

Appendix VI: MONTEREY COUNTY MENTAL HEALTH SERVICES ACT FY 2022-23 DRAFT ANNUAL UPDATE

PUBLIC COMMENTS



MONTEREY COUNTY HEALTH DEPARTMENT BEHAVIORAL HEALTH BUREAU | DIVISIÓN DE SALUD MENTAL | 1270 NATIVIDAD ROAD, SALINAS, CA 93906

From: Sophie Yakir <<u>syakir@interiminc.org</u>>
Sent: Monday, April 25, 2022 2:24:24 PM
To: 411-MHSAPublicComment <<u>MHSAPublicComment@co.monterey.ca.us</u>>; Schweikhard, Wesley 755-4856
<<u>SchweikhardW@co.monterey.ca.us</u>>
Cc: <u>bmitchell@interiminc.org</u> <<u>bmitchell@interiminc.org</u>>
Subject: Interim, Inc.'s comments on the FY 2022-23 MHSA Annual Update

[CAUTION: This email originated from outside of the County. Do not click links or open attachments unless you recognize the sender and know the content is safe.] Hello,

Attached please find Interim, Inc's comments on the draft MHSA Monterey County FY22/23 annual update. Please confirm receipt of the attached.

Interim, Inc.'s Comments on Monterey County MHSA Plan

To Whom It May Concern:

I have reviewed the draft MHSA FY 2022-2023 Annual Update draft plan for public comment that was released on March 25, 2022, and would like to provide the following comments.

Page 16 #7 Homeless Services and Supports FSP [CSS-14]

Page 18 #5 Homeless Outreach and Treatment [CSS-15]

This doesn't seem accurate to Interim, Inc, since MCHOME doesn't offer supported ed & employment. These services are offered outside of MCHOME by OMNI Resource center. Please note, the county reduced the funding for supported education services due to a budget shortfall, and the supported employment services are only available to those referred and approved for services by DOR. Supported education is available as part of the OMNI Resource Center to clients referred by MCBH.

Other comments:

We are concerned about the possible use of MHSA funds for capital costs for a locked facility. We are not clear if this is the County's intention to use these funds for capital costs for this proposed project. It was never the intention of MHSA funding to be used for a locked or involuntary settings. Interim, Inc. advises that the county reconsider using MHSA funds for this purpose per the regulations as sited <u>W&I 5847</u> - "All plans for proposed facilities with restrictive settings shall demonstrate that the needs of the people to be served cannot be met in a less restrictive or more integrated setting, such as permanent supportive housing."

Interim, Inc. would like to note the success of the Assertive Community Treatment program model. ACT is working very well with the hard to serve clients, primarily Latino in South County. Potentially ACT could be expanded. Another option would be to consider construction of a smaller project.

Sincerely, Barbara L. Mitchell Executive Director

Kind regards,

Sophie Yakir, Grants & Contracts Manager Interim, Inc. | P.O. Box 3222| Monterey, CA 93942 (831) 649-4522 ext. 214 | FAX (831) 883-3031 www.interiminc.org Donate | Facebook | Twitter | e-Newsletter

Housing, Healing, Hope: The Path to Mental Health

Oscar Flores
411-MHSAPublicComment
MHSA Public Comment Submission
Monday, April 25, 2022 4:59:02 PM

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Dear MHSA and MCBH colleagues and partners:,

Below are our comments on the draft MHSA Annual Update (FY 22-23).

As we emerge from the pandemic, we continue to see increased need for mental health and wellness support, especially for children who are entering a formal education and care settings. These children, and their families, often interact with systems who do not understand the unique opportunity the early childhood years represent, and the big vulnerability children face if they don't have strong and supportive relationships. Most services and treatment services are not developmentally appropriate, especially at school districts, where interventions tend to focus solely on child behavior in the educational setting versus considering the parent-child and child-environment impacts on the child's behavior and engagement at school. F5MC has also seen an increase in the use of Care Coordination services to help families connect to public mental health services that can be difficult for families to navigate, and not always prepared to provide dyadic (parent-child) services. In addition there can be long wait lists for existing services.

We appreciate the many wonderful additions for services and supports to the most vulnerable communities in our county. In our comments below, we share some additional ideas of ways to leverage programs, systems, and services either now or in the future. We also pose several questions that arose as we reviewed the MHSA plan. At the end, we offer two potential opportunities to consider for future investment via MHSA funding.

On page 10, there is a mention of stigma reduction work: "The recommendations included a need for stigma reduction education and campaigns, more providers, more services available in different languages, additional promotion about how to connect to services, and a central source for service information." Often, there is little to no information related to socialemotional health in the early years, and stigma reduction related to supporting families and caregivers who are having challenges supporting their young children. It would be helpful, especially if we are focused on preventing mental health challenges, to ensure mental health and wellness for young children is at the forefront of stigma reduction work. F5MC has a wealth of experience and stories from families F5MC has supported and ways these messages could be disseminated and would be glad to share that knowledge/information with BH..

On page 11, there is a mention of increased parenting education services: "To increase options and choices for families, another contractor was funded through a competitive

process to provide an array of family education in English and Spanish. This contractor will also offer classes in Triqui, which is an indigenous language spoken by community members from Oaxaca." Although F5MC has invested substantial resources to increase the capacity in the county to offer Abriendo Puertas, Positive Discipline, Circle of Security, and parent-child playgroups, there is still a need for more services/supports for the 0-5 population. F5MC subcontractors include organizations that provide services across the county of Monterey, and focus in North and South County, and Salinas. All of these programs are developmentally appropriate for young children and their families, and because they are part of our Early Childhood Collaboratives, families who are in need of connection to health and mental health resources, they get connected to Care Coordination navigation support. So often, we have learned that families "notice" that they need additional support as they engage in a parenting class, and having navigation support available - and not as a separate outside resource - helps parents feel connected. Once that trust and connection is built, they tend to engage and follow through with accessing resources.

On page 23, there is mention of new support for CHW strategies: "Another strategy to increase awareness of behavioral health conditions and available resources in the community will be for MCBH to work in partnership with a consultant or member of the Health Department to develop a model for increasing capacity of Community Health Workers (CHW) and/or Promotores to understand behavioral health conditions, conduct basic behavioral health screenings and link individuals in need to resources. This model would include training for the CHW and Promotores on behavioral health conditions, screening tools, resources and also provide Reflective Supervision to the CHW and Promotores to help reduce their experiences of secondary trauma and support their professional development." It was not clear the scale of this funding, and how this training will be implemented. This is wonderful news in terms of expanding the reach of CHW services. Our hope would be that this training is inclusive of the early years, and includes training related to serving the needs of young children and their families who are struggling with social-emotional challenges.

On page 24, there is mention of new funding for: "Peer support programs and therapeutic treatment for addressing Maternal Mental Health will be explored and incorporated based upon community capacity for implementation. MCBH released an RFP in FY22 to solicit applications from community-based organizations to develop and implement a Maternal Mental Health Peer program and anticipate funding up to two contracts in FY23." This is wonderful news in terms of expanding prevention funding that focus on early childhood. This was something we had commented on during last year's MSHA Annual Update and are glad to see this included.

On page 24, there is mention of new funding for: "An additional strategy will be added to address perinatal mood and anxiety disorders (PMAD) at the earliest point in time by funding a nurse home-visiting program which will specialize in screening and intervening early with

PMAD in partnership with the Monterey County Health Department's Public Health Bureau." This is wonderful news in terms of expanding prevention funding that focus on early childhood. This was something we had commented on during last year's MSHA Annual Update. We also encourage looking at other models, such as Parents as Teachers. F5MC currently has a partnership with CalWORKs to support families in their system with two years of home visiting services and can share information related to this.

Lastly, there are two areas that we are hoping might be addressed via future funding opportunities and strategies. They may be embedded in ways that we did not identify. These are two strategies on which F5MC would be pleased to partner/collaborate to maximize and leverage resources :

Interdisciplinary training is needed to ensure that everyone and every system that interacts with children and families is on the same page. F5MC offers and invests in training providers in the County, including medical and mental health professionals, in best practices for working in early childhood through the Infant-Family and Early Childhood Mental Health (IFECMH) training series. This training series follows competencies as defined by the California Center for Infant-Family and Early Childhood Mental Health. This past year this training series evolved, and added a weekday offering that focused on recruiting nurses, social workers, early childhood providers, and others. F5MC also started a "systems" series that is being presented as part of the Children's Council. There are other opportunities, such as using a trauma, reflective /mindful practice, healing informed framework, and using the Protective Factors Framework as a way to unify conversations across systems and providers.

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Although additional services are being supported, there is not a countywide approach to ensure that all of these programs and services are coordinated and integrated. There is a potential opportunity to support and implement the Help Me Grow model to address this need. This approach includes strong collaboration with medical providers and childserving providers, and offers a call center for families of young children to support their concerns or challenges. It also offers robust ways to support the family to access and engage in a variety of services. The call center staff and case managers also keep track of community services in an effort to provide families with updated resources and referrals. There are potentials for coordination with both 2-1-1 and BH's crisis intervention program to support the build out of this model.

With appreciation, F5MC staff

Oscar Flores

Senior Programs Manager First 5 Monterey County

Address <u>1125 Baldwin Street, Salinas, CA 93906</u> Phone (831) 444-8549 Ext. 15 Fax (831) 444-8637 Email <u>Oscar@First5Monterey.org</u> Website <u>www.First5Monterey.org</u>

From:	Robin McCrae
То:	411-MHSAPublicComment
Subject:	MHSA support for street outreach to homeless youth
Date:	Tuesday, April 12, 2022 5:07:55 PM

[CAUTION: This email originated from outside of the County. Do not click links or open attachments unless you recognize the sender and know the content is safe.]

Street outreach programs address the mental and emotional health needs of homeless youth. Homeless youth often experience trauma, stress, anxiety and depression, and may exhibit early symptoms of psychosis. As a result, street outreach counselors routinely screen and refer these youth to mental health services. I encourage MHSA support of street outreach services to homeless youth.

Robin McCrae Chief Executive Officer Community Human Services

www.chservices.org

"Making a positive impact on our community through prevention, intervention and treatment services for substance abuse, mental health and homelessness."

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From:	Tara Crampton
To:	411-MHSAPublicComment
Subject:	Rainbow Connections IN- 007
Date:	Friday, April 8, 2022 3:59:38 PM

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Good Afternoon,

I would like to submit my comment for the MHSA grant application titled, "Rainbow Connections." I currently work for the Monterey County Office of Education as an Multitiered Systems of Support Coordinator. This year multiple school districts have reached out to the county office looking for support for students in crisis and identifying as LGBTQ+. The Rainbow Connections MHSA Innovations Grant would offer support to students, families, and school districts so that all of our students are physically and mentally well. There is a need that we need to address in our community and interagency collaboration can support any needs that our students may have.

Thank you,

Respectfully, Tara Crampton Program Coordinator II, Multi-Tiered System of Supports & Tobacco Use Prevention Education, Leadership & School Systems Division, Educational Services Monterey County Office of Education 901 Blanco Circle Salinas, CA 93901 Office 831.755.0843

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Leadership, Support and Service to Prepare All Students for Success

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