

Contra Costa Mental Health Commission Focus Area Action Plan | 2010

Mission Statement: The Contra Costa County Mental Health Commission has a dual mission: First, To influence the County’s Mental Health System to ensure the delivery of quality services which are effective, efficient, culturally relevant and responsive to the needs and desires of the clients it serves with dignity and respect; and Second, To be the advocate with the Board of Supervisors, the Mental Health Division, and the community on behalf of all Contra Costa County residents who are in need of mental health services.

Item	Strategy/Activity	Commissioner Lead	Timeline	Status/Outcome
Focus Area #1	<u>Capital Facilities and Projects Workgroup - Mental Health Proposed Site Development for PHF/Other Programs</u> Participate in the development of programs for the site set aside for a psychiatric health facility (PHF) and/or other services	Annis Pereyra		
	Sponsor a public hearing or other educational forum to inform commissioners and the public on Crisis Stabilization, and proposed capital development plans.			Recommendation to broaden the topic to address crisis stabilization
***	Consider how achievable “Pavilion” 3 project proposal is – resolve the discussion			
	Strong active united voice in development of new facility – Collaborate with MHA			
	<ul style="list-style-type: none"> • PHF – Assurances are given but later changed because of cost • Express the real worries of the PHF 			

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Focus Area #2	<u>Quality of Care and Quality of Life Assurance Workgroup</u>	Peter Mantas		
***	Reopen CSU admissions			
**	Continuum of care/case management			
**	Assessment tool to review services (including unlicensed board and care facilities)			
**	Address Gaps in the System			
**	Develop qualitative and quantitative metrics for all county mental health services			
**	Review service provider contracts to include qualitative and quantitative metrics to monitor outcome performance			
*	Review and comment on county outcome reports			
*	Support efforts that improve post-discharge and timely coordination of care.			
*	Collocation of physical and Mental Health Services especially at new West County Health Center			
*	Apply Lean Management to Mental Health Operation			
*	Housing			
*	Site visits			
	Care be culturally informed and relevant			

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Focus Area #2	Quality of Care and Quality of Life Assurance Workgroup... Continued	Peter Mantas		
	Beds <ul style="list-style-type: none"> • Justification for reducing beds • Out of county placements due to the loss of beds • People pushed to lower level of care • Different level of care at CCRMC that is no longer there if beds are eliminated • Bed count • 10 remaining beds may be going away due to economies of scale (Acute care beds) • Nierika House - People are much worse off because their care was downgraded 			
	Ensuring good quality of life for consumers <ul style="list-style-type: none"> • Picking safe (internal and external) • Picking accessible outside resources (transportation and services) • Picking quality of housing • Subsidized transportation costs 			

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Focus Area #2	Quality of Care and Quality of Life Assurance Workgroup... Continued	Peter Mantas		
	Quality of care - Monitor that inpatient needs are met <ul style="list-style-type: none"> • Contract review • Are the Contract providers making decisions on level of service and what services are provided • Police – not willing to take 5150s to the hospital • Two-Tier vs multi-tier System to be politically correct (haves and have-nots) • Cadillac services for some while lower care for others 			

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Focus Area #3	MHC Budget/Finance Workgroup	Scott Nelson		
**	Help collaborate with Mental Health Administration to develop models such as a recovery clinic			
*	County to support all consumer driven recovery services to ultimately reduce involuntary commitments			
	State release of Prop 63 funds			
	Find “waste” and redirect			
	Maintain Mental Health funding to increase staffing to achieve transformation			
	Protect Clubhouse funding			
	Monitor CPAW			
	Enlist Congressman Garamendi in getting federal funds			
	Help County leaders reframe the definition of public safety (ie. reductions in mental health services can negatively affect public safety)			
Focus Area #4	Diversity and Recruitment Workgroup	Anne Reed		
	Increase Consumer voice			
	Reflect mission statement			
	Cultural, racial, ethnic, social group diversity			

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Focus Area #5	Governance			
	Assure Compliance with Statutory Obligations	Executive Committee		
	Update Bylaws and Develop Policies & Procedures	Peter Mantas		
	Review Board of Supervisor's Legislative policies as relates to the work of the MHC			
	Maintain a running list of issues brought to the Commission and link to resource for resolution as needed.			
*****	Communicate with decision makers (BOS and others) about the need for Systemic Change			
**	Work to become a transformational leadership body – Building bridges with the community – Respectful decisions			
	Earlier involvement in significant decisions			

Other summary items

- Deliver the message “mental health system in this county is not working” Systemic change is needed... System is in crisis... (****)
- Consumer voice should be included in planning and transformation
- Launch anti-stigma campaign
- Accessibility to transportation
- More involvement in legislative issues and advocacy
- Information from MHA not provided and or can't be trusted
- Engage with service providers and all stakeholders
- Join existing community committees
 - With focus of children, TAY and older adults
 - Older Adult Mental Health Community Task Force (Commissioners O'Keefe and Pereyra)
 - Patients rights (possibly have each committee representing the each age category focus on this independently)
 - CPAW (Commissioners Pasquini and Pereyra)