

# Alpine County Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20

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## Alpine County Behavioral Health Services



WELLNESS • RECOVERY • RESILIENCE

Prepared by:

Resource Development Associates

June 7, 2017





## Alpine County Behavioral Health Services

*Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

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### ACKNOWLEDGEMENTS

Alpine County Behavioral Health Services wishes to thank the many consumers, family members, community members, and agencies who participated in the community program planning and helped guide the development of this Three-Year Mental Health Services Act (MHSA) Program and Expenditure Plan:

- Alpine County Board of Supervisors
- Alpine County First 5
- Alpine County Mental Health Board
- Alpine County Unified School District and Office of Education
- Alpine County Health and Human Services
- Alpine Kids
- Alpine Native Temporary Assistance for Needy Families (TANF)
- Choices for Children
- Friends of Hope Valley
- Hung A Lel Ti Community
- Tahoe Youth & Family Services
- Woodfords Indian Education Center

As the preparers of this plan, Resource Development Associates (RDA) is particularly appreciative of the vision and commitment provided by the Mental Health Services Act (MHSA) Planning Committee, comprised of Alissa Nourse, Director of Behavioral Health and Amy Broadhurst, Mental Health Services Act (MHSA) Program Coordinator.

RDA Team:

- Amalia Egri Freedman
- Linda A. Hua, PhD
- Diana Sanders, MA
- Caitlin Palmer, MPP





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## List of Acronyms

Alpine County Behavioral Health Services (ACBHS)

Alpine County Mental Health Board (MHB)

Board of Supervisors (BOS)

California Association of Social Rehabilitation Agencies (CASRA)

California Mental Health Services Authority (CalMHSA)

Capital Facilities and Technology Needs (CFTN)

Community Program Planning (CPP)

Community Services and Supports (CSS)

electronic health record (EHR)

Field Capable Clinical Services (FCCS)

Full Service Partnerships (FSP)

Mental Health First Aid (MHFA)

Mental Health Services Act (MHSA)

Mental Health Services Oversight and Accountability Commission (MHSOAC)

National Alliance on Mental Illness (NAMI)

Positive Behavioral Intervention Supports (PBIS)

Prevention and Early Intervention (PEI)

Primary Intervention Program (PIP)

serious mental illness (SMI)

severe emotional disturbance (SED)

Temporary Assistance for Needy Families (TANF)

Transition Age Youth (TAY)

Workforce Education and Training (WET)



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## Mental Health Services Act (MHSA) County Compliance Certification

**County:** Alpine

<p align="center"><b>County Mental Health Director</b></p> <p><b>Name:</b> Alissa Nourse  <b>Telephone:</b> 530-694-1816  <b>Email:</b> anourse@alpinecountyca.gov</p>	<p align="center"><b>Program Lead</b></p> <p><b>Name:</b> Amy Broadhurst, MHSA Coordinator  <b>Telephone:</b> 530-694-1816  <b>Email:</b> abroadhurst@alpinecountyca.gov</p>
<p><b>County Mental Health Mailing Address:</b>  Alpine County Behavioral Health Services  75-C Diamond Valley Rd.  Markleeville, CA 96120</p>	

I hereby certify that I am the official responsible for the administration of county mental health services in and for said county and that the County has complied with all pertinent regulations and guidelines, laws and statutes of the Mental Health Services Act in preparing and submitting this annual update, including stakeholder participation and nonsupplantation requirements.

This annual update has been developed with the participation of stakeholders, in accordance with Welfare and Institutions Code Section 5848 and Title 9 of the California Code of Regulations section 3300, Community Planning Process. The draft annual update was circulated to representatives of stakeholder interests and any interested party for 30 days for review and comment and a public hearing was held by the local mental health board. All input has been considered with adjustments made, as appropriate. The annual update and expenditure plan, attached hereto, was adopted by the County Board of Supervisors on \_\_\_\_\_.

Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code section 5891 and Title 9 of the California Code of Regulations section 3410, Non-Supplant.

All documents in the attached annual update are true and correct.

County Mental Health Director (PRINT)	Signature <span style="float: right;">Date</span>

County: Alpine

Date: \_\_\_\_\_





**Alpine County Behavioral Health Services**

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## Mental Health Services Act (MHSA) County Fiscal Accountability Certification<sup>1</sup>

**County:** Alpine

Three-Year Program and Expenditure Plan

Annual Update

Annual Revenue and Expenditure Report

<p style="text-align: center;"><b>County Mental Health Director</b></p> <p><b>Name:</b> Alissa Nourse  <b>Telephone:</b> 530-694-1816  <b>Email:</b> anourse@alpinecountyca.gov</p>	<p style="text-align: center;"><b>Program Lead</b></p> <p><b>Name:</b> Amy Broadhurst, MHSA Coordinator  <b>Telephone:</b> 530-694-1816  <b>Email:</b> abroadhurst@alpinecountyca.gov</p>
<p><b>County Mental Health Mailing Address:</b>  Alpine County Behavioral Health Services  75-C Diamond Valley Rd.  Markleeville, CA 96120</p>	

I hereby certify that the Three-Year Program and Expenditure Plan, Annual Update or Annual Revenue and Expenditure Report is true and correct and that the County has complied with all fiscal accountability requirements as required by law or as directed by the State Department of Health Care Services and the Mental Health Services Oversight and

Accountability Commission, and that all expenditures are consistent with the requirements of the Mental Health Services Act (MHSA), including Welfare and Institutions Code (WIC) sections 5813.5, 5830, 5840, 5847, 5891, and 5892; and Title 9 of the California Code of Regulations sections 3400 and 3410. I further certify that all expenditures are consistent with an approved plan or update and that Mental Health Services Act (MHSA) funds will only be used for programs specified in the Mental Health Services Act. Other than funds placed in a reserve in accordance with an approved plan, any funds allocated to a county which are not spent for their authorized purpose within the time period specified in WIC section 5892(h), shall revert to the state to be deposited into the fund and available for counties in future years.

I declare under penalty of perjury under the laws of this state that the foregoing and the attached update/revenue and expenditure report is true and correct to the best of my knowledge.

County Mental Health Director (PRINT)	Signature	Date

<sup>1</sup> Welfare and Institutions Code Sections 5847(b)(9) and 5899(a).





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I hereby certify that for the fiscal year ended June 30, 2017, the County/City has maintained an interest-bearing local Mental Health Services (MHSA) Fund (WIC 5892(f)); and that the County's/City's financial statements are audited annually by an independent auditor and the most recent audit report is dated for the fiscal year ended June 30, 2016. I further certify that for the fiscal year ended June 30, 2017, the State Mental Health Services Act (MHSA) distributions were recorded as revenues in the local MHSA Fund; that County/City Mental Health Services Act (MHSA) expenditures and transfers out were appropriated by the Board of Supervisors and recorded in compliance with such appropriations; and that the County/City has complied with WIC section 5891(a), in that local Mental Health Services Act (MHSA) funds may not be loaned to a county general fund or any other county fund.

I declare under penalty of perjury under the laws of this state that the foregoing, and if there is a revenue and expenditure report attached, is true and correct to the best of my knowledge.

County Auditor Controller (PRINT)	Signature	Date

These forms will be signed once the plan has been finalized and approved by the Board of Supervisors.





## Overview

Alpine County lies along the crest of central Sierra Nevada, south of Lake Tahoe and north of Yosemite. This rural county is the smallest in California, with a population of 1,131 (US Census Bureau, 2015). Most of the population is concentrated around a few mountain communities: Markleeville, Woodfords, Bear Valley, and Kirkwood; Alpine County has no incorporated cities. Markleeville is the County seat and home to many of the County's offices. County departments and agencies provide direct services.

Alpine County is a "Small County" which is defined as a California county with a population of less than 200,000 as determined by the most recent census data. Population in Alpine County is comprised of 64.1% White, 19.4% American Indian/Alaskan Native, 9.5% Hispanic or Latino, 1.2% Asian, 3.4% with two or more non-Hispanic races, and 1.4% Native Hawaiian/Pacific Islander.<sup>2</sup> Partially situated in Alpine County, the Federally-recognized Washoe Tribe of Nevada and California includes four communities, with three in Nevada and one in Alpine County. The Washoe community in Alpine, Hung A Lel Ti, is concentrated in the town of Woodfords.

Alpine County began the Community Program Planning (CPP) process to develop its *Mental Health Services Act (MHSA) Three-Year Program and Expenditure Plan for Fiscal Years 2017–2020* in February 2017. Alpine County Behavioral Health Services (ACBHS) contracted with Resource Development Associates (RDA) to facilitate the Community Program Planning (CPP) activities that culminated in this plan. The purpose of this plan is to describe Alpine County's Community Program Planning (CPP) process, provide an assessment of the needs identified and prioritized via an inclusive stakeholder process, and the proposed programs and expenditures to support a robust mental health system based in wellness and recovery. This plan includes the following sections:

- **Overview of the community planning process** that took place in Alpine County from February through June 2017. Alpine County's Community Program Planning (CPP) was built upon the meaningful involvement and participation of mental health consumers, family members, county staff, providers, and other stakeholders as required by the Mental Health Services Oversight and Accountability Commission (MHSOAC).
- **Assessment of mental health needs** that identifies both strengths and opportunities to improve the public mental health service system in Alpine County. The needs assessment used multiple data sources, including service data, key informant interviews, community work sessions and public comments, to identify the service gaps that will be addressed by Alpine County's proposed Mental Health Services Act (MHSA) programs for FY 2017-20.
- **Description of Alpine County's Mental Health Services Act (MHSA) programs** by component, which includes a detailed explanation of each program, its target population, the mental health needs it addresses, and the goals and objectives of the program. This section of the plan also

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<sup>2</sup> U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates



provides information on the expected number of unduplicated clients served and the program budget amount.

This plan is required by the Mental Health Services Act (MHSA), approved by California voters in 2004 to expand and transform the public mental health system. The Mental Health Services Act (MHSA) represents a statewide movement to provide a better coordinated and more comprehensive system of care for those with serious mental illness, and to define an approach to the planning and the delivery of mental health services that are embedded in the Mental Health Services Act (MHSA) Values (see Figure 1). Mental Health Services Act (MHSA) planning and programming is funded through a 1% tax on individual annual incomes at or exceeding one million dollars.

**Figure 1: Mental Health Services Act (MHSA) Values**



Since completing the needs assessment and program planning phase of the *Three-Year Program and Expenditure Plan 2017– 2020*, stakeholders focused on addressing gaps that have emerged and enhancing the services offered by current Mental Health Services Act (MHSA) programs. Examples of priority service areas include:

- Continue to expand services and engagement in Bear Valley and Kirkwood;
- Improve outreach and engagement among transition age youth; and
- Enhance supports to community members and staff at risk for experiencing secondhand trauma.

This plan reflects the deep commitment of Alpine County Behavioral Health Services (ACBHS) leadership, staff, providers, consumers, family members, and other stakeholders to the meaningful participation of the community as a whole in designing Mental Health Services Act (MHSA) programs that are wellness and recovery focused, client and family driven, culturally competent, integrated, and collaborative.



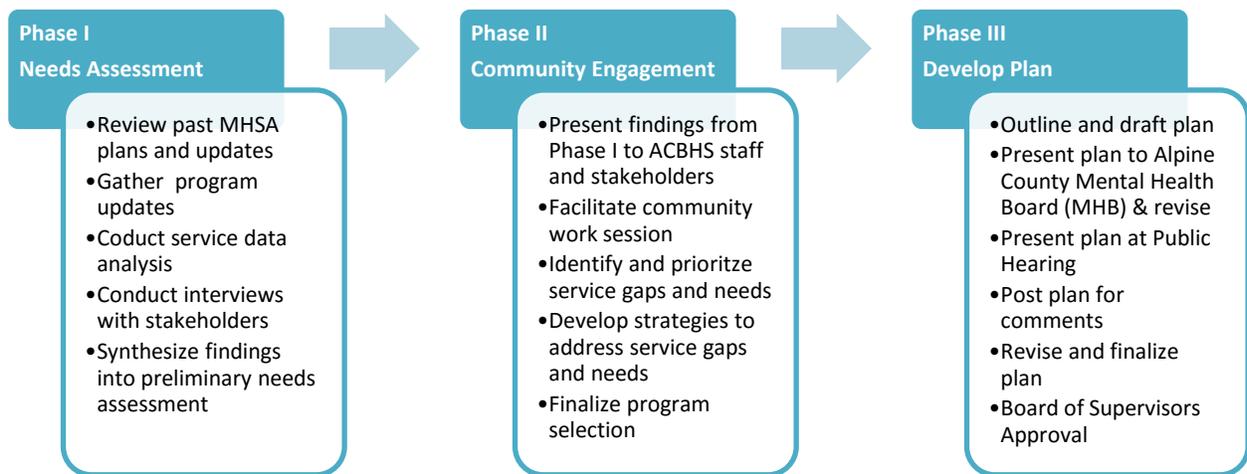
## Community Program Planning

### Approach/Methodology

In February of 2017, Alpine County Behavioral Health Services (ACBHS) initiated a planning process for the Mental Health Services Act (MHSA) Three-Year Program and Expenditure Plan (Plan) for Fiscal Years 2017-2018 through 2019-2020. The Mental Health Services Act (MHSA) Planning Committee was led by Alissa Nourse, Director of Behavioral Health Services; Amy Broadhurst, Mental Health Services Act (MHSA) Coordinator; and Resource Development Associates (RDA), a consulting firm with mental health planning expertise.

The planning team utilized a participatory framework to encourage buy-in and participation from stakeholders, including: service providers, consumers, family members, and other interested community members. The planning process consisted of three distinct phases: 1) Needs Assessment; 2) Community Engagement; and 3) Plan Development, as detailed in Figure 2.

Figure 2: Community Planning Process



Throughout the planning process, the planning team regularly presented to the Alpine County Mental Health Board (MHB) and Board of Supervisors, both of which reviewed and commented on all recommendations made by the Mental Health Services Act (MHSA) planning team. All meetings of the Alpine County Mental Health Board (MHB) and Board of Supervisors are open to the public.

### Community Planning Activities

In addition to making opportunities for various Alpine County Behavioral Health Services (ACBHS) stakeholders to participate in the needs assessment, the Mental Health Services Act (MHSA) Planning Team also provided opportunities for diverse Alpine County Behavioral Health Services (ACBHS) stakeholders to participate in the program planning and review process. These stakeholders included





behavioral health service consumers and their family members, service providers, members of law enforcement, education representatives, representatives from social services agencies, members of health care organizations, and representatives of underserved populations as set forth by the Mental Health Services Act (MHSA) Community Program Planning (CPP) guidelines. The details of these opportunities are further described below.

**Table 1. Community Participation in Strategy Development and Review**

Activity	Date	Total Participants
<i>Community Work Session</i>	March 10, 2017	17
<i>30-Day Review Period</i>	April 13-May 14, 2017	n/a
<i>Public Hearing</i>	May 25, 2017	4

### Community Work Session

Following the conclusion of the Needs Assessment, RDA synthesized the results of stakeholder interviews, the countywide survey, and the program and service data analysis to identify key strengths and challenges in Alpine County’s mental health services as experienced by a variety of stakeholders. Through this process, RDA also identified program and services needs and gaps. RDA then presented this information during a one-day community work session on March 10, 2017 held at the Firehouse Wellness Center in the Hung A LeI Ti Community. The team designed the work session to discuss the results of the needs assessment and to identify strategies to address these needs and gaps and maximize resources.

Alpine County Behavioral Health Services (ACBHS) publicized the community work session via flyers posted at the Wellness Center, Behavioral Health Services offices, and other public locations throughout the county (including Health & Human Services, Post Office, Library, and other business locations with exterior bulletin boards). Alpine County Behavioral Health Services (ACBHS) also sent the flyer via email to about 200 Alpine County Behavioral Health Services (ACBHS) stakeholders and posted it on both the Alpine County Behavioral Health Services (ACBHS) and Alpine County websites. Additionally, the Director spoke to the public about it at several Board of Supervisor meetings. The Mental Health Services Act (MHSA) Coordinator also conducted door-to-door outreach to inform community members of the date, time, and location of the community work session. Seventeen stakeholders attended the community work session.

The community work session provided an opportunity for participants to corroborate service gaps and needs from the needs assessment and expand this list based on their knowledge and experience of mental health services in Alpine County. RDA facilitated a work session to brainstorm strategies that would help address these needs and gaps in which stakeholders were asked the following questions:

1. Of the existing Mental Health Services Act (MHSA) programs, what programs or services are working well?
2. What changes would you make to existing programs to address the community’s areas for growth (e.g., changes or modifications)?





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3. What existing resources from the county or community-based organizations could be leveraged to make the changes identified above?
4. What new programs or strategies would need to be implemented (if any) to address the community’s areas for growth?
5. Of the strategies you listed above, would any of them address other gaps? If so, please list the strategies and areas for growth.

Stakeholders agreed that Alpine County Behavioral Health Services (ACBHS) has made great strides to address the community’s mental health needs and encouraged Alpine County Behavioral Health Services (ACBHS) to continue these efforts. In addition, work session participants developed the following strategies, which primarily consist of slight program modifications as summarized in Table 2.

**Table 2: Programming Strategies by Mental Health Services Act (MHSA) Component as Identified during Community Work Session**

MHSA Component	Program Expansion or Modifications
Community Support Services (CSS)	<ul style="list-style-type: none"> <li>• Keep all current programs</li> <li>• Increase outreach and engagement and educating community members about Alpine County Behavioral Health Services (ACBHS) programming and services, particularly in Bear Valley and Kirkwood</li> <li>• Use yoga as a key channel for expanded outreach and engagement</li> </ul>
Prevention and Early Intervention (PEI)	<ul style="list-style-type: none"> <li>• Engage Transition Age Youth (TAY) in identifying their needs and developing programming in a variety of prevention and early intervention strategies, including a learning series on topics such as developing life skills for adulthood and coping with stress; safe hang out spaces dedicated for Transition Age Youth (TAY) use; foster care transition and supports for other life changes; peer mentorship for Transition Age Youth (TAY) who are exposed to neglect, violence, and substance abuse; and advocacy for Transition Age Youth (TAY) who have large household responsibilities</li> <li>• Explore the need to provide secondhand trauma support and socialization services for caretakers, particularly grandparents who raise grandchildren</li> <li>• Explore the need for collaboration with other agencies such as Health and Human Services to provide congregate meals for seniors</li> </ul>
Workforce, Education, and Training (WET)	<ul style="list-style-type: none"> <li>• Include explicit trainings for staff on self-care and strategies to mitigate secondhand trauma</li> </ul>
Capital Facilities and Technology Needs (CFTN)	<ul style="list-style-type: none"> <li>• Continue to develop additional space for expanded/new services and Alpine County Behavioral Health Services (ACBHS) administrative offices (in progress)</li> </ul>
Innovation (INN)	<ul style="list-style-type: none"> <li>• Develop a position and provide training for a peer navigator and/or advocate with experience as a consumer or family member of a consumer to provide guidance to consumers and family members navigating the mental health care system.</li> </ul>





## Alpine County Behavioral Health Services

### *Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

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Following the community work session, the Mental Health Services Act (MHSA) Planning Team met to review the proposed strategies. The principle criteria in reviewing the proposed strategies were applicability to existing Mental Health Services Act (MHSA) programs, ability to address service needs, resources required, and adherence to Mental Health Services Act (MHSA) requirements. Ultimately, the planning team decided to incorporate most of the proposed strategies that adhered to these requirements into the Mental Health Services Act (MHSA) Annual Update. As Transition Age Youth-focused programming and peer advocacy were larger topics that need further exploration, Alpine County Behavioral Health Services (ACBHS) plans to make a concerted effort to learn more about those specific needs in FY 2017/18 so Alpine County Behavioral Health Services (ACBHS) can be targeted and responsive in developing programming for these needs in FY 2018/19.

### Local Review Process

The 30-day public comment period opened on April 13, 2017, when Alpine County Behavioral Health Services (ACBHS) posted the Annual Update publicly on the County website and emailed it to all Community Program Planning (CPP) participants who provided email addresses. Additionally, Alpine County Behavioral Health Services (ACBHS) posted a copy of the update at the Firehouse Wellness Center, in the reception areas of Behavioral Health, Health and Human Services, and the County Administrative Offices, and the Markleeville Post Office. Each posting included a request for written feedback. The cover page included date, time, and location of the Annual Update Public Hearing hosted by the Mental Health Board.

The Mental Health Board hosted a Public Hearing on May 25, 2017 to review and vote on the Three-Year Program and Expenditure Plan. During the hearing, community stakeholders were invited to provide feedback about the Three-Year Program and Expenditure Plan. Five stakeholders attended the public hearing, representing county staff, providers, and community members.

Alpine County Behavioral Health Services (ACBHS) staff presented the plan to public hearing participants by reviewing the community planning process and the Mental Health Services Act (MHSA) funded programs by component. The meeting was then opened for public comment.

### Public Comments

Overall, Alpine County Behavioral Health Services (ACBHS) did not receive many comments from the public. One community member submitted a comment during the 30-day public comment period, and two community members submitted comments at the Public Hearing.

**Comment received in-person during the 30-day public review period:** One community member requested that the Three-Year Program and Expenditure Plan use full program names and terms and avoid using only acronyms.



**Response:** Alpine County Behavioral Health Services (ACBHS) ensured the report spelled out full names and terms and added acronyms for stakeholders who may be only familiar with the acronym for some terms.

**Comment stated in-person at the Public Hearing:** A community member shared their experience implementing the Strong Warriors Project, a curriculum-based program that balances spiritual and mental health for Native and non-Native men and boys. The community member suggested this program may be responsive to transition age youth (TAY) needs.

**Response:** Alpine County Behavioral Health Services (ACBHS) will take recommendation this into consideration. The focus over the next few years will be to work with transition age youth (TAY) to understand their needs and desires for programming, including working with them to develop targeted programming that may include the Strong Warriors Project and other programs specified by transition age youth (TAY).

**Comment received in writing at the Public Hearing:** I believe this Mental Health Services Act (MHSA) plan has addressed the needs of the community.

### Summary of Stakeholder Participation

A total of 127 stakeholders participated in various needs assessment and Community Program Planning (CPP) activities from February through March 2017<sup>3</sup>. Several stakeholders participated in more than one activity, and all who participated in needs assessment activities were also invited to participate in the Community Program Planning (CPP) process. The following table displays the various Community Program Planning (CPP) activities the Mental Health Services Act (MHSA) Planning Team conducted to gather stakeholders’ input and the number of stakeholders engaged in each activity.

**Table 3. Stakeholder Participation in Community Program Planning (CPP) Activities**

Community Program Planning (CPP) Activity	Date	Total Participants
Countywide Survey	February – March 2017	58
Phone Interviews	February – March 2017	10
Transition Age Youth (TAY) Focus Group	February 17, 2017	4
Adult Focus Group	March 1, 2017	27
Older Adult Focus Group	March 9, 2017	11
Community Work Session	March 10, 2017	17
30-Day Public Posting	April 13 – May 14, 2017	1
Public Hearing	May 25, 2017	4

<sup>3</sup> Total participation was tallied based on sign-in sheets. It is possible that some participants did not sign in at all events.



## Alpine County Behavioral Health Services

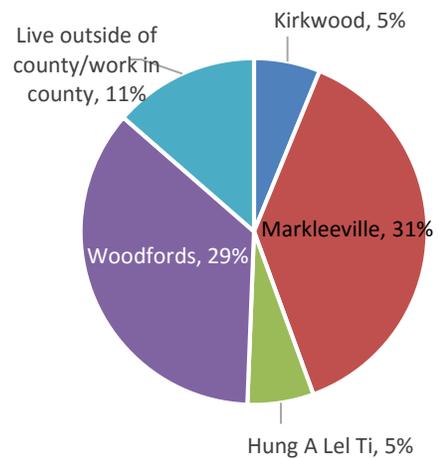
Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20

The participants represented a diverse age range (2% under 16, 49% adults, and 45% older adults); 78% of the participants identified as female, while 16% identified as male and 6% identified as other or preferred not to answer, and 83% identified as White/Caucasian, while 10% identified as American Indian/Native Alaskan and 6% identified as other.

The majority of participants were from either Markleeville (30%) or Woodfords (28%). About 11% of the participants were residents of another county who worked in Alpine County.

The Mental Health Services Act (MHSA) Planning Team was successful in engaging diverse stakeholders as set forth by the Mental Health Services Oversight and Accountability Commission’s (MHSOAC) Community Program Planning (CPP) guidelines, including behavioral health service consumers and their family members, service providers, education representatives, representatives from social services agencies, members of health care organizations, and representatives of underserved populations<sup>4</sup>. Participants were asked to complete anonymous demographic forms to self-identify their stakeholder affiliations; their responses were compiled and included in this section at the close of the 30-day public posting period.

Figure 3. Stakeholder Location



## Needs Assessment

To identify the current service strengths, needs, and gaps in the county, Resource Development Associates (RDA) developed a needs assessment based on the information received through the community planning activities described above. This included reviewing the following information sources to identify consistent themes:

- Past Mental Health Services Act (MHSA) program plans and documents
- Public comments from the FY 2014-15 Annual Update
- Service data over the past fiscal year
- Interviews with key informants in the Alpine County Behavioral Health Services (ACBHS) stakeholder group
- An online survey of consumers and stakeholders

<sup>4</sup> At the time of this planning process, the Mental Health Services Oversight and Accountability Commission (MHSOAC) had not released updated guidelines. This planning process was conducted based on instructions the Mental Health Services Oversight and Accountability Commission’s (MHSOAC) FY 2015-2016 MHSA Annual Update Instructions.





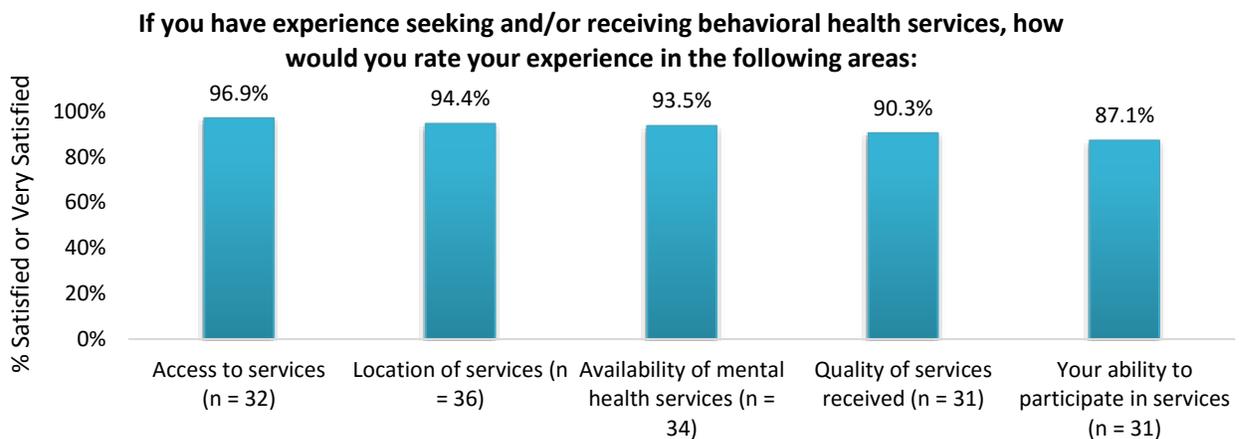
Initial findings from these activities were presented to stakeholders present at the community work session in March, during which time stakeholders validated, clarified, and prioritized service needs and gaps. The data collection methods and general participant demography for each of these data collection activities is described above, in *Community Program Planning*. Further details about participants and their demography can be found in *Appendix A*. Challenges are presented in order of greatest priority, as identified during the community work session.

### Countywide Stakeholder Survey

In an effort to reach more Mental Health Services Act (MHSA) stakeholders, particularly those who are geographically isolated, the Mental Health Services Act (MHSA) Planning Team administered an online and paper-based survey countywide. Fifty-eight individuals completed the survey, sharing their awareness of and experience with behavioral health services in the County. Eighty-seven percent of those who participated were aware of behavioral health services available in the County. Those who completed the survey were also asked to rate their satisfaction with the availability of services and the extent to which services met their needs. Survey participants were also asked to identify populations who were in particular need of behavioral health services.

Across the various stakeholder engagement efforts, community feedback was very positive, noting that Alpine County Behavioral Health Services (ACBHS) has improved over the past few years. Among survey respondents who had experience accessing Alpine County Behavioral Health Services (ACBHS) programs and services, about 87–94% were satisfied with access, availability, and quality of services (see Figure 4).

**Figure 4. Countywide Survey: Stakeholder Satisfaction with Alpine County Behavioral Health Services (ACBHS) Programs and Services**



The survey in combination with other community planning activities and program data highlighted the strengths of Alpine County Behavioral Health Services (ACBHS) programs and identified opportunities to address needs. The following sections present the findings from the community program planning process for access to services, staff and workforce, youth and families, transitional age youth, and adults and older adults.





## Access to Services

Mental Health Services Act-funded programs served 1,821 people in FY 2015-16. The majority of consumers were adults (659 individuals), followed by children (499 individuals), older adults (401 individuals), and transition age youth (168 individuals).<sup>5</sup> Of all the persons who received services through Mental Health Services Act (MHSA), 28% of consumers received services through the Community Services and Supports (CSS) component while 72% received services through Prevention and Early Intervention (PEI).

## Strengths

Across the Community Program Planning (CPP) activities, participants were generally pleased with the programs and services in which they have engaged. Stakeholders identified several strengths that improve access to Alpine County Behavioral Health Services (ACBHS) services.

- **Friendly and helpful staff:** Alpine County Behavioral Health Services' (ACBHS) friendly and helpful staff help make the programs and services more accessible.
- **Outreach to geographically remote areas:** Community members noted that concerted efforts to expand reach and services in Bear Valley and Kirkwood have effectively improved access for those residents.
- **Yoga classes are gateways to other behavioral health services:** Yoga classes, including Yoga & Art for Trauma Release and Yoga Meditation, have helped connect consumers with serious mental illnesses to other Alpine County Behavioral Health Services (ACBHS) services.
- **Increased communication with community:** In collaboration with Alpine County Behavioral Health Services (ACBHS), a couple of community members created a list serve to inform county residents who have internet access about upcoming programs and events in Alpine County including Alpine County Behavioral Health Services (ACBHS) events and services. Alpine County Behavioral Health Services (ACBHS) staff have also expanded their use of social media to advertise upcoming activities.
- **Improved transportation:** Alpine County Behavioral Health Services (ACBHS) provides transportation to all Mental Health Services Act (MHSA) programs which has greatly improved consumers' access to Mental Health Services Act (MHSA) programs and services. However, community work session participants suggested expanding hours of availability and area of coverage for transportation to allow more people to attend Mental Health Services Act (MHSA) programs.

*I feel all ages and demographics can benefit from programs such as yoga, movie nights, field trips or other Alpine County Behavioral health Services programs. Especially those who live in remote areas with very limited choices.*

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<sup>5</sup> The figure 1,821 is not unduplicated. Many Mental Health Services Act (MHSA) consumers participate in multiple programs and services.



**Needs**

- **Increased outreach about available services and mental health care system:** Some community members and interview respondents expressed a lack of awareness about how mental and behavioral health is implemented in the county. In particular, some were unsure of how Alpine County Behavioral Health Services’ (ACBHS) socialization and exercise programs support wellness, and relate to improved mental health. These respondents suggested that staff can spend more time debriefing events or using events as an opportunity to educate participants about wellness and Alpine County Behavioral Health Services (ACBHS) services. Additionally, there is a need to increase outreach about existing mental/behavioral health services available such as one-on-one counseling with a therapist. Alpine County Behavioral Health Services (ACBHS) staff should use accessible language and avoid jargon when educating the public about programs, services and their relationship to Alpine County Behavioral Health Services (ACBHS) and mental health.
- **Improved communication and coordination with other providers to improve referrals and expand access to services:** There may be opportunities for Alpine County Behavioral Health Services (ACBHS) to increase coordination with other service providers to improve engagement of residents utilizing other county services and to facilitate referrals to other services when appropriate. When discussing needs for each consumer group, stakeholders repeatedly raised the need for better coordination of care between providers. Consumers recounted frustrations of “finding the right door” and interacting with staff in other departments who were not well informed of Alpine County Behavioral Health Services (ACBHS) or its programs and services.

*Part of [our job] is our responsibility to know what’s available in the county so we know what to ask for when we need it.*

*—Education partner*

**Staff and Workforce**

In FY 2015-16, Alpine County Behavioral Health Services (ACBHS) began planning its Workforce, Education, and Training (WET) plan, a component . The plan was meant to begin implementation in FY 2016-17, though progress has been slow and Alpine County Behavioral Health Services (ACBHS) continues to develop and grow its staff in response to community needs. The following findings encompass strengths and needs of the Alpine County Behavioral Health Services (ACBHS) workforce as a whole, regardless of Mental Health Services Act (MHSA) funding.

**Strengths**

- **Culturally sensitive and responsive staff:** Across all Community Program Planning (CPP) activities, stakeholders generally agreed that, in addition to being friendly and helpful, Alpine County Behavioral Health Services (ACBHS) staff have the cultural humility necessary to provide services to Alpine County’s diverse community members. Alpine County Behavioral Health Services (ACBHS) recently filled a vacancy for a Native Wellness Advocate position, late March -2017 that





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will increase Alpine County Behavioral Health Services' (ACBHS) capacity to provide services and programs that are responsive to the culture of the county's Washoe community.

### Needs

- **Training to mitigate secondhand trauma for staff:** Staff identified the need to introduce training to avoid and mitigate the secondhand trauma associated with their work. While some of these elements are included in Alpine County Behavioral Health Services' (ACBHS) Workforce, Education, and Training (WET) plan, the plan has not been fully implemented, so the training may be inconsistent and/or staff may be unaware of the availability of such training.
- **Secondhand trauma prevention supports for community members:** Community members also expressed a need for secondhand trauma supports. In such a small community, family members are often responsible for serving as caretakers to other family members. Predominantly, caretakers are grandparents who are responsible for raising their grandchildren, youth and Transition Age Youth (TAY) who shoulder many household responsibilities, or adults who provide care for their family members with special needs and/or those who are in recovery. Stakeholders noted that such responsibility is taxing and can lead to secondhand trauma and expressed a need for caregiver support and prevention services such as socialization, respite, and self-care.
- **Expanded choice and input around services and treatment:** Consumers expressed an ongoing need to increase their opportunities to have input into their treatment planning and be active in making choices about services in which they participate. Opportunities to increase consumers' choice and input may include providing consumers with more options in therapeutic modalities and clinicians.

### Programs and Services for Youth and Families

In the past fiscal year (2015-16), Alpine County Behavioral Health Services (ACBHS) has provided a variety of Mental Health Services Act-funded programs and services for children and youth ages 0–15. Many of these programs and services include whole-family involvement. These programs and services served 499 children and youth in FY 2015-16.

### Strengths

- **Youth and families have high engagement in activities:** Youth- and family-oriented programs such as family outings, Movie Night, and Family Night have been successful in engaging youth and families in Alpine County Behavioral Health Services (ACBHS) programs and services. Families see the benefits of these programs in several ways: 1) they are better informed of services available to them if needed; 2) given that some of the activities are run by clinicians, there are opportunities for early identification of behavioral health needs; 3) socialization activities are effective in preventing feelings of isolation and lack of confidence in parenting.
- **Primary Intervention Program (PIP) in schools helps connect students to needed services:** The school-based Primary Intervention Program (PIP) has improved referrals between the school and Alpine County Behavioral Health Services (ACBHS) programs and cultivated stronger relationships between staff and the youth they serve. In addition, Primary Intervention Program (PIP) staff have





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been able to extend their trusting relationships with youth to include families, resulting in better outcomes. Staff have reported that Primary Intervention Program (PIP) serves as an easy entrée into behavioral health services, diminishing stigma-based fears of engaging in services.

- **Positive Behavioral Intervention Supports (PBIS) supports youth mental health in schools:** The school-based Positive Behavioral Intervention Supports (PBIS) program has been successful in providing social-emotional support and behavioral management to students struggling with stress and difficult life experiences such as trauma and foster care.
- **Training teachers expands mental health intervention support for students:** Some school staff have been trained in Mental Health First Aid as well as suicide prevention and intervention so they are better equipped to be more aware of warning signs and address the needs of youth during the school day.

### Needs

- **Increased socialization, substance abuse prevention, and resiliency skills:** Community work session participants identified a need to extend or introduce more youth programs to promote socialization, resiliency, and prevention of substance abuse and mental illness. In particular, many felt that outdoor activities could successfully engage youth while teaching important life skills.
- **Collaboration with youth to design and implement services:** Developing a youth-directed program using a “for us, by us” model could encourage youth buy-in and engagement in Alpine County Behavioral Health Services (ACBHS) services.

## Programs and Services for Transitional Age Youth (TAY)

In the past fiscal year (2015-16), Alpine County Behavioral Health Services (ACBHS) has provided some - funded programs and services for transition age youth (TAY) ages 16–24. Based on the previous Mental Health Services Act (MHSA) planning process, Alpine County Behavioral Health Services (ACBHS) and the community are aware that Transition Age Youth (TAY) services are an area of need. These programs and services served 168 Transition Age Youth (TAY) in FY 2015-16.

### Strengths

- **Transition Age Youth (TAY) participants socialize and build support networks:** Current TAY-focused programs provide opportunities for Transition Age Youth (TAY) to connect with their community and meet new people.
- **Providers have good rapport with Transition Age Youth (TAY):** Transition Age Youth (TAY) participants feel that staff are friendly, helpful, and understanding, which facilitates participation in Alpine County Behavioral Health Services (ACBHS) programs.

### Needs

- **Support for Transition Age Youth (TAY) in developing life skills to transition to adulthood:** In Alpine County, the Transition Age Youth (TAY) population are generally young people transitioning from their teen years to adulthood in a rural environment and may be geographically-isolated from places and experiences that would help them develop skills they will need to become





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independent. Developing life skills such as professionalism, the ability to cope with stress or anger, and personal care such as cooking and exercise is an ongoing need for programs serving Transition Age Youth (TAY) in Alpine County.

- **Increased engagement with Transition Age Youth (TAY) in programs and services:** Transition Age Youth (TAY) focus group participants and community work session participants agreed that there is an ongoing need to consistently engage more Transition Age Youth (TAY) in Alpine County Behavioral Health Services (ACBHS) programs and services. Transition Age Youth (TAY) face barriers to participating in mental health treatment and services including stigma related to mental health, lack of transportation, and lack of knowledge about what services are available. Transition Age Youth (TAY) and community members felt Alpine County Behavioral Health Services (ACBHS) may engage more Transition Age Youth (TAY) by directly engaging them in designing programming and engagement strategies.
- **Dedicated space for Transition Age Youth (TAY) to congregate and access drop-in services:** Related to the need to increase engagement and guide Transition Age Youth (TAY) in developing life skills for adulthood, some identified the need for a safe space dedicated for Transition Age Youth (TAY) to gather and socialize. This location could also serve as a drop-in location for Transition Age Youth (TAY) to engage in or be referred to other services as needed, which could increase access and engagement.
- **Prevention and treatment for substance and alcohol abuse:** Many community members expressed concern that drug and alcohol addiction impacts the lives of the county's Transition Age Youth (TAY) population. This trend leads to a need for increased substance abuse prevention programming and treatment for substance abuse disorder, which will be addressed within the county's Substance Use Disorder program.

## Programs and Services for Adults and Older Adults

In ACBHS' Mental Health Services Act (MHSA) Three-Year Program and Expenditure Plan for Fiscal Years 2014–2017, and prior years, stakeholders had identified programs and services for adults and older adults (ages 60 and above) as priority needs. Through the years, Alpine County Behavioral Health Services (ACBHS) has implemented a wide array of Mental Health Services Act (MHSA) programs and services for adults and older adults. In the past fiscal year (2015-16), Alpine County Behavioral Health Services' (ACBHS) Mental Health Services Act-funded programs and services served 659 adults and 401 older adults.



## Strengths

- **Successful engagement among adults and older adults:** Targeted programs have been successful in helping adults and seniors connect to their communities, building peer support networks, reducing isolation, and accessing other Alpine County Behavioral Health Services (ACBHS) programs. Yoga classes, congregate meals through Create the Good, and Senior Soak outings to Grover Hot Springs are examples of popular programs that have engaged Alpine County adults and provided opportunities to refer participants to other Alpine County Behavioral Health Services (ACBHS) services.

- **Senior socialization activities, combined with transportation, address a persistent need among older adults:**

Given the vast geography and small population of Alpine County, residents can easily feel isolated in their communities. This was particularly true for adults as they aged, lost friends, and became more homebound. Many had reported strong feelings of isolation and depression. Since implementing a variety of senior socialization activities, older adults have reported improved wellness and connectedness. Further, providing transportation to all Mental Health Services Act (MHSA) activities has enabled even more individuals to participate.

*I feel that [ACBHS] services apply to all age groups, all ethnicities. We keep meeting more people in our age group and older through their services and community building activities. We are always looking out for one another. I've seen older people become hermits so we go out and go on group walks when the weather permits. It keeps people from isolating.*

*—Community member*

## Needs

- **Peer advocacy to help consumers and their loved ones navigate the mental health system:** The community work session participants identified a need for an unbiased peer advocate for consumers and their family members to provide guidance and experience-based knowledge on how best to navigate the mental health care system in Alpine County and beyond. To meet this need, the advocates should relate to the consumers' or family members' perspective based on their own personal experience of navigating mental health services, legal system, and paperwork. Qualified advocates would be nonjudgmental, sensitive to consumers' culture, and aware of the community's history.
- **More information for consumers about available services and events:** To meet the need for consumers' to have a better understanding of mental health and the system of care available, providers can leverage existing wellness events as opportunities to educate consumers about mental health programs and other available services.



## MHSA Three-Year Program Plan

The following are the proposed programs and program modifications developed through community program planning, consistent with guidelines set forth by the Mental Health Services Oversight and Accountability Commission (MHSOAC). These programs are presented by MSHA component. Specific expenditure details are provided in the following section.

**Table 4. Summary of Mental Health Services Act (MHSA) Programs by Component**

Component	Program
<b>Community Services and Supports (CSS)</b>	Field Capable Clinical Services
	Full Service Partnerships
	Play Therapy
	Grief Support
	Outreach and Engagement
	General Systems Development
<b>Prevention and Early Intervention (PEI)</b>	Senior Socialization and Exercise
	Positive Behavior Interventions Support
	Create the Good
	Combining Past and Present
	Wellness Projects
	School-Based Primary Intervention Program
	Mental Health First Aid Training
Suicide Prevention Program	
<b>Workforce, Education, and Training (WET)</b>	Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Coordination
	Fundamental Learning Program
	Increasing Mental Health Staff Through Educational Stipends
	Financial Incentive Programs
<b>Capital Facilities and Technology Needs (CFTN)</b>	Capital Facilities Development
	Electronic Health Record Implementation

In addition to implementing these programs, based on community input, Alpine County Behavioral Health Services (ACBHS) will also begin exploring the potential of creating peer navigator positions and/or increasing partnership with peer advocates. Depending on the need and anticipated community engagement with peers, Alpine County Behavioral Health Services (ACBHS) may incorporate the function as a part of its own budget or revisit the topic in later Community Program Planning (CPP) processes to incorporate peer provider and/or advocacy as an Mental Health Services Act (MHSA) service, program, or project.



## Community Services and Supports (CSS) Programs

Through the Community Program Planning (CPP) process, stakeholders supported current Community Services and Supports (CSS) programs and identified few needs for modifications. As a result, the Mental Health Services Act (MHSA) Planning Team did not develop any new Community Services and Supports (CSS) programs, and proposes the continuation of current programs with slight modifications listed below in the proposed activities sections.

Field Capable Clinical Service				
<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing		<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+
<b>Program Description</b>				
<p>The Field Capable Clinical Services (FCCS) program increases behavioral health services utilization rates, supports isolated and homebound individuals, and increases behavioral health integration into the Hung A Lel Ti Community by extending services to schools, homes, and community locations throughout the county. The Field Capable Clinical Services (FCCS) program also ensures that therapeutic support and case management can be provided where the client feels most comfortable in the community. These services include a variety of evidence-based practices, such as:</p> <ul style="list-style-type: none"> <li>• Cognitive Behavioral Therapy</li> <li>• Individual Cognitive Behavioral Therapy</li> <li>• Trauma Focused Cognitive Behavioral Therapy</li> <li>• Dialectal Behavior Therapy</li> <li>• Motivational Interviewing</li> <li>• Solution Focused Therapy</li> <li>• Perinatal Mood Disorders</li> <li>• Mindfulness</li> </ul>				
<b>FY 2015 – 2016 Activities and Outcomes</b>				
<p><b>Key Successes in FY 2015-16:</b></p> <ul style="list-style-type: none"> <li>• The provision of behavioral health services in non-clinical environments has led to a decrease in missed appointments.</li> <li>• Locating services in the Hung A Lel Ti community has facilitated building trust with tribal members and decreased missed appointments within the community.</li> </ul> <p><b>Program Challenges in FY 2015-16:</b></p> <ul style="list-style-type: none"> <li>• Making and confirming appointments by phone are challenging due to inconsistent phone and internet service in the most rural areas.</li> </ul>				
<b>Number served in FY 2015-16:</b>	43	<b>Total Costs FY 2015-16:</b>	\$235,114.41 (\$5,467.78 per person)	
<b>Proposed Activities for FY 2017 – 2020</b>				
<p>BHS will continue to provide clinical services in non-clinical environments, including schools and community locations throughout the county. Alpine County Behavioral Health Services (ACBHS) will also pursue Medi-Cal certification for a new location for Field Capable Clinical services.</p>				



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<b>Goals and Objectives</b>			
<b>Goal:</b>	Field Capable Clinical Services (FCCS) aims to increase service utilization rates and support individuals who live in isolated communities, who are homebound, or who prefer to receive services in private settings. The program also aims to increase integration of Behavioral Health Services into the Hung A Lel Ti community and improve overall trust and community relations.		
<b>Objective 1:</b>	Provide supportive, flexible, consumer-driven services to all consumers at their preferred level of engagement.		
<b>Objective 2:</b>	Reduce the impact of living with serious mental illness or serious emotional disturbance (e.g., homelessness, incarceration, isolation).		
<b>Number to be served FY 2017-18:</b>	45	<b>Proposed Budget FY 2017-18:</b>	\$250,000
<b>Cost per Person FY 2017-18:</b>	\$5,555	<b>Total Proposed Budget FY 2017-20:</b>	\$800,000

<b>Full Service Partnerships (FSP)</b>				
<b>Status:</b>	<input type="checkbox"/> New		<input checked="" type="checkbox"/> Continuing	
			<input type="checkbox"/> Modified	
<b>Priority Population:</b>	<input type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+

**Program Description**

The full service partnership (FSP) program is designed to expand mental health services and supports to severely mentally ill residents of all ages, and to assist these residents in achieving their goals. Alpine County Behavioral Health Services (ACBHS) staff members also serve as active partners in County Multi-Disciplinary Teams in order to increase coordination of services across departments and jurisdictions and promote cross-disciplinary learning.

A team composed of Alpine County Behavioral Health Services (ACBHS) clinical staff offers strength-based, client/family-directed, individualized mental health and wraparound services, and supportive funding to children and youth with severe emotional disturbance (SED) who have experienced school disciplinary problems or academic failures, are in or at risk of out-of-home placement, or are at risk of involvement in juvenile justice; transitional age youth with severe emotional disturbance (SED) who are at risk of or have juvenile justice involvement, co-occurring disorders, risk of homelessness, or involuntary hospitalization, or institutionalization; adults with serious mental illness (SMI) who are homeless or at risk of homelessness, have co-occurring substance use disorders, are involved in the criminal justice system, or have had frequent hospitalization or use of emergency room services for psychiatric problems; and older adults with serious mental illness (SMI) who are homeless or at risk of homelessness, are frequent users of emergency psychiatric services or hospitalizations, have reduced functioning due to health problems, or are isolated or at risk of suicide.

These services include a variety of evidence-based practices, such as:

- Cognitive Behavioral Therapy
- Individual Cognitive Behavioral Therapy
- Trauma Focused Cognitive Behavioral Therapy
- Solution Focused Therapy
- Perinatal Mood Disorders
- Mindfulness
- Play Therapy





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- Dialectal Behavior Therapy
- Motivational Interviewing

**FY 2015 – 2016 Activities and Outcomes**

**Key Successes in FY 2015-16:**

- The full service partnership (FSP) program provided eight individuals with the highest level of care through individualized and coordinated behavioral health services in FY 2015-2016.

**Program Challenges in FY 2015-16:**

- Affordable housing that is appropriate for people experiencing certain mental illness is limited in Alpine County. The need for transportation and accessibility to food further limits available housing options for full service partnership (FSP) clients.

<b>Number served in FY 2015-16:</b>	8	<b>Total Costs in FY 2015-16:<sup>6</sup></b>	<i>Flex spending: \$31,272.84 (\$3,909.11 per person) Direct services: \$108,073.85 (\$13,509.23 per person)</i>
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**Proposed Activities for FY 2017 – 2020**

The full service partnership (FSP) program will continue to provide and expand mental health services and supports to residents of all ages with serious mental illness (SMI) or severe emotional disturbance (SED) and to assist these residents in achieving their goals. Alpine County Behavioral Health Services (ACBHS) staff will continue to serve as active partners on County Multi-Disciplinary Teams in order to increase coordination of services across departments and jurisdictions and promote cross-disciplinary learning. Alpine County Behavioral Health Services (ACBHS) will also consider incorporating other evidence based practices, such as Acceptance and Commitment Therapy (ACT) and Seeking Safety.

**Goals and Objectives**

<b>Goal:</b>	The goal of the full service partnership (FSP) program is to offer strength-based, client- and family-directed, individualized mental health and wrap-around services and funding to children and transitional age youth with severe emotional disturbance (SED), and to adults and older adults with serious mental illness (SMI). Full service partnership (FSP) also aims to improve coordination of services across departments and jurisdictions, promote cross-disciplinary learning, and increase wellness, recovery, and resiliency among severely mentally ill residents.
<b>Objective 1:</b>	Provide supportive, flexible, consumer-driven services to all consumers at their preferred level of engagement.
<b>Objective 2:</b>	Reduce the impact of living with mental health challenges through the provision of basic needs.
<b>Objective 3:</b>	Increase access to and service connectedness of adults experiencing mental health problems.

<b>Number to be served FY 2017-18:</b>	9	<b>Proposed Budget FY 2017-18:</b>	\$110,000
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<sup>6</sup> Cost per person is an average cost. Actual costs per person vary based on service utilization.





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<b>Cost per Person FY 2017-18:</b>	\$12, 222	<b>Total Proposed Budget FY 2017-20:</b>	\$300,000
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**Play Therapy**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input type="checkbox"/> Adult Ages 24 – 59 <input type="checkbox"/> Older Adult Ages 60+

**Program Description**

Play Therapy is an evidence-based practice designed to deliver clinical services to children in a low-stakes environment with the goal of helping children decrease anxiety, increase confidence, make healthier choices, and decrease behavior issues through the expression of play. These services include a variety of evidence-based practices, such as Sand Tray Therapy and Art Therapy.

**FY 2015 – 2016 Activities and Outcomes**

**Key Successes in FY 2015-16:**

- In FY 2015-16, Alpine County Behavioral Health Services (ACBHS) found a designated space for Play Therapy activities and began providing services at a newly opened preschool.

**Program Challenges in FY 2015-16:**

- Alpine County Behavioral Health Services (ACBHS) encountered no challenges in implementing Play Therapy in FY 2015-16.

<b>Number served in FY 2015-16:</b>	7	<b>Total costs in FY 2015-16:</b>	<i>Direct: \$44,089.03 (\$6,298.43 per person) Indirect: \$71,000</i>
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**Proposed Activities for FY 2017 – 2020**

Having recently secured a location for services and identifying two clinicians to provide Play Therapy, Alpine County Behavioral Health Services (ACBHS) looks forward to maintaining Play Therapy services and establishing consistency in services. The program is also able to accommodate services to more youth if the need arises.

**Goals and Objectives**

<b>Goal:</b>	The Play Therapy program aims to help children decrease anxiety, increase confidence, decrease behavior issues, and make healthier choices through play.
<b>Objective 1:</b>	Conduct outreach to parents, teachers, school-administrators, and students regarding the Play Therapy program to increase engagement in services.
<b>Objective 2:</b>	Support the development of appropriate coping and problem-solving skills.
<b>Objective 3:</b>	Improve success in school and at home, and reduce institutionalization and out of home placements.

<b>Number to be served FY 2017-18:</b>	10	<b>Proposed Budget FY 2017-18:</b>	\$118,000
<b>Cost per Person FY 2017-18:</b>	\$4,700	<b>Total Proposed Budget FY 2017-20:</b>	\$210,000





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Grief Support					
<b>Status:</b>	<input type="checkbox"/> New		<input type="checkbox"/> Continuing		<input checked="" type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+	
<b>Program Description</b>					
<p>Grief Support provides support for those who have experienced the loss of a loved one. Services may include outreach, crisis support, bereavement groups, individual support, and training on end of life issues as they relate to mental health issues, suicide prevention and intervention, substance use disorder issues, illness, and others depending on the current needs of the community. Culturally-competent follow-up interventions, education, referrals, and support target those who require assistance to address their emotions and needs as survivors. The service may also be designed to improve family functioning/communication in the wake of loss, identify and understand the factors that promote a survivor’s resilience and strength, provide bereavement services and support, and address issues of stigma and shame.</p>					
<b>FY 2015 – 2016 Activities and Outcomes</b>					
<p>In FY 2015-16, stakeholders recommended the development of Grief Support as a Community Services and Supports (CSS) program. Alpine County Behavioral Health Services (ACBHS) did not have the appropriate staff training to deliver Grief Support services, but recognized the need for such programming. Therefore, Alpine County Behavioral Health Services (ACBHS) proposed the implementation of Grief Support in their Mental Health Services Act (MHSA) Annual Update for FY 2016-17 through partnership with the Barton Health Hospice.</p> <p>So far in this year (FY 2016-17), however, Barton Health could not facilitate a group in Alpine County due to low numbers of people expressing interest. Alpine County Behavioral Health Services (ACBHS) looks forward to prioritizing Grief Support implementation in FY 2017-18 through referrals to the Douglas Center for Hope &amp; Health in Minden, Nevada and Barton Health located in South Lake Tahoe</p>					
<b>Key Successes in FY 2015-16:</b> N/A					
<b>Program Challenges in FY 2015-16:</b> N/A					
<b>Number served in FY 2015-16:</b>	0		<b>Total costs in FY 2015-16:</b>	\$0	
<b>Proposed Activities for FY 2017 – 2020</b>					
<p>Due to low interest, Alpine County Behavioral Health Services (ACBHS) will remove the grief support program as a standalone program in FY 2017-18. In its stead, Alpine County Behavioral Health Services (ACBHS) will refer consumers to grief support services provided by Douglas Center for Hope and Health or Barton Health Hospice.</p>					



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Outreach and Engagement				
<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing		<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+
Program Description				
The Outreach and Engagement program identifies, educates, and supports individuals in need of mental health services, and serves to reduce stigma and barriers to participation in Behavioral Health Services.				
FY 2015 – 2016 Activities and Outcomes				
<b>Key Successes in FY 2015-16:</b>				
<ul style="list-style-type: none"> <li>• BHS staff conducted outreach through several key activities, including:               <ul style="list-style-type: none"> <li>○ Presenting information on mental health awareness to children, adults, and seniors at the 50+ Club, Create the Good, and Back-to-School Night.</li> <li>○ Going door to door within the Hung A Lel Ti community and distributing information on available behavioral health services monthly.</li> </ul> </li> <li>• BHS staff offered a wide range of engagement activities, including:               <ul style="list-style-type: none"> <li>○ Senior activities</li> <li>○ Family movie nights</li> <li>○ Exercise classes</li> <li>○ Cultural Programs</li> <li>○ Art classes</li> <li>○ Yoga for Trauma Release and Meditation</li> <li>○ Summer/holiday break activities and meals for school-aged children</li> <li>○ Outreach and advertising through social media</li> </ul> </li> <li>• Alpine County Behavioral Health Services (ACBHS) staff also worked with Dial-a-Ride to supplement transportation needs, and conducted outreach to inform consumers of available transportation options. Alpine County Behavioral Health Services (ACBHS) staff also offered transportation to therapeutic and case management appointments for members of the Markleeville, Woodfords, and Hung A Lel Ti communities.</li> <li>• Alpine County Behavioral Health Services (ACBHS) hired a Mental Health Services Act (MHSA) Program Specialist based in Bear Valley who implemented programming that was responsive to stakeholders' needs in that area of the county.</li> </ul>				
<b>Program Challenges in FY 2015-16:</b>				
<ul style="list-style-type: none"> <li>• Transportation remains a barrier to engaging some stakeholders in behavioral health services for consumers in Bear Valley and Kirkwood. Additional transportation options and/or program offerings in those communities would improve engagement in these remote regions of the county.</li> <li>• Connecting with teens and engaging them in services has been challenging. Involving teens in designing teen-specific programs and engagement strategies among their peers may help Alpine County Behavioral Health Services (ACBHS) improve outreach to teens. Additionally, finding outreach methods that reach teens through social media may be more effective than traditional outreach methods such as flyers.</li> </ul>				



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- Stigma surrounding use of behavioral health services also remains a challenge. Additional countywide outreach would help reduce this stigma, and continue to build knowledge and understanding of available services.

<b>Number served in FY 2015-16:</b>	464	<b>Total costs in FY 2015-16:</b>	\$80,500 (\$173.49 per person)
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**Proposed Activities for FY 2017 – 2020**

Alpine County Behavioral Health Services (ACBHS) staff will continue to conduct outreach to Alpine residents, provide a wide range of engagement activities, and facilitate transportation for residents in remote areas of the county when feasible. Alpine County Behavioral Health Services (ACBHS) will continue efforts to reach geographically isolated Alpine residents, particularly through additional outreach in Kirkwood and Bear Valley. Additional Outreach and Engagement strategies Alpine County Behavioral Health Services (ACBHS) looks forward to pursuing in the next three years include:

- Developing a strategy to better connect with teens and engage them in programming will be a top priority. Late in FY 2016-17, Alpine County Behavioral Health Services (ACBHS) hired a Native Wellness Advocate and continues to interview individuals for the Mental Health Services Act (MHSA) Program Specialist position. Filling these roles will increase the county’s capacity to do outreach and provide new ideas about how to engage teens.
- Originally developed as a prevention activity housed in the Create the Good program, Yoga for Trauma Release and Meditation has been remarkably effective in reaching community members, exposing them to and engaging them in additional Behavioral Health Services, and reducing stigma against engaging in services. Therefore, Alpine County Behavioral Health Services (ACBHS) plans to move that activity from Create the Good to Outreach and Engagement in FY 2018-19.

**Goals and Objectives**

<b>Goal:</b>	The Outreach and Engagement program strives to identify individuals in need of behavioral health services and supports and link them to existing county services, including services at Behavioral Health, the Wellness Center, and additional county service delivery locations, and to educate community members about available services and supports. The program also seeks to reduce stigma through education about mental illness and psychological wellness; improve relations between behavioral health providers, overlapping jurisdictions, and different cultures and communities; and reduce barriers to participation in Behavioral Health Services.
<b>Objective 1:</b>	Conduct regular outreach in Kirkwood and Bear Valley, and enroll eligible participants.
<b>Objective 2:</b>	Conduct targeted activities with teens to better assess their needs for program and partner with youth in designing for-us-by-us programming.
<b>Objective 3:</b>	Improve community awareness of Alpine County Behavioral Health Services (ACBHS) and Mental Health Services Act (MHSA) programs so that current and potential consumers and family members understand the resources available to them and so that other county departments and partners recognize needs and make appropriate referrals to Alpine County Behavioral Health Services (ACBHS).

<b>Number to be served FY 2017-18:</b>	495	<b>Proposed Budget FY 2017-18:</b>	100,000
<b>Cost per Person FY 2017-18:</b>	\$200	<b>Total Proposed Budget FY 2017-20:</b>	300,000





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General Systems Development				
<b>Status:</b>	<input type="checkbox"/> New		<input checked="" type="checkbox"/> Continuing	
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+
Program Description				
<p><b>Program Purpose &amp; Description</b></p> <p>General systems development activities strive to improve access to Alpine County Behavioral Health Services (ACBHS) activities and events, coordinate service offerings between collaborating agencies, and reduce scheduling conflicts and duplicated efforts among service providers. General systems development funds are allocated to augment and/or amplify Community Services and Supports (CSS) programs in the areas of:</p> <ul style="list-style-type: none"> <li>• Mental health treatment, including alternative and culturally specific treatments</li> <li>• Peer support</li> <li>• Supportive services to assist clients, and clients’ families as appropriate, in obtaining employment, housing, and/or education</li> <li>• Wellness centers</li> <li>• Personal service coordination/case management/personal service coordination to assist clients, and clients’ families as appropriate, to access necessary medical, educational, social, vocational rehabilitative or other community services</li> <li>• Needs assessment</li> <li>• Individual services and supports plan development</li> <li>• Crisis intervention/stabilization services</li> <li>• Family education services</li> <li>• Project-based housing programs</li> <li>• Improve the county mental health service delivery system for all clients and their families</li> <li>• Develop and implement strategies for reducing ethnic/racial disparities</li> </ul>				
FY 2015 – 2016 Activities and Outcomes				
<p><b>Key Successes in FY 2015-16:</b></p> <p>Interagency collaboration remained strong and enabled Community Services and Supports (CSS) service recipients to engage in wraparound services.</p> <p><b>Program Challenges in FY 2015-16:</b></p> <p>Transportation remains a barrier for residents living in more remote areas of the county, and Alpine County Behavioral Health Services (ACBHS) staff are working to improve transportation options for services whenever possible.</p>				
<b>Number served in FY 2015-16:</b>	N/A		<b>Total costs in FY 2015-16:</b>	\$250,000





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**Proposed Activities for FY 2017 – 2020**

- To further develop Alpine County Behavioral Health Services (ACBHS) staff’s capacity to deliver value-driven services, Alpine County Behavioral Health Services (ACBHS) will provide increased exposure to and training in evidence-based practices in addition to cultural competency trainings.
- Alpine County Behavioral Health Services (ACBHS) staff will also continue to provide transportation to services and events, and explore options for improving access to services among consumers in Bear Valley and Kirkwood.

**Goals and Objectives**

<b>Goal:</b>	Systems Development activities aim to improve overall operation and coordination of behavioral health services in the county through regular provider meetings and enhanced communication.		
<b>Objective 1:</b>	Establish seamless service referrals and coordination among and between service providers.		
<b>Objective 2:</b>	Ensure that client services are culturally sensitive and responsive to clients’ needs.		
<b>Objective 3:</b>	Increase clients’ choice in services by leveraging a network of contracted providers in the area.		
<b>Number to be served FY 2017-18:</b>	N/A	<b>Proposed Budget FY 2017-18:</b>	\$250,000
<b>Cost per Person FY 2017-18:</b>	N/A	<b>Total Proposed Budget FY 2017-20:</b>	\$750,000

**Prevention and Early Intervention (PEI) Programs**

Through the Community Program Planning (CPP) process, stakeholders supported current Prevention and Early Intervention (PEI) programs and identified few needs for modifications. As a result, the Mental Health Services Act (MHSA) Planning Team did not develop any new Prevention and Early Intervention (PEI) programs, and proposes the continuation of current programs with slight modifications listed below in the proposed activities sections.

<b>Senior Socialization and Exercise</b>					
<b>Status:</b>	<input type="checkbox"/> New		<input checked="" type="checkbox"/> Continuing		<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input type="checkbox"/> Children Ages 0 – 17	<input type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+	
<b>Program Description</b>					
The Senior Socialization and Exercise Program focuses on improving the healthy attitudes, beliefs, skills, and lifestyles of older adults in Alpine County through participation in meaningful activities and utilization of services. It is designed to conduct outreach for increasing recognition of early signs of mental illness. As such, the Senior Socialization and Exercise Program also serves to reduce stigma associated with seeking behavioral health services; reduce isolation, depression, fear, anxiety, and loneliness among seniors; increase referrals to and knowledge about supportive services; provide a warm, caring environment where seniors can develop a sense of connection and belonging; encourage					





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development of new skills and creative abilities; and support active, healthy lifestyles. Among the evidence-based practices used in this program is Mindfulness.

**FY 2015 – 2016 Activities and Outcomes**

**Key Successes in FY 2015-16:**

The Senior Socialization and Exercise program incorporated a wide range of activities in FY 2015-16 to bring seniors together in a warm, welcoming environment. Socialization activities included:

- Collaborated with the 50+ Club, which provided an opportunity for seniors to gather and socialize with each other and the broader community on a monthly basis.
- Elder Luncheons afforded seniors an opportunity to socialize while playing bingo, completing puzzles, or watching movies.
- Cultural Activities including gathering and preparing Native and cultural foods, Campfire Tales, and Cultural Crafts.
- Monthly speakers on topics including emergency preparedness, essentials for a file of life, traveling, County business, health updates, storytelling, grief, healthy lifestyles, and Medicare Part D.
- Senior Soak socialization outings to Grover Hot Springs State Park brought seniors together weekly. This program was so well attended that Alpine County Behavioral Health Services (ACBHS) added a second weekly Senior Soak day.

There were also several senior exercise activities, which promoted physical movement, improved cardiovascular health, and socialization. Exercise classes were geared to individual fitness levels and physical restrictions.

- Weekly yoga classes with instructors.
- Biweekly chair exercise classes, performed with free weights, bands, and balls, as well as pre- and post-exercise stretching for stiff joints.
- Informal walking groups, which served as mobile talking circles.

Overall, senior socialization and exercise activities have provided consumers with opportunities to connect to each other and develop a support network. They also provided opportunities to inform consumers about other Mental Health Services Act (MHSA) programs which resulted in increased enrollment.

**Program Challenges in FY 2015-16:**

- Alpine County Behavioral Health Services (ACBHS) encountered no challenges in implementing Senior Socialization and Exercise in FY 2015-16.

<b>Number served in FY 2015-16:</b>	366	<b>Total costs in FY 2015-16:</b>	\$15,000 (\$40.98 per person)
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**Proposed Activities for FY 2017 – 2020**

The Senior Socialization and Exercise program has been greatly successful in engaging community members and consumers report immense satisfaction with the program as well as improved well-being and reduced feelings of isolation and depression. Therefore, Alpine County Behavioral Health Services (ACBHS) plans to continue implementing the Senior Socialization and Exercise program as designed, continuing to solicit feedback and input from consumers to reinforcement engagement.

**Goals and Objectives**





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<b>Goal:</b>	The goals of the Senior Socialization and Exercise Program are to: <ul style="list-style-type: none"> <li>• Increase the health and wellness of older adults within the community</li> <li>• Provide meaningful activity for older adults</li> <li>• Inspire hope among older adults</li> <li>• Increase community cohesion, trust, respect, appreciation, knowledge of cultural diversity, mutual aid, and local pride</li> <li>• Increase Alpine County older adults’ knowledge of available supports and services</li> <li>• Increase social skills and resiliency of older adults</li> <li>• Increase referrals to Alpine County Behavioral Health Services (ACBHS) and other supportive services</li> <li>• Improve healthy attitudes, beliefs, skills, and lifestyles</li> <li>• Reduce stigma associated with seeking behavioral health services or peer support</li> <li>• Reduce isolation, depression, fear, anxiety, loneliness, and suicidal thoughts among older adults</li> </ul>		
<b>Objective 1:</b>	Support older adults and their families through the aging process to develop and maintain a circle of support thereby reducing isolation.		
<b>Objective 2:</b>	Increase access to and service connectedness of adults at risk for experiencing mental health problems.		
<b>Objective 3:</b>	Promote the early identification of mental health needs in older adults to prevent suicide, isolation, and loss of independence and address co-occurring medical and substance use needs.		
<b>Number to be served FY 2017-18:</b>	350	<b>Proposed Budget FY 2017-18:</b>	\$34,375
<b>Cost per Person FY 2017-18:</b>	\$98	<b>Total Proposed Budget FY 2017-20:</b>	\$103,125

Positive Behavior Intervention Support (PBIS)					
<b>Status:</b>	<input type="checkbox"/> New		<input checked="" type="checkbox"/> Continuing		<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input type="checkbox"/> Adult Ages 24 – 59	<input type="checkbox"/> Older Adult Ages 60+	
Program Description					
Positive Behavioral Intervention Supports (PBIS) is an evidenced-based school-based approach to student support and discipline. The approach includes systemic and individualized strategies to achieve learning and social outcomes at both the individual and the school-wide levels, while preventing problem behaviors and emotional stress as well as increasing academic achievement. Positive Behavioral Intervention Supports (PBIS) programs have been shown to effectively reduce disciplinary referrals within schools and reduce the number of out-of-school student suspensions.					
FY 2015 – 2016 Activities and Outcomes					
<b>Key Successes in FY 2015-16:</b>					
<ul style="list-style-type: none"> <li>• The data show progress in decreasing challenging behaviors among consumers.</li> </ul>					





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- The Positive Behavioral Intervention Supports (PBIS) reward programs such as the HAWK Breakfasts were successful and well attended, with increasing attendance at each one.
- The Positive Behavioral Intervention Supports (PBIS) Lead and Coach were recruited to make a presentation for other California schools at the Placer County Office of Education’s Coaches Institute. The Tier II Support called Check-in Check-Out had a 90% student success rate.

**Program Challenges in FY 2015-16:**

- Inconsistent application of all of the Positive Behavioral Intervention Supports (PBIS) program components affected student outcomes. To address this, the Positive Behavioral Intervention Supports (PBIS) program is continuing to develop ways to ensure consistency in implementing all of the program components.
- Staff turnover made it difficult for new staff to be brought up to speed and there was insufficient time to train new staff members. The Positive Behavioral Intervention Supports (PBIS) program is currently planning for time to properly train new staff members during staff development days before school starts and during collaboration during the school year.
- There were not enough “check-in check-out coaches” to serve all students who could benefit from that option. The Positive Behavioral Intervention Supports (PBIS) program is working to find more coaches within existing staff.
- There were some technical issues with the rewards program software platform. As a result, the contractor is reviewing new rewards software platforms to find one that is more efficient.

<b>Number served in FY 2015-16:</b>	80	<b>Total costs in FY 2015-16:</b>	\$400 per person
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**Proposed Activities for FY 2017 – 2020**

Positive Behavioral Intervention Supports (PBIS) has generally been well received by the school, families, and community members. As such, Alpine County Behavioral Health Services (ACBHS) plans to continue supporting its implementation over the next three years. Slight changes in activities include:

- Implementing a more efficient reward system.
- Adding Tier II/III intervention possibilities to provide for more flexibility to address student needs.
- Creating a personalized Diamond Valley expectation video for teaching students and staff about Positive Behavioral Intervention Supports (PBIS) expectations in a more consistent manner.

**Goals and Objectives**

<b>Goal:</b>	The Positive Behavioral Intervention Supports (PBIS) program aims to promote positive environments and enhance quality of life for youth while also reducing challenging behaviors and emotional distress. Additionally, it strives to improve academic achievement and reduce out-of-school student suspensions.
<b>Objective 1:</b>	Establish consistency in Positive Behavioral Intervention Supports (PBIS) training, implementation, and oversight.
<b>Objective 2:</b>	Increase family involvement in and understanding of youth development.
<b>Objective 3:</b>	Identify youth with emotional/behavioral needs and provide appropriate early intervention services, referrals, and linkages.

<b>Number to be served FY 2015-16:</b>	83	<b>Proposed Budget FY 2017-18:</b>	\$45,875
<b>Cost per Person FY 2015-16:</b>	\$553	<b>Total Proposed Budget FY 2017-20:</b>	\$137,625





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Create the Good				
<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified	
<b>Priority Population:</b>	<input type="checkbox"/> Children Ages 0 – 17	<input type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+
Program Description				
<b>Program Purpose &amp; Description:</b>				
<p>Create the Good began as an adult luncheon geared toward adults and seniors featuring presentations on topics related to health, wellness and parenting. As a prevention program, Create the Good promotes socialization, awareness of health and wellness subjects, and learning opportunities. The program will expand to provide more early intervention opportunities by hosting an open support group, providing alternative therapies, such as therapeutic nature walks, yoga therapy and creating opportunities for “meet and greets” between participants and Alpine County Behavioral Health Services (ACBHS) staff, including the geographically isolated communities.</p>				
FY 2015 – 2016 Activities and Outcomes				
<b>Key Successes in FY 2015-16:</b>				
<p>Create the Good offered weekly luncheons with healthy, balanced meals. Luncheons featured presentations on topics related to health and wellness, including healthy eating, dialysis diet, signs of child abuse, and domestic violence awareness. Luncheons also supported community members in learning new things, building relationships with neighbors, and sharing recipes. Key successes in FY 2015-16 included:</p> <ul style="list-style-type: none"> <li>• Programming has been consistent. Friday luncheons become known as a place for other agencies to attend and connect with regular consumers.</li> <li>• Alpine County Behavioral Health Services (ACBHS) staff provided transportation to Create the Good events.</li> <li>• Alpine County Behavioral Health Services (ACBHS) began Create the Good implementation in Bear Valley in FY 2016-17.</li> <li>• Alpine County Behavioral Health Services (ACBHS) collaborated with SNAP-Ed to provide education about healthy food and lifestyle choices.</li> <li>• Collaborated with diabetes educators from Washoe Tribal Health Clinic.</li> </ul>				
<b>Program Challenges in FY 2015-16:</b>				
<ul style="list-style-type: none"> <li>• Alpine County Behavioral Health Services (ACBHS) encountered no challenges in implementing Create the Good in FY 2015-16.</li> </ul>				
<b>Number served in FY 2015-16:</b>	353	<b>Total costs in FY 2015-16:</b>	\$12,000 (\$34 per person)	
Proposed Activities for FY 2017 – 2018				
<ul style="list-style-type: none"> <li>• Create the Good will continue to offer weekly luncheons with guest speakers and presentations on integrated health and wellness topics.</li> <li>• The program will also host open support groups for adults focused on wellbeing. These open support groups may host guest speakers on topics related to self-help, and may include meet-and-greet opportunities with staff where community members can learn about available programming and the specialties of Alpine County Behavioral Health Services (ACBHS) therapists.</li> </ul>				





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<b>Goals and Objectives</b>			
<b>Goal:</b>	The goal of the Create the Good is to provide Alpine residents with preventative activities such as learning about health and wellness subjects in addition to engaging them in group-based early intervention services such as an open support group. In addition, Create the Good will engage residents in programming to build community members' trust in service providers and decrease barriers to accessing services for serious mental illness (SMI) or severe emotional disturbance (SED).		
<b>Objective 1:</b>	Promote wellness through socialization and educational presentations.		
<b>Objective 2:</b>	Provide opportunities to engage participants in early intervention activities as needs arise.		
<b>Objective 3:</b>	Reduce stigma against behavioral health by building community awareness through dialogue.		
<b>Number to be served FY 2017-18:</b>	390	<b>Proposed Budget FY 2017-18:</b>	\$29,375
<b>Cost per Person FY 2017-18:</b>	\$75	<b>Total Proposed Budget FY 2017-20:</b>	\$88,125

<b>Combining Past and Present</b>					
<b>Status:</b>	<input type="checkbox"/> New		<input checked="" type="checkbox"/> Continuing		<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59	<input checked="" type="checkbox"/> Older Adult Ages 60+	
<b>Program Description</b>					
Combining Past and Present is a culturally-based prevention program for Alpine County residents of all ages. The program seeks to preserve cultural traditions, build community, and prevent the onset of depression and anxiety related to lack of socialization for members of the Hung A LeI Ti community. Through community dialogue and activities, the program also addresses trauma-related mental health topics specific to Tribal communities, such as historical trauma and identity confusion.					
<b>FY 2015 – 2016 Activities and Outcomes</b>					
<b>Key Successes in FY 2015-16:</b>					
FY 2015-16 activities included cultural crafts, following the traditional calendar of the Washoe people through gathering trips for food and materials in the surrounding area, and then preparing traditional foods and tools. During FY 2015-16, cultural programming included:					
<ul style="list-style-type: none"> <li>• Acorn, Willow, Berries, Onion, and Pine Nut Gatherings</li> <li>• Basket Making, Beading, Stick Game Making, Flint Knapping, Acorn Biscuits and Pine Nut Soup</li> <li>• Singing Cultural Songs</li> <li>• Campfire Tales</li> </ul>					
These activities were targeted toward Alpine County residents of all ages, and were intended to provide community members with an opportunity to participate in cultural history and traditional ways of life.					
<b>Program Challenges in FY 2015-16</b>					



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- The Native Wellness Advocate who facilitated the Combining Past and Present program left Alpine County Behavioral Health Services (ACBHS) in July of 2016 and was not present to provide details on this program’s key activities and challenges.

<b>Number served in FY 2015-16:</b>	74	<b>Total costs in FY 2015-16:</b>	\$3,500 (\$47.29 per person)
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**Proposed Activities for FY 2017 – 2018**

Combining Past and Present will continue to provide activities intended to preserve cultural traditions, build community, and prevent the onset of depression and anxiety related to lack of socialization and identity loss. Alpine County Behavioral Health Services (ACBHS) recently hired a new Native Wellness Advocate (in FY 2016-17) who will work with consumers to develop culturally-appropriate activities. Based on previously successful activities, Alpine County Behavioral Health Services (ACBHS) anticipates continuing the following activities:

- Gathering and preparing native foods
- Washoe language
- Cultural crafts (basket making, beading, stick game making, flint knapping, skirt and ribbon shirt making)

**Goals and Objectives**

<b>Goal:</b>	Prevent the development of depression and anxiety related to lack of socialization and loss of cultural identity through cultural programs for Alpine County residents of all ages.
<b>Objective 1:</b>	Utilize culturally responsive approaches to engaging Native American community members in Combining Past and Present.
<b>Objective 2:</b>	Work with program participants to develop activities to preserve and share Native American culture and history.
<b>Objective 3:</b>	Improve well-being among Native American community members.

<b>Number to be served FY 2017-18:</b>	100	<b>Proposed Budget FY 2017-18:</b>	\$19,375
<b>Cost per Person FY 2017-18:</b>	\$194	<b>Total Proposed Budget FY 2017-20:</b>	\$58,125

**Wellness Projects**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59 <input checked="" type="checkbox"/> Older Adult Ages 60+

**Program Description**

Alpine County’s Wellness Projects are designed to provide targeted programming for a variety of distinct populations. These programs will provide continued support to prevent the development and onset of mental health issues among Alpine County residents and engage residents in programming to decrease barriers to accessing services for serious mental illness (SMI) and severe emotional disturbance (SED). The following projects make up Wellness Projects:

- Children and Transition Age Youth (TAY) Wellness Project: Alpine County Behavioral Health Services (ACBHS) will continue to provide play groups for children and will continue to support





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and leverage existing children and Transition Age Youth (TAY) programming occurring in nearby locations and through community collaborations.

- **Bike to School:** Held in the spring and fall, Alpine County Behavioral Health Services (ACBHS) staff chaperone local children as they ride their bikes to school. This project promotes health, wellness, collaboration, and the Alpine County cycling spirit.
- **Family Night:** Originating from its Substance Use Disorder (SUD) treatment program developed by a group called Feed the People, Alpine County Behavioral Health Services (ACBHS) adopted Family Night in its array of Wellness Projects as a safe place for families to experience sober recreation. The event begins as a SUD group session that evolves into Family Night, taking a less clinical structure for families to talk about how to build a resilient and healthy community reflective of its members.
- **Walk for Wellness:** Based on stakeholder input, Alpine County Behavioral Health Services (ACBHS) implemented Walk for Wellness in Bear Valley in FY 2016-17. This project borrows from somatic therapy and involves adults in exercise and socialization to alleviate feelings of isolation and improve well-being, resilience, and recovery.

### *FY 2015 – 2016 Activities and Outcomes*

#### **Key Successes in FY 2015-16:**

- Activities to promote family relationships were successful during FY 2015-16. The Father's Wellness Program started strong with classes for fathers/father figures and youth that focused on skills acquisition and collaborating on large group project. An Honoring Mothers event in May brought together mothers and children to hear a speaker and work on a project together; the event was very well attended.
- The Bike to School program was a popular program that involved youth in repairing bikes in preparation for a bike to school event on the last day of school.
- Alpine County Behavioral Health Services (ACBHS) added Family Night in FY 2015-16 that create a safe place for families to socialize. It was well received.

#### **Program Challenges in FY 2015-16:**

- Alpine County Behavioral Health Services (ACBHS) has had some difficulty engaging Transition Age Youth (TAY) in Wellness Projects. This has results in inconsistent programming targeting Transition Age Youth (TAY). Alpine County Behavioral Health Services (ACBHS) plans to prioritize Transition Age Youth (TAY) engagement in the coming years.
- Play groups experienced low attendance due the frequent changes in its location. Moving locations was intended to provide access to people living in different areas within the county, but resulted in confusion about where play groups were held. Alpine County Behavioral Health Services (ACBHS) addressed this by establishing a set location for play groups at the newly opened preschool, which has connected families with the preschool and increased enrollment.
- The summer reading program also experienced low enrollment due to scheduling conflicts with summer vacations and lack of transportation to the library. Given this, Alpine County Behavioral Health Services (ACBHS) is planning to cancel the program as a Wellness Project, and explore partnership with the library to support this program in a more effective form.
- Walk for Wellness was newly implemented in FY 2016-17, but so far in the year, Alpine County Behavioral Health Services (ACBHS) has learned that engagement in the project is low while the ski resort is open. Alpine County Behavioral Health Services (ACBHS) anticipates attendance will



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increase in the shoulder season (spring and fall), but will monitor attendance to study and adjust engagement efforts.

<b>Number served in FY 2015-16:</b>	282	<b>Total costs in FY 2015-16:</b>	\$55,000 (\$195.04 per person)
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**Proposed Activities for FY 2017 – 2018**

Alpine County Behavioral Health Services (ACBHS) will continue to provide targeted programming for its distinct populations described above. These programs will provide continued support to prevent the development and onset of mental health issues among Alpine County residents. Some slight modifications Alpine County Behavioral Health Services (ACBHS) anticipates making include:

- Prioritizing the Children and Transition Age Youth (TAY) Wellness Project to provide more consistent and accessible schedules for youth activities (e.g., play groups) and better engage Transition Age Youth (TAY) in creating engaging for-us-by-us activities.
- Adjusting the Bike to School project so that the event happens only in the spring. Throughout the month of May Alpine County Behavioral Health Services (ACBHS) collaborates with Alpine County Unified School District and several other providers on bike rides with youth leading up to the Bike-a-thon event on the last day of school. The bike rides promote exercise and healthy lifestyle and provide opportunities for conversation and wellness check-ins with participating youth.
- Continuing the Walk for Wellness in Bear Valley to gather data on attendance and may work with stakeholders to make adjustments to improve engagement as necessary.

**Goals and Objectives**

<b>Goal:</b>	Provide targeted programming to prevent the development and onset of mental health issues and to promote family wellness among Alpine County residents.
<b>Objective 1:</b>	Create venues for community members to engage in with their age group/living situation to bolster community and promote wellness.
<b>Objective 2:</b>	Educate community members on well-being, self-care, and services available.
<b>Objective 3:</b>	Develop community-oriented wellness activities to reduce stigma against seeking behavioral health services.

<b>Number to be served FY 2017-18:</b>	297	<b>Proposed Budget FY 2017-18:</b>	\$26,875
<b>Cost per Person FY 2017-18:</b>	\$95	<b>Total Proposed Budget FY 2017-20:</b>	\$80,625

**School-Based Primary Intervention Program**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified	
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input type="checkbox"/> Adult Ages 24 – 59	<input type="checkbox"/> Older Adult Ages 60+

**Program Description**

The Primary Intervention Program (PIP) provides one-to-one services to students through the use of non-directive play sessions, including games, arts and crafts activities, and conversations. Services are delivered by a child aid, with close supervision from a school-based mental health professional. Children receive one 30-40 minute one-to-one session per week, for a period of 12-15 weeks.





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The Primary Intervention Program (PIP) program is designed to enhance the social, emotional, and behavioral development of young students; to build children’s self-esteem and confidence; to encourage positive attitudes toward school and improved academic achievement; and to provide access to services for children with severe emotional disturbance (SED). Primary Intervention Program (PIP) services are provided by Tahoe Youth & Family Services through the Mental Health Services Act (MHSA) plan.

**FY 2015 – 2016 Activities and Outcomes**

**Key Successes in FY 2015-16:**

- FY 2015-16 was the first full school year for the Primary Intervention Program (PIP) at Diamond Valley School. With oversight from Alpine County Behavioral Health Services (ACBHS), Tahoe Youth & Family Services developed program policies and procedures, hired and trained staff in Primary Intervention Program (PIP) delivery, conducted outreach to teachers and families regarding Primary Intervention Program (PIP) offerings, enrolled students in Primary Intervention Program (PIP), and monitored student progress on a regular basis.
- Staff were able to establish program delivery protocols and collaborative efforts between Alpine County Behavioral Health Services (ACBHS), TYFS, and Diamond Valley School. These partnerships led to a more streamlined process for referrals to other behavioral health services.

**Program Challenges in FY 2015-16:**

- Diamond Valley School’s academic schedule only permits a brief window daily for students to participate in the program.
- Due to the small student body, (only 80 students total in grades K-8), the program struggled to obtain enough referrals to operate the program. TYFS decided in partnership with the school principal and Alpine County Behavioral Health Services (ACBHS) to allow enrolled students to be eligible to repeat services into future semesters as needed.

<b>Number served in FY 2015-16:</b>	10	<b>Total costs in FY 2015-16:</b>	\$1,387.56 per person <sup>7</sup>
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**Proposed Activities for FY 2017 – 2020**

Over the next three years, Alpine County Behavioral Health Services (ACBHS) and TYFS plans to continue Primary Intervention Program (PIP) implementation with few changes. TYFS hired a new staff member to better address scheduling challenges with the school and allow more flexibility in providing services. TYFS looks forward to continuing to work with students one-on-one to support their social, emotional, and behavioral development and improve their academic achievement.

**Goals and Objectives**

<b>Goal:</b>	Primary Intervention Program (PIP) strives to enhance the social, emotional, and behavioral development of young students and to minimize the need for more intensive services at a later age. Ideally, Primary Intervention Program (PIP) will also build children’s self-esteem and confidence; increase students’ sense of security and
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<sup>7</sup> Cost per person is an average cost. Actual costs per person vary based on service utilization. Costs are higher to serve students who participate for multiple semesters than those who participate for one semester.





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	positive attitudes about school; and increase personal capabilities related to life success; and provide access to Alpine County Behavioral Health Services (ACBHS) severe emotional disturbance (SED) services.		
<b>Objective 1:</b>	Strengthen access to community services for children, youth, and their families.		
<b>Objective 2:</b>	Support the development of appropriate coping and problem-solving skills.		
<b>Objective 3:</b>	Prevent the development of mental health challenges through early identification.		
<b>Number to be served FY 2017-18:</b>	16	<b>Proposed Budget FY 2017-18:</b>	\$45,875
<b>Cost per Person FY 2017-18:</b>	\$2,867	<b>Total Proposed Budget FY 2017-20:</b>	\$137,625

**Mental Health First Aid Training**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59 <input checked="" type="checkbox"/> Older Adult Ages 60+

**Program Description**

Mental Health First Aid (MHFA) is an eight-hour course for community members that teaches how to help someone who is developing a mental health problem or experiencing a mental health crisis. The training helps community members identify, understand, and respond to signs of mental illnesses and substance use disorders. The goal of mental health first aid is to help support an individual until appropriate professional help arrives. Community members learn a strategy that includes assessing risk, respectfully listening to and supporting the individual in crisis, and identifying appropriate professional help and other supports. Community members are introduced to risk factors and warning signs for mental health or substance use problems, engage in experiential activities that build understanding of the impact of illness on individuals and families, and learn about evidence-supported treatment and self-help strategies.

**FY 2015 – 2016 Activities and Outcomes**

**Key Successes in FY 2015-16:**

- FY 2015-16 was the first year of Mental Health First Aid (MHFA) implementation. Alpine County Behavioral Health (ACBHS) hosted three well-attended three trainings preparing participants to utilize Mental Health First Aid (MHFA) in identifying, understanding, and responding to signs of mental illness and substance abuse.
- Two trainers certified to teach adult Mental Health First Aid (MHFA) skills also became certified to teach youth Mental Health First Aid (MHFA), expanding their capacity to teach all age groups.

**Program Challenges in FY 2015-16:**

- The main challenge during FY 2015-16 was in scheduling trainings at a time that would allow the most people to participate. One of the youth Mental Health First Aid (MHFA) trainings was cancelled due to inclement weather as well as low enrollment and buy-in. It has been rescheduled for June 2017 to allow seasonal summer recreation and camp staff to participate.

<b>Number served in FY 2015-16:</b>	27	<b>Total costs in FY 2015-16:</b>	\$1,500 (\$55.55 per person)
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**Proposed Activities for FY 2017 – 2020**

Alpine County Behavioral Health Services (ACBHS) plans to continue coordinating trainings to empower more community members to understand and utilize Mental Health First Aid (MHFA) skills and strategies to prevent and address mental health problems and crises. Given that Alpine County hosts summer recreation events and camps in Bear Valley, Alpine County Behavioral Health Services (ACBHS) plans to provide Mental Health First Aid (MHFA) to event/camp staff as an extension of their community. Alpine County Behavioral Health Services (ACBHS) also plans to engage law enforcement, library staff, and Mental Health Board members.

**Goals and Objectives**

<b>Goal:</b>	Mental Health First Aid (MHFA) training is intended to increase community members' awareness of mental illness, decrease stigma against mental illness, and improve competency in responding to those experiencing a mental health issue or crisis.
<b>Objective 1:</b>	Recruit, train, and support county staff and residents to provide Mental Health First Aid (MHFA) in cases of crisis.
<b>Objective 2:</b>	Build community awareness of behavioral health services available and how to seek or make appropriate referrals.
<b>Objective 3:</b>	Provide the most appropriate mental health crisis care and service linkages while minimizing the costly placement of individuals in hospitals and jails.

<b>Number to be served FY 2017-18:</b>	40	<b>Proposed Budget FY 2017-18:</b>	\$19,375
<b>Cost per Person FY 2017-18:</b>	\$484	<b>Total Proposed Budget FY 2017-20:</b>	\$58,125

**Suicide Prevention**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	<input checked="" type="checkbox"/> Children Ages 0 – 17	<input checked="" type="checkbox"/> Transitional Age Youth Ages 16 – 24	<input checked="" type="checkbox"/> Adult Ages 24 – 59 <input checked="" type="checkbox"/> Older Adult Ages 60+

**Program Description**

Alpine County Behavioral Health Services (ACBHS) partners with the Suicide Prevention Network of Douglas County which provides the following services:

- Training. Several training programs are currently available. Applied Suicide Intervention Strategies Training (ASIST) is a national suicide prevention training program. The training is recognized as an established best practice and is specifically popular among small and mid-size counties. Through a two-day training, stakeholders learn how to recognize the risk and how to intervene to prevent the immediate risk of suicide. The purpose of the training is to prepare participants to integrate intervention principles into everyday practice. Question, Persuade, Refer (QPR) is another suicide prevention training program. Guided by certified trainers, QPR is an interactive one-hour presentation.
- Outreach and Engagement. The primary goal of this component is to lead presentations to raise community awareness about suicide. Presentations are typically delivered at community groups (e.g., parent group meetings, senior luncheons, Create the Good, Youth Leadership) and in K-12 schools (e.g., school assemblies, youth groups).





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- **Suicide Hotline.** Alpine County Behavioral Health Services (ACBHS) will contract with Crisis Support Services of Alameda County to operate a 24 hour per day, 7 days per week crisis line. In addition, the National Suicide Prevention Lifeline provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. Individuals in crisis are connected to the closest available crisis center where a trained counselor assists the individual to connect them to necessary services and supports in their county.
- **Suicide Prevention Communication Materials.** The California Mental Health Services Authority (CalMHSA) has developed a health communication campaign on suicide prevention, titled Know the Signs. In addition, it has identified strategies for collaborating with media and schools to conduct a general public education campaign to promote awareness of suicide and reduce stigma around seeking help.

**FY 2015 – 2016 Activities and Outcomes**

**Key Successes in FY 2015-16:**

- Alpine County Behavioral Health Services (ACBHS) contracted Suicide Prevention Network to begin implementation of the Suicide Prevention program in FY 2015-16.
- The Suicide Prevention program established its presence in the community through outreach and brought awareness to the issue of suicide prevention through a series of trainings and campaigns. One example of a successful outreach method was the “Walk in Memory, Walk for Hope” event. Through this and other events, the program made progress in opening a dialog about suicide and fostering conversations.
- Alpine County Behavioral Health Services (ACBHS) and the Suicide Prevention Network worked with the following agencies to promote the program:
  - Diamond Valley School
  - Washoe Indian Education Center
  - Native Temporary Assistance for Needy Families (TANF)
  - Tahoe Youth & Family Services
  - Live Violence Free
  - Health and Human Services
  - Washoe Tribe Juvenile Probation
  - Washoe Tribe Recreation Department
  - Washoe Tribal Council
  - Alpine County Sheriff’s Department
  - Washoe Tribe Police Department

**Program Challenges in FY 2015-16:**

- Alpine County Behavioral Health Services (ACBHS) encountered no challenges in implementing Suicide Prevention in FY 2015-16.

<b>Number served in FY 2015-16:</b>	115	<b>Total costs in FY 2015-16:</b>	\$38,000 (\$330.43 per person)
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**Proposed Activities for FY 2017 – 2020**

Alpine County Behavioral Health Services (ACBHS) plans to continue to implement the Suicide Prevention program via the Suicide Prevention Network and will continue to work in the community to promote suicide prevention awareness through training and campaigns, and to equip residents with the tools to prevent suicide. Key activities over the next three years include:





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- Continue training and outreach to all Alpine County, with localized trainings in Bear Valley, Kirkwood, Markleeville, and within the Hung A Lel Ti community.
- Develop a suicide prevention campaign within the school district in collaboration with Diamond Valley School and Behavioral Health Services staff.
- Encourage and promote the “Walk in Memory, Walk for Hope” awareness walk in September.
- Promoting Mental Health Matters in May by having speaker Kevin Hines presenting his story.

A key aspect of the program in FY 2017-18 will be to prioritize building respect and trusting relationships with the community to progress toward partnership and support successful implementation.

**Goals and Objectives**

**Goal:** The Suicide Prevention Program is intended to increase community members’ awareness of suicide prevention, decrease stigma against suicide as well as against seeking help, and improve competency in responding to those experiencing a crisis

**Objective 1:** Expand the reach of mental health and suicide prevention services.

**Objective 2:** Reduce the risk of suicide through prevention and intervention trainings.

**Objective 3:** Promote the early identification of mental illness and of signs and symptoms of suicidal behavior.

<b>Number to be served FY 2017-18:</b>	170	<b>Proposed Budget FY 2017-18:</b>	\$39,375
<b>Cost per Person FY 2017-18:</b>	\$232	<b>Total Proposed Budget FY 2017-20:</b>	\$118,125

**Innovation (INN) Project**

Given the county’s need for physical capacity and personnel to implement previously approved and expanded programs, Alpine County did not identify the need or ability to implement an innovation (INN) project at this time.

**Workforce, Education, and Training (WET) Programs**

The need for Workforce, Education, and Training (WET) programs emerged during the Community Program Planning (CPP) process. Alpine County recently approved its plan to implement Workforce, Education, and Training (WET) beginning in FY 2016-17.

<b>Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Coordination</b>			
<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	Alpine County Behavioral Health Services (ACBHS) staff		
<b>Program Description</b>			
Alpine County Behavioral Health Services (ACBHS) is dedicating the Mental Health Services Act (MHSA) Coordinator position to oversee the coordination and implementation of Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) programs in addition to overseeing the coordination and implementation of the Community Services and Supports (CSS), Prevention and Early Intervention (PEI), and Capital Facilities and Technology Needs (CFTN) components of its Mental Health Services Act (MHSA) Plan. The Mental Health Services Act (MHSA) Coordinator will coordinate and sustain an			





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education and training program for Alpine County Behavioral Health Services (ACBHS) staff, volunteers, partners, and consumers. Under the supervision of the Alpine County Behavioral Health Services (ACBHS) Director, this individual is responsible for promoting a work environment that values learning, cultural, and linguistic competence and humility, as well as personal and professional development. Activities to be implemented under the Workforce, Education, and Training (WET) component include developing curriculum for training modules to address specific topics, including state and federal regulations, consumer culture, and core skills; conducting training; and arranging for staff to participate in training outside of the county as appropriate. The Mental Health Services Act (MHSA) Coordinator will also support the expansion of the Alpine County Behavioral Health Services (ACBHS) workforce to include staff that are representative of Alpine County’s consumer culture, ensuring that the Alpine County Behavioral Health Services (ACBHS) system is responsive to the needs of its community.

***FY 2015 – 2016 Activities and Outcomes***

Alpine County Behavioral Health Services (ACBHS) developed their Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Plan in FY 2015-16. The plan was approved by the County Board of Supervisors on June 30, 2016, therefore, Alpine County Behavioral Health Services (ACBHS) did not implement any activities or have any other outcomes in FY 2015-16.

So far in this year (FY 2016-17), however, Alpine County Behavioral Health Services (ACBHS) has promoted their Mental Health Services Act (MHSA) Program Specialist to the Mental Health Services Act (MHSA) Program Coordinator position, the responsibilities of which includes Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Coordination. The Mental Health Services Act (MHSA) Program Coordinator is getting up to speed with the new responsibilities and Alpine County Behavioral Health Services (ACBHS) looks forward to further Workforce, Education, and Training (WET) plan implementation in FY 2017-18.

**Key Successes in FY 2015-16:** N/A

**Program Challenges in FY 2015-16:** N/A

***Proposed Activities for FY 2017 – 2020***

Alpine County Behavioral Health Services (ACBHS) looks forward to supporting the Mental Health Services Act (MHSA) Program Coordinator in her role transition and building her capacity to take on Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Coordination in FY 2017-18.

***Goals and Objectives***

<b>Goal:</b>	The Mental Health Services Act (MHSA) Coordinator will implement all elements of the Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) plan. Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Coordination will bolster Alpine County Behavioral Health Services’ (ACBHS) workforce and sustain necessary and relevant training and education for staff, volunteers, partners, and consumers.
<b>Objective 1:</b>	Implement and sustain the Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) plan.
<b>Objective 2:</b>	Assess Workforce, Education, and Training (WET) needs by employment category and establish responsive education and training program to meet needs.





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<b>Objective 3:</b>	Establish and maintain a culture of learning and growth throughout Alpine County Behavioral Health Services (ACBHS) and among its partners.		
<b>Proposed Budget FY 2017-18:</b>	\$90,000	<b>Total Proposed Budget FY 2017-19:<sup>8</sup></b>	\$180,000

**Fundamental Learning Program**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	BHCS staff, Mental Health Board Members, partner agencies, clients, family members		

*Program Description*

To ensure its staff is up to date with the basic competencies of behavioral health service provision, ACHBS partners with providers to train its staff and stakeholders on topics such as psychosocial rehabilitation skills, the recovery model, trauma-informed cognitive behavioral health services, integrated care and delivering comprehensive services promoting wellness and recovery. ABHCS will also identify regional and statewide trainings to enhance stakeholders’ understanding of the recovery model, promote effective service delivery, increase cultural competency and humility, promote leadership and team building, and learn other skills.

*FY 2015 – 2016 Activities and Outcomes*

Alpine County Behavioral Health Services (ACBHS) developed their Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Plan in FY 2015-16. The plan was approved by the County Board of Supervisors on June 30, 2016, therefore, Alpine County Behavioral Health Services (ACBHS) did not implement any activities in FY 2015-16. So far in FY 2016-17, Alpine County Behavioral Health Services (ACBHS) has established a partnership with Relias Learning to begin offering training and education opportunities for Alpine County Behavioral Health Services (ACBHS) staff, volunteers, partners, and consumers.

**Key Successes in FY 2015-16:** N/A

**Program Challenges in FY 2015-16:** N/A

*Proposed Activities for FY 2017 – 2020*

<sup>8</sup> Alpine County’s 10-year MHSA Workforce, Education, and Training (WET) disbursement ends FY 2018-19 and MHSA funding has not been allocated for FY 2019-20.





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Alpine County Behavioral Health Services (ACBHS) looks forward to further assessing its workforce needs by staff classification in FY 2017-18 and building out the Fundamental Learning Program over the next few years. Based on feedback from staff and stakeholders in the Community Program Planning (CPP) process, some activities Alpine County Behavioral Health Services (ACBHS) plans to implement include:

- Building in regular and explicit trainings and support for staff and community members around preventing, recognizing, and treating secondhand trauma.
- Continuing a relationship with Relias Learning to increase access to trainings, online course, continuing education credits, and other skill-building opportunities.
- Identifying and leveraging regional and statewide workforce development opportunities, such as trainings offered by National Alliance on Mental Illness (NAMI), California Association of Social Rehabilitation Agencies (CASRA), and the Central Regional Partnership.

**Goals and Objectives**

<b>Goal:</b>	The aim of the Fundamental Learning Program is to provide Alpine County Behavioral Health Services (ACBHS) staff, volunteers, partners, and consumers with increased access to education, training, and supports that would provide a foundation upon which Alpine County Behavioral Health Services (ACBHS) may build a well-informed workforce that is appropriately responsive to consumers’ behavioral health needs.
<b>Objective 1:</b>	Select training and education providers and establish business agreements to establish training and education opportunities for Alpine County Behavioral Health Services (ACBHS) staff, volunteers, partners, and consumers.
<b>Objective 2:</b>	Dedicate time and/or coordinate opportunities for Alpine County Behavioral Health Services (ACBHS) staff, volunteers, partners, and consumers to engage in training and education options.

<b>Proposed Budget FY 2017-18:</b>	\$30,000	<b>Total Proposed Budget FY 2017-19:<sup>9</sup></b>	\$60,000
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Increasing Mental Health Staff Through Educational Stipends			
<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	Residents of Alpine County, especially Native youth and Transition Age Youth (TAY)		
Program Description			
This program aims to increase the number of qualified mental health staff working in Alpine County, especially those representing the Native American community and culture, by offering a stipend to residents who pursue a degree in a mental health related field (psychology, social work, counseling, and substance use treatment). These Workforce, Education, and Training (WET) funds would offer an incentive to local youth to attend college, desire a career in the behavioral health field, and eventually return to the community to work in the public mental health system.			

<sup>9</sup> Alpine County’s 10-year MHSA Workforce, Education, and Training (WET) disbursement ends FY 2018-19 and MHSA funding has not been allocated for FY 2019-20.





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**FY 2015 – 2016 Activities and Outcomes**

Alpine County Behavioral Health Services (ACBHS) developed their Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Plan in FY 2015-16. The plan was approved by the County Board of Supervisors on June 30, 2016, therefore, Alpine County Behavioral Health Services (ACBHS) did not implement any activities or have any other outcomes in FY 2015-16.

**Key Successes in FY 2015-16:** N/A

**Program Challenges in FY 2015-16:** N/A

**Proposed Activities for FY 2017 – 2020**

Given that Alpine County’s MSHA Workforce, Education, and Training (WET) funding is scheduled to terminate at the end of FY 2018-19, Alpine County Behavioral Health Services (ACBHS) plans to reevaluate the impact of providing educational stipends and financial incentives on building its public mental health workforce. If found to be a positive return on investment, Alpine County Behavioral Health Services (ACBHS) will look into other opportunities to continue or augment funding if Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) funding is not renewed.

**Goals and Objectives**

<b>Goal:</b>	Increasing Mental Health Staff Through Educational Stipends is aimed at recruiting high school youth from Alpine County, especially Native youth, to select a degree in mental health related fields and pursue a Bachelor’s and/or Master’s degree in said fields.
<b>Objective 1:</b>	Leverage resources (e.g., presentations, lessons learned) from other counties or regions (e.g., Central Regional Partnership) who have been successful in developing mental health career pathway programs and adapt resources to engage Alpine County youth and Transition Age Youth (TAY).
<b>Objective 2:</b>	Partner with local schools and youth organizations to build enthusiasm for careers in the public mental health system and introduce the educational stipends.
<b>Objective 3:</b>	Identify and invite youth and Transition Age Youth (TAY) to apply for educational stipends.

<b>Proposed Budget FY 2017-18:</b>	\$10,000	<b>Total Proposed Budget FY 2017-19:<sup>10</sup></b>	\$20,000
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**Financial Incentive Programs**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Priority Population:</b>	County staff pursuing education and licensure for certain behavioral health positions		

**Program Description**

<sup>10</sup> Alpine County’s 10-year MHSA Workforce, Education, and Training (WET) disbursement ends FY 2018-19 and MHSA funding has not been allocated for FY 2019-20.





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Alpine County Behavioral Health Services (ACBHS) will support stipends for up to four individuals seeking licensing and education as psychiatric nurse practitioners, graduate-level social workers, or graduate-level counselors. These funds will be available to staff who meet enrollment criteria in exchange for a commitment to work in the county mental health system for a specified period of time. Priority will be given to candidates with cultural and language proficiency, consumer/family member lived experience, and hard-to-fill positions.

**FY 2015 – 2016 Activities and Outcomes**

Alpine County Behavioral Health Services (ACBHS) developed their Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) Plan in FY 2015-16. The plan was approved by the County Board of Supervisors on June 30, 2016, therefore, Alpine County Behavioral Health Services (ACBHS) did not implement any activities or have any other outcomes in FY 2015-16.

**Key Successes in FY 2015-16:** N/A

**Program Challenges in FY 2015-16:** N/A

**Proposed Activities for FY 2017 – 2020**

Given that Alpine County’s MSHA Workforce, Education, and Training (WET) funding is scheduled to terminate at the end of FY 2018-19, Alpine County Behavioral Health Services (ACBHS) plans to reevaluate the impact of providing educational stipends and financial incentives on building its public mental health workforce. If found to be a positive return on investment, Alpine County Behavioral Health Services (ACBHS) will look into other opportunities to continue or augment funding if Mental Health Services Act (MHSA) Workforce, Education, and Training (WET) funding is not renewed.

**Goals and Objectives**

<b>Goal:</b>	Recruit and retain a minimum of two individuals who have completed education programs leading to professional licensure by providing incentives of up to \$10,000 annually.
<b>Objective 1:</b>	Promote incentives among current staff and in job postings to grow qualified personnel.
<b>Objective 2:</b>	Identify distance learning and educational resources that facilitate enrollment for identified individuals.

<b>Proposed Budget FY 2017-18:</b>	\$20,000	<b>Total Proposed Budget FY 2017-19:<sup>11</sup></b>	\$40,000
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**Capital Facilities and Technology Needs (CFTN) Projects**

Through the Community Program Planning (CPP) process, stakeholders supported current Capital Facilities and Technology Needs (CFTN) projects and identified few needs for modifications. Further, Alpine County’s disbursement of Mental Health Services Act (MHSA) Capital Facilities and Technology Needs (CFTN) funding is scheduled to terminate at the end of FY 2017-18. As a result, the Mental Health

<sup>11</sup> Alpine County’s 10-year MHSA Workforce, Education, and Training (WET) disbursement ends FY 2018-19 and MHSA funding has not been allocated for FY 2019-20.





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Services Act (MHSA) Planning Team did not develop any new Capital Facilities and Technology Needs (CFTN) projects, and proposes the continuation of current projects with slight modifications listed below in the proposed activities sections

<b>Capital Facilities: Acquire New Space for Mental Health Services Act (MHSA) Administration and Services</b>			
<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
<b>Program Description</b>			
The Capital Facilities funds will be used to acquire a new building or space for Mental Health Services Act (MHSA) administration and services. The focus of the building or space will be to offer Mental Health Services Act (MHSA) services to children, transition age youth, families, adults, and older adults, providing: activity rooms for individual and group service delivery (e.g., additional wellness programs); and dedicated space for Alpine County Behavioral Health Services (ACBHS) administration.			
<b>FY 2015 – 2016 Activities and Outcomes</b>			
<b>Key Activities in FY 2015-16:</b>			
<ul style="list-style-type: none"> <li>• In FY 2015-16, Alpine County Behavioral Health Services (ACBHS) selected a site for a facility for behavioral health.</li> <li>• Selecting a new site involved the collaboration of a planning team that consisted of:               <ul style="list-style-type: none"> <li>○ Alpine Behavioral Health Director</li> <li>○ Behavioral Health Services Coordinator</li> <li>○ Behavioral Health Services Clinical Coordinator</li> <li>○ Mental Health Board Chair</li> <li>○ Alpine County Board of Supervisors Chair</li> <li>○ Community Development Director</li> <li>○ County Administrative Officer/Finance Director</li> <li>○ Architects</li> <li>○ Auditor</li> </ul> </li> <li>• The planning team met regularly to develop and plan the building, do programming for the building (such as creating an “adjacency diagram” looking at needs and purposes of the programs that will happen there), gathered input from behavioral health staff, worked to fit the building and programming needs within the budget.</li> <li>• The planning team selected a site and it was approved by the Board of Supervisors. In the site selection process, the team considered factors such as feasibility and cost.</li> </ul>			
<b>Program Challenges in FY 2015-16:</b>			
The selected site has existing entrance and egress that has access to highway requiring the team to work with Caltrans to determine whether the highway will need improvements. That process is time-consuming.			
<b>Proposed Activities for FY 2017 – 2020</b>			
Alpine County Behavioral Health Services (ACBHS) will continue to engage the community in the process of developing programing for the new building and plans to break ground in FY 2017-18.			
<b>Goals and Objectives</b>			





**Alpine County Behavioral Health Services**

*Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

<b>Goal:</b>	Acquire a new building or space for Mental Health Services Act (MHSA) administration and services in order to provide: activity rooms for individual and group service delivery (including Play Therapy and additional wellness programs); and dedicated space for the Mental Health Services Act (MHSA) administration team.		
<b>Objective 1:</b>	Identify potential space or building for Mental Health Services Act (MHSA) administration team. Maintain log of potential Mental Health Services Act (MHSA) locations and any outcomes related to follow-up.		
<b>Objective 2:</b>	Move Mental Health Services Act (MHSA) administration team to new office space and begin service delivery at new site. Maintain accurate calendar of key events and commencement of service delivery activities.		
<b>Proposed Budget FY 2017-18:</b>	\$988,500	<b>Total Proposed Budget FY 2017-18:</b>	\$988,500

**Technology Needs: Electronic Health Record Implementation**

<b>Status:</b>	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Continuing	<input type="checkbox"/> Modified
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**Program Description**

Alpine County Behavioral Health Services (ACBHS) has been implementing an electronic health record (EHR) to document services, streamline assessments, and track programmatic and client outcomes over time. It is intended to expedite staff access to client information and enable them to share critical information regarding high-risk clients (e.g., allergies, drugs sensitivities, recent crisis information, as appropriate). The electronic health record (EHR) would also ensure the privacy of protected health information by having state-of-the-art equipment and software.

**FY 2015 – 2016 Activities and Outcomes**

**Key Program Activities in FY 2015-16:**

- Alpine County Behavioral Health Services (ACBHS) successfully established a functional and fully electronic health record system and trained new staff to be prepared to understand and use the electronic health record (EHR). The electronic health record (EHR) will also ensure the privacy of protected health information by having state-of-the-art equipment and software.
- The State conducted a triennial review and commended Alpine on their electronic health record (EHR) implementation.

**Program Challenges 2015-16:**

- The signature pads do not yet consistently function as intended. As a work-around solution, Alpine County Behavioral Health Services (ACBHS) prints documents to obtain paper signatures as needed.
- Because there is limited internet service in the community, providers cannot do documentation onsite when they're working in the field. Instead, they enter the data into the system when they return to the home office.

**Proposed Activities for FY 2017 – 2018**

Alpine County Behavioral Health Services (ACBHS) will continue to utilize the electronic health record (EHR) program during FY 2017-18 and does not anticipate any Mental Health Services Act (MHSA) funding needs to do so.

**Goals and Objectives**





## Alpine County Behavioral Health Services

*Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

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<b>Goal:</b>	Implement an electronic health record (EHR) as a means for streamlining assessments, documenting services, and tracking programmatic and client level outcomes over time.
<b>Objective 1:</b>	Migrate existing paper records to new electronic health record (EHR) system. Track progress toward full migration on at least quarterly basis.
<b>Objective 2:</b>	Increase efficiencies in reporting, billing, and retrieving and storing personal health information.
<b>Objective 3:</b>	Establish and communicate assessment schedule, policies, and procedures for administration.
<b>Proposed Budget FY 2017-18:</b>	\$0



## FY 2017-18 Through FY 2019-20 Three-Year Mental Health Services Act Expenditure Plan

### Funding Summary

County: Alpine

Date: 4/11/17

	MHSA Funding					
	A	B	C	D	E	F
	Community Services and Supports	Prevention and Early Intervention	Innovation	Workforce Education and Training	Capital Facilities and Technological Needs	Prudent Reserve
<b>A. Estimated FY 2017/18 Funding</b>						
1. Estimated Unspent Funds from Prior Fiscal Years	200,000		630,875	375,000	788,500	
2. Estimated New FY2017/18 Funding	1,140,000	285,000				
3. Transfer in FY2017/18 <sup>a/</sup>	(200,000)				200,000	
4. Access Local Prudent Reserve in FY2017/18						0
5. Estimated Available Funding for FY2017/18	1,140,000	285,000	630,875	375,000	988,500	
<b>B. Estimated FY2017/18 MHSA Expenditures</b>	1,200,000	285,000		255,000	988,500	
<b>C. Estimated FY2018/19 Funding</b>						
1. Estimated Unspent Funds from Prior Fiscal Years	60,000	0	630,875	120,000		
2. Estimated New FY2018/19 Funding	1,140,000	285,000				
3. Transfer in FY2018/19 <sup>a/</sup>	0					
4. Access Local Prudent Reserve in FY2018/19						0
5. Estimated Available Funding for FY2018/19	1,200,000	285,000	630,875	120,000		
<b>D. Estimated FY2018/19 Expenditures</b>	1,200,000	285,000	0	120,000	0	
<b>E. Estimated FY2019/20 Funding</b>						
1. Estimated Unspent Funds from Prior Fiscal Years	60,000	0	630,875	0	0	
2. Estimated New FY2019/20 Funding	1,140,000	285,000				
3. Transfer in FY2019/20 <sup>a/</sup>	0					
4. Access Local Prudent Reserve in FY2019/20						0
5. Estimated Available Funding for FY2019/20	1,200,000	285,000	630,875	0	0	
<b>F. Estimated FY2019/20 Expenditures</b>	1,200,000	285,000	0	0	0	
<b>G. Estimated FY2019/20 Unspent Fund Balance</b>	0	0	630,875	0	0	

<b>H. Estimated Local Prudent Reserve Balance</b>	
1. Estimated Local Prudent Reserve Balance on June 30, 2017	583,065
2. Contributions to the Local Prudent Reserve in FY 2017/18	0
3. Distributions from the Local Prudent Reserve in FY 2017/18	0
4. Estimated Local Prudent Reserve Balance on June 30, 2018	583,065
5. Contributions to the Local Prudent Reserve in FY 2018/19	200,000
6. Distributions from the Local Prudent Reserve in FY 2018/19	0
7. Estimated Local Prudent Reserve Balance on June 30, 2019	783,065
8. Contributions to the Local Prudent Reserve in FY 2019/20	200,000
9. Distributions from the Local Prudent Reserve in FY 2019/20	0
10. Estimated Local Prudent Reserve Balance on June 30, 2020	983,065

a/ Pursuant to Welfare and Institutions Code Section 5892(b), Counties may use a portion of their CSS funds for WET, CFTN, and the Local Prudent Reserve. The total amount of CSS funding used for this purpose shall not exceed 20% of the total average amount of funds allocated to that County for the previous five years.





**Alpine County Behavioral Health Services**

*Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

**Community Services and Supports (CSS) Component Worksheet**

	Fiscal Year 2017/18					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>FSP Programs</b>						
1. FSP	625,000	575,000	50,000			
<b>Non-FSP Programs</b>						
1. FCCS	127,000	117,000	10,000			
2. OUTREACH & ENGAGEMENT	181,000	181,000				
3. PLAY THERAPY	83,500	76,500	7,000			
4. SYSTEMS DEVELOPMENT	250,500	250,500				
<b>CSS Administration</b>	0					
<b>CSS MHSA Housing Program Assigned Funds</b>	0					
<b>Total CSS Program Estimated Expenditures</b>	1,267,000	1,200,000	67,000	0	0	0
<b>FSP Programs as Percent of Total</b>	52.1%					

	Fiscal Year 2018/19					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>FSP Programs</b>						
1. FSP	625,000	575,000	50,000			
<b>Non-FSP Programs</b>						
1. FCCS	127,000	117,000	10,000			
2. OUTREACH & ENGAGEMENT	181,000	181,000				
3. PLAY THERAPY	83,500	76,500	7,000			
4. SYSTEMS DEVELOPMENT	250,500	250,500				
<b>CSS Administration</b>	0					
<b>CSS MHSA Housing Program Assigned Funds</b>	0					
<b>Total CSS Program Estimated Expenditures</b>	1,267,000	1,200,000	67,000	0	0	0
<b>FSP Programs as Percent of Total</b>	52.1%					

	Fiscal Year 2019/20					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CSS Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>FSP Programs</b>						
1. FSP	625,000	575,000	50,000			
<b>Non-FSP Programs</b>						
1. FCCS	127,000	117,000	10,000			
2. OUTREACH & ENGAGEMENT	181,000	181,000				
3. PLAY THERAPY	83,500	76,500	7,000			
4. SYSTEMS DEVELOPMENT	250,500	250,500				
<b>CSS Administration</b>	0					
<b>CSS MHSA Housing Program Assigned Funds</b>	0					
<b>Total CSS Program Estimated Expenditures</b>	1,267,000	1,200,000	67,000	0	0	0
<b>FSP Programs as Percent of Total</b>	52.1%					





**Alpine County Behavioral Health Services**

*Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

**Prevention and Early Intervention (PEI) Component Worksheet**

	Fiscal Year 2017/18					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated PEI Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>PEI Programs - Prevention</b>						
1. COMBINING PAST & PRESENT	19,375	19,375				
2. WELLNESS PROJECTS	26,875	26,875				
<b>PEI Programs - Early Intervention</b>						
1. PBIS	45,875	45,875				
<b>PEI Programs - Outreach for Increasing Recognition of Early Signs of Mental Illness</b>						
1. SENIOR SOCIALIZATION & EXERCISE	34,375	34,375				
2. CREATE THE GOOD	29,375	29,375				
<b>PEI Programs - Stigma and Discrimination Reduction</b>						
1. Speakers to support all PEI programs	10,000	10,000				
<b>PEI Programs - Access and Linkage to Treatment</b>						
1. PRIMARY INTERVENTION PROGRAM (PIP)	45,375	45,375				
<b>PEI Programs - Suicide Prevention</b>						
1. SUICIDE PREVENTION	39,375	39,375				
<b>PEI Programs - Improve Timely Access to Services for Underserved Populations</b>						
1. MENTAL HEALTH FIRST AID	19,375	19,375				
<b>PEI Administration</b>	15,000	15,000				
<b>PEI Assigned Funds</b>	0					
<b>Total PEI Program Estimated Expenditures</b>	285,000	285,000	0	0	0	0





**Alpine County Behavioral Health Services**

*Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

	Fiscal Year 2018/19					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated PEI Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>PEI Programs - Prevention</b>						
1. COMBINING PAST & PRESENT	19,375	19,375				
2. WELLNESS PROJECTS	26,875	26,875				
<b>PEI Programs - Early Intervention</b>						
1. PBIS	45,875	45,875				
<b>PEI Programs - Outreach for Increasing Recognition of Early Signs of Mental Illness</b>						
1. SENIOR SOCIALIZATION & EXERCISE	34,375	34,375				
2. CREATE THE GOOD	29,375	29,375				
<b>PEI Programs - Stigma and Discrimination Reduction</b>						
1. Speakers to support all PEI programs	10,000	10,000				
<b>PEI Programs - Access and Linkage to Treatment</b>						
1. PRIMARY INTERVENTION PROGRAM (PIP)	45,375	45,375				
<b>PEI Programs - Suicide Prevention</b>						
1. SUICIDE PREVENTION	39,375	39,375				
<b>PEI Programs - Improve Timely Access to Services for Underserved Populations</b>						
1. MENTAL HEALTH FIRST AID	19,375	19,375				
<b>PEI Administration</b>	15,000	15,000				
<b>PEI Assigned Funds</b>	0					
<b>Total PEI Program Estimated Expenditures</b>	285,000	285,000	0	0	0	0

	Fiscal Year 2019/20					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated PEI Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>PEI Programs - Prevention</b>						
1. COMBINING PAST & PRESENT	19,375	19,375				
2. WELLNESS PROJECTS	26,875	26,875				
<b>PEI Programs - Early Intervention</b>						
1. PBIS	45,875	45,875				
<b>PEI Programs - Outreach for Increasing Recognition of Early Signs of Mental Illness</b>						
1. SENIOR SOCIALIZATION & EXERCISE	34,375	34,375				
2. CREATE THE GOOD	29,375	29,375				
<b>PEI Programs - Stigma and Discrimination Reduction</b>						
1. Speakers to support all PEI programs	10,000	10,000				
<b>PEI Programs - Access and Linkage to Treatment</b>						
1. PRIMARY INTERVENTION PROGRAM (PIP)	45,375	45,375				
<b>PEI Programs - Suicide Prevention</b>						
1. SUICIDE PREVENTION	39,375	39,375				
<b>PEI Programs - Improve Timely Access to Services for Underserved Populations</b>						
1. MENTAL HEALTH FIRST AID	19,375	19,375				
<b>PEI Administration</b>	15,000	15,000				
<b>PEI Assigned Funds</b>	0					
<b>Total PEI Program Estimated Expenditures</b>	285,000	285,000	0	0	0	0





**Alpine County Behavioral Health Services**

*Mental Health Services Act (MHSA) Annual Update and Three-Year Program & Expenditure Plan FY 2017-20*

**Workforce, Education and Training (WET) Component Worksheet**

	Fiscal Year 2017/18					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated WET Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>WET Programs</b>						
1. MHSA COORDINATION	125,000	125,000				
2. FUNDAMENTAL LEARNING PROGRAM	100,000	100,000				
3. EDUCATIONAL STIPENDS	10,000	10,000				
4. FINANCIAL INCENTIVES	20,000	20,000				
<b>WET Administration</b>	0					
<b>Total WET Program Estimated Expenditures</b>	255,000	255,000	0	0	0	0

	Fiscal Year 2018/19					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated WET Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>WET Programs</b>						
1. MHSA COORDINATION	120,000	120,000				
2. FUNDAMENTAL LEARNING PROGRAM	0	0				
3. EDUCATIONAL STIPENDS	0	0				
4. FINANCIAL INCENTIVES	0	0				
<b>WET Administration</b>	0					
<b>Total WET Program Estimated Expenditures</b>	120,000	120,000	0	0	0	0

**Capital Facilities/Technological Needs (CFTN) Component Worksheet**

	Fiscal Year 2017/18					
	A	B	C	D	E	F
	Estimated Total Mental Health Expenditures	Estimated CFTN Funding	Estimated Medi-Cal FFP	Estimated 1991 Realignment	Estimated Behavioral Health Subaccount	Estimated Other Funding
<b>CFTN Programs - Capital Facilities Projects</b>						
1. BUILDING	988,500	988,500				
<b>CFTN Programs - Technological Needs Projects</b>						
1. Electronic Health Record Implementation	0					
<b>CFTN Administration</b>	0					
<b>Total CFTN Program Estimated Expenditures</b>	988,500	988,500	0	0	0	0





## **Appendix A: Stakeholders Engaged in Community Program Planning**

A total of 127 individuals participated in the Community Program Planning (CPP) process, throughout the key informant interviews and the community work session in March 2017, the public hearing in May 2017, and the public commenting period in May and June 2017. A total of 31 demographic forms were submitted at the conclusion of these activities.

### **Participant Stakeholder Affiliation**

- 27% Consumers
- 15% Family Member of a Consumer
- 20% County Government Agency Staff
- 7% Contracted Service Provider or Community-Based Organization Staff or Volunteer
- 0% Law Enforcement Staff
- 6% Education Agency Staff
- 5% Social Service Agency Staff
- 0% Veteran Organization Staff or Volunteer
- 1% Medical or Health Care Organization Staff
- 51% Community Member
- 8% Other
- 8% Did not identify

### **Participant Age Ranges**

- 2% Under 16
- 0% 16-24
- 49% 25-59
- 45% 60 and older
- 3% Did Not Identify

### **Participant Gender**

- 79% Female
- 16% Male
- 1% Other
- 4% Did Not Identify

### **Participant Race/Ethnicity**

- 83% White/Caucasian
- 1% African American/Black
- 1% Hispanic/Latino
- 1% Asian or Pacific Islander
- 10% American Indian/Native Alaskan
- 3% Multi-race
- 6% Other
- 3% Did Not Identify

### **Participant Residency**

- 4% Bear Valley
- 4% Hung A Lel Ti Community
- 4% Kirkwood
- 30% Markleeville
- 28% Woodfords
- 26% Other
- 2% Did Not Identify