

MHSA Community Program Planning and Local Review Process

County: SAN BENITO 30-day Public Comment period: 4/24/15 – 5/24/15

Date: 4/24/15 Date of Public Hearing: Not required

This FY 2014/2015 Update addresses the need to 1) rescind the FY 14/15 transfer of \$110,000 to Prudent Reserve, as previously approved in the MHSA FY 2014-2017 Three-Year Plan, and 2) assign the maximum allowable transfer amount (\$379,139) to the Capital Facilities/Technology component. See Exhibit B and the MHSA Funding Summary (Budget) for details.

COMMUNITY PROGRAM PLANNING

1. *Briefly describe the Community Program Planning (CPP) Process for development of all components included in this Update.*

The San Benito County Behavioral Health (SBCBH) Community Program Planning (CPP) process for the development of this Update builds upon the planning process that started in 2005 for the development of our original Three-Year Plan and our Annual Updates, as well as through our most recent 3-Year Plan. Over the past several years, this planning process has been comprehensive and has included the input of diverse stakeholders through focus groups, stakeholder meetings, and surveys. Components addressed by the planning process included Community Services and Supports (CSS); Prevention and Early Intervention (PEI); Innovation; Workforce Education and Training (WET); Capital Facilities/Technological Needs (CFTN); and Housing. In addition, we provided basic education regarding mental health policy; program planning and implementation; monitoring and quality improvement; evaluation; and fiscal and budget components.

For the planning process for the FY 2014/15-2017/18 Three-Year Plan, we conducted focus groups and stakeholder meetings at various locations in the community, including our wellness center (Esperanza Center). In addition, we obtained input from community stakeholders and conducted outreach to the unserved and underserved through collection of MHSA surveys. This outreach included meeting with over 50 Hispanic families (N=52) who completed the MHSA survey. These families meet monthly with a Migrant Education Program and were very interested in learning about our programs and services. We also obtained information from individual school personnel, to obtain their perspective on needs and issues for children and families in our community. Across all stakeholder groups including consumers, we received surveys from 86 individuals. Included in these stakeholder groups were veterans, persons from the LGBTQ community, and persons with lived experience.

With this information, we were able to determine the unique needs of our community and develop an MHSA program that is well designed for our county. The overall goals of the MHSA are still valid and provide an excellent guide for maintaining and enhancing our MHSA services.

2. *Identify the stakeholders involved in the Community Program Planning (CPP) Process (e.g., agency affiliation, populations represented, ages, race/ethnicity, client/family member affiliation, primary languages spoken, etc.).*

A number of different stakeholders were involved in the most recent CPP process. Input was obtained at the Behavioral Health Board meetings and with stakeholder focus groups. In addition, MHSA staff, consumers, family members, Behavioral Health Director, administrative and fiscal staff, quality improvement staff, representatives from allied providers and agencies, and others involved in the delivery of MHSA services provided input into the planning process. The CPP also included input from law enforcement, as well as from child and adult team meetings in mental health and substance abuse services, and the multiple agencies involved with delivering quality services to our community. Consumers who utilize the Esperanza Wellness Center were involved in the CPP through group meetings. Over 100 surveys were distributed to gather input from consumers, family members, stakeholders, staff, providers, partner agencies, and the general public, with 86 completed and returned.

LOCAL REVIEW PROCESS

1. *Describe methods used to circulate, for the purpose of public comment, the annual update. Provide information on the public hearing held by the local mental health board after the close of the 30 day review.*

This MHSA FY 2014/2015 Update has been posted for a 30-day public review and comment period from **April 24, 2015**. An electronic copy is available online at www.san-benito.ca.us. Hard copies of the document are available at the Behavioral Health clinic and in the lobbies of all frequently accessed public areas, including, Hazel Hawkins Hospital, County Administration, and the local library. In addition, hard copies of the Update have been distributed to all members of the Behavioral Health Advisory Board; consumers (on request); staff (on request); Esperanza Center (our Adult/TAY Wellness Center); and with partner agencies. The 30-day comment period has also been announced on our website and via a newspaper ad, as well as posted prominently on each copy of the Update.

As an Update to an approved MHSA FY 2014/2015 Plan (a component of the most recent Three-Year Plan), this document does not require a Public Hearing.

2. *Include summary of substantive recommendations received during the stakeholder review and public hearing, and responses to those comments. Include a description of any substantive changes made to the annual update that was circulated. Indicate if no substantive comments were received.*

As an Update to an approved MHSA FY 2014/2015 Plan (a component of the most recent Three-Year Plan), this document does not require a Public Hearing.

Input on the MHSA Update will be reviewed and incorporated into the final document, as appropriate, prior to submitting to the County Board of Supervisors and the California Mental Health Services Oversight and Accountability Commission (MHSOAC).

MHSA Program Component CAPITAL FACILITIES/TECHNOLOGICAL NEEDS

1. Provide a program description.

Capital Facilities (CF) funds will be utilized to purchase and remodel an existing office building in Hollister to allow for the growth of SBCBH. The building will provide treatment space and staff offices for our mental health services and substance use treatment programs. The primary focus of the building will be to offer expanded MHSA services to children, families, adults, and older adults. In addition, psychiatric services will be available for all age groups in this facility.

The building will meet ADA specifications and be accessible for all clients and family members. The development of this facility and the delivery of MHSA services at this site will be consistent with the goals of our MHSA Three-Year Plan and the Capital Facilities and Technological Needs (CFTN) component.

A FY 2014/2015 transfer of \$379,139 from CSS to Capital Facilities is required to fund this project. As a result, the previously-approved transfer of \$110,000 to Prudent Reserve is rescinded. We will explore adding additional funding to the Prudent Reserve in future years.

A Technology project has not been determined at this time.

2. Describe any challenges or barriers, and strategies to mitigate.

In this small community, available properties are limited. As a result, our greatest challenge is finding the right facility that meets the needs of our staff and clients. At this time, SBCBH is conducting due diligence to determine the property that best fits our requirements.

3. Describe if the county is meeting/met benchmarks and goals, or provide the reasons for delays to implementation.

A specific timeline and related benchmarks/goals will be developed once the property has been identified. We anticipate that the purchase of the building will occur in FY 2015/2016.

4. List any significant changes from previous fiscal year or Plan, if applicable.

SBCBH has identified the need to move forward with a building purchase through CF dollars. We hope to accomplish this goal in FY 2015/2016.