



HEALTH AND HUMAN SERVICES AGENCY BEHAVIORAL HEALTH & RECOVERY SERVICES



POLICY AND PROCEDURE

Service Area: Mendocino County Behavioral Health and Recovery Services

Subject: Mental Health Services Act Community Program Planning (CPP)

Subject Matter
Expert:

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Previous or
Referenced Policy
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POLICY:

Mendocino County Health and Human Services Agency (HHSA) Behavioral Health and Recovery Services (BHRS) will support programs funded through the Mental Health Services Act (MHSA), also known as Proposition 63, which will be conducted in accordance with the California Department of Health Care Services Guidelines and Regulations for Mental Health Services Act Programs, Mental Health Services Oversight and Accountability Commission (MHSOAC), as well as all State and Federal guidelines for Mental Health programs, and any Mendocino County Policies that pertain to MHSA programs. The County MHSA oversight team in collaboration with MHSA stakeholders will develop a Three-Year Plan, tri-annually which will outline the Mental Health Service Programs that will be provided during that time period. MHSA programs will fall under one of the five components of the Mental Health Services Act, and will maintain the goals of improving outreach and access to unserved and underserved populations, in a linguistically and culturally competent manner, and that are client and family focused. Programs will be community based, integrated, with an emphasis on evidence based care, targeted at early intervention, reducing longevity of illness, and improving self-sufficiency of those whose lives are affected by serious mental illness.

Decisions of what and how programs are included in the Three-Year Plan will be determined through the Community Program Planning Process. Stakeholder input and feedback on MHSA programs will be collected through the CPP Process, community

and consumer needs will be collected and used to evaluate and prioritize which programs will be funded through MHSA. The plan development process for any component or special project of MHSA shall actively seek the feedback of stakeholders both formally and informally. Stakeholders shall be made aware of Community Program Planning events through a wide variety of culturally & linguistically competent venues.

Programs that receive MHSA funding will follow the regulations and philosophies that pertain to the type of funding received. MHSA funded programs will report to stakeholders and the County MHSA oversight team regarding progress toward meeting needs and reaching MHSA goals.

Mendocino County MHSA oversight team develops a calendar of the MHSA Stakeholder Forums which are available in the primary cities throughout Mendocino County and held wherever possible in consumer friendly venues. The time, location and frequency of the forums vary based on stakeholder feedback each year.

The purpose of forums is to:

- a. Obtain feedback from MHSA Stakeholders on how MHSA programs are working to meet needs and overcome barriers, including collection and discussion of issues that need resolution (see Issue Resolution Process below);
- b. Identify what needs are yet unfilled,
- c. For MHSA programs to share program updates and information, and
- d. For the County MHSA oversight team to share overarching MHSA news and changes.

MHSA providers are expected to attend MHSA Stakeholder Forums. MHSA providers will communicate with their staff and consumers about MHSA Stakeholder Forums, by posting fliers and information about MHSA Stakeholder Forums in MHSA service locations in areas easily visible to consumers and other stakeholders, and encouraging consumer attendance at MHSA Stakeholder Forums. MHSA Forums are held at varying locations around the County to ensure attendance from a wider variety of stakeholders. Wherever possible, MHSA providers should attempt to incorporate feedback from MHSA stakeholders into programs, and reflect those changes in the next forum updates. Changes that cannot be immediately incorporated are tracked in a "Needs List" that is reviewed and discussed during the MHSA three year planning and annual plan update processes. Additionally, during the MHSA Stakeholder Forums Issue and Issue Resolutions will be collected, reviewed and responded to when possible and appropriate by the MHSA provider.

In addition to the MHSA Stakeholder Forums, there are a number of additional Community Program Planning Process activities and events that are outlined in the MHSA Three-Year Plan that are designed to collect feedback from stakeholders and provide information about MHSA programs.

Definitions

Community Program Planning Process (CPP): The CPP Process is a process defined by California Code of Regulations toward the development and review of MHSA programs. CPP utilizes community collaboration through clients, client family members, agencies, organizations, and other community members who work together to share information and resources in order to fulfill a shared vision and goals. The Community Planning Process will be done in a culturally competent manner, providing equal quality of service to all ethnic, cultural, and linguistic communities. Disparities are identified, and strategies are developed to eliminate disparities. The Community Planning Process will strive to, when appropriate, encourage client and client family members that are able to access a full range of Mental Health services that are provided in a comprehensive and coordinated manner. MHSA programs are to be client and family driven, which means that the client has the primary decision making role in identifying his/her needs. Client strengths and inclusive decision making will be utilized in determining the services and supports that are most effective and helpful for the client. Client input will be the main factor for planning, policies, service delivery, evaluation, and the determination of outcomes of MHSA programs. MHSA programs will be focused on the principles of Wellness, Recovery, and Resilience, under the philosophy that mental health consumers are empowered, respected, and to develop social connections, self-responsibility, and self-determination.

Stakeholder: Stakeholders are defined by the Department of Health Care Services (DHCS) and the Mental Health Services Oversight and Accountability Commission (MHSOAC) as individuals or entities with an interest in mental health services in the State of California including but not limited to: individuals with serious mental illness, clients of MHSA programs, providers of mental health or related services, family members, educators, representatives of law enforcement, and other agencies or other community members that interact with individuals with mental illness (primary care providers, social service agencies, substance use treatment services, etc.), that have an interest in the mental health issues, consumers or their families, or an interest in Mental Health Services Act programs. Stakeholders shall include representatives of unserved and/or underserved populations and shall reflect the diversity of the demographics of the County including but not limited to geographic location, age, gender, and ethnicity.

PROCEDURE:

1. **MHSA Stakeholder Forums:** The Mendocino County MHSA oversight team will facilitate stakeholder forums to provide opportunities to communicate with MHSA stakeholders. Communication will include informing about MHSA programs and activities occurring, and will provide opportunity for stakeholders to give input and

feedback on MHSA programs and activities. Communication from stakeholders will be collected and utilized in drafting and planning for program changes during the MHSA Three-Year Plan or Annual Plan Update process. The MHSA oversight team will strive to ensure that Forums are held in locations that encourage the participation of community stakeholders that reflect the diversity and demographics of the county.

- a. Forums will be scheduled to encourage consumer and family member participation as stakeholders.
 - b. Forum location and times will be responsive to stakeholder input and accessibility considerations for representatives of varying geographic, gender, ethnic, and age groups.
 - c. Forums will be advertised in local media and on the MHSA website. The MHSA oversight team will attempt to collect evidence of the advertisement of forums in the form of newspaper clippings, sample fliers (with locations), etc.
 - d. MHSA service providers shall attend and provide information about their programs.
 - e. Forums will include education and, when necessary, training to stakeholders on the purpose of the forums and community planning process.
- 2. Behavioral Health Advisory Board (BHAB) Meetings:** The BHAB is a diverse board made up of representatives of all county districts and different perspectives on behavioral health services. The Behavioral Health Advisory Board advises Behavioral Health and Recovery Services on strategies and feedback toward improving the quality of care, maintaining goals of recovery, human dignity, and the opportunity for individuals to meet their full potential.
- 3. MHSA Joint Stakeholder Meetings:** At least once a year, and additionally as needed, MHSA Stakeholder Forums and Behavioral Health Advisory Board Meetings will hold a Joint Stakeholder Meeting. This is an opportunity for both bodies and stakeholders to provide input and feedback on the MHSA Three-Year Plan or Annual Plan Update.
- 4. Quality Improvement Meetings:** Quality Improvement Committee (QIC) meetings are an opportunity for beneficiaries of specialty mental health services and the community to learn information about client care, service accessibility, and capacity, along with consumer satisfaction. Where data or feedback pertain to MHSA services, this information will be collected and utilized in determining Community Program Planning Process.

5. **Consumer Feedback Events:** The Mendocino County MHSA oversight team in coordination with MHSA service providers will conduct events that are focused on collecting input from consumers of MHSA services and their family members.
 - a. Consumer Feedback Events will be scheduled to increase consumer participation.
 - b. Consumer Feedback Events will be planned to consider the accessibility of underserved or underrepresented ethnic, geographical, and age groups.

6. **Three-Year Program and Expenditure Plan & Annual Plan Updates:** The Mendocino County MHSA oversight team will write a MHSA Three-Year plan, in coordination with stakeholders, tri-annually that outlines the programs, budget, and intentions for the three year period. This plan will be updated annually, Annual Plan Updates, to address changes needed during the implementation of the Three-Year plan. The Three-Year Plan will address each of the five components of MHSA.
 - a. **30 day review Process:** MHSA Three-Year Plans, Component Plans, Annual Plan Updates, and amendments to plans shall be made available for Public Review by posting in publicly accessible venues for a minimum of 30 days. A Public Comment Hearing shall be held and facilitated with the Mental Health Advisory Board to collect stakeholder recommendations regarding the plan. Comments, questions and feedback can be collected during the 30 day review period. During the Public Comment Hearing additional comments, questions, and recommendations are collected regarding the plan and all are answered in writing with the final draft of the plan, and a summary of the substantive recommendations will be included with the plan. The MHSA providers shall list and maintain evidence of the public posting dates.
 - b. **Approval by the Board of Supervisors:** Following the 30 day review and response to Public Comments the Plan is submitted for approval by the Board of Supervisors, following the Board of Supervisors scheduling protocol to ensure proper calendaring of the agenda item. MHSA programs will utilize proper planning and timeliness to ensure that all Plan and Updates are completed and Reviewed with sufficient time to go before the Board of Supervisors before the new Fiscal Year.

7. **Issue Resolution Process:** The Issue Resolution process is designed to formalize concerns and issues that arise regarding MHSA programs and to formally respond to those issues. The intent is to provide constant feedback regarding programs and to work together to improve all services. All MHSA programs shall make available Issue Resolution Forms to MHSA stakeholders, without the need for consumers to ask for them (available in lobby, on website,

etc.). All MHSA programs will encourage stakeholders that have complaints, concerns, questions or issues, to voice them. Where the stakeholder is unwilling or unable to complete the Issue Resolution form him/herself, the MHSA program will assist in the completion or finding a designee to assist in the completion of the form, so that the review of the issue and the resolution can be documented and shared with other MHSA stakeholders. Issues will be formalized by completing the MHSA Issue Resolution Request Form. These forms will be reviewed by the pertinent MHSA provider and the MHSA County oversight team. The MHSA provider will provide a formal response to the issue addressing how it will be resolved. All issues and their formal resolutions will be logged in a formal Issue Resolution Log maintained by the County MHSA oversight team. The Issue Resolution Log will include the date the issue was received, a brief description of the issue, a brief description of the resolution, and the date the issue was resolved. An attempt will be made to determine whether the stakeholder was satisfied with the process. Collection of Issues and discussion of summaries of Issue Resolutions will be addressed during the Community Planning Process MHSA Stakeholder Forums, so all stakeholders have the opportunity to learn of the resolution and the MHSA program responsiveness to stakeholders.

- a. MHSA service providers will collect Issue Resolution forms from participants in their programs and submit them to the Mendocino County MHSA oversight team for monitoring and addressing trends.

8. MHSA Annual Summary: The Mendocino County MHSA oversight team will produce a document at the end of each fiscal year which assesses the capacity of MHSA programs to implement and provide the services and programs outlined in the MHSA Three-Year Plan/Annual Plan Update.

- a. The Annual Summary will include a review of the strengths and challenges/limitations of service providers.
- b. The Annual Summary will include a review of the bilingual proficiency of service providers.
- c. The Annual Summary will include a review of the diverse cultural, ethnic, linguistic, and other underserved groups represented among service providers compared to the population being served.

REFERENCES:

CCR, title 9, sections 3200.270, 3300, 3310, 3315, 3610, 3650
 WIC Sections 5846 (c), 5847, 5848, 5650, 5651
 DMH Information Notice 10-01(check for more current)

ATTACHMENTS:

Issue Resolution Form