

Approved MHSA Program and Expenditure Plan
Emerging Plan Elements – as of January 30, 2014

Plan Element	Status
1. Crisis Residential Program	Telecare contract approved by the Board of Supervisors on January 14th. Amount up to \$2 million. Estimated start March 2014.
2. Assessment and Recovery Center	Construction of building being completed. Staffing positions being determined. Estimated start Spring of 2014.
3. Master Leasing Program	SHELTER, Inc selected through a competitive bid process; negotiating contract – estimated \$325,000 in funding.
4. Rapid Access to support same day urgent appointments.	All three Clinical Specialist positions are filled and plan element initiated. Filling three half-time Registered Nurse positions are pending.
5. Transition Age Youth Full Service Partner Program in East County	Youth Homes contract approved by the Board of Supervisors on January 14 th . Estimated \$665,000. Estimated start March 2014.
6. Adult Full Service Partner Program in East County	Hume Center selected through a competitive bid process; contract negotiated and awaiting Board of Supervisors approval – estimated \$907,493.
7. Transitional Residential Program for Transitional Age Youth in Central County	\$500,000 allotted for programming; \$150,000 allotted for facility renovation. County General Services developing plans and cost estimate for facility renovation.
8. Purchase vans and hire three Community Support Workers to provide transportation for consumers served at each regional clinic.	Vans purchased. One Community Support Worker has been hired in East County, and interviews are in process to fill the positions in Central and in West County.
9. Three Clinical Specialists to provide financial management services for consumers – one per adult clinic.	The position in West County has been filled; interviews are in process to fill the East and Central County positions.
10. Two Clinical Specialists and one clerk to provide utilization review of MHSA funded services to ensure appropriate level of care and appropriate documentation	One Clinical Specialist and the Clerk have started; the second Clinical Specialist position is in the County's hiring process for being filled.
11. Three Clinical Specialists, one for network providers, one for Adult Services, and one for Children's Services to perform	The position for network providers has been filled.

various quality assurance functions for MHPA funded plan elements	
12. Vocational Services Innovation Proposal	To be addressed during upcoming three year planning process.
13. Older Adult Peer Project Innovation Proposal	To be addressed during upcoming three year planning process.
14. Transportation Innovation Proposal	To be addressed during upcoming three year planning process.

**Contra Costa County MHSa CPP
Focus Group Schedule**

Transitional Age Youth (TAY)							Complete?
1	TAY	West County	Tuesday January 28, 2014	1:00 - 2:30 pm	Fred Finch	2523 El Portal Drive, Suite 201 San Pablo, CA 94806	X
2	TAY	East County	Friday January 31, 2014	4:00 - 5:30 pm	People Who Care Children's Association	2231 Railroad Avenue Pittsburg, CA	X
3	TAY	Central County	Monday February 3, 2014	3:30 - 5:00 pm	Rainbow Center	2118 Willow Pass Rd, Suite 500 Concord, CA 94520	X
Older Adults							
4	Older Adults	Central County	Thursday January 30, 2014	1:00 - 2:30 pm	Pleasant Hill Manor	40 Boyd Road, Pleasant Hill, CA 94523	X
5	Older Adults	West County	Tuesday February 4, 2014	1:00 - 2:30 pm	Lifelong	Friendship Manor 564 Stege Ave, Richmond, CA 94804	X
+	Older Adults	Central County	Thursday January 30, 2014	3:00 pm - 4:30 pm	Pleasant Hill Manor	40 Boyd Road, Pleasant Hill, CA 94523	
LGBTQ							
6	LGBTQ	County-wide	Monday February 3, 2014	1:00 - 2:30 pm	Rainbow Center	2118 Willow Pass Rd, Suite 500 Concord, CA 94520	X
Adult Consumers and Family Members							
7	Adults	West County	Tuesday January 28, 2014	10:00 - 11:30 am	Rubicon	2500 Bissell Avenue Richmond, CA 94804	X
8	Adults	Central County	Thursday January 30, 2014	10:00 - 11:30 am	Anka	1850 Gateway Blvd, Suite 900 Concord, CA 94520	X
9	Adults	East County	Friday January 31, 2014	10:00 - 11:30 am	Hume Center	555 School Street Pittsburg, CA	X
Asian/Pacific Islander Community							
10	API	West County	Tuesday February 4, 2014	10:00 - 11:30	CHAA	207 37th St Richmond, CA 94805	X
Children/Parents/Families							
11	Children/Parents/ Family	Central County	Thursday January 30, 2014	3:30 - 5:00 pm	County	2425 Bisso Lane, Suite 200 Concord, CA 94520	X
12	Children/Parents/ Family	West County	Tuesday February 4, 2014	3:30 - 5:00 pm	County	303 41st St Richmond, CA 94805	X
People Experiencing Homelessness							
13	Homelessness	West County	Tuesday February 4, 2014	6:30 - 8:00 pm	County Homeless Programs	847 Brookside Drive Richmond, CA 94801	X
14	Homelessness	Central County	Thursday February 13, 2014	6:30 - 8:00 pm	County Homeless Programs	2047 Arnold Industrial Way #C Concord, CA 94520	
Latino Community							
15	Latino & African American Children/Parents/ Families	East County	Friday January 31, 2014	12:00 - 1:30 pm	De Familia a Familia	Pittsburgh Health Center 2311 Loveridge Rd. Pittsburgh, CA 94565	X
16	Latino Community	West County	Wednesday February 5, 2014	5:30 - 7:00 pm	Building Blocks for Kids	312 9th Street Richmond CA 94801	
17	Latino Community	Central County	Wednesday February 19, 2014	5:30 - 7:00 pm	La Clinica de la Raza	2000 Sierra Road Concord, CA 94518	
Provider Focus Groups							
18	Children Providers	County-wide	Tuesday February 25, 2014	10:00 - 11:30 am	CCMH	2425 Bisso Lane Concord, CA 1st Floor Conf. Rm.	
19	TAY Providers	County-wide	Tuesday February 25, 2014	1:15 - 2:45 pm	First Hope Clinic	1034 Oak Grove Rd. Concord, CA	
20	Adult Providers	County-wide	Thursday February 27, 2014	1:00 - 2:30 pm	CCMH	1320 Arnold Drive #242 Martinez, CA	
21	Older Adult Providers	County-wide	Thursday February 27, 2014	3:00 - 4:30 pm	CCMH	1320 Arnold Drive #242 Martinez, CA	

From: <William.Walker@hsd.cccounty.us>
To: <William.Walker@hsd.cccounty.us>
Sent: Friday, December 20, 2013 5:11 PM
Subject: HSD All Staff Message: Behavioral Health Staffing Update

I wanted to let you know of a staffing change in our Behavioral Health Division.

Steven Grolnic-McClurg left his position with us as Director of Mental Health Services on December 13 to join the City of Berkeley as their Manager of Mental Health Services. We wish him well in his new position.

As you know, the Behavioral Health Division has been working hard over the past two years to create an integrated system that provides improved care for community residents with complex behavioral health needs. The focus has been on breaking down silos between the systems of care and maximizing resources while designing an infrastructure to support these integration efforts. This included combining our Mental Health, Homeless and Alcohol and Other Drugs services. These efforts are closely aligned with those occurring at the state level and in similar communities regarding the development of behavioral health services.

In order to better conform to statute and regulation and current California practice, I am recommending that Cynthia Belon, L.C.S.W. be appointed to Acting Mental Health Director as part of her duties as Behavioral Health Director. I presented this to the Mental Health Commission on Thursday and will be bringing the formal request for her permanent appointment to the Board of Supervisors in January.

I am working with Cynthia and our Personnel Officer to identify an appropriate administrative structure that better reflects our integration efforts, which will likely include the creation of the Deputy Director for Behavioral Health. This position will have oversight for many of the day-to-day operations, particularly in the mental health programs.

Please feel free to contact me with any questions.

William B. Walker, M.D., Director and Health Officer
Contra Costa Health Services
50 Douglas Drive, Suite 310
Martinez CA 94553
Ph: (925) 957-5403
Fx: (925) 957-5409

KATHI McLAUGHLIN
LORI HEFNER

February 2, 2014

District 1 Supervisor John M. Gioia
District II Supervisor Candace Andersen
District III Supervisor Many N. Piepho
District IV Supervisor Karen Mitchoff
District V Supervisor Federal D. Glover
Contra Costa County Board of Supervisors
651 Pine St.
Room 107
Martinez, CA 94553

Dear Members of the Board:

On Tuesday, February 4th, Dr. Walker will be asking you to appoint Cynthia Belon, the Behavioral Health Director, as the Mental Health Director. Two and a half years ago Dr. Walker asked you to create a Behavioral Health Division, combining Mental Health, Alcohol and Other Drugs, and Homeless Services into one comprehensive division in order to better serve our consumers with multiple or overlapping needs and diagnosis. This was done with minimal community input and included one division unique to this county--Homeless Services. Usually Behavioral Health Divisions or Departments include Public Health or Social Services with AOD and Mental Health. I have not been able to find a single instance where Homeless Services (as separate from Public Health) were included. At the same time you were asked to appoint Cynthia Belon, the Homeless Services Director, as the Behavioral Health Director. Ms. Belon *overnight* moved from supervising less than thirty employees and a budget of about \$20 million, to supervising more than 500 employees with a combined budget of about \$200 million. At that time she was the Division Director with the least amount of experience supervising the smallest budget and the least number of employees. Mental Health advocates questioned this at the time but were willing to withhold judgment pending performance. The integration of these three divisions has been going on now for nearly three years. The County has spent *hundreds of thousands* of dollars on hand-picked consultants to facilitate this process. What do we have to show for it? Are our clinics integrated? Can consumers "enter through any door" and receive whatever services they need seamlessly? If you are a child experiencing mental health problems that are exacerbated by your family's homelessness or yours or your parent's substance abuse can you get all the services you need in one place? If you are an older adult experiencing depression and experiencing financial, physical, or emotional abuse from your caregiver do you have

somewhere to go or someone to talk to the first time you need help? In short, if you are a consumer of mental health services who is affected by homelessness or substance abuse are you better off today than you were before these divisions were combined? I believe the answer is a resounding "NO!!!" That's not to say that some consumers aren't better off--but it is to say that in most instances we are better off either because of services provided under the Mental Health Services Act, or because of the dedication of line staff who do their best to get us the services we need, **despite not because of**, leadership from the Health Services Department or the Behavioral Health Services Division!

More than a year ago over 150 mental health consumers, mental health providers, educators, youth advocates, attorneys, disability rights activists, members of labor unions, County Mental Health Commissioners, union representatives and citizens crowded into the Board of Supervisor Chambers to loudly and strongly tell the Board that we were angry, frustrated and very disappointed by the less than transparent means by which the new Mental Health Director, Steven Grolnic-McClurg, was recruited, vetted and appointed. We told the Board that the interview process developed by the Behavioral Health Director was less than fair and appeared to be designed to discredit other candidates in favor of Mr. McClurg. We told the Board we had tremendous concerns about his lack of experience and preparation as a mid-level non-profit manager to lead such a complex public division, with a \$140 million budget and over 400 employees. This was so far outside of his experience that we questioned his reasons for accepting the position. To his credit, after being hired as Mental Health Director in January of 2013, Mr. McClurg worked hard to dispel our concerns. He modeled the transparency which had been sadly lacking while the Behavioral Health Director was the Acting Mental Health Director, and was on his way to regaining the badly broken trust of the Mental Health community when--less than a year later--he abruptly resigned in order to take a similar position, but with a much smaller agency in terms of budget, employees, and complexity!

We find ourselves asking "Why"? Why did he accept the position in the first place? Why did he resign so abruptly? Was he overwhelmed by his position? Was there any other underlying reason possibly associated with his willingness to be more open and transparent? And most importantly, why did Dr. Walker and Ms. Belon fail **once again** to listen to the community? Why rush to appoint Ms. Belon as the *permanent* Mental Health Director? What has changed from a year ago that made Ms. Belon an appropriate choice? After Suzanne Tavano left as Mental Health Director, why did the County go through two recruitment processes instead of just appointing Ms. Belon at that time? We (the Mental Health community) were told that Ms. Belon lacked the qualifications to be Mental Health Director. What has changed? It is certainly not that she has achieved the trust and support of the Mental Health Commission, the Mental Health Services Act (MHSA) Consolidated Planning and Advisory Workgroup (CPAW) or the support of most Mental Health Advocates! Even more importantly, she has failed to gain the trust of the Mental Health Division's supervisors and managers (although they can't speak publicly for fear of reprisals the atmosphere of distrust and fear is palpable the minute you walk into the Mental Health offices)! It is also clear that neither Ms. Belon's attitude towards the Mental Health community, nor her commitment

to transparency and open communication have changed. As you may know, the Mental Health Services Act brings in \$40 million in *new* money every year. The act also requires that stakeholders, which must include consumers and family members as well community members, must be included in the planning and evaluation of programs funded by MHSA. In Contra Costa that group is known as CPAW. Ms. Belon had difficulty participating in CPAW meetings when she was Acting Director a year ago, actually commenting to some participants that CPAW was a joke. She hasn't been able to find the time to attend our meetings since Mr. McClurg left and I don't remember her attending any meetings in support of Mr. McClurg when he was hired. Has nothing been learned from the rupture of public trust by not holding a professional, nationwide recruitment, seriously seeking out the most competent mental health leadership in the country as we did with Donna M. Wigand and Suzanne Travano? In fact, she is often absent from everything! According to many sources, she is seldom at her desk and often away on vacation or home sick. How will she be able to do two jobs when she can't do the one she was hired for?

In the last two recruitments, California mental health leadership was so appalled by Dr. Walker's treatment of Ms. Wigand and Ms. Tavano that many qualified professionals chose not to apply for what had been, at one time a prestigious, respected, and influential position. When and why did Contra Costa Mental Health move from being a state and national leader in consumer and family oriented programs to being a division that can't recruit strong, courageous leaders who are committed to transparency and working in collaboration with those affected by mental illness? At one time Contra Costa County had the programs, services, and leaders that the state and nation looked to for exemplary programs that supported recovery and resiliency. We were leaders! Sad to say we are not leaders any more. Are we appointing Ms. Belon to this important position because we are too ashamed to admit that quality mental health professionals don't want to work for us? If that is the case then ***shame on us!***

We are calling on you, as our elected representatives, to halt this permanent appointment. We understand the need to appoint an Acting Mental Health Director, because the law requires us to have someone designated in that capacity. However; under the Welfare and Institutions Code (W&I) Number 5604.2 the Mental Health Commission MUST : "Review and make recommendations on applicants for the appointment of a local director of mental health services. The board shall be ***included*** in the selection process prior to the vote of the governing body." At the December meeting of the Commission Dr. Walker announced his intention to hire Ms. Belon without a selection process. He did not include the Commission in the process as required by law, he simply told them what he intended to do. On January 23rd the Commission voted unanimously, with one abstention, to request that you postpone appointing Ms. Belon as the Mental Health Director. We are asking you to support the Mental Health Commission's request by making Ms. Belon's appointment temporary because Dr. Walker's unilateral action appears to violate state law and could put our funding and services at risk. We also ask you to direct Dr. Walker to immediately hire an appropriate search firm experienced in nation-wide searches for this type of professional. We are also asking that you ensure that the community, including

consumers and family members, as well as the Mental Health Commission (as required by law) be **included** in the review and interview process. Given the less than objective process designed by the Ms. Belon last time, we ask that you provide direction and oversight to ensure that the process is not only transparent but also fair, balanced, and unbiased. At a minimum we ask that all candidates be asked the same questions, be given equal time, and that all interview panelists be required to state any conflict of interest and refrain from making personal comments or observations about the candidates. If either Dr. Walker or Ms. Belon opposes these requests we call for their immediate resignations. This may seem harsh but the level of disregard shown to us, the consumers and loved ones of these services *again* has created a permanent rupture of our trust in these individuals. Our mothers, fathers, sons, daughters, sisters, brothers, aunts and uncles, and grandparents deserve first class care in this county. We deserve no less! The current leadership seems totally unable to adequately address persistent issues of distrust and lack of transparency and inclusion.

Once again we stakeholders are now required to have the strength and fortitude to keep pointing this out to Contra Costa County leadership and this is at the cost of our own personhood, mental wellness, self-care, and resiliency. It is not our job to train these people for these high-level public administrator positions for which they are inadequately prepared. We demand the quality of leadership for those suffering serious and persistent mental illness, these individuals and their families that hang in the balance and the huge public sums at stake.

Respectfully,

Kathi McLaughlin
706 Soto St.
Martinez, CA 94553
(925) 372-6886
kathimclaughlin@comcast.net
CPAW Member
Co-Chair CPAW Innovation Committee
Co-Chair CPAW Membership Committee
Member CPAW Steering Committee
Board Member, Martinez USD
Delegate, California School Boards Assn.
Member, Conditions of Children Task Force,
Cities, Counties and Schools Partnership

Respectfully,

Lori Hefner, MBA, MA, NCG, CLPF
25 A Crescent Dr.
Pleasant Hill, CA 94523
(925) 200-7192
Lori@LoriHefner.com
CPAW Member
Member CPAW Aging and Older Adult
Committee
Member CPAW Steering Committee
Gerontologist, Fiduciary and
Conservator

Cc
Dr. William Walker, MD
Health Officer for Contra Costa County and the
Director of Contra Costa Health Services

CPAW AGENDA ITEM READINESS WORKSHEET

CPAW Meeting Date: February 6, 2014

Name of Committee/ Individual: Children's Committee

- 1. Agenda Item Name:** Appointment of Mental Health Director
- 2. Desired Outcome:** CPAW consideration and support of a letter regarding the appointment of a Contra Costa Mental Health Director
- 3. Brief Summary:** The Children's Committee met on 01/28/14 and discussed the developments regarding the appointment of a new Contra Costa Mental Health Director.
- 4. Background:** The previous Mental Health Director, Steve Grolnic-McClurg left Contra Costa County in December 2013 to accept a similar position with the City of Berkeley. The Health Services Director, Dr. William Walker, has requested that the Board of Supervisors approve the appointment of the Behavioral Health Services Director, Cynthia Belon, as Acting Mental Health Director.

The Children's Committee discussed the above mentioned topic & some concerns were raised that in addition to the other age related services, that whom ever is selected for the position wouldn't be sensitive to Children's Mental Health needs or be open to Community & Stakeholder input. So we drafted a letter to the B.O.S. asking that these be considered when making their decision on this issue.

5. Specific Recommendation:

- That CPAW consider the attached letter and vote whether to support the letter..

6. Anticipated Time Needed on Agenda: 15 minutes

7. Who will report on this item? Ryan

To Whom it May Concern:

The Children's Committee of C.P.A.W. would like to strongly urge a thoughtful deliberation of restructuring of the County Behavioral/Mental Health System and then give great consideration to the kind of leadership it places in charge of our most vulnerable populations. We would like to recommend consultation with other counties who have had effective reorganization (i.e. San Mateo) and even discussions with other counties (i.e. Alameda) to learn and not make similar mistakes. Once the organization is solid, then a search for strong leaders can begin. In both our System of Care and its leadership we stress the importance of transparency, innovation, inclusion, and co-occurring capacity. This Committee is specifically concerned that a M.H. Director/Deputy Director should be appointed who is sensitive & proven in Children's Mental Health issues & helps build the support around children and families & who is willing to be open minded & include Community & Stakeholder input. Children and families makes up an enormous portion of county services and needs to be represented in leadership with strong, experienced, & capable managers.

Please consider the need for a more transparent process, inclusion of all stakeholders (Providers, Consumers, Family Members of Consumers, & Leaders), and the call for dynamic, competent, and effective leadership.

Thank you for your time and consideration.

Ryan Nestman
Co-Chair C.P.A.W. Children's Committee
C.P.A.W. Member
Family Member of a Child Consumer
Consumer

**Contra Costa County
MHSA Program and Fiscal Review
Preliminary Draft Methodology**

MHSA/Finance Committee
February 5, 2014

Purpose of Review Methodology

- Compliance with statute, regulations, policy
- Support goals and priorities of Three Year Plan
- Result in best services and supports

1

Schedule

- Written methodology by March 1, 2014
 - Obtain input
- Four MHSA funded programs reviewed by April 1, 2014
 - Contact programs by mid-February
 - Conduct reviews in late March
- Four draft reports by June 1, 2014
 - Incorporate program response
- Final report by June 30, 2014
 - Incorporate Executive Summary

2

I. Program and Fiscal Compliance

- Federal Office of Management and Budget Circulars (OMB)
- Welfare and Institutions Code (WIC)
- California Code of Regulations (CCR)
- State Mental Health Performance Contract (MHP)
- MHSA Three Year Program and Expenditure Plan
- Contra Costa County Contract Terms and Conditions
- Generally accepted accounting principles

3

II. Target Population

- MHSA Community Service and Supports (CSS) definition of Full Service Partnerships (FSP)
 - Serve the Seriously Mentally Ill (SMI)
- Prevention and Early Intervention (PEI)
 - Persons at risk for SMI
- Sample chart reviews

4

= Also includes SED children

III. Needs of Community/Population

- Align with needs, strategies and priorities of Three Year Plan
 - Contract language consistent with Three Year Plan
- Include results of existing consumer satisfaction report
- Consumer, family member, service provider interviews

5

IV. Provide Services

- Review monthly service summaries
 - Summarizes number, type of services
- Site visit matches supporting documentation with monthly summary
 - chart reviews, interviews

V. Number of Individuals Served

- Review monthly service summaries
- Site visit matches supporting documentation with monthly summary
 - Logs and charts

VI. Outcomes

- Six domains
 - Incidence of restriction
 - Incidence of psychiatric crisis
 - Meaningful activity
 - Psychiatric symptoms
 - Consumer satisfaction/quality of life
 - Cost effectiveness
- Provide context
 - Pre-post intervention
 - Control/experiment group
 - Year to year
 - Comparison of similar programs
 - Accepted standard

VII. Fiscal Sustainability

- Analyze risk factors
 - Diversified portfolio
 - Credit viability
 - Audited financial statement
 - Assets and liabilities (balance sheet)
 - Income statement
 - Cash flow
 - Organizational maturity experience/expertise

9

VIII. Fiscal Audit

- Performed yearly
- Review for auditor findings or opinions
 - Concern over internal controls
 - Financial data accuracy

10

IX. Oversight

- Review internal control systems
 - Appropriate delegation, segregation of duties

11

X. Support for Allowable Expenses

- Review relevant Federal Office of Management and Budget (OMB) circulars
- Review transactions to ensure policies applied correctly
- Personnel
 - Payroll system and timecards
- Operating expenses
 - Receipts for all expenses incurred
 - Test allocation formulas
 - Test transactions within system
 - Could establish threshold dollar amount
 - Randomly sample

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XI. Expenses Invoiced in Appropriate Year

- Review relevant OMB circulars
- Review transactions to ensure policies applied correctly
 - Test system regarding billing in correct time frame
- Review year end closing entries and adjustments for compliance
 - Verify accruals

13

XII. Justified Administrative/Indirect Costs

- Review relevant OMB circulars for identification and allocation of indirect costs and/or development of indirect cost rate
- Review allocations to ensure policies applied correctly

14

XIII. Claiming Process Integrity

- Reconcile financial statements to financial system
 - Break out costs by program
 - Audited financial statement
- Match level of service delivery with funding

15

XIV. Sufficient Administrative Support

- Review history of administrative response
- Match with administration/indirect costs charged to program

16

XV. Maintain Required Insurance Policies

- Inspect documents for compliance with contract
 - General Liability
 - Workers Compensation
 - Professional Liability
 - Certificate of Insurance
- Verify policies are current and in required amount(s)

17

XVI. HIPAA Requirements

- Match HIPAA Business Associate Attachment in contract with implementation of a protocol for safeguarding protected patient health information

18

XVII. Sufficient Resources to Evaluate Program Outcomes and Quality

- Review history of program response
- Match with staff resources allocated to program

19

XVIII. Training and Oversight of Clinical Documents

- Coordinate with existing Utilization Review (UR) system
 - Level I and II
 - Synch with schedule and type of existing UR
- Identify problem(s)
 - Review training/oversight effort

20

XIX. Communicate with Contract Manager

- Review history of communication with contract manager
 - Regularity/type
 - Problems in communication
 - Sharing of issues
- Include corrective plan, if appropriate

21

Programs Selected This Fiscal Year

Suggested parameters for selecting programs to participate in the first four program and fiscal reviews:

- Be in operation at least a year
- Select at least one contract program and one county operated program
- Be large enough to be significant (>300K), but small enough to complete a review in a day (single site)
- Select one from each of the major areas of FSP, Housing, System Development and PEI
- Be of interest to the MHC for immediate attention

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Next Steps

- Guidance from this committee (today)
- Further develop methodology and tool
- Provide refined methodology for review and input
- Review four programs
- Draft four reports
- Draft final report

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MHSA COMMUNITY ENGAGEMENT UPDATES TO CPAW

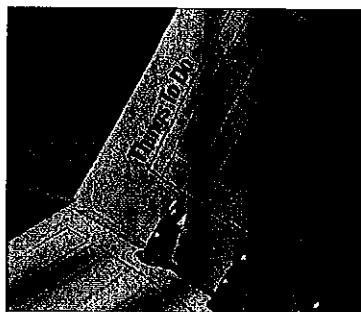
February 6, 2014

Resource Development Associates

Roberta Chambers, PsyD

Today's Agenda

- Overview of the CPP Process
- Overview of Community Engagement & Types of Events
- Status Updates on Community Engagement Events
- Discussion/Feedback



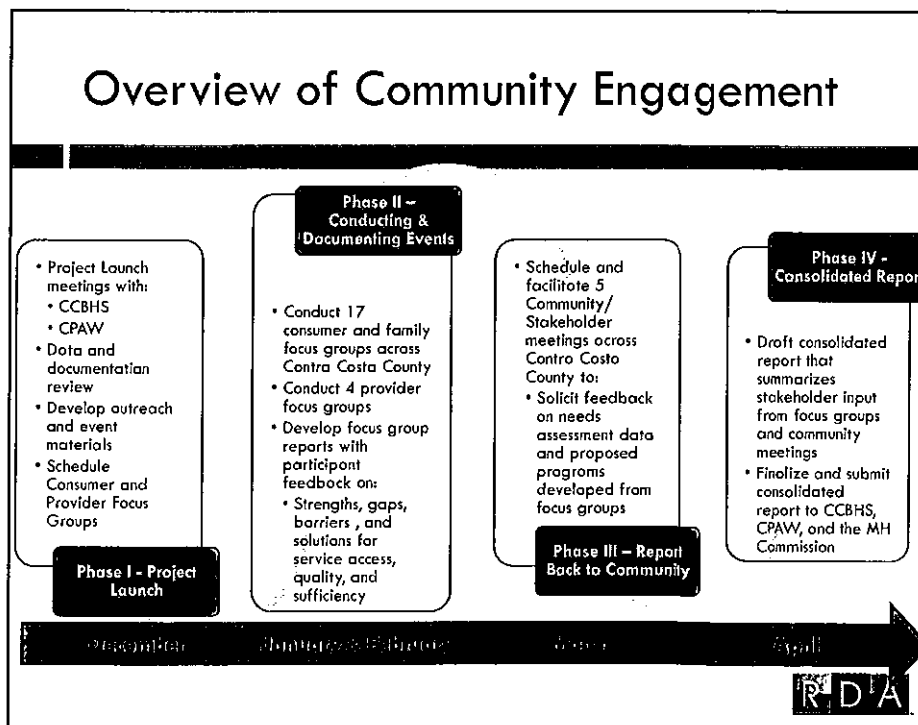
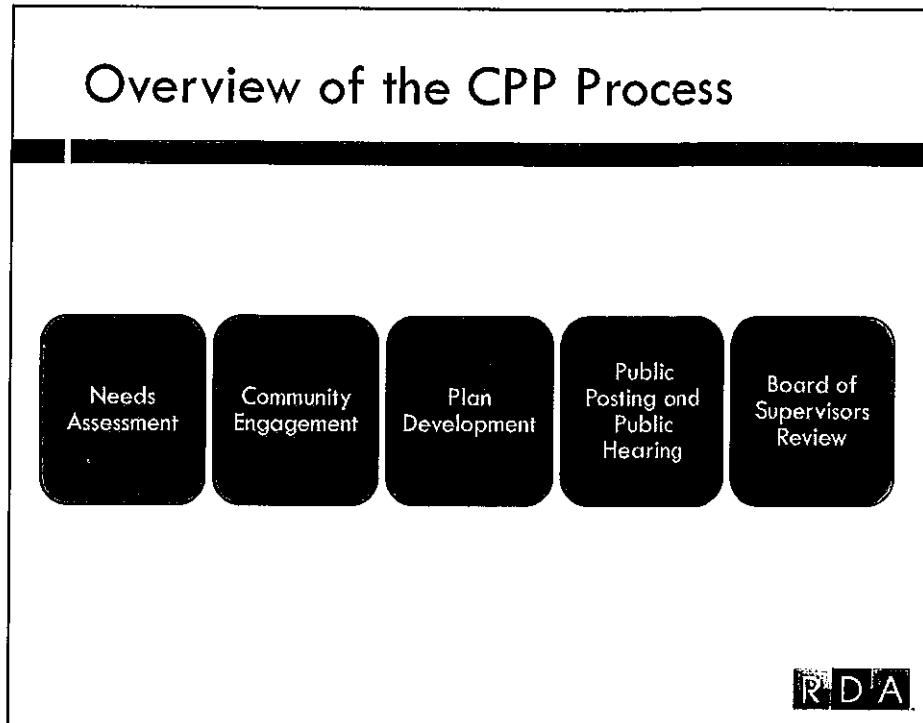
Community Program Planning Process

- The MHSAs intend that there be a **meaningful stakeholder process** to provide subject matter expertise to the **development of plans focused on utilizing the MHSAs funds at the local level.**
- Language related to the CPP had always been included in the MHSAs and, after Assembly Bill (AB) 1467 was enacted in 2012, this process was strengthened.



MHSA Values





Definitions

- **Consumer/Family Focus Group**
 - Facilitated discussion
 - 6 – 15 participants
 - Participants self-identify as either consumer or family member
- **Provider Focus Group**
 - Facilitated discussion
 - 6– 15 participants
 - Participants self-identify as a service provider for an MHSA funded program in Contra Costa County
- **Community Forum**
 - Presentation to validate focus group findings and gather additional information
 - 30 – 50 participants from various stakeholder groups and the community



Consumer Family Focus Groups

□ Focus Groups Remaining:

Target Pop.	Region	Host Agency	Date/Time
Older Adults	Central County	CCMH	2/19 at 3:00 pm
People experiencing homelessness	Central County	Concord Shelter	2/13 at 6:30 pm
Latino Community	Central County	La Clinica	2/19 at 5:30 pm

□ Focus Groups Completed to Date:

- Please see the next slide.



Target Pop.	Region	Host Agency	# Attended
Adults	West County	Rubicon	12
TAY	West County	Fred Finch	13
Adults	Central	Anka	6
Older Adult*	Central	CCMH	6
Children/ Parents/ Families	Central	CCMH	2
Adults	East County	Hume Center	4
Latino & African American Families	East County	De Familia a Familia	41
TAY	East County	People Who Care	14
TAY	Central County	Rainbow Center	39
LGBTQ	County-wide	Rainbow Center	28
API Community	West County	CHAA	3
Older Adults	West County	Lifelong	14
Children/ Parents/ Families	West County	CCMH	0
People experiencing homelessness	West County	CCMH	12
Latino Community	West County	BBK	7
Grand Total			201

Provider Focus Groups

□ 4 Provider Focus Groups:

SOC	Date	Time	Location
Children	Tuesday 2/25	10:00 – 11:30 am	2425 Bisco Lane, Concord, CA 1st Floor Conf. Rm.
TAY	Tuesday 2/25	1:15 – 2:45 pm	First Hope Clinic, 1034 Oak Grove Rd, Concord, CA
Adult	Thursday 2/27	1:00 – 2:30 pm	1320 Arnold Drive #242, Martinez, CA
Older Adult	Thursday 2/27	3:00 – 4:30 pm	1320 Arnold Drive #242, Martinez, CA



Community Forums

- Presentation to validate focus group findings and gather additional information
- 30 – 50 participants from various stakeholder groups and the community
- To be scheduled for March
 - West
 - Central
 - East
 - CPAW
 - Commission



Successes/Challenges

- New approach to CPP for Contra Costa County
- Fast timeline to coordinate and conduct community engagement events
- Good turnout in most focus groups
- Engaged service providers



Discussion/Feedback

- CPAW Input
 - CPAW/MHC Joint Forum
 - 1 additional focus group for any who have not yet participated
- Outreach Suggestions for Provider F.G.s
- Community Forum Venue Suggestions
- Community Forum Times (Morning/Afternoon/Evening)
- Do you have any questions and/or comments about the Community Engagement?
- Do you have any questions and/or comments about the Community Planning Process?



Contact Us!

Roberta Chambers, PsyD
rchambers@resourcedevelopment.net
510.488.4345 x102



CPAW Meeting Calendar

February 2014

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6 CPAW - 3-6pm - 2425 Bisso Ln., Concord	7	8
9	10 CPAW Membership Committee - 3- 5pm - 1340 Arnold Dr., Ste. 112, Martinez	11	12 Social Inclusion - 10am - 12pm - 2118 Willow Pass Rd., Ste. 500, Concord	13	14 	15
16	17 	18	19 CPAW Housing Committee - 9-10:30am - 1340 Arnold Dr., Ste. 112, Martinez	20	21	22
23	24 CPAW Innovation Committee - 2- 4pm - 1340 Arnold Dr. Ste. 112, Martinez	25 CPAW Children's Committee - 3:30 - 5pm - 1340 Arnold Dr., Ste. 200, Martinez	26 CPAW Aging and Older Adults Committee - 2-3:30pm - 2425 Bisso Ln., Ste. 100, Concord	27 CPAW Steering Committee - 3-5pm - 2425 Bisso Ln., Concord	28	