapy Clinic and Save Our Students Community Counseling are funded to provide mental health services to client using post graduate students. Crisis services provided by Save our Students and psychotherapy services provide by Lomi offer post graduate interns a range of opportunities to gain experience.	http://www.sonoma-county.org/health/mh/mhsa.htm

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Sonoma	Mobile Support Team	INN	Integrates consumers and family members into a county-wide response team, and retrains mental health staff to work effectively alongside consumers and family members. Adapts crisis response team models that rely solely on the involvement of licensed clinicians by integrating trained consumers and family members into the team. Proposes to engage in a number of bridge-building activities with law enforcement to support crisis response.	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Integrated Health Team	INN	Creates a client-centered, holistic approach that incorporates community health education strategies as a core component of primary care and behavioral health service provision. In this model, the primary goal is to address unmanaged physical health conditions that lead to early morbidity for consumers living with serious and persistent mental illness (SPMI). Launches an integrated, multidisciplinary team of peer health educators, physicians, nurses, psychiatrists, behavioral health specialists, and care managers. Create a new three-pronged model by adapting two existing models: 1) primary care and behavior health integration model, and 2) peer- based community health education.	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Electronic Health Records	CFTN	Electronic Health Record (EHR) System Projects include: • Infrastructure, Security, Privacy • Practice Management • Clinical Data Management • Computerized Provider Order Entry • Full EHR with Interoperability Components (for example, standard data exchanges with other counties, contract providers, labs, pharmacies)	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Client and Family Empowerment Projects	CFTN	Client and Family Empowerment Projects • Client/Family Access to Computing Resources Projects • Personal Health Record (PHR) System Projects • Online Information Resource Projects (Expansion / Leveraging information sharing services)	http://www.sonoma-county.org/health/mh/mhsa.htm
Sonoma	Other Technology Projects that Support MHSA Operations	CFTN	Other Technology Projects That Support MHSA Operations • Telemedicine and other rural/underserved service access methods • Pilot projects to monitor new programs and service outcome improvement • Data Warehousing Projects / Decision Support • Imaging / Paper Conversion Projects	http://www.sonoma-county.org/health/mh/mhsa.htm
Stanislaus	Westside Stanislaus Homeless Outreach Program (SHOP)	CSS - FSP	Operated by Telecare Corporation to offer three full service partnership tracks that uniquely and successfully provide services to diverse unserved and underserved populations: Westside SHOP, Partnership TRAC, and Josie's TRAC. SHOP utilizes a "housing and employment first" approach with recovery and client- and family-centered focus that inspires hope with individuals recently discharged from a psychiatric hospital and who are homeless or at risk for homelessness and/or have been high users of crisis-based services including hospital, mobile crisis, emergency rooms, and incarceration. In addition, two Outpatient programs, Fast TRAC and Wellness TRAC, serve individuals further along in their recovery. Our new program, Transition TRAC (Discharge Team), serves individuals for 30-90 days as they transition out of an inpatient setting and access community resources.	http://stanislausmhsa.com/
Stanislaus	Juvenile Justice	CSS - FSP	This full service partnership is a collaborative partnership with Stanislaus County Probation Department offering treatment and supportive services for high-risk youth (primarily ages 13-19) with serious emotional disturbance, on formal or informal probation, and their families. Aggression Replacement model is employed to address aggression, immaturity, withdrawal, and other at-risk behaviors.	http://stanislausmhsa.com/
Stanislaus	High Risk Health and Senior Access	CSS - FSP	A consolidated FSP program of Health Mental Health and Senior Access and Resource Team designed to serve the same target populations and utilize FSP strategies with a key addition of graduated levels of care to be added in the consolidated program effective FY10-11. The program will serve adults (18 - 59 years) and older adults (60+ years) with significant, ongoing, possibly chronic, health conditions (i.e., Diabetes Mellitus, Hypertension) co-occurring with Serious Mental Illness (SMI) as well as functional impairments related to aging. The sub-group of transition-aged adults (55-59 years) with SMI, co-occurring substance abuse disorders and/or other physical health conditions is included in the target population. Outreach and services to diverse ethic and cultural populations and individuals who are homeless or at risk of homelessness, at risk of institutionalization, hospitalization, nursing home care or frequent users of emergency rooms for health care are prioritized.	http://stanislausmhsa.com/

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Stanislaus	Integrated Forensic Team	CSS - FSP	This full service partnership works in partnership with a number of agencies within the criminal justice system in Stanislaus County to offer services and supports to adults and transition age young adults with serious mental illness including individuals with co-occurring substance abuse disorder, who are homeless or at risk for homelessness and/or who have historically been high users of crisis-based services including hospital, mobile crisis, emergency rooms, probation and incarceration.	http://stanislausmhsa.com/
Stanislaus	Transition Age Youth Drop-in Center - Josie's Place	CSS - SD	A membership-driven "clubhouse" with recovery-oriented services and supports for transition aged young adults in a non-stigmatizing environment. Three service teams are located in the center: Josie's Place Intensive Services and Supports (ISS) and a Full Service Partnership (FSP) called Josie's TRAC. A Young Adults Advisory Counsel (YAAC) collaborates in creating youth consumer driven services on site. TAY-aged peer support staff members with lived experience are members of the center's support team.	http://stanislausmhsa.com/
Stanislaus	Families Together	CSS - SD	Offers a busy family-oriented center with support groups for youth, men, and parents/caregivers in the Family Partnership Center. The program has significantly improved supports and services for diverse youth with serious emotional disturbance (SED) and their families, and kin care providers (family other than biological or adoptive parents). Services to families include one-to-one peer support; service coordination; advocacy; respite for youth, adults, and families; transportation; and wraparound-style services.	http://stanislausmhsa.com/
Stanislaus	Consumer and Family Member Empowerment Center	CSS - SD	Known simply as "The Empowerment Center" this program provides behavioral health consumers and family members a safe and friendly environment where an individual can flourish emotionally while developing skills. It is a culturally diverse center where individuals can gain peer support and recovery-minded input from peers to reduce isolation, increase the ability to develop independence and create linkages to services related to treatment of serious mental illness and co-occurring substance abuse. 100% staffed by behavioral health consumers and family members, it is a safe place where transitional age young adults, adults and older adults can work toward independence and get support for coping with mental health issues. A culinary training program called The 'Garden of Eat'n' provides consumers and family members an opportunity to learn skills such as food preparation, sanitization, catering, and safe food practices with the goal of gainful employment after completing their training.	http://stanislausmhsa.com/
Stanislaus	Outreach and Engagement to Diverse Communities	CSS - OE	Two community-based contractors were identified, El Concilio of Stanislaus County and West Modesto King Kennedy Neighborhood Collaborative. The initial phase of work by the contractors involved an extensive needs assessment in unserved/under served ethnic communities to identify specific gaps in service. The future goal is for contractors to employ service strategies for the identified individuals in the underserved communities. These programs were transferred to PEI-Community Capacity Building Project in 2011.	http://stanislausmhsa.com/
Stanislaus	Garden Gate Crisis Outreach Program	CSS - OE	Garden Gate Respite Center (GGRC) is a 5-bed respite home open 24 hours a day, 7 days a week located in a residential neighborhood that maintains "good neighbor" relationships in the community and with immediate neighbors. The respite center is co-located with a 13 apartment and 1 house transitional supportive housing that together offer three levels of temporary housing (3 to 5 day respite housing; 5 to 20 day extended respite housing; and 6 months to 2 years of temporary supportive housing). Staff of the center represents diverse cultures and most have lived experience as consumers or family members of consumers of mental health services.	http://stanislausmhsa.com/
Stanislaus	Educational Pathways	WET	The Outreach and Career Academies was established during the initial community planning for WE&T in response to the strong input for the need to acquaint students early and reach diverse populations/community with career paths into: 1) Davis High School Health Careers Academy is a four year college preparatory academic program that offers vocational experiences for careers in health care. The partnership between BHRS and the Health Academy provides students an early exposure to career paths in public mental health. This includes an opportunity to volunteer/field placement at a BHRS site. WE&T offers six scholarships for Health Academy students in their junior/senior year who are interested in pursuing a degree in psychology or behavioral health. 2) Westside King Kennedy Neighborhood Collaborative (WMKKNC) Wellness Project provides junior high students with an introduction to the experiences of mental health careers through interactive involvement. Mark Twain Junior High School continued their participation in the Wellness Project. Five junior high students participated in skits, scenarios, and discussions on issues that impact their mental health such as how to handle stress at school and home, self-esteem, how mental health impacts physical health and vice verse, cyber bullying, and mental health issues in teen and pre-teens.	http://stanislausmhsa.com/

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Stanislaus	Consumer and Family Member Volunteerism	WET	Stakeholders prioritized the need to have a structure that supports and provides opportunities for volunteerism within the behavioral health system. BHRS volunteer program continued to progress with sixty (60) volunteers during this FY11-12. Nine (9) volunteers placed in BHRS sites are CASRA students. Two exceptional CASRA graduates volunteered with WE&T to provide mentorship and support to CASRA students. They assisted with outreach to culturally diverse ethnic communities, CASRA orientation, community events, classroom presentation, and ensuring CASRA student success. They are putting their knowledge from the classroom into practice and role model the achievability of academic success even for consumer and family members.	http://stanislausmhsa.com/
Stanislaus	Training and Technical Assistance	WET	The initial community planning process and workforce needs assessment identified gaps and barriers in the employment of consumers and family members, despite a decade long history of recruiting and hiring consumers and family members. In order to bridge this gap, the Consumer and Family Member Training and Support program was established. Initially, it was developed to prepare consumer and family members in the basics of becoming employed in the public mental health system. Subsequently, it has evolved to include a priority to impact the work environment to be welcoming and incorporate the perspective of lived experience. (CASRA) program partnership with Modesto Junior College (MJC) provides a structure to integrate academic learning to real life field experience in the adult public mental health system. Before this partnership, MJC did not have a mental health curriculum in their program. The initiative taken by BHRS to purchase the CASRA curriculum signifies the efforts to fill the gaps for employment of consumers and family members in public mental health. This is a nine (9) unit certificated course program at MJC that provides individuals with the knowledge and skills to apply goals, values, and principles of Recovery oriented practices to effectively serve consumer and family members. The certificated units also counts towards the individuals Associate of Arts Degree in Human Services.	http://stanislausmhsa.com/
Stanislaus	Workforce Development	WET	Training addresses a variety of key content areas that were identified during the planning process including but not limited to community collaboration skills, resiliency and recovery, treatment of co-occurring disorders,	http://stanislausmhsa.com/
Stanislaus	Targeted Financial Incentives Program to Increase Diversity in the Workforce	WET	Uses financial incentives to increase workforce diversity through a partnership with California State University Stanislaus. MSW and MFT students from culturally diverse backgrounds and/or students who had lived experience as consumers/family members received financial stipends. Selection criterion for stipends was based on results of the workforce needs assessment data included in the approved WET plan. BHRS assisted submission of 15 loan repayment applications to the statewide program MLAP FY12-13- 12 awarded, 8 BHRS and 4 partner agencies were in Stanislaus County.	http://stanislausmhsa.com/
Stanislaus	Expanded Clinical Supervision and Supported Loan Repayments	WET	The community planning process identified challenges that need to be addressed by this action and acknowledged that the challenges are related to longstanding workforce shortages. Internships at all levels of educational experience are needed (high school, community college, baccalaureate and graduate levels). The barriers identified to adequate staffing for internship programs were similarly identified as barriers to ongoing supervision for professional development of pre and post-licensed staff. Offer 10 Field Placement at BHRS with 12 students placed at BHRS this year-2012-2013. Offered 6 educational stipends; 2 MSW stipends and 3 MS stipends and 1 BA.	http://stanislausmhsa.com/
Stanislaus	Community Capacity Building Project	PEI	Increasing behavioral health capacity at three levels: (1) Individual and Leadership Development, (2) Organizational Development, and (3) Communities. This program will be made available to underserved communities and community leaders throughout Stanislaus County but will include two specific initiatives that promote, support, and further develop Asset-Based Community Development strategies in the Latino and faith-based communities. Involves extensive community-based networking to develop an understanding of community capacity building (CCB) and how as the cornerstone of all PEI programs and services. CCB is intended to reduce disparities in access to mental/behavioral health services, serve underserved cultural populations, and ultimately fulfill the overall intent of the PEI plan to create a "help first" system of behavioral health supports in Stanislaus County. There are two programs in this Project: Asset Based Community Development & Promotores, and Community Health Workers.	http://stanislausmhsa.com/
Stanislaus	Asset Based Community Development Program	PEI	Utilizing ABCD strategies, BHRS will convene leaders and stakeholders within these respective communities to identify best practice approaches to increase behavioral health capacity and to promote emotional health and wellness in their respective communities.	http://stanislausmhsa.com/

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Stanislaus	Promotores and Community Health Workers Program	PEI	The Promotores/Community Health Worker continuum includes diverse titles and roles within health and human service agencies such as peer educator, health advocate, outreach worker, block parent, community health worker, and Promotores, among others. Promotores and Community Health Worker strategies will aim to increase the capacity of community members and health outreach workers who serve as liaisons between their community and social service organizations.	http://stanislausmhsa.com/
Stanislaus	Emotional Wellness Behavioral Health Education Project	PEI	Establishes two new community-based programs using strategies to increase mental health wellness, education and awareness, and link to a countywide strategic effort to expand access and develop local social and emotional support groups. The primary focus is on reducing stigma and discrimination that result in disparities in access to behavioral health services. All educational materials will also be produced in Spanish. Programs include: Community Support Development/Friends Are Good Medicine Program and Mental Health Promotion Campaign.	http://stanislausmhsa.com/
Stanislaus	Community Support Development/ Friends Are Good Medicine Program	PEI	Provides countywide clearinghouse for materials in Spanish and English, A directory to publicize support groups to make mutual -aid available to everyone Information and assistance source to groups in database. Self-help in both the general and professional communities Leadership training, consultation, assistance to groups, and information sheets on topics of interest to self-helpers Linkages with community-based organizations to develop additional support groups. Introduction of peer support in new areas.	http://stanislausmhsa.com/
Stanislaus	Mental Health Promotion Campaign	PEI	This program is a countywide multimedia campaign that helps families, educators, healthcare providers, and young people recognize mental health problems and seek or recommend appropriate services, increase the public's awareness of behavioral health concerns, and provide information on how to develop and maintain emotional wellness and resiliency.	http://stanislausmhsa.com/
Stanislaus	Adverse Childhood Experience Project	PEI	Address the needs expressed by stakeholders for expanded responses to childhood traumatic experiences including child sexual abuse, early onset of serious mental disorders, and juvenile justice involvement. This project addresses key community needs of the psychosocial impact of trauma, at-risk children and youth, as well as focusing on trauma-exposed youth and their families, persons experiencing the early onset of serious mental disorders, and early involvement in the juvenile justice system. There are three programs in this Project: Teaching Pro-Social Skills; Expanded Child Sexual Abuse Prevention and Early Intervention; and Early Psychosis Prevention.	http://stanislausmhsa.com/
Stanislaus	Teaching Pro-Social Skills	PEI	Teaching Pro-Social Skills (TPS) is a comprehensive psycho educational skills program designed for aggressive children and youth at risk of or experiencing juvenile justice involvement. Based on the Aggression Replacement Training, TPS and its component procedures are (1) skill streaming – which teaches a curriculum of pro-social, interpersonal skills, (i.e., what to do instead of aggression), (2) anger control training – to teach youth what not to do if provoked, and (3) moral reasoning training – to promote values that respect the rights of others and help youth want to use the interpersonal and anger management skills they are taught.	http://stanislausmhsa.com/
Stanislaus	Expanded Child Sexual Abuse Prevention and Early Intervention Program	PEI	Expanded Child Sexual Abuse Prevention and Early Intervention expand the effective strategies used by the Parents United/Child Sexual Abuse Treatment Team to address the trauma associated with child sexual abuse. The expansion will provide the addition of Spanish-speaking programming for adults who were molested as children, establishment of 24 hour/7 day a week Warm Line for individuals and families affected by child sexual abuse, expansion of peer sponsorships and the capacity to provide education about child sexual abuse to Spanish-speaking and other audiences. (Peer Sponsorships is a program of volunteer families who provide support to families who have just been identified as experiencing child sexual abuse. Sponsoring families have also experienced child sexual abuse but have successfully engaged in treatment and recovery.)	http://stanislausmhsa.com/
Stanislaus	Early Psychosis Prevention Program	PEI	Provides services for young people between the ages of 12 and 25 who are at risk for serious mental illnesses. The program includes community education to increase awareness of signs and symptoms and early access to screening, assessment, education, treatment and supports for young people and their families. By getting help early, an individual's chances greatly improve for staying in school, working, maintaining friendships and planning for the future. The implementing partner will be required to provide bilingual Spanish/English early intervention services as well as community education. Materials used for public education will be developed in Spanish as well as English. Attention to local needs will need to be balanced with fidelity the model.	http://stanislausmhsa.com/

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Stanislaus	Child and Youth Resiliency and Development Project	PEI	Addresses the needs expressed by stakeholders to focus on facilitating emotional resiliency among high-risk children and youth through mentoring, education, life skills training, peer support, and community leadership opportunities. It addresses key community needs of at-risk children, youth and young adult populations by focusing on these priority populations: children and youth in stressed families, at risk for school failure, at risk of or experiencing juvenile justice Involvement, and underserved cultural populations. There are two programs in this Project: Leadership and Resiliency Program (LRP) and Children are People (CAP).	http://stanislausmhsa.com/
Stanislaus	Youth Leadership and Resiliency Program (LRP)	PEI	A school-and/or community-based program for youth ages 14-19 that enhances internal strengths and resiliency, prevents involvement with substance abuse and violence, helps youth avoid school failure and involvement with juvenile justice. Specific activities include resiliency groups, adventure and outdoor activities, community service opportunities, conflict resolution, social skills training and peer mentoring. Individuals who are the focus of this program will be involved in its development. It's a program for children of alcoholics or substance abusing parents/caregivers.	http://stanislausmhsa.com/
Stanislaus	Children are People (CAP) Program	PEI	CAP is a psycho-educational, problem-solving program designed to address, in a small group setting, the problems of children in third through fifth grades who are exposed to family substance abuse. The program consists of 8-10 sessions. Each weekly session includes opening and closing exercises and a topic for learning/discussion that addresses a specific psychosocial concern children may encounter. The program will include training and supervision to staff and qualified volunteers at up to ten different sites within the county. The program curriculum is available from Substance Abuse Mental Health Services Administration (SAMHSA).	http://stanislausmhsa.com/
Stanislaus	Adult Resiliency and Social Connectedness Project	PEI	Meets the needs of consumer-run initiatives to set a standard for quality education about mental illness. The quality education comes directly from individuals who have been in the position of experiencing social stigma. The program intends to: 1) offer genuine work opportunities that make a difference in the community, 2) encourage self confidence, reduce self-stigma and increase self-esteem in presenters/educators, 3) carry a message of hope and focus on the message "Recovery is possible." Reduces barriers in access to early mental health interventions by addressing stigma associated with mental illness and emotional health problems. Stigma reduction strategies include: expanded social support networks, culturally appropriate support and early mental health interventions offered in non-stigmatizing settings. This includes expanding existing communities of support and enhancing linkages between communities of support. There are three programs in this Project: In Our Own Voice Program; Arts for Adult Resiliency and Social Connectedness Program; Faith/Spirituality-Based Resiliency and Social Connectedness.	http://stanislausmhsa.com/
Stanislaus	In Our Own Voice Program	PEI	A new universal prevention program that provides a mental health education developed by National Alliance on Mental Illness (NAMI) in which two trained consumer speakers share compelling personal stories about living with mental illness and achieving recovery. Presentations are given to consumer groups, students, law enforcement officials, educators, providers, faith community members, politicians, professionals, inmates, and interested civic groups. A NAMI-developed program with national resources is available for local implementation to be implemented by the local chapter of the National Alliance on Mental Illness.	http://stanislausmhsa.com/
Stanislaus	Arts for Adult Resiliency and Social Connectedness Program	PEI	Raise public awareness and acceptance of the creative talents of people living with mental illness or co-occurring disorders who are involved in the arts (e.g., painting, film, photography, sculpture, music, literature, and drama). These artists will engage other adults in the community to organize creative workshops and other activities that promote resiliency and social connectedness by addressing stakeholders' recommendation to provide opportunities for parents and other adults to unwind, hone their interests and create mutual support among peers.	http://stanislausmhsa.com/
Stanislaus	Faith-/Spirituality-Based Resiliency and Social Connectedness Program	PEI	Facilitates, encourages and supports several faith communities and spirituality groups throughout Stanislaus County to create increased social support and social connections for adults experiencing the impact of trauma and other risk factors. It is anticipated that these activities will include a variety of support groups, study groups, outreach, social and recreational activities and personal/peer based support. Partnerships with other PEI programs will allow faith organizations to provide education and information about behavioral health concerns that reduce stigma, enhance emotional wellness and support recovery.	http://stanislausmhsa.com/

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Stanislaus	Older Adult Resiliency and Social Connectedness Project	PEI	Older Adult Resiliency and Social Connectedness Project is the result of a collaborative planning process conducted in Stanislaus County and involving diverse stakeholders throughout the county. BHRS partnered with the Area Agency on Aging and Commission on Aging to co-sponsor a targeted focus group dedicated to formulating needs, strategies and best ways to implement services to older adults. Older adult representatives and advocates actively participated throughout the PEI planning process. There are three programs in this Project: Program to Encourage Active, Rewarding Lives for Seniors (PEARLS); Senior Peer Counseling; Senior Center without Walls.	http://stanislausmhsa.com/
Stanislaus	Program to Encourage Active, Rewarding Lives for Seniors (PEARLS) Programs	PEI	Designed to reduce symptoms of depression and improve health-related quality of life. PEARLS, is an established evidence-based program that provides eight sessions with a trained PEARLS counselor in the senior's home. The program is "participant-driven" and participants are helped and encouraged to feel confident in using existing community services and to attend local events. The home-based and individualized nature of this program makes it ideal for older adults who have become isolated due to losses in friendships due to death and loss of mobility due to physical changes and/or lack of transportation. Older adult stakeholders and advocates stressed over and over again the necessity of reaching out to homebound seniors who have lost contact with social connections as a method for reducing depression, suffering and suicide.	http://stanislausmhsa.com/
Stanislaus	Senior Peer Counseling Program	PEI	As a new community-based prevention program, it is proposed to be place-based where seniors go to access faith, social and recreational activities. Senior Peer Counselors will receive training and be certified as volunteers prior to engaging in peer counseling. Individuals will be paired with a senior peer counselor who is old enough to be a peer and to have experienced many of the same life events. This community-evidence based program is successful in providing local seniors an age-mate contact who can make a difference in helping work through issues of emerging mental illness or life changes and bridge the barrier of not wanting to ask for help. Volunteers are also enriched by being able to directly contribute to the increased well-being of a member of their generation. The program will match at-risk seniors with peer counselors who have similar linguistic and cultural characteristics.	http://stanislausmhsa.com/
Stanislaus	Senior Center without Walls Program	PEI	The program would offer over-the-phone activities, friendly conversation and an assortment of classes and support groups to homebound elders and those who find it difficult to go to a community senior center. Participation is possible from the comfort of home through telephone conference calls. Calls are free. A toll-free number is made available when participants register and connects them to the group conference call, which allows them to talk to each other, much like the old-fashioned "party lines". Any type of telephone will work, even rotary dial. This is an established program in Northern California for which no research has been done to show evidence or promising practice, however, which clearly could be considered community-defined evidence.	http://stanislausmhsa.com/
Stanislaus	Health/Behavioral Health Integration Project	PEI	Establishes proposals to fund behavioral health clinicians and psychiatric consultation to occur in primary care health clinics serving primarily underserved cultural communities. The project will interface with several other projects in this plan to ensure continuity of care to older adults, children/youth, and adults who are at risk of depression and suicide due to untreated behavioral health issues. The project includes one program implemented at numerous sites throughout the county to begin to address stakeholder identified needs related to increasing supports in the community, include all age groups, and improve access to services.	http://stanislausmhsa.com/
Stanislaus	School Behavioral Health Integration Project	PEI	Project will consist of a range of multi-faceted activities including embedding a mental health clinician within a school setting to provide behavioral health consultation, substance abuse problem identification, screening and referral, support for educational professionals and parents, screening and early interventions for behavior and emotional problems of students. This project includes two programs: Student Assistance and School-Based Consultation Program and Parents and Teachers as Allies (NAMI).	http://stanislausmhsa.com/
Stanislaus	Student Assistance and School-Based Consultation Program	PEI	This program provides school based services for at risk children in grades 1 through 5 focused on enhancing emotional resiliency leading to school success. These programs target the school "system or site" to increase its capacity to serve children from stressed families in culturally underserved communities who are at risk of school failure.	http://stanislausmhsa.com/

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Stanislaus	Parents and Teachers as Allies (PTA) Program	PEI	Helps families and school professionals identify the key warning signs of early-onset mental illnesses in children and adolescents in our schools. It focuses on the specific, age-related symptoms of mental illnesses in youngsters. PTA makes it clear that families and school professionals are natural allies in working to ensure that youth with early-onset mental illnesses receive timely and appropriate treatment. A NAMI-developed program with national resources is available for local implementation to be implemented by the local chapter of the National Alliance on Mental Illness.	http://stanislausmhsa.com/
Stanislaus	Evolving a Community-owned Behavioral Health System of Supports and Services	INN	Implemented by BHRS, this project focuses on learning what works in developing stakeholder processes that enable community and county partners to join with BHRS leaders in collaborative decision-making to develop ownership of an integrated, financially sustainable behavioral health system committed to results.	http://stanislausmhsa.com/
Stanislaus	Arts for Freedom - Peer Recovery Art Project	INN	Increases quality of services, including better outcomes for individuals of all ages. Arts for Freedom project has a mission to emphasize what people can do rather than what they cannot do through artistic expression and in support of artistic pursuits. Arts for Freedom is open to anyone from Stanislaus County who wants to participate and will provide opportunity for artists who live with mental illness to show the quality and depth of their art. This novel project will attract artist from diverse cultures and ethic groups throughout Stanislaus County. Arts for Freedom will serve as a parallel social support system, a gateway to services and providers, will develop linkages for referral purposes and encourage use of community-based services whenever possible with a primary purpose of increasing quality of services and producing better outcomes for people. We need a project like this to increase access creative social supports and reduce stigma so that people can be identified as something other than their illness or diagnosis. The project will help support and accelerate county-wide transformation by connecting people receiving services to community-based supports.	http://stanislausmhsa.com/
Stanislaus	Beth and Joanna Friends in Recovery	INN	Increases quality of services including better outcomes in this project that pairs two individuals, a peer and a pal, for a six-month period of time. A Peer is someone who has mental illness and/or co-occurring substance issues, is isolated or needs support. A Pal is someone successful in recovery from their mental illness and/or co-occurring substance issues and has had some basic training in the mental health field such as the 10-week NAMI Peer-to-Peer course, or be attending our junior college and taking psycho-social rehabilitation courses. Pals will be recruited from among MJC Human Services students in the California Association of Social Rehabilitation Curriculum (CASRA) class (an MHSA Workforce Education and Training Program). The project will help support and accelerate county-wide transformation by connecting people receiving services to community-based supports.	http://stanislausmhsa.com/
Stanislaus	Building Support Systems for Troubled Youth	INN	Increases the quality of service and better outcomes for troubled youth through a family resource center-based mentoring program that integrates school, community, and family support systems to increase developmental assets in troubled youth ages 7-11 yrs. a secondary focus will occur as promotion of interagency collaboration is addressed to achieve quality of service and better outcomes. The local community-based family resource center will take the lead and coordinate project activity, local school administrators will assist in identifying at-risk youth, share the use of school facilities and allow the use of teacher and/or administrator staff time to participate and local businesses partners who provide incentives and services to participating children and families. If proven effective, the project could be replicated in other communities in Stanislaus County.	http://stanislausmhsa.com/
Stanislaus	Civility School Learning Project	INN	Increasing quality of services including better outcomes by creating ownership of "social culture" at Keyes Elementary and Spratling Middle School in students, classroom teachers, parents, and campus staff through campus-wide introduction of civility activities and strategies. Traditional models for providing school-based mental health support for students have a primary focus on "solving the problem" or "fixing the student" with much less focus on connecting the individual to his/her natural support community of peers, parents and personnel. Student behavioral problems are often the source and ongoing fuel for adversarial interactions that lack civility between parents, kids and school staff; academic and non-academic.	http://stanislausmhsa.com/

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Stanislaus	Connecting Youth to Community Supports	INN	Increasing quality of services including better outcomes with secondary foci of promoting interagency collaboration and increasing access to services by offering youth who are currently receiving services at Sierra Vista Child and Family Services, the Drop in Center Family Resource Center (FRC), the North Modesto/Salida Family Resource Center, the Hughson Family Resource Center, and the Bridge access to community-based activities. Clinicians will assist youth in identifying activities they are curious about, interested in, and passionate about. The Community Support Specialist, based at FRC or other partner agency, would receive an activity referral and the Specialist would connect the youth to the desired activity and monitor participation in the activity. The clinician would monitor progress toward recovery including length of time and intensity of treatment.	http://stanislausmhsa.com/
Stanislaus	Families in the Park	INN	Increases access to underserved groups through an innovative approach in a culturally specific way of outreaching to young African-American families (predominantly mothers with pre-school children) who spend their days from April to November in West Modesto's Mellis Park. Locating the project in the untypical and accessible location of the familiar neighborhood park is the first step in a culturally specific approach as the park is a place where families feel relaxed and comfortable.	http://stanislausmhsa.com/
Stanislaus	Integration Innovations	INN	Increases the quality of services including better outcomes, for adult and older adult individuals of all cultures, and ethnicities who receive medical and psychiatric care in a primary care clinic setting. Stanislaus County needs a project like this to increase the quality of services offered to medically high-risk populations, including uninsured and underinsured individuals who have psychiatric illnesses and/or substance abuse issues co-occurring with chronic disease such as diabetes and hypertension. Access to peer supports is not currently included in primary care service delivery and has the potential to achieve better outcomes for overall well-being including health and mental health.	http://stanislausmhsa.com/
Stanislaus	Promoting Community Wellness through Nature and Neighborhood -Driven Therapies	INN	A community-based approach that proposes to increase access to underserved groups through a combination of family-oriented outdoor programming and capacity for resident-led neighborhood improvements as "therapies" to address wellness issues in the Airport Neighborhood.	http://stanislausmhsa.com/
Stanislaus	Revolution Project	INN	Engages adults who own businesses or have other civic leadership roles to learn what it takes to resolve existing conflicts with youth from nearby schools and build partnerships that transform mental health in the rural, underserved Westside community of Patterson.	http://stanislausmhsa.com/
Stanislaus	Capital Facilities and Technological Needs	CFTN	Service recipients, family members and contract organizations were involved in ongoing processes related to development and implementation of projects to support modernization of our information systems, collecting and reporting of better outcomes data and service recipient access to computing resources that support self-care and wellness goals. All projects are within budget and meeting timelines. There are four approved TN projects: Electronic Health Record Consumer Family Access to Computing Resources, Data Warehousing and Document Imaging.	http://stanislausmhsa.com/
Sutter-Yuba	Children's Integrated Full Service Partnership	CSS - FSP	FSP PROGRAMS FOR CHILDREN SYMHS Integrated FSP (Age 0 – 5 Program): serves children 0 through 5 years old who have behavioral problems that significantly impact their social, emotional and educational experiences. The children are at risk of out of home care, or may have parents with a mental health and/or substance abuse disorder and/or are at risk of homelessness. SYMHS Integrated FSP (Age 6 – 15 Program): serves children and adolescents 6 through 15 years old who have behavioral problems that significantly impact their social, emotional and educational experiences. The children are at risk of out of home care, involvement with Juvenile Justice, or Child Protective Services. They may have parents with a mental health and/or substance abuse disorder and/or are at risk of homelessness.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act
Sutter-Yuba	Transition Age Youth Integrated Full Service Partnership	CSS - FSP	FSP PROGRAMS FOR TRANSITIONAL AGE YOUTH (TAY) SYMHS Integrated FSP (Forté Academy- Transition Age Youth Program): serves young people age 16 through 25 who are homeless, gang-involved, aging out of the foster care / probation / youth mental health systems, young women with self-harming high-risk behaviors, those with co-occurring mental health and substance abuse disorders and those whose cultural identity places them in underserved populations within our community.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act

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Sutter-Yuba	Adult and Older Adult Integrated Full Service Partnership	CSS - FSP	FSP PROGRAMS FOR ADULTS SYMHS Integrated FSP HOPE (Healthy Options Promoting Empowerment): Provides intensive community-based services to adults 26—59 with severe mental illness and/or co-occurring disorders who are underserved, at risk of homelessness, hospitalization or re-hospitalization, and/or incarceration to achieve improved quality of life and community stability. ---------- FSP PROGRAM FOR OLDER ADULTS SYMHS Integrated FSP HOPE (Healthy Options Promoting Empowerment): Provides intensive community-based services to older adults aged 60+ diagnosed with severe mental illness, who may also have complex medical needs, co-occurring disorders, and/or other specialized needs related to mental health and aging. FSP SUPPORT: A Housing Resource Specialist coordinates with existing housing programs; develops partnerships with local landlords; assists clients in locating affordable temporary/ emergency/ transitional/ permanent housing. The Housing Resource Specialist assists clients with paper work and navigating systems in order to avoid homelessness. FSP SUPPORT: Employment Resource Specialist: Assesses and provides a wide variety of employment and pre-employment resources for clients who have expressed interest in community employment. The Employment Resource Specialist coordinates a Vocational Training Program that provides time-limited paid work skills training through supported employment at a variety of local businesses. FSP SUPPORT: Wellness & Recovery Center (See description below.) ---------- WELLNESS & RECOVERY CENTER SYMHS Wellness and Recovery Center: Peer Staff, Peer Volunteers, and County providers work as an integrated team to provide a wide range of wellness and recovery-oriented activities and services such as Culinary Academy, Home Economics, Double Trouble, Pathways to Recovery, Town Hall, Art and Music Groups, Peer Counseling, building social support, community reintegration, and employment training opportunities. This is also a FSP support program.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act
Sutter-Yuba	Older Adult Mobile Outreach Team	CSS - OESD	SYMHS BEST (Bi-County Elder Services Team): Provides mobile community outreach services to older adults with psychiatric disabilities who may be physically or geographically isolated and have historically been un-served or underserved residents of Sutter and/or Yuba Counties.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act
Sutter-Yuba	Ethnic Outreach and Engagement Program	CSS - OESD	SYMHS Ethnic Outreach Program & Hmong Outreach Center: The MHSA Ethnic Outreach Team consists of Latina, Asian Indian, and Hmong providers who have sensitivity to and understanding of the mental health and other special needs of the persons they serve. Bilingual outreach, referral, linkage, counseling, and other services are provided in a variety of settings such as schools, homes, local primary care clinics, community agencies, SYMHS Clinic, and the Hmong Outreach Center.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act
Sutter-Yuba	Urgent Youth Services Team	CSS - OESD	SYMHS MHSA Adult Urgent Services: Provides expedited access to all adult outpatient services through weekly Open Access (walk-in) Clinics and as a disposition from Psychiatric Emergency Services. As nursing staff coordinate and schedule access to urgent and routine psychiatry for new and returning consumers; Alcohol and Other Drugs (AOD) Program staff provide motivational enhancement, engagement, and Moral Reconation Therapy (MRT)for those with co-occurring disorders, while licensed therapists provide assessment, referral, and same-day counseling services. SYMHS MHSA Youth Urgent Services: Provides expedited access to all youth outpatient services for youth who have been taken to Psychiatric Emergency Services experiencing suicidal or homicidal ideation and not hospitalized but sent home with a safety plan. Team comprised of therapist and case manager. Team either works on crisis to stabilize and move to longer-term services, or stabilize youth and family to discharge. Team conducts weekly reviews with multi-disciplinary team to ensure every child who visits Psychiatric Emergency Services or are hospitalized have been offered adequate care whilst in hospital and upon release.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act

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Sutter-Yuba	WET Plan	WET	WORKFORCE, EDUCATION AND TRAINING (WET) Identify workforce gaps, increase cultural and linguistic capacities and educate consumers MENTAL HEALTH CAREER PATHWAY PROGRAMS Intern Supervision Program: Clinical supervision will be provided to registered interns who work at, or are assigned to SYMHS. The program addresses filling hard to fill positions. Youth Workforce and Career Program: SYMHS WET Coordinator will work with high school counselors and workforce agencies to develop a workforce program with a focus on youth. Counselors will be educated in assisting youth in career pathways that encourage post-secondary education and employment in the public mental health workforce. Adult Workforce Plan: SYMHS will partner with workforce development agencies to link consumers with employment readiness opportunities. SYMHS will promote job-coaching skills for case managers and counselors to utilize when working with adult consumers. Financial Incentive Program: Employee Scholarship program will pay towards the costs related to tuition costs. TRAINING Wellness Service Delivery Training: Workshops will be held about topics related to wellness, recovery and resilience. Target audience will include consumers, family members, community members, contractors and service delivery and support staff. Core Competencies Training: This training provides educational opportunities for SYMHS staff, consumer contract employees and community stakeholders. Training will address core competencies needed for working in the public mental health system. Integrating Cultural Competence in the Public Mental Health System Training: This provides training focused on the diverse cultural and linguistic needs of the Latino, Hmong, Asian Indian, and other underserved populations in Sutter-Yuba counties. The goal is to develop understanding, skills, strategies, multicultural knowledge and awareness of cultural barriers, sensitivity and responsiveness to consumers, and to ultimately result in better outcomes for Sutter-Yuba counties diverse consumers	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act

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Sutter-Yuba	Community Prevention Team	PEI	PREVENTION AND EARLY INTERVENTION (PEI) Identify risks early on, prevent worsening of mental illness and promote wellness Community Prevention Team: Using an asset based community development approach to assess need and individualize plans to the needs identified by the community. Target populations include trauma exposed individuals, individuals experiencing onset of serious psychiatric illness, children and youth in stressed families, children and youth at risk of school failure, children and youth at risk for experiencing juvenile justice involvement, and underserved cultural populations. The overall goal is to increase the capacity of the community to provide prevention services. • Nurtured Heart Approach Parenting – training school personnel and others to disseminate this parenting approach for difficult children. • PLUS Anti-Bullying – providing grants to schools to bring Peer Leaders Uniting Students to their middle and high school campuses. Creates school-wide climate of inclusion based on student/peer-led forums and activities. • Trauma Awareness/Education – training for professionals who work with children throughout the community to build an understanding of the effects of trauma and how to work with children who exhibit behaviors based on these effects. • Building Resilience – training for agency staff in providing this evidence-based program for young children from homes with domestic violence and substance abuse. • Seeking Safety – training for non-profits who work with adults with both traumatic experiences and alcohol or other drug misuse. • 40 Developmental Assets – informational presentations regarding the Assets and how they are used to increase resilience and reduce negative behaviors in adolescence. • Alcohol and Other Drug Counseling for Foster Youth – provides education and counseling to foster youth with early substance abuse issues. • Increasing resources available to LGBT individuals – The goals are to increase resources available to LGBT individuals; assist with development of Gay Straight Alliance clubs in area high schools; work with local LGBT organization GOTBLISS to develop gatherings that provide support for LGBT individuals; and promote a local chapter of Parents and Friends of Lesbians and Gays (PFLAG). SYMHS Coordinated with CRLA to put on an anti-bullying forum regarding LGBT youth in schools. • Outreach to Spanish- speaking parents provided parent training at Migrant Head Start, Even Start, a Catholic Church, Head Start and various family resource centers. Community training to parents was provided in Spanish on the following topics (number trained is in parentheses): ☐ Nurtured Heart Parenting (103) ☐40 Developmental Assets (72) ☐Family Stress Management (123) ☐ Gang and Drug Awareness (72) ☐ Family Communication (24) ☐Healthy Boundaries (29) ☐Building Self-Esteem in Children (12) ☐Los Ninos Bien Educados – Parenting Series (19) • Gatekeepers – training local natural gatekeepers such as garbage collectors, grocery store checkout clerks, etc. to be mindful of elderly and/or impaired adults who may need assistance, and how to connect them with APS. The target group is Older Adults. • Elder Adult Mental Health Training – Provided training to over 800 IHSS workers (applicants) so far to recognize symptoms of mental illness and how to access assistance. The target group is Older Adults.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act

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Sutter-Yuba	Community Prevention Team (cont.)	PEI	• Suicide Prevention ☐ Applied Suicide Intervention Skills Training (ASIST) –trained 95 agency staff and community members to be able to effectively intervene and obtain help for individuals who are suicidal. Some of the community partner agencies who have received this training include: o Sutter and Yuba County Probation o Camptonville Fire Department o Yuba and Sutter County CPS o Rideout Hospital o Yuba County APS o Yuba College o Children's Hope FFA o Yuba County Jail o Plumas Lake Elementary School District o Wheatland Police Department o Casa De Esperanza o Sutter County Health Department o Yuba County Victim and Program Services o Sutter County CalWORKs o Rideout Health Cancer Center o California National Guard Family Programs o Salvation Army Depot o Yuba County Office of Education o Family Soup Family Resource Center o Sutter North Medical Foundation o Yuba City Unified School District o Mercy Housing o Victor Community Support Services o Wheatland Elementary School District o Live Oak Unified School District ☐ Mental Health First Aid - trained 72 agency staff and community members to render assistance and obtain help for individuals showing signs of mental illness. Mental Health First Aid also provides information to help reduce stigma and discrimination. Some of the partner agencies who have received this training include: o California Tribal TANF Program o Salvation Army o Sutter and Yuba County Probation o Mental Health America o Truth Tabernacle o Regional Emergency Shelter Team o Sutter County Superintendent of Schools o UCD Medical Center/Napa Mental Health Board o Yuba-Sutter Gleaners Food Bank o E Center Head Start o GraceSource Family Resource Center o Yuba City Unified School District o Marysville Joint Unified School District o Yuba County Office of Education o Truth Tabernacle ☐ Safe TALK –trained 21 partner agency and community members in a model of talking with someone who is suicidal and connecting them with professionals for more thorough assistance. Some of the partner agencies who have received this training include: o Yuba Gardens Middle School o Plumas Lake Elementary School District o GraceSource Family Resource Center o Wheatland Police Department o Yuba County Office of Education o Bear River Family Resource Center o Wheatland Union High School o Beale AFB School Liaison Office ☐ Yellow Ribbon Suicide Prevention Program –by end of 12/13 school year, will have trained all area high schools in a model that teaches "it's always ok to ask for help". The program teaches students to be gatekeepers for their peers and teaches staff how to connect kids to more help. Total youth trained will exceed 8,300 students, plus faculty and staff. • Traditional Healer Program – graduated 10 traditional healers from an educational program that included training in Western medical processes through Rideout Health Group, Bi-County Ambulance, and SYMHS Psychiatrists and the AOD Program Manager. The program also included a class segment with the Yuba County Sheriff's Department. The PEI team also taught the SYMHS psychiatrists about how Shamans are trained. Mentoring: Mentoring's overall goal is to expand the availability of mentoring for youth as a means of increasing resilience. Targets include children and youth in stressed families, those at risk of school failure and those at risk of juvenile justice involvement, as well as members of underserved cultural populations. • Big Brothers/Big Sisters – Contracted to bring Big Brothers/Big Sisters to our area. Friday Night Live – Contracted to expand their mentoring program to an additional site and to the Yuba foothills. Strengthening Families: The overall goals are to increase the community's capacity to provide this program and to diversify its geographic availability. We trained 39 community partners to operate this evidence-based program that improves family communication and functioning. Programs are to be offered in the local Salvation Army program as well as in local churches. Targets include children and youth in stressed families, those at risk of school failure and those at risk of juvenile justice involvement, as well as members of underserved cultural populations. SYMHS is working with The Spot in Live Oak to provide this in that community and is also working with a local Lutheran Church that is planning to begin offering the program in their facility.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act

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Sutter-Yuba	Community Prevention Team (cont.)	PEI	• Recreation: The overall goal is to enhance access to recreational activities that serve a preventive function. PEI conducted Park and Play Fitness Day events in each county to promote physical activity and recreation in local parks as a means of promoting mental health. Targets include children and youth in stressed families, at risk of school failure and at risk of juvenile justice involvement, as well as underserved cultural populations. SYMHS has provided $24,000 in grants to benefit over 1600 local youth by providing scholarships for programs such as gymnastics, basketball, cheerleading, football, dance, karate, painting, swimming, volleyball, soccer, baseball, fencing, after school program participation and also to purchase various sports equipment for local youth programs that serve the youth target population. We have also contracted with Camptonville Community Partnership to provide recreational activities in the Yuba County Foothills. First Onset: The goal is to provide early intervention for those identified as experiencing the first onset of mental illness. • Teen Screen: partnering with Harmony Health Clinic to implement this protocol for screening adolescents at primary care sites for depression and other mental illness. • First Onset: early identification of first onset consumers upon intake at Adult Outpatient clinic.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act
Sutter-Yuba	Innovation	INN	Sutter-Yuba Counties does not have an approved Innovation Plan at this time. The Innovation Plan is in the final stages of development based on feedback from the state Mental Health Services Oversight and Accountability Commission	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act
Sutter-Yuba	Housing	Housing	HOUSING Acquisition, Construction and/or rehabilitation of permanent supportive housing for individuals with serious mental illness who are homeless or at risk of homelessness by providing capital development and operating subsidies. SYMHS MHSA Supportive Housing Program: SYMHS' Yuba City Project is a fully furnished attractive duplex located in a convenient Yuba City neighborhood, providing supportive permanent housing for six mental health consumers. The reasonable monthly rent includes all utilities, basic phone service, basic cable service, and yard maintenance, and each resident has their own private bedroom. SYMHS staff provide support & coordination of services for residents while the Regional Housing Authority of Sutter and Nevada Counties provides property management. Heather Glen is a similar supportive housing project currently being implemented in Marysville. This project is an apartment complex of 4 units which will offer housing to an additional 8-10 mental health consumers.	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act

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Sutter-Yuba	Capital Facilities and Information Technology	CFTN	Little White House Renovation: The target population for the Capital Facilities project is participants in the Adult Wellness and Recovery Program (W&R). This program serves the chronically mentally ill adult and transitional age young adults in various stages of recovery. The program has expanded rapidly over the last 4 years and more space is needed for consumer designed activities and W&R community events. The building will house meeting areas, smart classrooms and recreational space to serve the 90 individuals being served in this program. A building that once served as nursing quarters for the County Hospital is being refurbished and brought up to ADA standards to better serve the needs of the W&R program. The planned development for the Wellness and Recovery Center is on hold temporarily. Infrastructure improvements have been made to the facility as planned. At present the facility is being used to house Kings View staff supporting implementation of the Anasazi EHR and is also being used as an on-site training center to train SYMHS staff in using the components of the Anasazi system. When the Anasazi system is fully implemented, the Wellness and Recovery Center refurbishment will be completed and will be repurposed to its intended use as a client and family activity center. INFORMATION TECHNOLOGY Electronic Health Record: The program purchased will move the department forward into use of an Electronic Health Record agency wide and will result in Health Information Exchange with other health facilities and community agencies providing comprehensive, integrated services to mental health consumers. The goal was to select, purchase and install an appropriate system to meet SYMHS needs. Anasazi implementation continues in the second year of the contract with Kings View. To date the system infrastructure and hardware have been updated and replaced as needed. The practice management components for scheduling, intake, documentation of services, treatment plan development and progress notes are in place and being used by staff in all intake, outpatient and crisis services. Service documentation has been linked to billing for services. The clinician and physician home pages are on-line and in use. Billing has been implemented using the Anasazi system and linked with Kings View to send claims to the State. Report capacity is now in place to make best use of clinical and fiscal data captured by	http://www.co.sutter.ca.us/doc/government/depts/hs/mh/hs_mental_health_services_act
Tehama	Community Crisis Response Unit	CSS - OESD	The Community Crisis Response Unit (CCRU) continues to coordinate with our outpatient medication support services to insure a continuum of care for those with more challenging mental health needs. Staff members are trained through CSS dollars to provide the evidence based practice, *Seeking Safety* - designed to help individuals in crisis start a plan of recovery even before leaving the unit. Because the Tehama County Health Services Agency (TCHSA) also manages the County's Medi-Cal Clinic, we are also able to continue our primary care integration on a regular basis.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Transition Age Youth Drop In Services	CSS - OESD	The Youth Empowerment Services (YES) Center continues to provide laundry and shower facilities for our TAY homeless population. Providing access to the facility in this way opens up opportunities for engaging folks in a plan of recovery. Additionally, there are now several process / rehab groups running for TAY consumers including our new *Therapeutic Drumming* Rehabilitation Group. The YES Center also offers stipend opportunities.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Vista Way	CSS - OESD	The Vista Way Drop-In Center continues to provide laundry and shower facilities for our adult and older adult homeless population. Providing access to the facility in this way opens up opportunities for engaging folks in a plan of recovery. Additionally, there are now several process / rehab groups running including Communication, Independent Living, Healthy Living, Relaxation, Exercise, Symptom Management, Art, and *Therapeutic Drumming.* The VW Drop-in Center also offers stipend opportunities.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Telemedicine	CSS - OESD	Telemedicine includes a Clozaril clinic for both adults and children.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Housing	CSS - OESD	Our efforts include continuing to assist consumers in obtaining permanent housing, the facilitation of accessing shared housing when available, and providing rental assistance to our FSP clients.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Outreach Workplan	CSS - OESD	Tehama County's Community Education and Latino Outreach Work plan provides services for Latino outreach, community education activities, and counseling with a bilingual therapist. Educational activities include Native American activities, migrant labor camp outreach, and health fair. Outreach priorities include the Cinco De Mayo celebration and May is Mental Health Month.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm

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Tehama	Consumer Employment	CSS - OESD	Our efforts at the VW Drop-In Center and the YES Center include the provision of work experience through our stipend program, linkage with educational and vocational opportunities, assistance with employment, and job coaching. The stipend work experience includes office duty training, peer support facilitation, as well as landscaping, janitorial, and light construction duties.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Adult Full Service Partnerships	CSS - FSP	Our Adult FSP offers the provision of case management, clinical therapy, medication support, crisis management, housing assistance, board and care support, employment assistance, and flexible funding for a variety of services. This fiscal year has seen an uptick in FSP enrollees.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Older Adult Full Service Partnerships	CSS - FSP	Our Older Adult FSP offers the provision of case management, clinical therapy, medication support, crisis management, housing assistance, board and care support, employment assistance, and flexible funding for a variety of services. Our efforts with this population also include assistance in coordinating primary care services as these consumers begin to struggle with advanced age-related medical conditions. This fiscal year has seen an uptick in FSP enrollees.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Transition Age Youth Full Service Partnerships	CSS - FSP	Our TAY FSP offers the provision of case management, clinical therapy, medication support, crisis management, housing assistance, board and care support, employment assistance, and flexible funding for a variety of services. This fiscal year has seen an uptick in FSP enrollees.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Nurturing Parenting (NP)	PEI	The Mental Health Division collaborates with the Drug and Alcohol Division to provide Nurturing Parenting provides this evidence-based parenting program that supports parents and their youth in learning and reinforcing core values that contribute to effective parent-child interactions. We have tapped our Spanish-speaking population with the provision of our bilingual NP program.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Trauma Focused Cognitive Behavioral Therapy	PEI	Our TF-CBT program provides a comprehensive model of therapy which assesses anxiety, PTSD, depression, and other trauma-related symptoms. TF-CBT encourages parents, children, and adolescents to work collaboratively at building skills to address mood regulation and safety. Tehama County Mental Health (TCMH) has a six-member team comprised of four licensed clinicians, two case managers, one health educator, and one certified alcohol and drug addictions specialist.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Teen Screen	PEI	The YES Center is a registered site for TeenScreen - an evidence based computer-screening tool for depression and suicide. Additionally, TCMH has registered three (3) locations as TeenScreen sites throughout the county.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Workforce Education and Training Work Plan	WET	We continue to provide myriad opportunities for our current staff to receive training on new evidence-based practices (EBPs) including but not limited to Moral Reconation Training (MRT) and Seeking Safety.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Training and Technical Assistance	WET	TCMH is currently in the process of making the shift to an electronic health record (EHR) throughout the rest of this calendar year. This has included multiple software demonstrations. The final decision will in part hinge on how compatible the system is for integration with other divisions within TCHSA.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Mental Health Career Pathway Program	WET	TCMH is currently reworking much of the WET plan as originally envisioned. Though we have experienced moderate success in assisting clients to hold down Agency employment opportunities, we would like to enhance the training protocols for determining the best candidates to move into full time employment. Much of this new direction will come as a result of a more intense stakeholder review coming later in May of this year.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Financial Incentive Programs	WET	TCMH is currently reworking much of the WET plan as originally envisioned. Our new direction will include educational financial incentives to attract qualified candidates to hold down some of our most difficult positions to fill (i.e., bilingual Spanish speaking clinicians). Much of this new direction will come as a result of a more intense stakeholder review coming later in May of this year.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Capital Facilities and Technology Work Plan	CFTN	TCMH continues to develop an electronic health record program which will include Tehama county's ability to fully utilize Transformational Care Planning Services (TCP) providing Person Centered Treatment Planning services which embrace individual treatment needs utilizing a Team approach with the client's identified team members with a therapist, case manager, rehabilitation specialist, and medication support staff. Additionally CFT will provide online resources for consumers including the transition age youth drop in population at the YES Center and adult drop in population at the Vista Way Recovery Center.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm
Tehama	Therapeutic Drumming	INN	TCMH has invested considerably in our EBP *Therapeutic Drumming* Rehabilitation Groups over the last two fiscal years. This investment has yielded dividends for both the consumers and staff as there are now several drumming groups interspersed throughout Tehama County and across age cohorts.	http://www.tehamacohealthservices.net/MentalHealth/directory_mh.htm

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Trinity	Horizon and MileStones Wellness Drop in Centers	CSS - OESD	Creates wellness drop-in centers.	www.trinitycounty.org
Trinity	Full Service Partnerships	CSS - FSP	Full Service Partnerships for all four age groups, including the flex fund for case management and housing. These are focused on seriously mentally ill adults and emotionally disturbed children.	www.trinitycounty.org
Trinity	Alpine Board and Care	CSS - FSP	Underwrites 5 beds at Alpine Board and Care House for Full Service Partners.	www.trinitycounty.org
Trinity	Outreach and Engagement	CSS - FSP	Provides outreach and engagement activities to inform the community about MHSA.	www.trinitycounty.org
Trinity	MHSA Coordinator	WET	Funds a portion of a MHSA Coordinator to pull everything together and attend all state phone and regional meetings.	www.trinitycounty.org
Trinity	Prevention Services Liaison	PEI	Focuses on youth who may become involved with the juvenile justice system so that emotional needs of adjudicated are met in the community and out-of-home placements are avoided.	www.trinitycounty.org
Trinity	Friday Night Live	PEI	Continues to support Friday Night Live Programs throughout Trinity County. School sites are selected through strong desire by schools to continue programs or new school sites who want to initiate programs. Schools must have on-campus coordinator. Uses Prevention money to fund the coordinator position so all programs have support and direction and all CalOMS data is being collected as required by the State.	www.trinitycounty.org
Trinity	PEI Counselor for Trinity Alps Unified School District	PEI	Continues to fund the Trinity Alps Project with the "Why Try?" curriculum, for which the Office of Education is the fiscal lead.	www.trinitycounty.org
Trinity	Link Center	PEI	Based at the Hayfork Elementary School, its focus is to provide educational counseling and support to those children who are living in a stressful home environment, are being bullied at school, or due to behavioral issues are at risk of school failure.	www.trinitycounty.org
Trinity	Peer Mentoring	INN	Provides Agency support so peer mentoring can be delivered to clients using the Respite Bed Program at Alpine House.	www.trinitycounty.org
Trinity	Permanent County Positions	INN	Consumers to provide the peer mentoring for Alpine House.	www.trinitycounty.org
Trinity	Respite	INN	Underwrite the Respite bed at Alpine House.	www.trinitycounty.org
Trinity	Technology Support	INN	Provides technology support to contract for data collection and analysis on the learning question for Innovation.	www.trinitycounty.org
Trinity	MHSA Coordinator funding to support Respite effort	INN	Funds a portion of an MHSA Coordinator to provide the support to this new important effort in our County.	www.trinitycounty.org
Tulare	One Stop Center Programs / North, Central and South Tulare County	CSS	The One Stop Centers provide an array of comprehensive mental health services for children and youth, and transitional age youth ages with severe and persistent mental illness or serious emotional disturbance, who are underserved, at risk of out-of-home placement, at risk of justice system involvement, or diagnosed with a co-occurring disorder; services are provided in English and Spanish. The One Stop Centers are strategically located in North, Central, and South Tulare County in an effort to optimize outreach and engagement efforts. The program provides linkages and services consistent with CSS requirements through collaboration with other mental health service providers; health organizations and agencies such as Child Welfare Services and Alcohol and Drug Services; community-based organizations; and faith-based organizations. Services follow the MHSA philosophy with a focus on reducing ethnic and cultural disparities by requiring culturally and linguistically diverse program staff to make regular contact with education programs, local community organizations, and local schools to promote mental health and access to services.	http://www.tchhsa.org/hhsa/

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Tulare	Unidos Para la Salud / United for Health Mobile Unit Programs	CSS	The Mobile Units provide an array of comprehensive mental health services for all age groups with severe and persistent mental illness or serious emotional disturbance, who are traditionally un/underserved, are homeless or at risk of homelessness, those with co-occurring disorders, those at risk of criminal justice involvement, and those who are at risk of institutionalization. The Mobile Units are characterized for their strategic mobility of services to decrease barriers in access to services seen in rural communities and with lack of transportation. The program provides linkages and services consistent with CSS requirements through collaboration with other mental health service providers; health organizations and agencies such as Child Welfare Services and Alcohol and Drug Services; community-based organizations; and faith-based organizations. The Mobile Units have begun providing specific health services by on-site public heath nurses, and benefits assistance through on-site self sufficiency counselors. Services follow the MHSA philosophy with a focus on reducing ethnic and cultural disparities by requiring culturally and linguistically diverse program staff to make regular contact with local community organizations and local schools, and regular visits to local health fairs and community events to promote mental health and access to services. The Public Health Nurse (PHN) on the Mobile Unit program places PHNs on the South and North County Mobile Units to provide comprehensive and coordinated services that improve access to health services and add linkages to available resources. The co-location of Health and Mental Health services reduces stigma by normalizing discussion of mental illness, and provides services in the consumer's community thus reducing disparities in access to care.	http://www.tchhsa.org/hhsa/
Tulare	Supportive Housing	CSS	TLC holds a monthly Family Dinner and Family Support Group to engage resident consumer families in the lives of the residents. Persons with severe and persistent mental illness who are receiving services provided by Tulare County Mental Health and who need specialized care and mental health services are eligible for referral to the TLC program. Eligible applicants must be at least 18 years old and up to 60 years of age; or older if the consumer is capable of self-care and is ambulatory. Community Living Center (CLC) is considered a new program for CSS Plan purposes. The CLC provides a transitional housing option for adults with severe and persistent mental illness and is a more independent living setting for Transitional Living Center (TLC) residents in their movement towards independent living in the community. The CLC program employs the Wellness and Recovery Action Plan (WRAP). The WRAP model teaches participants recovery and self-management skills and strategies that: promote higher levels of wellness, stability and quality of life; decrease the need for costly, invasive therapies; decrease the incidence of serious mental health challenges; decrease traumatic life events; increase understanding of these mental health challenges and decrease stigma; raise participants' level of hope, and encourages actively working toward wellness; and increases participants' sense of personal responsibility and empowerment. Achieving wellness in mental health treatment and everyday living is paramount for residents at CLC. While the consumer may be achieving recovery goals as it relates to mental health treatment such as medication management or substance abuse resolution, it is also important to focus on the consumer's ability to manage day-to-day activities in personal and inter-personal relationships. East Tulare Avenue Cottages (ETAC) formerly titled the East Tulare Avenue Apartments (ETAP), is a permanent residential option for 22 persistent or severe mental illness adults that provides case management services and activities that support community re-integration. Residents have access to a drop-in center where they can utilize such things as computers and exercise equipment. All services offered to the residents are voluntary and staffs ensure that the on-site training maximizes the clients' progress attaining their service plan goals. Transitional Age Youth (TAY) Housing program is a previously approved program. The TAY Housing program provides transitional housing for TAY (ages 18-24) with complex mental health needs. To meet the needs of these youth across Tulare County, TAY maintains two separate operating sites, one in Visalia and the other in Porterville. In partnership with the local One Stop Service Centers, the program assists participants in stabilizing from the effects of being homeless and provides supports for wellness, recovery and independence by offering life skills workshops, and one-on-one coaching sessions around issues and topics fundamental to successful independent living.	http://www.tchhsa.org/hhsa/

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Tulare	Specialty Mental Health Services	CSS	Child Welfare Services (CWS) Continuum of Services is a partnership between the Tulare County Mental Health Department and the Tulare County Child Welfare Services department. This program staffs five licensed clinical social workers who provide counseling to adults who have an open CWS case to alleviate barriers to accessing needed mental health services which helps many to remain or reunify with their children. Transition and Linkages Program (formerly titled the Jail Transition and Linkages Team) is designed to provide outreach to incarcerated individuals receiving services from Criminal Justice Mental Health and to ensure linkage to appropriate levels of mental health services and supports (e.g., housing and employment services) prior to their release from jail. Services provided include assessing client's needs, linkage to mental health and Alcohol and Other Drug services, family notification, and connection to service provider to follow-up and reschedule another appointment if needed. The goal of these services is to prevent unsupported direct release to the streets, thus alleviating the revolving door of incarceration and unnecessary emergency/acute psychiatric inpatient services. The Equine-Facilitated Psychotherapy Program (EFP) began as a pilot project in February 2010 through a partnership between the Tulare County Department of Mental Health, Happy Trails Riding Academy, and Tulare Youth Service Bureau. The overall goal of the Equine Facilitated Psychotherapy (EFP) Program is to provide an alternative therapeutic intervention for consumers who might not be responding to traditional forms of psychotherapy, or whose level of functioning might be further enhanced through this intervention. The targeted ages for EFP are 7 - 15 years of age. EFP is a creative and innovative addition to play and talk therapy that provides a mental health consumer and rehab specialist or therapist with a live, interactive medium for effective assessment and treatment. While a consumer is participating in EFP group sessions, the therapeutic progress they are making is further enhanced by individual sessions with their primary mental health clinician. Parents/foster parents/guardians are included in the child/youth's treatment through family and/or collateral sessions. The Co-Occurring Disorders Program provides individuals diagnosed with a co-occurring mental health and substance abuse disorder with housing, employment, education and integrated treatment; while promoting the principles of wellness and recovery, and delivering services in ways that are culturally and linguistically competent.	http://www.tchhsa.org/hhsa/
Tulare	Wellness and Recovery Activities	CSS	The Wellness and Recovery Centers (WRC) are community-based multi-service centers that provide a supportive environment offering choice and self-directed guidance for recovery and transition into community life. They are primarily consumer-driven centers providing peer counseling, peer mentoring, advocacy, and leadership opportunities. Services include support groups, educational guidance, vocational services, fitness, independent living skill development, and socialization. Rehabilitative Psychiatry focuses on training from Dr. Mark Ragins of Mental Health America Los Angeles for the purpose of moving toward a recovery-based system of care. Tulare County mental health staff, consumer, community-based partners, and family members are provided with specific training in how to configure clinical practice to include setting and services in such a way that it is more in line with wellness and recovery principles. Illness Management is included in the 2010 Wellness & Recovery Strategic Plan. Illness Management is an evidence-based practice that assists consumers in becoming empowered to effectively manage their own illnesses and in achieving their personal recovery goals. SAMSHA has created an Illness Management tool	http://www.tchhsa.org/hhsa/
Tulare	Children and Youth in Stressed Families - Maternal Mental Health Program	PEI	The Perinatal Wellness program screens all pregnant and postpartum women for symptoms of Perinatal Mood and Anxiety Disorder (PMAD) using the Edinburgh Postnatal Depression Scale (EPDS). Women who, through the Edinburgh tool, show signs of PMAD are enrolled in the program and assigned to a registered nurse case manager, who conducts a health assessment and provides in-home services and/or a referral to a mental health provider.	http://www.tchhsa.org/hhsa/

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Tulare	Children and Youth in Stressed Families - Family Interaction Program	PEI	Parent-Child Interaction Therapy (PCIT) is an empirically supported treatment that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns. Parents are taught specific skills to establish a nurturing and secure relationship with their child while increasing their child's pro-social behavior and decreasing negative behavior. PCAT (Parent Child Attunement Therapy) is a therapeutic intervention for children with developmental delays or those who are under 30 months of age. Under the Family Interaction Program, the PCIT and PCAT have been developed for delivery through the various Family Resource Centers in Tulare County.	http://www.tchhsa.org/hhsa/
Tulare	Children and Youth in Stressed Families - In-Home Parent Education Program (formerly titled: Family Integration Program)	PEI	The In-Home Parent Education program provides in-home support services and education to at-risk families, with the goal of fostering positive interactions and increasing coping skills that stabilize and strengthen the family unit. The program uses the evidence-based Parenting Wisely (PW) curriculum, which is comprised of a set of interactive training modules for parents of children ages 3-18 years. Based on social learning, cognitive behavioral, and family systems theories, the modules aim to increase parental communication and disciplinary skills.	http://www.tchhsa.org/hhsa/
Tulare	Children and Youth in Stressed Families - SafeCare Program	PEI	The Safe-Care program is based on the SafeCare Home-Based Visitation model for families with children (ages 0-7). The SafeCare program trains parents in maximizing their own healthcare skills; promotes positive and effective parent-child interaction skills; significantly reduces the number of hazards in the home; increases parental structured problem-solving skills; and increases mental health services provided to unserved and underserved populations of Tulare County.	http://www.tchhsa.org/hhsa/
Tulare	Children at Risk of School Failure - Preschool Expulsion Reduction Program	PEI	The Pre-school Expulsion Prevention program provides prevention and early intervention services for children at risk of preschool expulsion, as well as alternatives to expulsion. The principles of applied behavioral analysis and other evidence-based methods (e.g., Preschool Life Skills Curriculum) are used to decrease challenging behaviors and teach positive skills. Services are provided in the classroom to target problem behaviors and serve as a model for educators. Services are also provided in the home to help ensure continuity in the child's environment and provide support for parents in reinforcing positive behaviors.	http://www.tchhsa.org/hhsa/
Tulare	Children at Risk of School Failure - K-3 Early Intervention Program (a.k.a. Special Friends)	PEI	The Special Friends program uses several evidence-based approaches and evaluation tools that are designed to increase protective factors, functioning, and positive outcomes for children with adjustment problems (e.g., inattentiveness, shyness, aggression, acting-out) in grades K-3. Outcomes are measured through administration of the Walker-McConnell Scale (WMS), which is completed by the student's teacher both before and after provision of services. Parents are also provided education regarding their child's needs and are surveyed at the conclusion of the program.	http://www.tchhsa.org/hhsa/
Tulare	Children at Risk of School Failure - Children of Promise Program	PEI	This program serves youth at risk for potential school failure, by providing outreach and orientation activities in addition to a semester-long (Reconnecting Youth) or 12-week (CAST) program. Goals are to increase school performance; decrease adverse drug use consequences; decrease degree of drug use and total drug involvement; increase self-esteem and perceived school bonding; decrease depression, hopelessness, perceived stress, and anger; and to decrease frequency of suicidal thoughts, direct and indirect suicide threats, and suicide attempts.	http://www.tchhsa.org/hhsa/
Tulare	Early Identification and Intervention for Individuals Experiencing Mental Illness project	PEI	The Early Identification of Serious Mental Illness program provides training such as the Crisis Intervention Training and Mental Health First Aid (still in development) to community members, gatekeepers, and law enforcement officials, to teach them how to recognize and respond to individuals exhibiting early signs of mental illness.	http://www.tchhsa.org/hhsa/
Tulare	Suicide Prevention - Tulare County Suicide Prevention Task Force	PEI	The Suicide Prevention Task Force (SPTF) functions as a multi-disciplinary collaborative, combining representatives from government, education, community-based service providers, and community members. Training, activities, and education are provided throughout the community to increase awareness of the signs and symptoms of suicide risk, and to showcase prevention and early intervention best-practices. Specific activities and pilot programs developed through the SPTF include but are not limited to the Older Adult Depression Screening program, Home Bound Senior Outreach program, ASIST training, and the Festival of Hope chalk art festival.	http://www.tchhsa.org/hhsa/

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Tulare	Suicide Prevention - Community Warm Line - LGBTQ (a.k.a. Trevor Project)	PEI	The Trevor Project operates the only nationwide, around-the-clock crisis and suicide prevention helpline for lesbian, gay, bisexual, transgender, and questioning youth. The hotline and related activities aim to reduce stigma associated with accessing services for emotional and mental health needs specifically among the LBGTQ community: to expand knowledge of currently available resources for the LBGTQ community: and to provide linkage and referrals to appropriate mental health services.	http://www.tchhsa.org/hhsa/
Tulare	Reducing Disparities in Access to Mental Health - Community Warm Line - English and Spanish	PEI	The Warm Line is a local call center that provides information and support to county residents experiencing non-emergency hardship and acts as a first contact for non-emergency questions, needs, and concerns. It helps to divert non-emergency call volume from emergency rooms, law enforcement, and crisis lines. Call Specialists are former mental health consumers who are familiar with the mental health system and provide peer support to callers.	http://www.tchhsa.org/hhsa/
Tulare	Reducing Disparities in Access to Mental Health - 211 Referral System	PEI	2-1-1 provides free and confidential information and referrals to government agencies, community-based organizations, and service providers. Consumers can call for help concerning food, housing, employment, health care, counseling, recreation, personal and household needs, disaster services, education, income assistance, information services, consumer and public safety, legal, mental health, transportation, and volunteer opportunities. This program increases access to services for underserved populations by reducing language barriers and decreasing stigma associated with contacting service providers.	http://www.tchhsa.org/hhsa/
Tulare	Electronic Health Record project	CFT - Technology	This project will upgrade the current Practice Management and Electronic Medical Record Systems with the Avatar suite of products.	http://www.tchhsa.org/hhsa/
Tulare	Personal Health Record project	CFT - Technology	*Not Yet Implemented:* This project will enable the purchase and implementation of a Personal Health Record system that integrates with the EHR, thus allowing clients access to predefined portions of their charts and communication with clinicians electronically for services such as requesting appointments.	http://www.tchhsa.org/hhsa/
Tulare	Basic Computer Software Training for Consumers project	CFT - Technology	*Not Yet Implemented:* This project will provide basic computer software training to consumers and family members to assist in utilizing the Personal Health Record system.	http://www.tchhsa.org/hhsa/
Tulare	Wellness and Recovery Center	CFT - Capital Facilities	*Not Yet Implemented:* Tulare County's use of the Capital Facilities funds to create wellness and recovery centers will increase the County's ability to produce long-term impacts with lasting benefits and will move its mental health system toward the MHSA goals of wellness, recovery, and resiliency.	http://www.tchhsa.org/hhsa/
Tulare	Integrated Clinic with Pharmaceutical Case Management	INN	The Integrated Clinic with Pharmaceutical Case Management program combines consultation, assessment, and warm linkage for providers of physical health, mental health, substance abuse, medication management, and community services. This is an effort to ameliorate current fragmentation of service delivery and create pathways of communication between physical health and mental health providers.	http://www.tchhsa.org/hhsa/
Tulare	Recovery Academy	INN	*Not Yet Implemented:* The Recovery Academy involves the development of a peer-led recovery academy at both County mental health clinics to serve as an additional level of care within the existing mental health delivery system, and will create a new service delivery model that is consumer and family member driven, with peer staff at all levels.	http://www.tchhsa.org/hhsa/
Tulare	My Voice Media Center	INN	The My Voice Media Center program will provide the opportunity to develop methods in which consumers and family members tell their stories through various mediums, such as public oral expression, video, and music. The My Voice Media Center introduces a new approach that has been successful in non-mental health contexts, including campaigns for educational rights, human trafficking, and advocacy for individuals living with HIV. Forms of expression such as participatory INN Programs photography programs provide individuals from disadvantaged and marginalized communities with tools for advocacy and communication to create positive social change.	http://www.tchhsa.org/hhsa/
Tulare	Consumer and Family Member Training, Support, and Volunteer Program	WET	*Not Yet Implemented:* This program will provide employment preparation and volunteer support for consumers and their family members. The focus will be on developing essential skill sets and supports to promote success in employment, volunteer roles, and academic environments.	http://www.tchhsa.org/hhsa/

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Tulare	Cultural Competence in the Public Mental Health System	WET	The purpose of this effort is to develop understanding, skills, and strategies to assist in embedding cultural competence into the public mental health system. Training and activities will focus on disparities identified in the County's Cultural Competency Plan and will include culturally focused discussion with community based organizations and community leaders, as well as consumers and their family members.	http://www.tchhsa.org/hhsa/
Tulare	Workforce Development	WET	This effort will identify necessary training, evidence-based curricula, and best practices that will assist in transforming the mental health system to one that is based on recovery, resiliency, and wellness, culturally competent, and consumer and family driven. Strategies will include implementation of train-the-trainer programs, consultation by field experts, and use of online learning and content management systems (e.g., E-Learning, Network of Care).	http://www.tchhsa.org/hhsa/
Tulare	Local High School and Community College Initiative	WET	*Not Yet Implemented:* In collaboration with local high schools and community colleges, a mental health career pathway component will be developed, preparing students for careers in the mental health field. Special effort will be made to involve youth from diverse ethnic communities where access to knowledge about mental health careers may be limited and stigma regarding mental illness may be strong.	http://www.tchhsa.org/hhsa/
Tuolumne	Full Service Partnerships	CSS - FSP	Provides extensive support and wrap around case management services for individuals who have a serious mental illness or severe emotional disorder.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Peer Support Services	CSS - OESD	As part of the peer driven continuum of care – consumers utilize Enrichment Center, the David Lambert Center and the first floor of the old Tuolumne General Hospital (CAIP Program). Programs include: 1. The Tuolumne County Enrichment Center, which located at 102 Hospital Rd. (next to the Behavioral Health clinic). This program is peer run and serves as the current site for socialization and provides outreach and support help to people in achieving recovery in a safe and caring place. People can attend any of the many peer support groups, including PRIDE (listed below). 2. The P.R.I.D.E. (Peer Recovery: Independent Development and Empowerment) support group is a peer supported group for residents with mental illness which fosters leadership development and extended recovery skills to continue living independently. 3. A range of Community Support Groups, which are held and run by Peer Volunteers – these groups currently meet at the Enrichment Center as part of the peer driven continuum of care. Currently, four Community Support Groups (Dual Diagnosis, Bi-Polar and Depression Support, Emotion Regulation and Post Traumatic Stress Disorder) are held weekly. 4. The Benefits Specialist program assists consumers in applying for and obtaining public benefits such as	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Crisis Assessment and Intervention Program (CAIP) Walk In Center	CSS - OESD	Call or Walk in Clinic Offers a team of clinicians and recovery counselors that respond to crisis prevention or emergency support and referral services 24 hours/7 Days a week and services include: • Telephone and face-to-face intervention for support or crisis intervention • Onsite evaluations at Sonora Regional Medical Center • Help in connecting to community resources • Follow-up appointments • Assessment and arrangements for psychiatric hospitalization if needed • On-site evaluations and services at Tuolumne County Jail	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Native America Outreach and Engagement	CSS - OESD	A contract with the Tuolumne Me-Wuk Indian Health Clinic provides outreach and engagement services targeting Native American youth and their families. The intent of this program is to engage individuals/families/populations that are currently receiving little or no mental health services by providing services within the community and in locations other than traditional mental health service sites, by focusing on identifying needs, assisting with linkages to services, reducing barriers to services, and providing culturally competent responses to behavioral health problems within the Native American Community of Tuolumne County.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf

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Tuolumne	Older Adults Outreach and Engagement Services	CSS - OESD	A contract with Catholic Charities provides outreach and engagement services targeting older adult population (60+). The intent of this program is to engage those older adults that are currently receiving little or no mental health services by providing services within the community and in locations other than traditional mental health service sites, focusing on identifying needs, assisting with linkages to services, and reducing barriers to services.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Nurturing Parenting (NP) Early Childhood Education Services	PEI	Nurturing Parenting Program is a multi-level parenting and family support strategy to prevent severe behavioral, emotional and developmental problems in children by enhancing the knowledge, skills and confidence of parents. These services foster positive parenting skills and activities to promote positive brain development in children birth to teen years.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Bi-lingual Parent Education/Case Management Consultant Services	PEI	The bi-lingual parent consultant provides outreach, information and referral, and case management services to Latino families in Tuolumne County. Case management support includes development of an individualized needs identification and goal setting plan for each family. An important component of the individualized work has been to explore how the social expectations change from one culture to another, and how to meet those challenges in a way that support the parent (s) as well as the children. Tools are provided to recognize and manage stress caused by the process of acculturation.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Friendship Program Consulting	PEI	The Friendship Program team (a School Special Education Psychologist and School Readiness Educator) provide on-site consultation and follow up coaching to preschool and Head Start teachers, Head Start Family Advocates and parents to assist in the identification and long range management of children with behavioral health.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Bullying Prevention Program	PEI	A school-wide Bullying Prevention Program to students between the ages of 6 and 13 is the first sustainable bullying prevention program in Tuolumne County. Teachers engage students in lesson and activities which increase empathy for the victim, the person exhibiting bullying behaviors, and the bystander - and provide strategies for victims and bystanders to remain safe.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Challenge Days Program	PEI	A school violence prevention program is implemented in six Tuolumne County School Districts each year titled "Challenge Days". This one to three day curriculum creates an atmosphere of tolerance and respect on campus, helps to eliminate harassment in all its forms; enhances self-management skills of students and fosters positive connections with students.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Suicide Prevention Training Program	PEI	A local community agency and interagency oversight committee work together to implement, coordinate, monitor, and provide project management for a the suicide prevention education trainings county-wide, as well as training of trainer activities and a comprehensive community education campaign targeted to all community residents. Targeted individuals have training to help recognize and review risk, and intervene to prevent the immediate risk of suicide.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf

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Tuolumne	Staff Training	WET	Training in several areas that empower staff to provide services based in the wellness, recovery, and resilience model, are culturally competent, support the philosophy of a client/family driven mental health system, and integrates services including community collaboration.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Individual Training	WET	Individual staff and consumers/family members receive training as needed on subjects including: cultural competency, wellness, recovery, and resiliency; service integration; consumer/family driven services; and the inclusion of consumer/family members at every level.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Psychosocial Rehabilitation Training	WET	The nine module course distributed by Psychiatric Rehabilitation Consultants teaches consumers the skills needed to achieve individual recovery goals. Nine modules were purchased that assist consumers with: Basic Conversation Skills, Community Reentry, Workplace Fundamentals and more. This program is an ideal first step for a consumer seeking a mental health career pathway.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Peer Support/ Psychosocial Rehab Certificate Program	WET	A 12– unit Peer Support Certificate Program through Columbia Community College targeting staff, consumers/family members, local Latino or Native American populations, and/or other community members wanting to provide peer support in mental health. The program consists of four 3 – unit courses: Introduction to Peer Support, Advanced Skills in Peer Support, Helping Skills and basic conflict management, and a Work Experience Internship at the county or other community based organizations.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Internship and Supervision Program	WET	Provides added resources dedicated to internship opportunities, supervision and consultation with expert cultural consultants, availability of clinical supervision of hours toward licensure of existing staff and increase of participation by individuals from underserved communities in internships.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Community College Education Reimbursement	WET	Ensures financial accessibility, this program provides reimbursement on a semester-by semester basis for all educational expenses for staff and consumer/family members attending community college, including distance education courses, or the regionally sponsored mental health certificate at Columbia College.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Capital Facilities and Technological Needs	CFTN	TCBH's CTFN component of the Mental Health Services Act has been used to remodel the CAIP Walk in Crisis Center, and consolidate Behavioral Health Services from three separate buildings into one building, as well as to ready the building for the Enrichment Center use. Technology funds are available to provide the necessary technology to support mental health services, including computers, electronic record systems, etc.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf

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Tuolumne	Interagency community task force to oversee the implementation and effectiveness of case management and peer recovery strategies	INN	Current Innovation project: "Wellness: One Mind, One Body" involves collaboration and integration with Primary Health Care. Previous Innovation project: Created an interagency community task force to oversee the implementation and effectiveness of case management and peer recovery strategies that target individuals with mental illness who are currently conserved or at risk of being conserved; may require a higher level of care (inpatient hospitalization/residential placement); and are residing in residential facilities and are able to return home to live safe and independent lives. Develops new strategies that improve behavioral health services for Tuolumne County's residents with mental illness; reduce the number of repeat placements in higher or more restrictive levels of care, and provide on going evaluation of strategies identifying both successful and unsuccessful outcomes to develop a long-term strategic plan. A team of case managers provide support to this program as needed, including a licensed Psychiatric Technician (PT), for medication management.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Tuolumne	Supportive Housing Program	Housing	TCBH's Housing component of the Mental Health Services Act was used to purchase a home close to the Behavioral Health clinic in 2012 to provide permanent supportive housing for severely mentally ill residents. The house has two separate floors with 3 bedrooms on each floor; 6 tenants began living there in March, 2013.	www.tcbehavioralhealth.com http://tuolumne.networkofcare.org/mh/ http://tuolumne.networkofcare.org/content/client/176/Tuolumne-County-Behavioral-Health-MHSA-Annual-Update-2013-2014.pdf
Ventura	Screening, Triage, Assessment and Referral (STAR)	CSS- SD	STAR serves consumers of all ages who are entering the county's behavioral healthcare system. The program coordinates access so that consumers receive timely, appropriate and consistent information, thorough screening, triage, assessment, and/or linkage to appropriate mental health services and supports in an efficient, high quality, culturally sensitive manner county-wide. "Recovery Coaches," who are individuals with "lived experience," assist in engaging persons in treatment who have traditionally been un-served or underserved, while helping to ensure that the concepts of empowerment, wellness and recovery are incorporated from the beginning of the consumer's experience with the VCBH system. STAR has increased the county's ability to provide consistent, coordinated outreach, assessment, supports and referral to our community, including an increase in service to un-served and underserved individuals.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Children's Full Service Partnership	CSS - FSP	In collaboration with the Probation Department, the program provides intensive community-based services for youth between 13 and 18 years of age who are involved with the Juvenile Justice System and have been placed on formal probation. Utilizing a 'wraparound' philosophy of "whatever it takes," the program provides support to youth and families through culturally competent services. With the use of parent support, peer advocates, and intensive case management to provide counseling, education and support, the program focuses on assisting youth and their families in identifying their strengths, working together to assess needs, and designing a personal plan of care, which includes linkage and engagement to identified services and supports.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Children's Intensive Response Team	CSS - SD	Through the CIRT program, children and their families with escalating mental health issues are provided immediate access to crisis intervention services, both by phone and in person. Services are provided to children/youth up to 21 years of age throughout the county 24 hours per day 7 days a week wherever appropriate and best meets the needs of the youth and family. CIRT also provides extended intensive case management and support for up to 30 days to assist families in accessing ongoing services. Through the 30 day follow up, culturally and linguistically competent CIRT staff facilitate in-home stabilization, conduct assessments, begin family driven resiliency planning, and establish linkage and brokerage to culturally appropriate community and faith based services.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Family Access Support Team	CSS - SD	This program is designed to provide services to children, youth and their families served by the Behavioral Health Department who are at high risk for hospitalization or out-of-home placement. FAST is staffed solely with Parent Partners, who have raised a child with a serious mental/emotional disorder and receive specialized training to support others in similar situations. Parent Partners collaborate with the treatment team, providing intense home-based services to families. They model techniques to support parents in implementing the Personal Care Plan of each child and their family, so that the family better understands how to utilize interventions to alleviate crises.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)

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Ventura	Fillmore Community Project	CSS - SD	The Fillmore Community Project provides a variety of mental health treatment, supports and case management services for severely emotionally disturbed (SED) youth between 0 and 17 in the communities of Fillmore and Piru, historically underserved communities that are predominantly Latino. These communities include a significant number of migrant workers and Spanish speakers. With fully bilingual staff, services are community based, culturally competent, client and family driven and designed to overcome the historical stigma and access barriers to services in these communities.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Transitional Age Youth Full Service Partnership	CSS - FSP	This program serves transitional age youth (TAY), ages 18-25, who are diagnosed with a serious mental illness (SMI), many of whom are dually diagnosed with a co-occurring substance abuse disorder and who are risk of homelessness, incarceration or hospitalization. The program serves 15 TAY who live in a supportive, social rehabilitation environment in Camarillo, with an additional 15 TAY living independently throughout the county. The program supports individuals in moving toward personal recovery by providing stabilization and skill development to live independently and successfully within the community. Consumers receive a multidimensional range of services – "whatever it takes" to support their wellness and recovery, with an emphasis on moving toward living independently within the community.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	TAY Transitions	CSS - FSP/SD	The Transitions program serves Transitional Age Youth (TAY), ages 18 to 25 years old, with serious mental illness, by addressing their full spectrum of needs. Transitions focuses on a client driven model, which integrates wellness and recovery into its array of services, including psychiatric treatment, individual therapy, intensive case management services, group treatment and rehabilitation services. While ensuring capacity to provide services within the clinic setting, the Transitions Program ensures that clinicians and case managers also provide field-based services within homes, community, and the TAY Wellness and Recovery Center. Peer staff, or "Recovery Coaches," support consumers in the achievement of their wellness and recovery goals. The program serves primarily the Oxnard, Ventura, Conejo and Simi Valley regions of Ventura County and has been effective in expanding access to services to traditionally un-served and underserved TAY in these areas.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	TAY Wellness and Recovery Center	CSS - SD	The Transitional Age Youth (TAY) Wellness and Recovery Center, or "TAY Tunnel," serves TAY, ages 18 to 25 years old, who are recovering from mental illness and often substance abuse issues, and are also at risk of homelessness, substance abuse, incarceration and increasing severity of mental health issues. The program is a 'portal' for service access, by offering supports commonly utilized by young adults with a serious mental illness without the pressure of 'enrolling' in services. It is located in Oxnard, and outreaches to underserved TAY throughout the county, offering an array of on-site supports and referrals to TAY who historically have not accessed services through the traditional clinic system. The TAY Tunnel also provides supports for TAY as they transition out of other mental health programs on their journey of wellness and recovery. The TAY Tunnel was developed and is run by peers who support members in the design of their personal recovery plan and in creating a set of goals that are meaningful to them.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Mobile Crisis Response Team	CSS - SD	This program provides services to all adults and older adults in need of community-based crisis response services 24/7 throughout Ventura County. This is for individuals currently receiving mental health services, and for those who are un/under served within the community. For some of these consumers and their families, this may be the first contact with mental health services, so follow up calls and expedited referrals to the Screening, Triage, Assessment and Referral team are made if necessary.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Adult Recovery Tracks	CSS - FSP/SD	Provides a full continuum of services to adult behavioral health consumers with serious and persistent mental illness (SPMI), many of whom had been underserved or un-served by the county's traditional mental health system. The program was developed with multiple tracks, providing services across a spectrum of needs and focusing on the wellness and recovery of the individual. Additional tracks provide research informed or evidenced-based treatment for consumers diagnosed with psychotic disorders or mood disorders, or who are dually diagnosed with mental health and substance abuse issues. These tracks are provided in all VCBH adult clinics, serving consumers county-wide. Consumers served through all tracks receive additional support from Recovery Coaches – peer employees with lived experience who participate as members of the treatment teams.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)

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Ventura	Adult Full Service Partnership	CSS - FSP	The Adult Full Service Partnership serves individuals county-wide who are diagnosed with a serious and persistent mental illness, are leaving, or at risk of, incarceration, and are at risk or homelessness or hospitalization. This program has increased access to appropriate care for individuals with serious mental illness who historically had been inappropriately housed in the jails and often become homeless after release. The Adult FSP provides comprehensive, integrated, recovery based services utilizing the Assertive Community Treatment modality.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Adult Wellness and Recovery Center	CSS - SD	The Adult Wellness and Recovery Center serves adults who are recovering from mental illness and often also substance abuse, who are at risk of homelessness, substance abuse, incarceration and increasing severity of mental health issues. The program is a 'portal' for access by offering supports commonly utilized by individuals with a serious mental illness without the pressure of 'enrolling' in services. It is located in Oxnard, and outreaches to underserved individuals throughout the county, offering an array of on-site supports and referrals to those who historically have not accessed services through the traditional clinic system. The program also provides supports for individuals as they transition out of other mental health programs on their journey of wellness and recovery. The program was developed and is run by peers who support members in the design of their personal recovery plan and in creating a set of goals that are meaningful to them.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Peer and Family Employment and Support	CSS - OESD	Peer and family employment is fundamental to the MHSA vision of wellness and recovery as well as to the vision of Transformation of the behavioral healthcare system within Ventura County. This program provides training, advocacy and direct service for and by peers and family members through several distinct, yet related components: - Training, employment, supervision and support for individuals with "lived experience" to provide wellness and recovery based support to other consumers of the county's behavioral health system. The county has contracted with Recovery Innovations (RI), which is an organization run by and for peers, specializing in the training, employment and support of those with lived experience within the workforce. - RI peers also facilitate wellness and recovery focused classes in all the county's adult clinics and other mental health providers throughout the county. RI "Recovery Coaches" have also been integrated into the treatment teams of a number of VCBH programs, utilizing their "lived experience" to engage consumers in treatment, support them in advocating for themselves in their recovery and supporting them in developing community and spiritual supports. - Support to the local NAMI chapter and Client Network, both of which support transformation to a wellness and recovery based system through outreach and training, as well as the empowerment of consumers and family members. - The transformational liaison team, which includes individuals with personal experience with the mental health system as consumers or family members, and provides advocacy, program recommendations and serves as liaisons between the County and the consumer and family member community.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Short Term Social Rehabilitation Program	CSS - OESD	This program provides short term, voluntary residential services, as an alternative to hospitalization for consumers experiencing a mental health crisis and who require supports beyond those resources available within the community. The licensed 15 bed program serves adults throughout the county as an alternative to hospitalization for individuals presenting with sub-acute psychiatric symptoms and possible co-occurring disorders in the least restrictive environment possible, leading to a reduction in involuntary hospitalizations, incarcerations and homelessness. The program will provide up to 30 days of intensive, culturally appropriate, recovery based and individualized services to ensure stabilization and transition back into the community with appropriate community supports.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Workforce Infrastructure Development and Support	WET	Provides for staff to support the planning, development and operation of a comprehensive workforce program and drives the development of appropriate workforce. Staff will regularly assess program needs including bilingual/competency, liaison with stakeholders, coordinate with training institute management and instructors, coordinate with clinical programs and liaison with county administration.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)

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Ventura	Training Institute – Advancing Workplace Education	WET	**Training Institute Committee** – The committee is comprised of community organizations and educational institutions and meets quarterly to collaborate regarding training ideas, identification of resources and scheduling of opportunities. **Training and Conferences** – There are a wide variety of training activities and conferences to enhance and educate the mental health workforce in recovery based treatment, evidenced based practices and other topics related to the transformation of the behavioral health system.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Mental Health Career Pathways	WET	**Consumer & Family Recovery Education Center** – Provides education for consumers and family members. Educational programs are offered through Recovery Innovations California RICA, for consumer education and employment; through Ventura County Behavioral Health to increase staff knowledge regarding Wellness & Recovery concepts; and through NAMI family education programs. **Language Development Programs** – A Language Assistance Program has been developed to train and hire bilingual (Spanish/English) individuals to provide support to clinical staff when monolingual consumers and family members are receiving services in our clinics. Additional programs will be developed to increase the bilingual capacity among clinical staff including recruiting bilingual students and providing Spanish language classes. **Career Ladder Program-Secondary Education** – A collaboration with the Ventura County Community College District (VCCCD) and Oxnard High School District, this project is designed to provide outreach to high school students, including the development of an introductory course in Public Mental Health to encourage high school students to enter the mental health field. **Human Services Certificate Program** – A three course certificate program in collaboration with Oxnard College within the Human Services Department. Provides training for entry level positions to improve case management skills. Also provides college credit for those interested in pursuing advanced degrees. Program was specially designed with a foundation in wellness and recovery concepts.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Internship Programs	WET	**Clinical Training and Internship Programs –** Includes providing clinical fieldwork experience and training for students enrolled in a variety of clinical programs. **Mental Health Nurse Practitioner Program** – Clinical internships for nurse practitioners enrolled in a mental health nurse practitioner certificate program. The goal is to utilize nurse practitioners with specialty training in mental health to provide relief to clinics where it has been difficult to find a sufficient number of psychiatrists for medication management services.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Financial Incentive Programs	WET	**Educational Stipends and Scholarships –** This program is still in development and will provide financial supports in the form of scholarships and/or loan assumption for educational costs. This program will be available for staff, consumers and family members that are pursuing advanced degrees in the mental health field. The focus will be on bilingual and bicultural individuals and will also support those with lived experience. **Internship Stipends –** Provides educational stipends to students who are participating in clinical training programs. Currently these stipends are focused on bilingual students receiving training as an MFT trainee, MSW intern, and Research Assistant.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Mental Health Information System - Avatar Practice Management	CFTN - Technology	Includes the purchase and implementation of a new MIS (Management Information System) that is necessary to meet both current Department needs, as well as to comply with State and Federal requirements, which require counties to transform reporting systems to an integrated technology system supporting secure Electronic Health Records. The new system will include electronic billing, registration, data collection, electronic clinical notes, e-prescribing and lab orders, mobile clinical access, document imaging, interface with contracted community based providers, and a linkage to a personal health record that consumers can set up and control.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Short Term Social Rehabilitation Facility Improvements	CFTN - Capital Facilities	These funds have been dedicated to the site improvement of an existing facility for a short term social rehabilitation program.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)

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Ventura	Universal Prevention Project	PEI	These projects include a variety of grassroots prevention efforts that address specific needs of target communities and increase community engagement, provide public education, and promote awareness of mental health issues while reducing the stigma that prevents people from accessing services. Community coalitions include one lead agency and are made up of community partners, which may include non-profit organizations, faith-based communities, advocacy groups, and/or others who support the project goals. The coalitions are designed to "mirror" the area they serve, reflecting the cultural, ethnic/racial and linguistic make-up of the community, with each Coalition partner providing a unique contribution to the project. The projects Include area-specific, as well as community-wide, universal and targeted outreach, education and prevention strategies. Community Coalitions are currently being implemented by City Impact for the Oxnard, Port Hueneme, and Rio areas, Kids & Families Together with a county-wide project, and GLAD, with a project specifically focusing on the deaf and hard of hearing community. Other Universal Prevention Project activities include: a social marketing campaign, Wellness Everyday, designed to increase awareness and decrease stigma of mental health issues; Mental Health First Aid, which includes education of community members about mental health issues; and a comprehensive program to address bullying on school campuses.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Primary Care Project	PEI	This project provides early intervention treatment of depression for individuals 12 years and older, through a collaborative care approach between behavioral health and primary care clinics. Behavioral health clinicians are integrated into the primary health care sites utilizing IMPACT, which is an evidenced based collaborative care model for the screening, assessment, and intervention of individuals experiencing early depression. Integration of these early mental health services with primary health care is less stigmatizing and provides accessibility to services for individuals that have historically been less likely to access traditional mental health services. The Primary Care Project has been implemented by VCBH, in partnership with the Ventura County Healthcare Agency, and by Clinicas del Camino Real, and serves individuals in most regions of the county.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	School Based/Parenting Services	PEI	This program provides services to support children with behavioral problems and at-risk of more significant mental health issues, as well as their families. It includes implementation of Triple P Parenting, an evidence based, multi-level parenting support model to support families of children with emerging behavioral challenges. Focused on working with parents to identify strength-based interventions for their family, this model seeks to empower the family to address parenting issues. A wide range of community agencies throughout the county that interact with families have been trained to provide simple parenting support and direction using Triple P. Additionally, community based organizations have been contracted to provide the more intensive levels of Triple P to families throughout the county. The program includes a partnership with First 5 Ventura, to serve children 0-5 years old and their families.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Early Signs of Psychosis Intervention	PEI	The Ventura Early Intervention Prevention Services (VIPS) program assesses and treats individuals between the ages of 16-25 years old who show signs of, and experience early warning signs of psychosis. The VIPS team provides individualized treatment to address these early "prodromal" signs and to assist young people and their families to build coping skills, reduce stress, and increase performance in all areas of life. The team also educates community members who most typically interact with young people, assisting them in the identification of the early warning signs of psychosis. This program utilizes the Portland Identification and Early Referral (PIER) model, a research informed practice.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Early Supportive Services	PEI	The ESS Program provides focused, short term, research based mental health services to children with emerging mental health issues who are from stressed families, at risk of school failure or at risk of juvenile justice involvement. These are children and youth who present to the behavioral health system with behaviors that place the individual at a higher risk for mental health issues. Data indicate that, left untreated, these behaviors may escalate into more significant mental health problems.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Mixteco Engagement	INN	This project focuses on increasing outreach and access for the Mixteco (indigenous) population, primarily in the Oxnard Plains area of Ventura County. This project will be guided by an innovative approach to engaging stakeholders in the Mixteco community in a manner that incorporates the unique cultural traits of this group. The resulting peer-driven process for development, implementation and evaluation of outreach, education and service approaches will be evaluated to determine if there is increased access to services and supports by the Mixteco community.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)

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Ventura	Farm Worker Outreach	INN	This project proposes to develop an outreach and targeted mental health prevention program targeting the farm worker population, including kinship families within the population, in the Santa Clara Valley area of the County. The expected learning goal of the project is to determine whether the use of trained community members, specifically in partnership with schools and other community resources, leads to increased access to services and supports for this subset of the farmworker population.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Quality of Life Improvement Project	INN	The project seeks to examine whether the establishment of meaningful, non-clinical activities for adults with serious and persistent mental illness (SPMI) will serve as a bridge for these individuals to increase participation in clinical treatment or other daily life activities and whether those individuals experience improvement in physical and mental health outcomes. The project targets individuals with SPMI, living in board and care facilities, who are isolated and do not have access to quality of life enhancing activities – sometimes due to the severity of their illness which precludes their participation through normal avenues.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Health Care Access and Outcomes Project	INN	This project will support consumers in addressing in an integrated manner, their interrelated mental and physical health needs. The project serves adult consumers with intensive serious and persistent mental health needs through the transformation of existing full service partnership programs serving Older Adults and individuals with high utilization of IMDs who have historically been underserved in the mental health system (the Empowering Partners through Integrative Community Services (EPICS) program) . The project includes training of the entire treatment teams in "health navigation," which is intended to support consumers in accessing and navigating physical health care and ensuring treatment and management of physical health conditions. The project will also incorporate health education and health behavior support strategies with the goal of improving both physical and mental health status and promoting a more integrated approach to behavioral health care.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Ventura	Capital Development and Capitalized Operating Subsidy	MHSA Housing	The funds allocated by DMH to Ventura County and administered by California Housing Finance Authority provide permanent financing and capitalized operating subsidies to develop permanent supportive housing for MHSA-eligible individuals with serious mental illness who are homeless or at risk of homelessness. At present, 15 units completed, 24 ready for occupancy, 15 under construction and 11 in development, for a total of 65 apartments, affordable to very- and extremely- low income individuals. An additional 31 units: 15 units developed as a result of one-time extraordinary MHSA funding (preceded MHSA Housing Program) and 16 units developed, as a result of MHSA but funded from other sources.	http://www.vchca.org/behavioral-health/mental-health-services-act-(mhsa)
Yolo	Rural Children's Mental Health Program	CSS – FSP & OESD	Serves the large western rural area of Yolo County and offers a blend of MHSA services (Full Service Partnership, System Development, Outreach and Engagement) to rural children and youth and their families. Children and youth who have psychiatric disabilities and unmet or under-met mental health treatment needs are the priority population. Many of the children residing in this area are Latino, with family members who primarily speak Spanish.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Pathways to Independence for Transition-Age Youth (TAY)	CSS – FSP & OESD	Provides services and activities specifically designed to promote wellbeing and independence among TAY with mental illnesses, including foster youth and youth previously detained in Juvenile Hall. The program promotes wellness, recovery, resilience and responsible living by offering socialization, physical activities, life skills assistance and housing supports, and offers TAY-focused Wellness Center activities.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Adult Wellness Alternatives Program,	CSS – FSP & OESD	Clients receive case management support, help applying for benefits, and assistance with finding transitional and permanent housing. High-acuity FSP clients, including those re-entering the community from locked facilities, receive Assertive Community Treatment (ACT) services. The program operates a Wellness Center in Woodland, which is open weekdays until 4 p.m. The Wellness Center offers socialization opportunities, life skills classes, support groups, day trips, and creative activities to adult consumers.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Older Adult Outreach and Assessment Program	CSS – FSP & OESD	Provides seniors (aged 60+) experiencing mental illness with clinical and case management support, mental health assessments, linkage to peer support and other supports intended to help them maintain independence. Through this program the unique needs of older adult consumers are acknowledged and met. Staff coordinates with other agencies serving seniors: Adult Protective Services, Public Guardian, Public Health, In-Home Support Services and Adult Day Health.	http://www.yolocounty.org/index.aspx?page=991

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Yolo	Rural Children's Resiliency Program	PEI	Targets underserved children, youth and families in the large western rural area of the county and provides services designed to build communication and social skills, self-confidence, and resiliency using Evidence-Based Practices (EBP) and promising practice activities. In addition to building resiliency, the program seeks to reduce disparities in access to services for un-served and underserved populations living in rural areas.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Urban Children's Resiliency Program	PEI	Targets underserved children and families in the urban areas of the county (residents of Davis, Woodland and West Sacramento), including children, youth and families experiencing stress; children or youth at risk of school failure; minors involved with juvenile justice; or children or youth who have experienced trauma. This program uses EBP and promising practices to help children and youth develop resiliency, communication and social skills, and self-confidence, as well as to help identify individuals in need of mental health treatment.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Senior Peer Counselors Program	PEI	Coordinates and trains a group of peer volunteers who provide visitation and support to at-risk older adults living in the community. Goals are to combat isolation of seniors and reduce causes of depression; help seniors to continue self-care, access local resources and maintain independence; build resiliency among elder populations and reduce the risk of developing mental illnesses; assist in identifying early signs of mental instability.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Early Signs Training and Assistance Program	PEI	Seeks to increase mental health literacy, decrease stigma and discrimination, and increase early identification of mental illnesses by providing free countywide mental health community education opportunities, such as Mental Health First Aid certification; seeks to reduce overall severity of impacts of mental illnesses by assisting individuals experiencing the onset of symptoms to access early intervention services.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Crisis Intervention Training Program	PEI	Offers recurring opportunities for law enforcement officers and other first responders to receive mental health crisis intervention training, using a nationally recognized EBP model and police-approved (POST) curriculum. Officers are taught to identify signs and symptoms of mental health crisis while considering cultural and age factors, to use appropriate and compassionate responses, and to skillfully de-escalate crisis circumstances using minimal force.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Participation in Central Region WET Partnership	WET	Offers coordination of programs, resources, training needs; creates distance learning opportunities; encourages career paths; establishes collaborative structure for partnering counties.	http://www.yolocounty.org/index.aspx?page=991
Yolo	License Eligible Volunteer Interns	WET	Offers license-eligible volunteer interns opportunities to obtain hours towards licensure on a volunteer basis; helps develop new public mental health professionals.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Mental Health Professional Development	WET	Addresses the training needs of staff and providers; offers internet-based learning to consumers, volunteers and staff (including Continuing Education Units for professionals); offers training on evidence-based practices.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Student Loan Repayment Program	WET	Provides mechanisms for student loan repayment for individuals working in mental health in Yolo County.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Capital Facilities	CFTN	Planning in process. Tentative plan is to expand Wellness Center, adding fixtures, equipment and space.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Technology	CFTN	Initial plan involves providing mobile access to medical records for field staff; updating server capacity; adding electronic signature capability; adding computerized prescription capability; conversion to digital storage.	http://www.yolocounty.org/index.aspx?page=991
Yolo	Innovation	INN	The Yolo Local Innovation Fast Track Grant Program (L.I.F.T.) provides for three levels of funding to be made available to community providers and stakeholders for the purpose of encouraging and enhancing community collaboration in introducing innovative programs, events and trainings to the local mental health community on a fast track basis, while bolstering the economies of local providers and rejuvenating the local stakeholder process. Programs of the highest level, which provide direct services consistent with MHSA requirements, are eligible for reiterative funding for up to three years. Current L.I.F.T. Programs, through FY 13-14, include: Integrated Mental Health Services; Harm-Reduction Model Co-Occurring Disorder Program; Greater Access Program (GAP) for homeless, un-diagnosed, un-served or un-benefitted adults.	http://www.yolocounty.org/index.aspx?page=991

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Yolo	Housing	Housing	Planning for MHSA Housing is in process, with tentative plans to build 15 housing units integrated in a larger complex and in close proximity to shopping, bus lines, mental health and social services, a medical clinic and the Wellness Center.	http://www.yolocounty.org/index.aspx?page=991