



SANTA CLARA COUNTY MENTAL HEALTH SERVICES ACT

# MHSA Annual Update Report to MHB Older Adult Committee July 8, 2013



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Revised: June 21, 2013

# MHB MHSA Agenda



1. Overview of MHSA Key Performance Measures by Component - CSS / PEI / INN / WET / CFTN
2. MHSA Older Adult Programs
  - a) Progress Update
  - b) Proposed Changes
3. Next Steps
4. Comments/Questions



# Performance Measures by MHSA Component



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## MHSA Key Performance Measures by Plan Component

Community Services & Supports (CSS)	Prevention & Early Intervention (PEI)	Innovation (INN)	Workforce Education & Training (WET)	Capital Facilities & Technology Needs (CFTN)
<ul style="list-style-type: none"> <li>• Reduction of subjective suffering from mental illness</li> <li>• Increase meaningful use of time and capabilities in school, work, activity</li> <li>• Reduce homelessness and increase safe and permanent housing</li> <li>• Increase access to substance abuse treatment</li> <li>• Increase natural networks of supportive relationships</li> <li>• Reduction in multiple foster care placements</li> <li>• Reduction in incarceration/juvenile justice involvement</li> <li>• Reduction in disparities in service access</li> <li>• Increase in self-help and consumer/family involvement</li> </ul>	<ul style="list-style-type: none"> <li>• Reduction of Stigma and Discrimination</li> <li>• Reduction of Disparities in Access to Mental Health Services</li> <li>• Reduction of Psycho-Social Impact of Trauma</li> <li>• Prevention and Early Intervention of At-Risk Children, Youth and Young Adult Populations experiencing onset of serious Psychiatric Illness</li> <li>• Reduction and Prevention of Suicide Risk</li> </ul>	<ul style="list-style-type: none"> <li>• Increase access to underserved groups</li> <li>• Increase the quality of services, including better outcomes</li> <li>• Promote interagency collaboration</li> <li>• Increase access to services</li> </ul>	<ul style="list-style-type: none"> <li>• Have a workforce fully integrated and reflective of the cultural and ethnic diversity of consumers and family members at all levels of the workforce, including employees, interns, and volunteers</li> <li>• Provide employment opportunities and integrated support mechanisms throughout the system</li> <li>• Enhance staff training and develop opportunities and career pathways for County and Community Based Organization (CBO) staff</li> <li>• Provide training and educational opportunities in the mental health system</li> </ul>	<ul style="list-style-type: none"> <li>• Provide a comprehensive electronic medical record for consumers that can be shared in a secure &amp; shared across service providers (EHR Project)</li> <li>• Create a single data repository for all of the MHD information (EDW Project)</li> <li>• Provide computer labs and basic PC skills training for consumers in established Wellness Centers across the County (CLC Project)</li> <li>• Enhance the current Mental Health Department website (WEB Project)</li> <li>• Provide a housing and/or bed availability database (BHX Project)</li> <li>• Create secure, real-time data system of client records accessible across agencies to provide a cross agency view of registered consumer's demographic, service &amp; other information (CHR Project)</li> <li>• Improve access to high risk populations in the downtown &amp; east San Jose service areas; areas with the highest concentration of at-risk youth (Medi-Plex Project)</li> <li>• Improve the current space for Self-Help Center to have a computer training room &amp; several activity rooms which will allow multiple group activities (DTMH Project)</li> </ul>



# MHSA Older Adult Programs



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# MHSA Older Adult Program

## OA01 Older Adult FSP

### Progress Update



The total number of Older Adult FSP consumers served in FY2012 was 39. This was a 19.7% increase in FY2012 from that of FY2011; and consumers were served beyond targeted capacity.

In terms of race and ethnicity, the data reflects:

- 4.9% increase in White,
- 40% increase in African-American,
- 22.2% increase in Hispanic, and
- 32.9% increase in Asian/Pacific Islander
- There were no Native American consumers served in either FY2011 or FY2012.
  - Thus, the goal for FY2014 is to increase the penetration rate of Native American seniors.

# MHSA Older Adult Program

## OA01 Older Adult FSP

### Progress Update



Furthermore, in FY2012:

- The number of EPS admissions for older adults enrolled in Older Adult FSP programs decreased by 3% compared to FY2011;
- The number of hospitalization decreased in FY2012 by 66% compared to FY2011; while,
- The number of arrests remained at zero for both FY2011 and FY2012

In all, the total number of Older Adult FSP consumers served from FY2007 through FY2012 was 162.

**MHSA Older Adult Program**  
*OA01 Older Adult FSP*  
*FY2013-14 Proposed Changes*



**There are no proposed changes for FY2014.**



# MHSA Older Adult Program

## *OA02-04 Older Adult BHSOS*

### *Progress Update*



On June 1, 2011, 348 members of the community attended the Santa Clara County Older Adult Summit. These members included:

- seniors and their families,
- caregivers,
- advocates,
- service providers,
- community leaders, and
- government officials from throughout Santa Clara County.

# MHSA Older Adult Program OA02-04 Older Adult BHSOS Progress Update Continue..



Subsequently, the Mental Health Department (MHD) outlined a 3-year implementation process to address the concerns and recommendations from the Summit.

- Effort is expected to significantly improve the quality of life and wellbeing of seniors residing in Santa Clara County;
- The MHD, through collaboration with the Aging Services Collaborative, will ensure that recommendations from the Summit and the subsequent strategies being implemented are shared with key leaders and organizations in the senior-serving community.

# MHSA Older Adult Program OA02-04 Older Adult BHSOS Progress Update Continue..



**Training for geriatric care is critical, thus:**

- **Clinicians and therapist participated in a new training opportunity that allowed them to improve their therapeutic skills in helping older adults dealing with depression;**
- **This project provides training and evaluation to participating clinicians in a well-established clinical intervention skill set called Cognitive Behavioral Therapy;**
- **Designated provider sites will utilize the PHQ9 depression screening tool as part of their individual projects, which will help track the rates of depression in their systems by reporting the number of individual consumers screened for depression.**

# MHSA Older Adult Program OA02-04 Older Adult BHSOS Progress Update Continue..



Two long-term goals for this project group will be:

- To develop a process for utilizing the PHQ9 as a monitoring tool across the various settings; and
- To insure organizations involved in this project have a mechanism in place to address positive responses to screening questions.

# MHSA Older Adult Program OA02-04 Older Adult BHSOS Progress Update Continue..



Golden Gateway Comprehensive Older Adult Program is intended to provide comprehensive services to SMI Older Adults (60+), who may be physically; linguistically or culturally isolated; or homebound with primary health and other age-related conditions through:

- Comprehensive Outreach & Education,
- Engagement,
- Assessment and Referral, and
- Treatment and Support Services

# MHSA Older Adult Program OA02-04 Older Adult BHSOS Progress Update Continue..



**In FY2012, the number of Older Adult Consumers served was 107 (1.9% increase from FY2011). Moreover, from FY2009 to FY2012, the Golden Gateway program served 355 seniors of which:**

- 18<sup>0</sup>% were Latino,**
- 1.4<sup>0</sup>% were African American,**
- 0.6<sup>0</sup>% were Native American,**
- 14.1<sup>0</sup>% were Asian/Pacific Islander,**
- 18<sup>0</sup>% were White, and**
- 41.4<sup>0</sup>% were of Unknown Ethnicity**

# MHSA Older Adult Program OA02-04 Older Adult BHSOS Progress Update Continue..



**In FY2013, the budget included one-time funds to support a collaboration with the City of San Jose. The expected outcomes of the project:**

- Geriatric Specialists employed by the City of San Jose to work at the community centers will be better able to identify key mental health issues faced by the senior participants at their center and as requested by senior participants, link individuals to mental health interventions.**
- Senior participants of the community centers will be more knowledgeable about mental health issues and services, in addition, more senior participants will be better able to address mental health related issues they personally experience.**

# MHSA Older Adult Program

## OA02-04 Older Adult BHSOS

### Progress Update Continue..



#### Project activities to-date include:

- The training of 14 City of San Jose Community Center staff on Mental Health First Aid (MHFA);
- March 2013 was the first month of a 12 month community education program for senior participants;
  - 737 individuals attended the “Close Family and Relationships” presentation offered by MHD;
- Assigned a Sr. Mental Health Program Specialist & Health Care Program Analyst to manage weekly capacity of FSP providers;
  - Open capacity is communicated to the Mental Health Call Center



# MHSA Older Adult Program OA02-04 Older Adult BHSOS FY2013-14 Proposed Changes



The Older Adult collaboration with City of San Jose was initially slated to start July 2012. However, actual start of the program occurred in March 2013.

- The project is MHSA funded on a one-time basis at \$280,000;
- Due to delay start of the program, the expenses projected for FY2013 is approximately \$90,000 and the remaining balance will be spent during FY2014;
- The one-time amount slated for FY2014 will be \$190,000, the remaining amount of the contract.

# MHSA Older Adult Program

## *PEI P4 - Older Adult PEI Services*

### *Progress Update*



**MHSA Older Adult Program**  
*PEI P4 - Older Adult PEI Services*  
*FY2013-14 Proposed Changes*



# MHSA Older Adult Program

## *INN-04 Elders' Storytelling Project*

### *Progress Update*



**Asian Americans for Community Involvement (AACI) and Gardner Family Care Corporation (GFCC) were awarded a contract to implement the INN-04 “Storytelling” Project which was implemented in FY2013.**

- To date, a total of 39 Spanish & Vietnamese Speaking Seniors have participated in the project.**

# MHSA Older Adult Program

## *INN-04 Elders' Storytelling Project*

### *Progress Update*



**Of the 39 participants, 15 seniors completed the program while 24 individuals are currently active participants;**

- **Age range of 13 Vietnamese seniors was 60 to 80 years with the average being 69 years;**
  - **Vietnamese participants consisted of seven males and six females;**
- **Age range of 11 Latino seniors was 64 to 78 years with the average age being 72 years;**
  - **Spanish Speaking participants consisted of four males and seven females;**
- **The majority of participants reported having limited English proficiency.**

**MHSA Older Adult Program**  
*INN-04 Elders' Storytelling Project*  
*FY2013-14 Proposed Changes*



**There are no proposed changes.**



# MHSA Adult Prevention & Early Intervention (PEI) Programs



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# MHSA Adult Program

## *PEI P4: Primary Care / Behavioral Health Integration for Adults and Older Adults Progress Update*



### •**Reduction of Stigma & Discrimination**

#### •Primary Care Behavioral Health Contractors-

- roughly 450\* underserved individuals (aged 16+) identified & treated July-Dec 2012. 86% = 26+ years old (~390\*).
- for 100% of individuals served this is was the first time they had access to Behavioral Health (BH) services through their primary care clinics.

#### •VMC clinics-5000+ served by BH in primary care.

- Additional 2 VMC clinics to launch IMPACT in FY 14
- Combined: 10 of 26 BH clinicians completed clinical skills training for IMPACT

### •**Reduction of Disparities in Access to MH Services**

- All services are provided by Safety-Net providers to the underserved

\*Contractor Data is only approximate given that there were steep learning curves with the implementation of new Electronic Medical Records and launch of BH services one month apart from each other and data entry errors and omissions.



# MHSA Adult Program

## *PEI P4: Primary Care / Behavioral Health Integration for Adults and Older Adults Progress Update*



- **Reduction of Psycho-Social Impact of Trauma**

- Initial Data\*: Trauma is not a primary diagnosis for pts in PC but is present in many

- **Prevention and Early Intervention of At-Risk Children, Youth and Young Adult Populations experiencing onset of serious Psychiatric Illness**

- Approximately 25 of 450\* individuals served by Primary Care Behavioral Health contractors were aged 16-25, none experiencing first break

- **Reduction and Prevention of Suicide Risk**

- For those with depression screening, suicidality is addressed with every screen.
- In VMC implementation, approximately 2.8%\*\* of all pts screened June 2013 experience suicidal thoughts at time of screening

\*Contractor Data is only approximate given that there were steep learning curves with the implementation of new Electronic Medical Records and launch of BH services one month apart from each other and data entry errors and omissions.

\*\* VMC Data is an estimate until such a time as EMR is launched (Oct 2013) to track this systematically.

# MHSA Adult Program

## *PEI P4: Primary Care / Behavioral Health Integration for Adults and Older Adults FY2013-14 Proposed Changes*



Effective June 2013- all of the PEI P4 contracts (New Refugees, PEI Short-Doyle, and Primary Care Behavioral Health) will be consolidated under one contract monitor from the current four contract monitors.

Effective FY 13-14- all contractor PEI P4 data will be analyzed and consolidated by Decision Support: a) quicker analysis across all three vendors, b) easier segregation of patient data across multiple metrics, and c) by individual contractor. (Currently each contractor provides only aggregate data to SCCMHD)

An additional \$1.0 million in one-time MHSA Funds will be continued in VMC in FY 14.

IMPACT Training and technical assistance will continue into FY13- expanding from 8 clinics to 10 clinics (4 community clinics; 6 VMC)



# Next Steps

## FY2013-14 MHSA Annual Update



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# FY2013-14 MHSA Annual Update Schedule



July 2013	August 2013	September 2013	October 2013
<ul style="list-style-type: none"> <li>MHD to participate in MHB Committee meetings in July to discuss progress updates and preliminary plans for Draft FY2013-14 MHSA Annual Update.</li> <li>Hold MHSA SLC meeting on July 29, 2013 to go over preliminary plans for Draft FY2013-14 MHSA Annual Update.</li> </ul>	<ul style="list-style-type: none"> <li>Publish Draft FY2013-14 MHSA Annual Update Plan on August 2, 2013 for the required 30-day public comment/review period. Draft plan will be posted on the SCCMHD website. <a href="http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx">http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx</a></li> </ul>	<ul style="list-style-type: none"> <li>September 1, 2013 is the end of the required 30-day public review comment period – End of Business Day.</li> <li>September 5, 2013 MHSA SLC meeting. SLC to vote on Draft FY2013-14 MHSA Annual Update Plan.</li> <li>September 9, 2013 MHB Public Hearing to vote on Draft FY2013-14 MHSA Annual Update Plan.</li> </ul>	<ul style="list-style-type: none"> <li>SCCMHD to request the County Board of Supervisor (BOS) to adopt Draft FY2013-14 MHSA Annual Update Plan as endorsed / approved by MHB and MHSA SLC tentatively Scheduled October 2013 TBD.</li> </ul>



# Comments / Questions

Your Voice Matters!