

SCC Behavioral Health Integration DRAFT Preliminary Internal Communications (April 2013)

Purpose

Inform community partners and MHD and DADS staff about the process to plan and implement the integration into a single Behavioral Health Department; to clarify the process, timeline and roles associated with integration; and to ease people's minds about what this means for them personally and professionally.

Timing

The first message should go to staff as soon as possible and a similar communication should go out to CBOs/contractors shortly thereafter. Then, brief bimonthly updates should be sent with links to meeting minutes, emerging products, etc., as progress is made.

Method

The first communication and brief updates will be via InfoMail, and more detailed communications will be posted to the website.

Content

MHD and DADS Merging into One Behavioral Health Department – a message from Bruce Copley and Nancy Peña

This is an exciting time for our County and departments, as we undertake a merger and full integration of MHD and DADS. Consistent with the Board of Supervisors' priorities and the new HHS Roadmap, the integration also reflects the latest best practices for professionals in our fields, and responds to the mandates in Federal health care reform. The primary driver for the integration effort however, is that an integrated Behavioral Health organization is best for consumers and their families. This is a commitment we all share, and it will spur us through the transition.

Planning for integration is underway now. We have a Steering Committee comprised of several stakeholders from our system partners, consumer groups, contract agencies and diverse communities. The Executive Directors and Division Directors from both departments are meeting regularly to coordinate, and have launched Work Groups to do the detailed planning for integration. Work Groups address the following areas:

- Integration Model Recommendations
- Quality
- Administrative Services
- Budget/Financial Support and Contracts Administration

- Family & Children's Services; Transition Age Youth Services
- Adult Services; Senior Services
- Primary Care Based Services
- Communications

Our plan is to first determine the desired model for integration, then plan for integrated support systems and basic infrastructure---these areas will be integrated first before other functional areas. Planning for integration of all areas will proceed and implementation will be phased, with completion targeted for June 2014.

We will keep you updated regularly on the progress via e-mail, and will have all materials posted on the website if you want to know more.

You can stay involved by reading the updates here and going to the website so you can look at summaries and emerging products, and by all means, asking questions of your Division Director or either of us.

We know you may have other questions and may have some concerns about what this means to you. We don't anticipate any job loss, or major changes in job duties. That said, your work may change, as our work as a single organization will change. We anticipate more collaboration, more fully integrated approaches to prevention, early intervention and treatment, and a heightened sensitivity to the complex, multiple conditions that many of our consumers bear. This is fully consistent with where we have been going as separate departments, and as a County in the last several years. We look forward to your participation in making the integration smooth, efficient and effective for consumers.