



**Humboldt County  
Department of Health and Human Services  
Mental Health Branch**

**Mental Health Services Act  
Program and Expenditure Plan  
Fiscal Year 2009/2010 Update**

**COUNTY CERTIFICATION  
MHSA FY 2009/10 ANNUAL UPDATE**

County Name:                     Humboldt                    

<b>County Mental Health Director</b>	<b>Project Lead</b>
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Humboldt County Department of Health and Human Services Mental Health Branch 720 Wood Street Eureka, Ca 95521	

I hereby certify that I am the official responsible for the administration of public community mental health services in and for said County and that the County has complied with all pertinent regulations, laws and statutes for this Annual Update. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code Section 5891 and California Code of Regulations (CCR), Title 9, Section 3410, Non-Supplant.

This Annual Update has been developed with the participation of stakeholders, in accordance with CCR, Title 9, Sections 3300, 3310(d) and 3315(a). The draft FY 09/10 Annual Update was circulated for 30 days to stakeholders for review and comment and a public hearing was held by the local mental health board or commission. All input has been considered with adjustments made, as appropriate.

All documents in the attached FY 2009/10 Annual Update are true and correct.

Karolyn Rim Stein  
Signature

3/4/09  
Date

M.H. Branch Director  
Title  
Local Mental Health Director/Designee

## **Description of Community Program Planning and Local Review Processes MHSA FY 2009/10 ANNUAL UPDATE**

County Name:     Humboldt    

**Instructions:** Utilizing the following format please provide a brief description of the Community Program Planning and Local Review Processes that were conducted as part of this Annual Update.

### **1. Briefly describe the Community Program Planning Process for development of the FY 2009/10 Annual Update. It shall include the methods for obtaining stakeholder input. (suggested length – one-half page)**

The MHSA FY 2009-2010 Update planning process was built upon knowledge gained from ongoing MHSA activities and Local Review processes including:

- The initial Community Services and Supports planning process
- Community Services and Supports (CSS) implementation activities
- 2006 Community Services and Supports Progress Report
- 2007 Community Services and Supports Progress Report
- Community Services and Supports FY05/06 Remaining Funds Plan
- Community Services and Supports One-Time Augmentation Plan
- Community Services and Supports Expansion Plan
- Prevention and Early Intervention Planning Process

Humboldt County conducted an extensive planning process for the CSS component of MHSA. Many of the individuals who participated in the CSS planning process as Mental Health Board members, clients and family members, and Department of Health and Human Services (DHHS) staff provided insight and lessons learned for further MHSA planning.

MHSA planning has continued with thoughtful, deliberate planning efforts by the Humboldt County Mental Health Board, clients and family members, and Humboldt County DHHS staff to ensure inclusion of required stakeholders.

Significant changes were made to the on-going planning processes. In addition to conducting targeted DHHS-sponsored MHSA stakeholder planning meetings, requests were made for local community-based organizations and associations that represent and/or serve diverse stakeholders to include MHSA at regularly scheduled meetings. This dramatically increased the number of individuals providing input.

Most recently, in conjunction with the MHSA Prevention and Early Intervention (PEI) planning activities, input was also provided for CSS programs.

## 2. Identify the stakeholder entities involved in the Community Program Planning Process.

The initial Community Services and Supports planning process component of the MHSA included:

- Proposition 63 Steering Committee
- Six regional meetings (see Table 1 below)
- Thirteen targeted stakeholder meetings (see Table 2 below)
- Four age-specific advisory groups
  - Children and youth
  - Transition age youth
  - Adult
  - Older adult
- Community Strengths & Needs Survey
- Client interviews.

Table 1: Six regional meetings

<b>Location</b>	<b>Number of participants</b>
• Eureka	30
• Arcata	24
• Willow Creek	9
• Orick	15
• Fortuna	8
• Redway	15

Table 2: Thirteen targeted stakeholder meetings

<b>Stakeholder Group</b>	<b>Number of participants</b>
• Client consumers	19
• Families of clients	10
• Education/schools	16
• Law enforcement/courts/Probation	6
• Native American community	15
• Hispanic/Latino community	4
• Asian/Pacific Islander community	4
• DHHS Mental Health Branch organizational providers	8
• Community and primary care providers/clinics	30
• Transition-age youth	13
• Gay/lesbian/bisexual/transgender community	5
• Homeless community	23
• DHHS Mental Health Branch staff	8

MHSA education and/or stakeholder input collected from:

- DHHS Family/ Community Resource Center monthly meeting
- Transition Age Youth, first onset of mental illness planning meeting
- Juvenile Justice Commission
- Domestic Violence Coordinating Council, Eureka
- Domestic Violence Coordinating Council, Redway
- The NET (Community Network)
- NAMI (National Alliance on Mental Illness)
- Fetal Infant Mortality Review/Child Death Review Team
- CAST (Child Abuse Services Team)
- Hope Center community meeting
- Hope Center MHSA PEI input meeting
- Paso a Paso meeting
- AIDS Task Force
- Community partners
- In Home Support Services Public Authority Advisory Board
- DHHS organizational provider meeting
- Positive Indian Families Network
- Willow Creek regional meeting
- Redway regional meeting
- McKinleyville regional meeting
- Eureka MHSA PEI public hearing.
- Alcohol Tobacco and Other Drug Prevention Committee
- Mental Health Board
- Mental Health Branch all-staff meetings
- Alcohol and Drug Advisory Board
- DHHS Human Services Cabinet meeting.

**3. Describe how the information provided by DMH and any additional information provided by the County regarding the implementation of the Community Services and Supports (CSS) component was shared with stakeholders.**

Information regarding MHSA planning and implementation is provided through a variety of means including:

- Targeted DHHS-sponsored MHSA stakeholder planning meetings
- DHHS staff participation at meetings of local community-based organizations and associations that represent and/or serve diverse stakeholders (examples listed above).
- Informational materials and outcomes provided for:
  - Program-specific staff meetings
  - DHHS Newsletter
  - DHHS Trends reports
  - Mental Health Branch "Branch Bits" newsletter

- Mental Health Branch Data Book
- Mental Health Board updates
- Local newspapers
- DHHS public education activities.

**4. Attach substantive comments received about the CSS implementation information and responses to those comments. Indicate if none received.**

Through careful review of the CSS TAY work plan implementation goals during the course of the MHSA PEI planning process, stakeholder input led to the discontinuation of the CSS TAY work plan to be replaced with the inclusion of a TAY focused strategy in a PEI Project.

**5. List the dates of the 30-day stakeholder review and public hearing. Attach substantive comments received during the stakeholder review and public hearing and responses to those comments. Indicate if none received.**

The 30-day Public Comment period was from February 3, 2009 through March 4, 2009. The Public Hearing followed the Mental Health Board Meeting on February 19, 2009 from 1:45 to 2:30pm at the Humboldt County Department of Health and Human Services Rainbow Room, 720 Wood Street, Eureka, Ca 95501 (Attachment A)

The MHSA FY 2009-2010 Update Plan was available in an electronic format at: the Humboldt County Department of Health and Human Services, Mental Health Branch, Mental Health Services Act website: <http://co.humboldt.ca.us/HHS/MHB/MHSA/> (Attachment B)

The MHSA FY 2009-2010 Update Plan were available in a hard copy format and comments could be placed in the "MHSA Comment Box" at:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• Humboldt County Department of Health and Human Services Professional Building: 507 F Street, Eureka</li> </ul>   | <ul style="list-style-type: none"> <li>• Humboldt County Department of Health and Human Services Mental Health Branch: 720 Wood Street, Eureka</li> </ul> |
| <ul style="list-style-type: none"> <li>• Humboldt County Department of Health and Human Services, Mental Health Branch, Children Youth and Family Services: 1711 3<sup>rd</sup> Street, Eureka</li> </ul> | <ul style="list-style-type: none"> <li>• Hope Center 2933 H Street, Eureka</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Humboldt County Department of Health and Human Services Garberville Office 727 Cedar Street</li> </ul>   | <ul style="list-style-type: none"> <li>• Humboldt County Department of Health and Human Services Willow Creek Office 77 Walnut Way</li> </ul>             |

**Comments for the MHSA FY 2009-2010 Update Plan could also be addressed to:**

Department of Health and Human Services  
Mental Health Branch  
Attn: Jaclyn Culleton  
Mental Health Services Act  
720 Wood Street Eureka, Ca, 95501

**By phone:**  
(707) 441-3770

**Or toll free at:**  
(866) 320-8911

**Or by email to:**  
mhsacomments@co.humboldt.ca.us

- An informational flyer was sent to stakeholders regarding the Plan's availability, including where to obtain it, where to make comments, and where/when the public hearing would be held (Attachment C)
- Flyers were mailed to over 30 locations around the county, including public libraries, health care clinics, tribes, and senior centers
- Flyers were e-mailed to recipients on more than 10 local e-mail distribution lists including family/community resource centers, organizational providers, and Latino Net
- Plans were e-mailed or mailed to all persons who requested a copy
- An advertisement was placed in the local newspaper on February 15<sup>th</sup>, 2009 with the Plan's availability, including where to obtain it, where to make comments, and where/when the public hearing would be held (Attachment D)
- The Mental Health Branch Director and the MHSA Coordinator announced to DHHS staff, community-based organizations and partner agencies in various meetings the Plan's availability including where to obtain it, where to make comments, and where/when the public hearing would be held.

During the public review period, comments from stakeholders were received in a variety of ways, including e-mail, comment boxes, phone calls, and at the public hearing. The comments received were outside of the scope of the MHSA 09/10 Update and not substantive to the Update. However, they are relevant and important to services provided in the community. All comments were carefully documented and are used to inform planning and implementation of programs and activities throughout the Humboldt County DHHS.

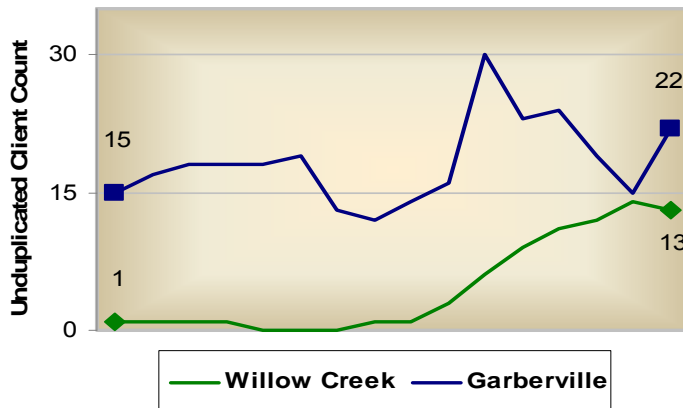
## Report on FY 2007/08 Community Services and Supports Activities MHA FY 2009/10 ANNUAL UPDATE

County Name:                   Humboldt                  

**Provide a brief narrative description of progress in providing services through the MHA Community Services and Supports (CSS) component to unserved and underserved populations, with emphasis on reducing racial/ethnic service disparities. (suggested length – one-half page)**

Humboldt County residents residing in the rural, remote and outlying areas of the county are an identified unserved/underserved population in MHA stakeholder processes. Through CSS funded programs such as Rural Outreach Services Enterprise (ROSE) and Outpatient Medication Support Expansion services to this population in the Garberville and Willow Creek areas have increased. Outpatient Medication Services Expansion provides medication support to approximately 50 unduplicated clients per quarter via teleconference equipment located in Garberville.

**MHA:  
Rural Outreach Services Enterprise (ROSE)  
Clients by Location  
July 2007- October 2008**

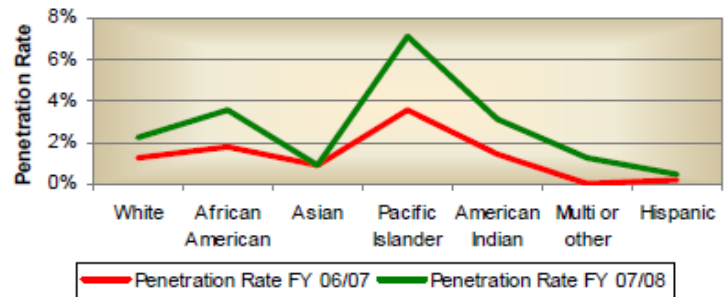


Since implementation ROSE has increased behavioral health services:

- In Garberville from 15 unduplicated clients in July 2007 to 22 unduplicated clients in October 2008
- In Willow Creek from 1 unduplicated client in July 2007 to 13 in October 2008

- The penetration rate by ethnicity/race of estimated Humboldt County population into established CSS programs continues to improve or remain the same for all ethnic/racial groups.

**Penetration Rates by Ethnicity for MHA Services**



Sources: DHHS MHB CMHC data; ECA SMI Prevalence Estimates, [http://www.dmh.ca.gov/Statistics\\_and\\_Data\\_Analysis/Prevalence\\_Rates.asp](http://www.dmh.ca.gov/Statistics_and_Data_Analysis/Prevalence_Rates.asp), extracted 6/3/08; State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail, 2000–2050. Sacramento, CA, July 2007.



**County Name**

Humboldt County

Rural Outreach Services Enterprise (ROSE)

**Work Plan Title**

**Population to Be Served**

ROSE serves all age groups throughout the county including rural, remote, and outlying geographic areas.

The MHSA CSS component of this integrated program serves individuals with severe mental illness or serious emotional disturbance including people who are homeless and at-risk of homelessness.

**Work Plan Description**

**Rural Outreach Services Enterprise (ROSE)** provides mobile access to culturally appropriate services with efforts focused on reducing cultural and ethnic barriers to access that tend to exist in more traditional mental health settings. ROSE links with and provides support to existing community organizations such as Family and Community Resource Centers, community clinics, and Tribal Organizations in order to reach the unserved and underserved populations in those areas of the county.

Humboldt County covers over 3,573 square miles and has pockets of population in many rural, remote, and outlying areas where there is little or no public transportation available. A unique solution to this issue is to take the services to the clients.

At full implementation, ROSE will be an integrated response with Social Services, Mental Health and Public Health Branches as an outreach program for individuals with a variety of physical, behavioral, and social needs as well as prevention and education activities, thereby reducing the stigma associated with accessing behavioral health services.

Services and supports will meet locally identified needs with the focus to improve access and will include: integrated outreach and prevention, clinical services including some medication support services, case management, information and referral, peer education and support, and system navigation help.

Outreach, peer education and support, and system navigation help will be provided by peer client and peer family member staff.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

400 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

300 System Development

100 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal



County Name

Humboldt County

Work Plan Title

Hope Center

Population to Be Served

The Hope Center serves unserved and underserved populations including transition age youth, adults and older adults who have a severe mental illness and their family members.

Work Plan Description

**The Hope Center** (formerly the Wellness Center) provides a safe, welcoming environment based on recovery self-help principles and the resources necessary for people with a mental health diagnosis who are underserved and their families to be empowered in their efforts to be self sufficient. The Hope Center is client run and provides recovery services including peer-to-peer education and support, system navigation, and linkage to services. Outreach efforts are made by Hope Center peer staff and volunteers to underserved people with a mental health diagnosis.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

700 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

600 System Development

100 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal



**County Name**

Humboldt County

**Work Plan Title**

Comprehensive Community Treatment (CCT)

**Population to Be Served**

Comprehensive Community Treatment serves transition age youth, adults and older adults with severe and persistent mental illnesses.

CCT clients may be referred through the mental health management team and are evaluated for services by the treatment team.

**Work Plan Description**

**Comprehensive Community Treatment (CCT)** provides intensive community services and supports (e.g.: housing, medical, educational, social, vocational, rehabilitative, or other needed community services) as defined by the partner to achieve recovery. Personal Services Coordinators (PSCs), including peer clients and peer family members whenever possible, provide services to partners in the community.

The Mission of the program is to help people with severe mental illnesses live successfully in the community, and reduce inpatient psychiatric hospitalizations.

Individualized Services are provided to meet specific client needs. A team of providers collaborates to deliver integrated services of the recipients' choice, monitor progress towards goals, and adjust services over time to meet the recipient's changing needs.

Comprehensive Community Treatment is based on the Assertive Community Treatment model with modifications for smaller rural communities.

The CCT Team Program Objectives are to work with individuals with severe mental illness to:

- Decrease mental health symptoms & prevent recurrent episodes
- Meet basic needs & enhance quality of life
- Improve functioning in social and employment settings
- Assist family members/care providers
- Provide support for people to stay in their communities

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

130 Total

Number of Clients By Funding Category

95 Full Service Partnerships

System Development

35 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

Total

Number of Clients By Type of Prevention

Early Intervention

Indicated/Selected

Universal



County Name

Humboldt County

Work Plan Title

Outpatient Medication Services Expansion

Population to Be Served

Outpatient Medication Services Expansion serves unserved and underserved populations residing in rural areas of the county including children, transition age youth, adults and older adults who have a severe mental illness or serious emotional disturbance.

Work Plan Description

**Outpatient Medication Services Expansion** provides medication support to people with a serious mental illness residing in remote rural areas utilizing video conferencing equipment. It is a service strategy that will enhance existing collaborative efforts with primary health care providers.

COMMUNITY SERVICES AND SUPPORTS

Annual Number of Clients to Be Served

213 Total

Number of Clients By Funding Category

Full Service Partnerships

140 System Development

73 Outreach & Engagement

PREVENTION AND EARLY INTERVENTION

Annual Number to Be Served

Total

Number of Clients By Type of Prevention

Early Intervention

Indicated/Selected

Universal



**County Name**

Humboldt County

**Work Plan Title**

Alternative Response Team (ART) Expansion

**Population to Be Served**

The Alternative Response Team serves children at-risk of Child Welfare Services intervention and their families.

The MHSA CSS component of this integrated program serves children with serious emotional disturbance and their families.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

153 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

100 System Development

53 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal

**Work Plan Description**

**Alternative Response Team (ART) Expansion** is a collaboration of state initiatives including MHSA and a Child Welfare Improvement Activity. Initiated in 1996, the ART team is a collaboration between Child Welfare Services and Public Health to engage families by strengthening and preserving their capacity to protect and nurture their children. ART provides prevention services in the home for at-risk families with children aged 0-8 years of age that were referred to CWS but did not meet the criteria for CWS intervention. In September 2006, through MHSA funding, a full time Mental Health Clinician position was added to the interdisciplinary team resulting in a more integrated and holistic service experience to families. Using the evidence based practice, Parent Child Interaction Therapy (PCIT), mental health staff provide screening and assessment services, consultation, parent education, and wellness/recovery/resiliency focused clinical services.



**County Name**

Humboldt County

**Work Plan Title**

Older Adults and Dependent Adults Program

**Population to Be Served**

Older Adults and Dependent Adults Program serves adults and older adults at-risk of higher level of care or higher level of supervision.

The MHSA CSS component of this integrated program serves adults and older adults with severe mental illness.

**Work Plan Description**

**Older Adults and Dependent Adults Program** provides in home services to disabled adults, at-risk adults and older adults. The enhanced adult services team expands an existing collaboration between Social Services, Adult Protective Services, In Home Support Services, Public Health Nursing, and a Mental Health Clinician to provide assessment and treatment planning to older and dependent adults with a serious mental illness who are at risk of abuse or neglect or who are in need of support services to remain in their home.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

  175   Total

Number of Clients By Funding Category

           Full Service Partnerships

   75    System Development

  100   Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

           Total

Number of Clients By Type of Prevention

           Early Intervention

           Indicated/Selected

           Universal



**County Name**

Humboldt County

**Work Plan Title**

Crisis Intervention Services (CIS)

**Population to Be Served**

Crisis Intervention Services (CIS) serves transition age youth, adults and older adults at risk of requiring acute psychiatric inpatient care, residential treatment, or outpatient crisis intervention because of a mental disorder or experiencing crises and who may be homeless, including those with co-occurring disorders.

**Work Plan Description**

**Crisis Intervention Services (CIS)** staff responds to intervene and prevent hospitalizations and incarcerations. CIS provides crisis support during critical incidents or potential critical incidents involving persons who may have a mental illness or co-occurring disorder. Additional mental health staff will be added to current programs for the purpose of responding to local hospital emergency rooms to assess, engage, and refer clients to appropriate services and supports; and to develop more direct outreach, engagement, and access strategies. Crisis Intervention Team (CIT) is a national model where partnerships between law enforcement, mental health systems, clients of mental health services, and their family members can help in efforts to assist people who are experiencing a mental health crisis and to help them gain access to the treatment system where they are best served.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

150 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

150 System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal



County Name

Humboldt County

Work Plan Title

Integrated Program & Planning Support Structures

Population to Be Served

Integrated Program & Planning Support Structures serves unserved and underserved children, transition age youth, adults, and older adults who have serious mental illness and/or serious emotional disturbance

Work Plan Description

**Integrated Program & Planning Support Structures** is a further integration and expansion of a newly developed division at DHHS. To facilitate progress toward MHSa goals, Integrated Program & Planning Support Structures includes the following infrastructure enhancements:

- **The Office of Client & Cultural Diversity (OCCD)** provides cross-branch leadership to DHHS in the areas of policy and program development related to culturally competent client and family driven services and the reduction of racial, ethnic, and geographic disparities.
- **The Research and Evaluation (R&E) Unit** includes a full spectrum of evaluation services from data management, data verification, statistical analysis and interpretation, to written progress reports; increasing DHHS capacity for outcomes based program planning and improvement. These data offer a measure of how a program or service, overtime, affects the community.
- **The Training, Education and Supervision Unit (TES)** continues to build system capacity to develop, coordinate, and integrate resources to provide education and training opportunities to staff, clients, parents, families, community partners, and providers.

Clients are indirectly served by these structures. Benefits to clients include:

- Service provision by staff who have received core, ongoing, and continuing training and evidence based practice training through TES.
- Use of evaluative services provided through R&E to guide service delivery and evidence based practice targeted toward the identified target populations.
- Increased access to services and reduced barriers to services as targeted by the OCCD.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

5100 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

5100 System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal



**County Name**

Humboldt County

**Work Plan Title**

Suicide Prevention

**Population to Be Served**

This project will address suicide prevention on a population-wide basis, across the entire lifespan, utilizing universal as well as selective and indicated prevention strategies.

This project supports the statewide suicide prevention initiative.

**Work Plan Description**

The Suicide Prevention Project is built around a public health approach that defines the problem, identifies risk factors, develops and tests interventions to control or prevent the problem, implements interventions and monitors the effectiveness of employed interventions.

The Suicide Prevention Project focuses on community collaboration, cultural competence, and programs that are individual- and family-driven. The Project will target underserved communities with an integrated and outcomes-based program design, focusing on wellness while encouraging resilience and recovery.

Components include:

- Training and workforce enhancements to prevent suicide
- Educate communities to prevent suicide - establish annual targets for training that identify the number of individuals and occupations that will receive training for increasing awareness of protective factors
- Local data collection and dissemination to inform prevention and early intervention strategies and for evaluation of suicide prevention programs for use in program improvement
- Enhanced capacity for clinical and forensic review of suicide deaths, including working with coroners and medical examiners to improve consistency and accuracy.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

1000 Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

1000 Universal



**County Name**

Humboldt County

**Work Plan Title**

Stigma and Discrimination Reduction

**Population to Be Served**

This project will address stigma and discrimination reduction on a population-wide basis, across the entire lifespan, utilizing universal as well as selective and indicated prevention strategies.

This project supports the statewide stigma and discrimination reduction initiative.

**Work Plan Description**

While the project will be carried out with a population-based perspective, there will be key components matched to the unique cultural and linguistic demands of Humboldt County’s diverse, rural population, including Native American, Latino and non-English speaking community members.

The Stigma and Discrimination Project focuses on community collaboration, cultural competence, and programs that are individual- and family-driven. The Project will target underserved communities with an integrated and outcomes-based program design, focusing on wellness while encouraging resilience and recovery.

Components include:

- Implement training and workforce enhancements to reduce stigma and discrimination
- Educate communities to take action to reduce stigma and discrimination
- Build local capacity for evaluation of stigma and discrimination reduction programs for use in program improvement including input of underserved populations
- With diverse input consider strategies to reduce isolation and alienation, foster and design programs that are culturally and linguistically appropriate, and consider core elements of cultural competence in program development.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

1000 Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

1000 Universal



**County Name**

Humboldt County

**Work Plan Title**

Transition Age Youth Partnership Program

**Population to Be Served**

The Transition Age Partnership Program will serve young adult populations at risk of or experiencing onset of serious psychiatric illness to prevent mental illnesses from becoming severe and disabling.

The education component will utilize a universal approach.

**Work Plan Description**

Components include:

- Education, Training and Outreach: Early identification of indicators for TAY who are at risk of or who are experiencing the onset of serious psychiatric illness, the role of the family and community in supporting mental health wellness and recovery, and how to access behavioral health services within local communities.
- TAY Advocacy will build on the concepts of Youth Development as used by the DHHS Alcohol and Other Drug Prevention Programs. By providing a safe environment with an approach that is youth-driven and congruent with youth culture, TAY participants will experience opportunities for community engagement, leadership and meaningful and caring relationships with peers and adults. These protect against risk factors of serious mental illness by promoting development of relevant personal and interpersonal skills, healthy personal attitudes and behaviors toward violence prevention, academic completion and minimization of the use of drugs, tobacco and alcohol.
- TAY Plus is an indicated approach which will include a comprehensive, coordinated and multifunctional team that will provide an integrated service experience through culturally appropriate support services to TAY who are at risk of or who are experiencing the onset of serious psychiatric illness, their families, and their other significant supports. The team will utilize the evidence based practice Trauma Focused Cognitive Behavioral Therapy.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

1050 Total

Number of Clients By Type of Prevention

10 Early Intervention

40 Indicated/Selected

1000 Universal

**FY 2009/10 Mental Health Services Act  
Summary Funding Request**

County: HUMBOLDT

Date: 1/27/2009

	MHS Component				
	CSS	CFTN	WET	PEI	Inn
<b>A. FY 2009/10 Planning Estimates</b>					
1. Published Planning Estimate <sup>af</sup>	\$3,340,600	\$0	\$0	\$1,055,500	\$258,700
2. Transfers <sup>bf</sup>					
3. Adjusted Planning Estimates	\$3,340,600	\$0	\$0	\$1,055,500	\$258,700
<b>B. FY 2009/10 Funding Request</b>					
1. Required Funding in FY 2009/10 <sup>cf</sup>	\$5,120,241			\$1,482,847	
2. Net Available Unspent Funds					
a. Unspent FY 2007/08 Funds <sup>df</sup>	\$1,862,339				
b. Adjustment for FY 2008/09 <sup>ef</sup>	\$82,698				
c. Total Net Available Unspent Funds	\$1,779,641	\$0	\$0	\$0	\$0
<b>3. Total FY 2009/10 Funding Request</b>	<b>\$3,340,600</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,482,847</b>	<b>\$0</b>
<b>C. Funding</b>					
1. Unapproved FY 06/07 Planning Estimates					
2. Unapproved FY 07/08 Planning Estimates	\$0	\$0			
3. Unapproved FY 08/09 Planning Estimates	\$0			\$427,347	
4. Unapproved FY 09/10 Planning Estimates	\$3,340,600			\$1,055,500	
<b>5. Total Funding<sup>ff</sup></b>	<b>\$3,340,600</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,482,847</b>	<b>\$0</b>

**FY 2009/10 Mental Health Services Act  
Community Services and Supports Funding Request**

County: HUMBOLDT

Date: 1/27/2009

CSS Work Plans				FY 09/10 Required MHA Funding	Estimated MHA Funds by Service Category				Estimated MHA Funds by Age Group			
No.	Name	New (N)/ Approved Existing (E)			Full Service Partnerships (FSP)	System Development	Outreach and Engagement	MHA Housing Program	Children, Youth, and Their Families	Transition Age Youth	Adult	Older Adult
1.	1 Rural Outreach Services Enterprise (ROSE)	E	\$826,064		\$718,952	\$107,112		\$45,388	\$68,082	\$662,667	\$49,927	
2.	2 Hope Center	E	\$189,627		\$177,697	\$11,930		\$37,925	\$37,925	\$75,851	\$37,925	
3.	3 Comprehensive Community Treatment (CCT)	E	\$1,822,252	\$1,822,252				\$112,139	\$112,139	\$1,429,767	\$168,208	
4.	4 Outpatient Medication Services Expansion	E	\$244,775		\$241,913	\$2,862		\$17,695	\$35,389	\$173,996	\$17,695	
5.	5 - discontinued, refer to PEI Exhibit E-4 -	E	\$0		\$0	\$0						
6.	6 Alternative Response Team (ART) Expansion	E	-\$7,283		-\$24,342	\$17,059		-\$6,578	-\$705			
7.	7 Older and Dependent Adults Program	E	\$133,426		\$70,346	\$63,080				\$67,972	\$65,454	
8.	8 Crisis Intervention Services (CIS)	E	\$125,433		\$72,178	\$53,254			\$18,815	\$94,075	\$12,543	
9.	9 Integrated Program & Planning Support Structures	E	\$244,387		\$244,387			\$61,097	\$24,439	\$134,413	\$24,439	
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26.	Subtotal: Work Plans <sup>a/</sup>			\$3,578,680	\$1,822,252	\$1,501,131	\$0	\$0	\$296,084	\$2,638,740	\$376,191	
27.	Plus County Administration			\$544,849								
28.	Plus Optional 10% Operating Reserve			\$412,353								
29.	Plus CSS Prudent Reserve <sup>b/</sup>			\$584,359								
30.	Total MHA Funds Required for CSS			\$5,120,241								

a/ Majority of funds must be directed towards FSPs (Title 9, California Code of Regulations Section 3620(c)). Percent of Funds directed towards FSPs= 50.92%  
 b/Transfers to Capital Facilities and Technological Needs, Workforce Education and Training, and Prudent Reserve are subject to limitations of WIC 5892b.

**FY 2009/10 Mental Health Services Act  
Prevention and Early Intervention Funding Request**

County: HUMBOLDT

Date: 1/27/2009

PEI Work Plans			FY 09/10 Required MHSA Funding	Estimated MHSA Funds by Type of Intervention			Estimated MHSA Funds by Age Group			
No.	Name			Universal Prevention	Selected/ Indicated/ Prevention	Early Intervention	Children, Youth, and Their Families	Transition Age Youth	Adult	Older Adult
1.	1	Suicide Prevention	\$298,364	\$298,364			\$74,591	\$74,591	\$74,591	\$74,591
2.	2	Stigma and Discrimination Reduction	\$186,651	\$186,651			\$46,663	\$46,663	\$46,663	\$46,663
3.	3	Transitional Age Youth (TAY) Partnership Program	\$680,837	\$204,251	\$65,244	\$411,342		\$680,837		
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26.	<b>Subtotal: Work Plans<sup>a/</sup></b>		<b>\$1,165,852</b>	\$689,266	\$65,244	\$411,342	\$121,254	\$802,091	\$121,254	\$121,254
27.	<b>Plus County Administration</b>		<b>\$182,190</b>							
28.	<b>Plus Optional 10% Operating Reserve</b>		<b>\$134,804</b>							
31.	<b>Total MHSA Funds Required for PEI</b>		<b>\$1,482,847</b>							

a/ Majority of funds must be directed towards individuals under age 25--children, youth and their families and transition age youth . Percent of Funds directed towards those under 25 years=

79.20%

**Worksheet for Exhibit G  
CSS Prudent Reserve Plan  
FY 2009-10 Annual Update - MHSA**

**County Humboldt**

**1/27/2009**

<b>1. Requested FY 2009-10 CSS Services Funding</b> (Total funds requested from Exh E1, line 26)	3,578,680
<b>2. Less: Non-Recurring Expenditures</b> (Subtract any identified CSS non-recurring expenditures included above)	-
<b>3. Plus: CSS Administration</b> (Total funds requested from Exh E1, line 27)	544,849
<b>4. Subtotal</b>	4,123,529
<b>5. Maximum Prudent Reserve (50%)</b> (50% of Subtotal above)	2,061,764
<b>6. Prudent Reserve Balance from prior approvals</b>	-
<b>7. Plus: Amount requested to dedicate to Prudent Reserve through FY 2009-10 Annual Update</b> (Total funds requested from Exh E1, line 29)	584,359
<b>8. Prudent Reserve Balance</b>	584,359
<b>9. Prudent Reserve Shortfall to Achieving 50%</b>	1,477,405

**Please describe below how the County intends to reach the 50% requirement by July 1 2010; for example indicate future increases in CSS planning estimates that will be dedicated to the prudent reserve before funding any program expansion.**

Request to dedicate \$584,359 to Prudent Reserve through FY 2009-10 represents 14% of the proposed CSS funding level for FY 2009-10. County intends to reach the 50 % requirement by July 1 2010 using strategies during FY 2009-10 to maximize other revenue sources such as Medi-Cal FFP for MHSA workplans in order to reserve MHSA funding for this purpose. Additionally, any future increases in CSS planning estimates may be dedicated to the prudent reserve before funding any program expansion. Unspent funds will be dedicated to Prudent Reserve by July 1 2010 to the extent that the Reserve of such funds will not impact the delivery of services to children, adults and seniors.

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# Attachment A



**THURSDAY FEBRUARY 19, 2009  
RAINBOW CONFERENCE ROOM  
720 WOOD STREET  
EUREKA, CA 95501**

- I. Mental Health Board Meeting -12:15-1:45 p.m.**
- A. Call to order
  - B. Roll call, introduction of staff and guests
  - C. Adjustments to the agenda
  - D. Action items
    - 1) Approval of minutes from January 15, 2009 **x**
  - E. Public comments- two minute limit
  - F. Reports
    - 1) Mental Health Board Chairman's report-
      - a) Recruitment and Awareness outreach strategy
    - 2) DHHS Director's report-(standing item as needed)
    - 3) Mental Health Branch Director's report
  - G. Adjournment
- II. Public Hearing -1:45-2:30 p.m.**
- A. 2009/10 MHSA CSS plan

**x = Enclosure**

DHHS=Department of Health and Human Services, 507 F Street, Eureka  
HCMH = Humboldt County Mental Health, 720 Wood Street, Eureka  
CYFS = Children Youth and Family Services, 1711 Third Street, Eureka

# MENTAL HEALTH BOARD GUEST LIST SIGN IN SHEET

February 19, 2009

NAME	AGENCY	ADDRESS	E-MAIL	PHONE
Kris Huschle	PHB	908 7th, Eureka		441-5554
Lara Weiss	PHB	"	lweisse@co.humboldt.ca.us	441-5034
Connie Sundberg	Changing Times Family Services	805 7th St Eureka, CA 95501	csundberg@changingtimes.org	445-1195
Regina Bavaroskic	Trinidad Karipunan	Cherise Lane Trinidad, CA	abavaroskic@trinidadkaripunan.com	677-0211
Randy Bernuskie	UIHS	Arcata 1600 West Way		
Alan Schrader	UIHS	Arcata 1600 West Way	alan.schrader@erihb.net	825-5060
Rick Wedge	MH Board	1572 Ecoler Ave #1 Arcata	wedge@rick@sbglobal.net	764-5594
Rick Cawthorn	Human Services Hoop Valley Tribe	P.O. Box 1257 Hoop, CA 95546	drkatz@sbglobal.net	530-625-4236
Ruth Needham	parent-community	905 Valley Forge	gabbygus@aol.com	725-4406
ERIC FIMBRES	MH HEALTH BOARD	1963 BLANDI LANE FORTUNA 95540	ERIC@COMMUNITYNEEDHAM@MCC.CA.GOV	445-2866
K Steini	DHHS-MHB	720 Wood 95501	ksteini@co.humboldt.ca.us	268 2990
John Hill	MH Board	1692 Cardinal Dr. McKinleyville, CA	jhill1952@comcast.net	839 7877
Marianne Pinnerkaup	MH Board	44 Beauchamp Rd Eureka, CA 95503	marianne@att.net	442-6212

Ext 13

# Attachment B



## Mental Health Branch

Karolyn Stein, RN, Branch Director

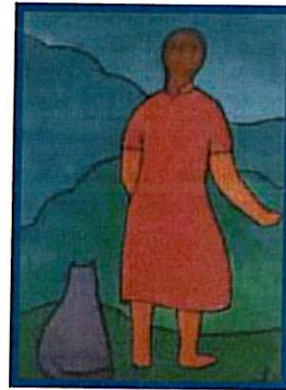


# Mental Health Services Act (MHSA)

## About The Mental Health Services Act

The Mental Health Services Act (MHSA) provides funding to counties to expand and develop innovative and integrated mental health services for children, youth, adults, and older adults. California voters passed Prop 63 in November 2004 as the result of a grassroots coalition intending to transform public mental health care.

The intent of this website is to inform and invite you to participate in the implementation of the MHSA.



"Maggie and Jane"  
Maggie had found a home  
~ Louise Hope ~

- [Full text of the Mental Health Services Act](#)
- [Acta de Servicios de Salud Mental](#)

The Mental Health Services Act addresses a broad continuum of prevention, early intervention, and service needs.

- Older / Dependent Adult Services provides co-located, integrated mental health services by a clinician, with the Adult Protective Services (APS) and In-Home Supportive Services (IHSS) Program.
- Crisis Intervention Services (CIS) provides the coordination of crisis intervention services in partnership with law enforcement.
- The Alternative Response Team (ART) is an innovative, multi-agency program aimed at those at-risk families that would benefit from early intervention and services.
- Comprehensive Community Treatment (CCT) is a team treatment approach designed to provide comprehensive, community-based psychiatric treatment, rehabilitation, and support to persons with serious and persistent mental illness.
- Hope Center is a client and family member center, that provides peer-to-peer education, support, prevention services, wellness activities, and system navigation. To contact the Hope Center, call **(707) 441-3723**.
- Rural Outreach Services Enterprise (ROSE) provides Mental Health, Alcohol and Other Drug, Social Services, and Public Health mobile outreach services to outlying communities.
- Telemedicine services provide medication support to outlying areas.
- Support to Transitional Age Youth (TAY) Organizations.
- The Mental Health Liaison works with families and individuals in the community who have mental health questions, concerns, or need support.

## Public Comment! Participate! Be informed!

Mental Health Services Act Plans and Updates are available for a 30-day comment period before they are submitted to the State Department of Mental Health. When a Plan or Update is available for Public Comment it will be located in the **MHSA Documents Open for Public Comment** section.

### MHSA Plans or Updates may be obtained in several ways:

- Click on the name of the document below to view or print.
- Click on document below to view and on the last page will be listed the locations hard copies are available during the 30-day Comment Period.
- E-mail or call with your mailing address or email address and request the document.

### Submitting a Public Comment during the 30-day Comment Period may be done in several ways:

Click on the document below to view it and on the last page of the document will be listed the locations "MHSA Comment Boxes" are available during the 30-day Comment Period.

- Email: [mhsacomment@co.humboldt.ca.us](mailto:mhsacomment@co.humboldt.ca.us)
- Comment line phone number: **(707) 441-3770**
- Toll Free number: **(866) 320-8911**

## MHSA Documents Open for Public Comment!

- [MHSA Fiscal Year 2009-2010 Update](#)
- [Prevention Early Intervention Technical Assistance Request](#)

## Previous MHSA Documents

### 2008

- [MHSA Housing Assignment Letter](#)
- [MHSA Prevention and Early Intervention Plan](#)
  - [Suicide in Humboldt County 2003-2007](#)
  - [Humboldt County Strategic Prevention Plan](#)
  - [Recommendation Submitted by Advisory groups to MHSA Steering Committee](#)
  - [Integrated Services Initiative 2007-2010 Strategic Plan](#)
  - [California Strategic on Suicide Prevention: Every Californian is part of the Solution](#)
  - [Eliminating Stigma and Discrimination Against Persons with Mental Health Disabilities. A Project of the Mental Health Services Act](#)
  - [Early Intervention for Transitional Age Populations](#)
- [MHSA Prevention and Early Intervention Assignment Letter](#)
- [MHSA Community Services and Supports Fiscal Year 2008-2009 Update](#)

### 2007

- [Community Services and Supports Implementation Progress Report](#)
- [Community Services and Supports FY05/06 Remaining Funds Plan](#)
- [Community Services and Supports One-Time Augmentation Plan](#)

- [Community Services and Supports Expansion Plan](#)

**2006**

- [Community Services and Supports Implementation Progress Report](#)

**2005**

- [Community Services and Supports Plan](#)
- [Executive Summary Community Services and Supports Plan](#)
- [Framework for Community Input](#)
- [MHSA Advisory Group Recommendations](#)

**Site Links**

- [Comprehensive Community Treatment Program](#)
- [Crisis Intervention Services](#)

**Web Links**

- [California Department of Mental Health \(MHSA\)](#)
- [California Network of Mental Health Clients \(CNMHC\)](#)
- [National Alliance for the Mentally Ill \(NAMI\)](#)

# Attachment C



**COUNTY OF HUMBOLDT**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
PHILLIP R. CRANDALL, DIRECTOR

**MENTAL HEALTH BRANCH**  
720 Wood Street Eureka, CA 95501-4482  
(707) 268-2900 Fax: (707) 476-4049

Administration  
(707) 268-2990

Children, Youth & Family Service  
(707) 268-2800

Adult/24 Hour Services  
(707) 268-2900

Alcohol & Other Drug Programs  
(707) 476-4054

February 3, 2009

To whom it may concern,

Humboldt County Department of Health and Human Services is committed to stakeholder participation in the development of Mental Health Services Act programs.

The Mental Health Services Act, legislation passed in 2004, provides funding to counties to expand and develop innovative and integrated mental health services.

Currently there are Humboldt County Mental Health Services Act documents available for Public Comment from February 3, 2009 through March 4, 2009.

There will also be a Public Hearing on February 19<sup>th</sup>, 2009 from 1:45-2:30pm at the Department of Health and Human Services Rainbow Room at 720 Wood Street in Eureka.

Enclosed please find a flyer that contains information on where to access these documents and how to make comments.

If possible and appropriate please make these materials available to your staff and the people you serve. Also, please remove the materials after the Public Comment period ends on March 4th, 2009.

Please contact us with any questions you may have.

Thank you in advance for your help in this effort,

Jaclyn Culleton  
Administrative Analyst  
Mental Health Services Act  
Humboldt County Mental Health Branch  
720 Wood Street, Eureka, CA 95501  
Phone: 707 268-2923  
Email: [jculleton@co.humboldt.ca.us](mailto:jculleton@co.humboldt.ca.us)



Humboldt County Department of Health and Human Services  
**Mental Health Services Act**

*Provides funding to expand and develop innovative and integrated mental health services*

*What do you think?*

## Public Comment

### February 3rd – March 4th

Mental Health Services Act Fiscal Year 2009-2010 Update and the  
Prevention and Early Intervention Technical Assistance Request

Documents are available and comments may be placed in the  
**"MHSA Comment Box"**

- Humboldt County DHHS Professional Building:  
507 F Street, Eureka
- Humboldt County DHHS Mental Health Branch  
Children Youth and Family Services:  
1711 3<sup>rd</sup> Street, Eureka
- Humboldt County DHHS Mental Health Branch  
Garberville Office:  
727 Cedar Street
- Humboldt County DHHS Mental Health Branch:  
720 Wood Street, Eureka
- Hope Center: 2933 H Street, Eureka
- website: <http://co.humboldt.ca.us/HHS/MHB/MHSA/>
- Humboldt County DHHS Mental Health Branch  
Willow Creek Office:  
77 Walnut Way

## Public Hearing on February 19<sup>th</sup>

Humboldt County Department of Health and Human Services Rainbow Room

720 Wood Street in Eureka from **1:45 to 2:30pm**

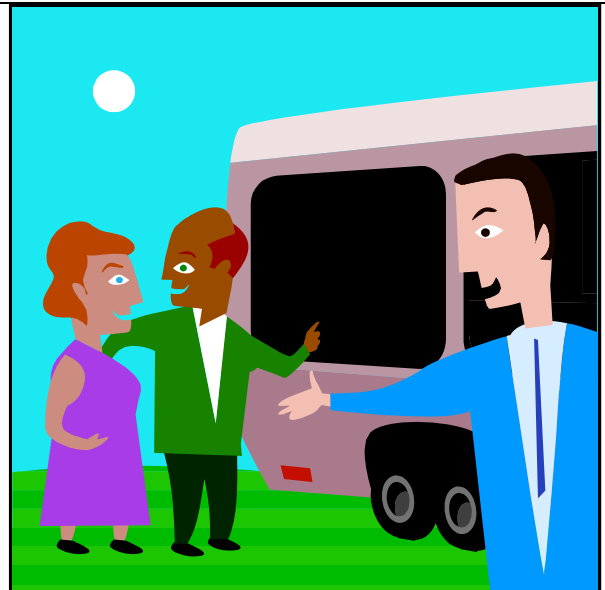
To request documents be sent to you or to make  
a comment please contact us at:

**Phone:** (707) 441-3770

**Toll free:** (866) 320-8911

**Email:** [mhsacomments@co.humboldt.ca.us](mailto:mhsacomments@co.humboldt.ca.us)

**Address:** Department of Health and Human  
Services, Mental Health Branch  
Attn: Jaclyn Culleton  
720 Wood Street  
Eureka, Ca 95501



# Attachment D

### On Ortho-Bionomy

**Demystifying Ortho-Bionomy** is the topic of a talk on Tuesday at 7 p.m. at Moonrise Herbs on the Arcata Plaza. Sara Sunstein, a local practitioner and instructor, will explain how the gentle art of Ortho-Bionomy engages the body's innate desire to

heal. She will also teach some simple Ortho-Bionomy techniques to release tensions and pain in people's own bodies. Sunstein began practicing Ortho-Bionomy in 1982 in Berkeley. Moonrise Herbs requests pre-registration for this talk. Stop by 126 G St. in Arcata, or call 825-2296.

International of Eel River Valley will honor Hillary Callihan with the Violet Richardson Award this year.

Callihan, a junior at Fortuna High School, will be honored for volunteering at the Royal Family Kids Camp. She is the daughter of Mike and Sue Callihan of Fortuna.

Royal Family Kids Camp is



Humboldt County Department of Health and Human Services

## Mental Health Services Act

*Provides funding to expand and develop innovative and integrated mental health services*

# What do you think?

### Public Comment

#### February 3rd – March 4th

Mental Health Services Act Fiscal Year 2009-2010 Update and the Prevention and Early Intervention Technical Assistance Request

Documents are available and comments may be placed in the "MHSA Comment Box"

- Humboldt County DHHS Professional Building: 507 F Street, Eureka
- Humboldt County DHHS Mental Health Branch Children Youth and Family Services: 1711 3<sup>rd</sup> Street, Eureka
- Humboldt County DHHS Mental Health Branch Garberville Office: 727 Cedar Street
- Humboldt County DHHS Mental Health Branch: 720 Wood Street, Eureka
- Hope Center: 2933 H Street, Eureka
- website: <http://co.humboldt.ca.us/HHS/MHB/MHSA/>
- Humboldt County DHHS Mental Health Branch Willow Creek Office: 77 Walnut Way

### Public Hearing on February 19<sup>th</sup>

Humboldt County Department of Health and Human Services Rainbow Room

720 Wood Street in Eureka from 1:45 to 2:30pm

To request documents be sent to you or to make a comment please contact us at:

Phone: (707) 441-3770

Toll free: (866) 320-8911

Email: [mhsacomment@co.humboldt.ca.us](mailto:mhsacomment@co.humboldt.ca.us)

Address: Department of Health and Human Services, Mental Health Branch  
Attn: Jaclyn Culleton  
720 Wood Street  
Eureka, Ca 95501

