

## MENTAL HEALTH SERVICES ACT (MHSA)

### STAKEHOLDER GROUP MEETING CALENDAR, 2023 v3

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\*\* This schedule is subject to change. Please view the MHSA [website](#) for calendar updates.

DATE	TIME	LOCATION	MEETING THEMES
January 27, 2023	2:00-4:00pm	Go To Meeting	<ul style="list-style-type: none"> <li>• Presentation: El Timpano</li> <li>• Three-Year Plan Update</li> <li>• Calendar Brainstorm</li> </ul>
March 24, 2023	2:00-4:00pm	GoToMeeting	<ul style="list-style-type: none"> <li>• Review MHSA-SG Applications</li> <li>• Presentation: African American hub</li> <li>• CPPP/INN recommendation</li> </ul>
April 28, 2023	1:00-3:00pm	Go To Meeting	<ul style="list-style-type: none"> <li>• Program Spotlights: Pilot API mental health program</li> </ul>
June 23, 2023	1:00-3:00pm	Teams	<ul style="list-style-type: none"> <li>• Presentation: Primary Care Integration Programs.</li> </ul>
August 25, 2023	1:00-3:00pm	Zoom	<ul style="list-style-type: none"> <li>• Presentation: SB 326 Modernization</li> </ul>
October 27, 2023	1:00-3:00pm	Zoom	<ul style="list-style-type: none"> <li>• Presentation: CPPP Report &amp; FY 24/25 Listening Session</li> </ul>
December 15, 2023	1:00-3:00pm	Zoom	TBD

## MHSA STAKEHOLDER GROUP (MHSA-SG)

Friday, October 27, 2023 (1:00-3:00pm)

**ZOOM MEETING TELECONFERENCE:** [Join Zoom meeting](#)  
United States (Toll Free): 877-336-1831; Access Code: 350574

MISSION	VALUE STATEMENT	FUNCTIONS
<i>The MHSA Stakeholder Group advances the principles of the Mental Health Services Act and the use of effective practices to assure the transformation of the mental health system in Alameda County. The group reviews funded strategies and provides counsel on current and future funding priorities.</i>	<i>We maintain a focus on the people served, while working together with openness and mutual respect.</i>	<p>The MHSA Stakeholder Group:</p> <ul style="list-style-type: none"> <li>• <i>Reviews</i> the effectiveness of MHSA strategies</li> <li>• <i>Recommends</i> current and future funding priorities</li> <li>• <i>Consults</i> with ACBH and the community on promising approaches that have potential for transforming the mental health systems of care</li> <li>• <i>Communicates</i> with ACBH and relevant mental health constituencies.</li> </ul>

1. Welcome and Introductions
  - Ice Breaker: If you could compete in any Olympic sport, which would it be? 1:00
2. General Updates & Announcements 1:10
  - MHSA CPPP Planning Committee Update
  - MHSA Listening Sessions schedules & locations
  - New MHSA Senior Planner, Mr. Noah Galo
  - Calendar/Next meeting: December 15<sup>th</sup> 1-3pm
3. Presentation: MHSA CPPP Listening Session 1:45
4. Wrap-Up 2:50
5. Meeting Adjournment 3:00

### Documents Attached:

- Meeting Calendar 2023
- Agenda
- PPT



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# Mental Health Services Act Stakeholder Meeting

Facilitator:

Tracy Hazelton, MPH | MHSA Division Director, Alameda County Behavioral Health

**Zoom/Virtual**

**Friday, October 27, 2023 | 1:00PM**

**HELLO**  
**MY NAME IS**

**ICEBREAKER:**

If you could compete in any Olympic sport, which would it be?

# Community Agreements/DTA

- Respect
- Participate to have fun and learn
- Raise hand to ask questions
- Mute phones to help presenters
- Feel free to use the chat box
- Assume goodwill
- Use the chat box to ask a question
- Pace/Pause/Breathe: We have a variety of people participating using different communication methods (phone, webcam, etc.) we might take time to pause throughout the presentation to address comments/questions



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# Meeting Agenda

- Welcome & Introductions
- Presentation: Listening Session
- Administrative Updates & Announcements
- Wrap-Up/ Summary



# MHSA Listening Session Agenda

**Listening Session Purpose: Education and Information sharing about MHSA, Stakeholder Engagement and Information Gathering**

## **Meeting Process for Today:**

- Why we are here
- Looking at the many known behavioral health needs
- Wanting to identify/rank problems or areas of need and then focus on *solutions*
- Conducting a ranking process
- Talking about the top 3 areas
- Time for any other comments and feedback
- Demographic Survey
- Wrap Up



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## Community Agreements

- *Keep your mic on mute unless talking*
- *Use the chat box to ask a question*
- *Pause/Breathe: We have a variety of people participating using different communication methods (phone, webcam, etc.) we might take time to pause throughout the presentation to address comments/questions*
- *Have fun and participate*

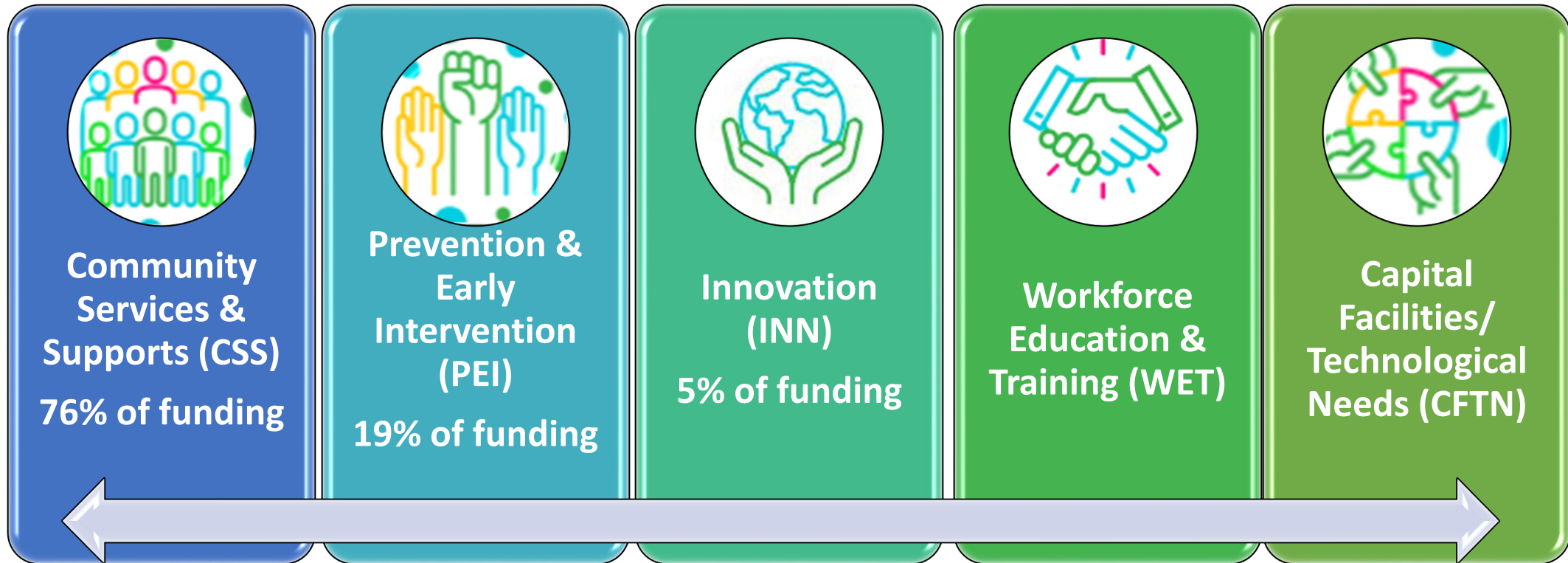


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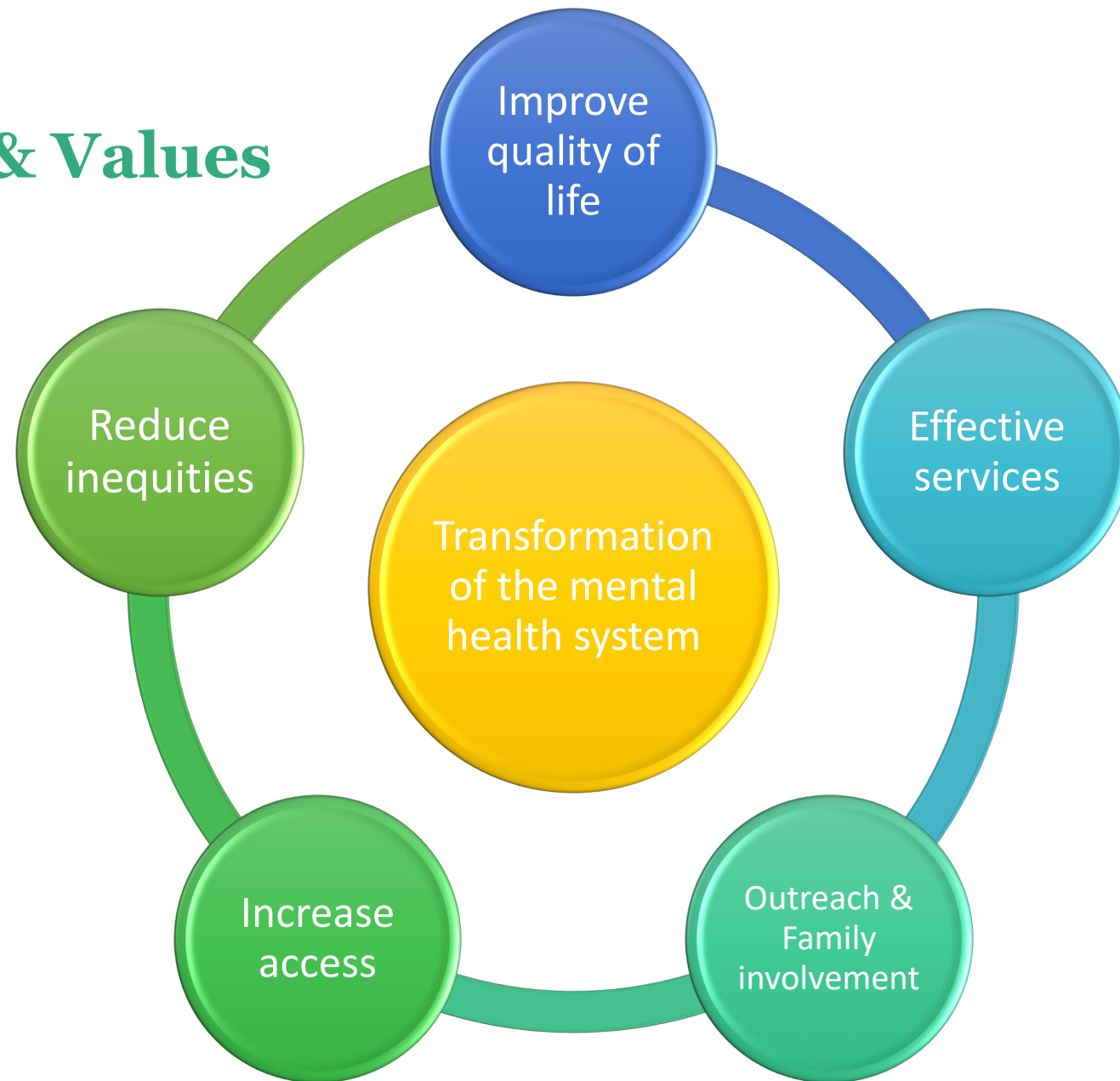


# Mental Health Services Act (MHSA) Component Areas

- In 2004, California voters passed Proposition 63, known as the Mental Health Services Act
- Funded by 1% tax on any personal incomes over \$1 million
- Here are the 5 Service Categories:



# MHSA Goals & Values



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## MHSA: Who Does It Serve?

- Individuals with serious mental illness (SMI) and/or severe emotional disorder (SED)
- Individuals not served /underserved by current mental health system
- Services must be in a voluntary setting, meaning MHSA funds can not be used to provide services in the jail or a locked facility.
- Non-supplantation: MHSA may not replace existing program funding or be used for non-mental health programs.



# Community Program Planning Process (CPPP)

The County shall provide for a CPPP (also known as Community Listening Sessions or Community Input) as the basis for developing the Three-Year Program and Expenditure Plans and Plan Updates\*.

The CPPP shall, at a minimum, include:

- Involvement of clients with serious mental illness and/or serious emotional disturbance and their family members in all aspects of the Community Program Planning Process.
- Participation of diverse stakeholders.
- Training/Education on MHSA.

Alameda's Community Listening sessions will conclude December 31, 2023

*\*Title 9 CCR § 3300*



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# MHSA Funding from Previous Community Input Sessions



Provider capacity building funds to address workforce crisis



Increased funding for programs that have a focus on race/ethnicity and/or culture.



New Early Childhood early intervention programming



# Listening Session



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# Known Top Behavioral Health Needs in Alameda County

**Access, Coordination and Navigation to Services** - this category captures the needs of diverse cultures and identities such as race/ethnicity, language, LGBTQIA+, veteran status and age related to accessing/finding/navigating to mental health and substance use services, including community knowledge and education, language capacity and culturally responsive approaches to engaging communities. There is also a need for successful connection to services after an emergency.

**Behavioral Health Workforce** - this category captures the needs related to recruiting, developing, supporting and maintaining a sufficient clinical and peer/family member workforce to address the needs and the diversity of the community. This includes a workforce that looks like the community it serves and provides services in a communities languages so clients can be served in their native languages. This category also captures the Provider Support needs around training/core competencies burn out, high turnover and vicarious trauma.

**Crisis Continuum** - this category captures needs related to mental health and substance use crisis response and with an emphasis on non-law enforcement response, as well as appropriate community-based supports, early assessment of suicide risk, and stabilization during and after a crisis.

## Known Top Behavioral Health Needs in Alameda County

**Housing Continuum** - this category captures the housing needs for individuals living with behavioral health challenges ranging from prevention of becoming unhoused, housing navigation, and supports needed to maintain housing. This is particularly needed for those living with disabilities and older adults, who may be facing becoming unhoused for the first time.

**Substance Use** - this category captures the increasing need for substance use services and supports that are *accessible, integrated and coordinated* with mental health services.

**Community Violence and Trauma**-this category captures gun violence, domestic violence, human trafficking, gang violence, immigration trauma, poverty, pervasive racism and homophobia, family conflict and stress, school safety and bullying, and post-traumatic stress disorder (PTSD).

**Child/Youth/Young Adult Needs** - this category captures mental health and substance use challenges for school to transition-age youth ages 6-25, it also includes specific needs of children 0-5 and their families, respite services, ongoing increased suicide rates, youth runaways, juvenile justice involvement, human trafficking, gang violence, lack of support on how to access services, needs of LGBTQ+, pervasive racism, needs of bi-cultural children, lack of training on the part of schools for students with MH challenges.



## Known Top Behavioral Health Needs in Alameda County

**Adult/Older Adult Needs** - this category captures mental health and substance use challenges for adults and older adults including social isolation, depression, complex chronic health issues (including Alzheimer's and dementia), general poor mental health outcomes for those living with a severe mental illness, suicide rates, alternatives to incarceration, pervasive racism, LGBTQ+, immigration stress, gun violence, elder abuse, traumatic impact of social unrest-fear, in particular for Asian communities.

**Needs of Family Members**-this category captures the ongoing stress, frustration and isolation family members can feel in taking care of their loved ones in a healthcare system that is mainly a “fail first” system, especially for loved ones with severe mental illness and episodes of anosognosia. Numerous navigation issues, especially related to the criminal justice system. High need for 24/7 access to inpatient and outpatient psychiatry services. Suicide (and how this effects the family and entire communities) lack of understanding about Child protective Services (CPS), intergenerational trauma, and immigration trauma.

## Known Top Behavioral Health Needs in Alameda County

**Needs of Veterans**-this category captures the mental health and housing needs of Veterans: Oakland-Berkeley/Alameda County has the 4th highest number of homeless veterans, and second highest (78.8%) percentage of unsheltered homeless veterans in California. Veterans have a higher rate of poor mental health compared to nonveterans and women veterans have a poorer mental health compared to their male counterparts, in particular due to military sexual assault trauma. Additional needs include high suicide rates (16-18/day), stigma, lack of navigation support, lack of focused veteran groups for non-VA (veterans association) connected individuals and the aging veteran population who are older, sicker and more isolated. There is also a misunderstanding that *not all veterans are eligible for VA services*. In addition to these needs for American veterans, veterans of other countries also have significant needs around problem solving and healthy coping mechanisms.

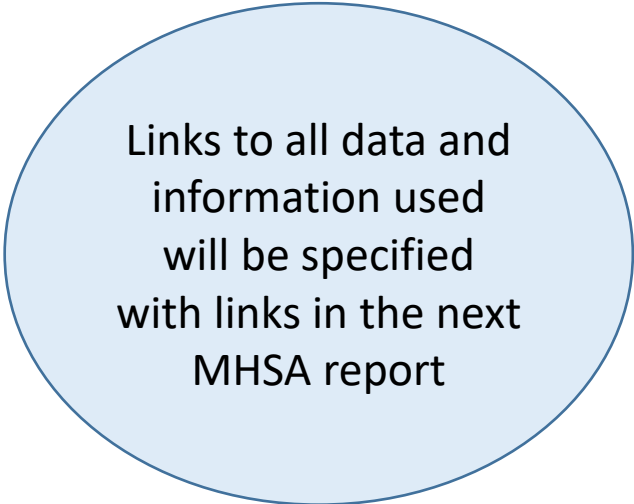
**Needs of the Re-entry Community** for both Adults and Youth- this category captures the mental health, substance use, housing and employment needs of this community. Difficult to navigate uncoordinated and complicated systems to receive both behavioral and physical health services. Stigma, a high need for services to be provided by people who reflect this community and have lived experience with being justice involved. Additional needs in the areas of: focused treatment for sex offenders (housing, prosocial rehab services etc.). Lack of MH supported recovery residences, cooccurring treatment and focused job training. Needs of specific communities (LGBTQ+, immigrant, communities of color). Housing assistance and support services for those with disabilities to live independently.

# Time to Rank the Three(3) Community Need Areas you would like to talk about today



# Documents used for the Assessment of Needs Areas

- MHSA Three Year Plans FY 20/23 and 23/26
- Community Program Planning Report FY 22/23
- Alameda County point in time Homeless data
- Alameda County Cultural Competency Plan
- ACBH Utilization data for Mental Health Services
- MH and SUD prevalence data FY 21/22, from the California Department of Health Care Services (DHCS)
- California Health Information Survey data
- Alameda County Health Status profile
- 2020 suicide data from the California Department of Public Health
- Healthy Alameda website
- Swords to Ploughshares Veterans data
- Various journal articles on housing, mental health, psychiatric needs



Links to all data and information used will be specified with links in the next MHSA report



**Next meeting:**  
**Friday, December 15, 2023**  
**1-3PM**



**Alameda County Behavioral Health  
Care Services**



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**thank you.**

Please visit us at [acmhsa.org](https://acmhsa.org)