FOR IMMEDIATE RELEASE
July 30, 2010

Over $6.5 Million in Prop 63 Funds Approved for Alameda, Mariposa, and San Mateo Counties for Mental Health Services

Yesterday, the California Mental Health Services Oversight and Accountability Commission (MHSOAC) approved a total of $6,552,109 for mental health services in Alameda, Mariposa, and San Mateo Counties. The MHSOAC approved $5,951,039 for Alameda County and $490,970 for San Mateo County, as requested, for new programs in their Prevention and Early Intervention (PEI) Annual Updates. Mariposa County was approved for $110,100 in Innovation (INN) funds.

The MHSOAC approves Prevention and Early Intervention (PEI) funds for programs that apply strategies focused on preventing mental illness from becoming severe and disabling. MHSOAC Chair Andrew Poat said, “Our prevention programs will decrease expensive emergency room visits as we provide prevention services to consumers of mental health services. Prevention and Early Intervention funds will keep kids in school, keep families together, and will avoid long term unemployment.”

Alameda County will be using their $5,951,039 in PEI monies to fund three new programs: Mental Health-Primary Care Integration for Older Adults; Peer Support Program for Children, Transitional Age Youth, and Adults; and the Prevention Grant Program. The Prevention Grant Program developed out of Alameda’s Community Program Planning process which identified several groups in the community that were not receiving a distinct allocation of resources with the original PEI plan. These populations include African American communities; lesbian, gay, bisexual, transgender, queer, questioning and intersex (LGBTQI) community; veterans; and individuals with co-occurring physical disabilities and addiction issues. Projects under this program will be based upon evidence-based, emerging and promising practices that will include culturally-competent community outreach, engagement and education.

San Mateo will be using the $490,970 approved in their PEI Annual Update for a new program called Community Outreach, Engagement, and Capacity Building. This program will use three strategies to identify individuals who are underserved, un-served and who will benefit from getting involved with the behavioral health system. The first strategy, the Navigator Program, will utilize outreach workers who are peers or parent partners who are bilingual, bicultural and connected to the community to connect those who are un-served or underserved to services while de-mystifying the system and reducing stigma. The second strategy is to add a licensed mental health clinician to a 24/7 suicide prevention hotline to ensure follow-up and linkage to behavioral health services. The third strategy expands the
capacity of providers, integrates evidence-based practices into day-to-day services, improves cultural and linguistic competency and improves the overall knowledge of providers to screen and treat patients for trauma and co-occurring disorders.

The funds approved by the MHSOAC for Innovation (INN) purposes will help fund county mental health programs that are novel, creative, and ingenious in their mental health approaches. These programs are also being developed within communities in ways that are inclusive and representative. Chair Poat said, “Innovation funds will help to jump start our thinking about how to improve our mental health programs.”

Mariposa will be using the $110,100 approved in their INN plan to use an adaptation of a successful child welfare practice, Team-Decision making, to improve services for adult clients. MHSA Team Decision-making is led by consumers which, at the consumer’s discretion, include family members, mental health professionals, and diverse community resource providers. The Teams offer support and resources for recovery and success. The adaptation of this practice to the adult population will be assessed for its effectiveness in creating positive results and whether MHSA Team Decision-making increases community collaboration and reduces stigma.

The MHSOAC met on Thursday, July 29, 2010 at the California Institute for Mental Health in Sacramento.

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