Colusa County Department of Behavioral Health



MHSA Annual Update 2015/2016

Colusa County Department of Behavioral Health

Table of Contents

Stakeholders	2
Annual Update-Introduction	2-3
MHSA Programs	3-7
Outcomes	8-16
MHSA Budget	17-19

Colusa County
Department of
Behavioral
Health Vision
Statement

• • •

The Colusa County Department of Behavioral Health will provide high quality consumer centered and family friendly, prevention, education and clinical services to residents of Colusa County. We will promote recovery/wellness through independence, hope, personal empowerment and resilience. We will make access to services easier, services will be more effective, produce better outcomes and out-ofhome and institutional care will be reduced. All of our Behavioral Health services will be designed to enhance the wellbeing of the individuals and families who it is our privilege to serve.

Stakeholders and Key Contributors:

Safe Haven Peer Drop-in Center

Colusa County office of Education

Colusa County Probation

Colusa County Public Health

Colusa County Behavioral Health Staff Members

Colusa County Sheriff's Office.

Colusa County Veteran's Services

Colusa County Health and Human Services

Colusa Police Department

Williams Police Department

Colusa Indian Community Council

Colusa Indian Health Clinic

Frist 5 Colusa County

CAPC

Impact

Hand In Hand

Colusa Regional Medical Center

Peer Advocate Council (PAC)

English Language Advisory Committee (ELAC)

Colusa One-Stop

Hand Up

Stakeholder Process

Colusa County Department of Behavioral Health will be holding quarterly meetings (Dates to be determined) to increase collaborative efforts with the identified Stakeholders of the community. Currently, the Department of Behavioral Health will be seeking feedback from the community on Wednesday, September 16th, 2015 at 6:00pm; Monday, September 21st, 2015 at 12:00pm; and Friday September 25th at 4:00pm at various locations in the community.

The Department of Behavioral Health is looking to utilize the local newspapers, flyers, countywide emails, word of mouth, and other collaborative efforts to engage the community in this process.

30-Day Public Review (Date of posting; feedback will be provided.)

Annual Update-Introduction

MHSA or Prop 63 was passed in 2004 in order to address the unique mental health needs of communities. The Act enables a 1% tax with those of an income exceeding 1 million dollars. These funds go towards preventative services and direct services for children, Transitional Age Youth (TAY), adult, and older adults who identify as being severely emotionally disturbed or severely mentally ill. MHSA promotes community collaboration, cultural competence, client and family driven services

• • •

focused on wellness, recovery, and resilience through an integrated approach. The Act also seeks to raise awareness and reduce stigma and discrimination around mental health.

The annual update for fiscal year 2015-2016 indicates continued program efforts and revisions. The removal of one program and additional programs to consider at this time include:

- 1. Learn to Earn; direct schools based program was exhibiting little improvement among consumers and is being considered for removal.
- 2. Additional outreach efforts for Children System of Care (CSOC) and Adult System of Care (ASOC).
- 3. An innovative approach to outreach directed toward the undeserved and underrepresented Hispanic population.

Colusa County will continue to provide a thorough assessment and evaluation of MHSA programs and continue with an intensive stakeholder planning process for further development of a three-year integrated plan.

MHSA PROGRAMS

Colusa County Department of Behavioral Health is identified as a rural community with a population of approximately 21,500 according to the United States Census. Colusa County is made of a total of ten communities, with Colusa being the seat of the County. More than half of the population identifies as Hispanic or Latino with Spanish being the threshold language. The Hispanic/Latino population often fluctuates according to the crop season, as Colusa County's economy is supported the production of crops. Colusa County also has a small percentage of American Indian and Alaska Native alone, at approximately 2.7%. The median household income according to the United States Census is approximately \$52,000. Being a small, rural community also means that stigma and discrimination around mental health are strongly prevalent, causing a barrier to those who are interested in seeking help or learning more about the issue. MHSA has allowed for the opportunity for the community to become better educated on mental health through collaboration, integration of services, and developing more culturally competent services county wide.

Program Name: Wraparound

Component: CSS-FSP

Program Description: Wraparound provides intensive wrap around services to children and youth who could benefit from a more integrated approach to services. Wraparound is client and family driven focused on wellness, recovery, and resilience. Staff works with the client to build natural supports within the community through collaboration with other departments in the community and the client's family.

Program Name: ASOC-FSP

Component: CSS-FSP

• • •

Program Description: A "whatever it takes" method of services is provided to consumers of all ages (children, transition age youth, adults, and older adults) who meet specific requirements. Specific requirements include, being at risk of homelessness, psychiatric hospitalization, and incarceration as a result of a mental illness. Consumers are provided with intensive services in collaboration with natural supports and services other than mental health. Supports can include housing, transportation, education, vocational training, food, and clothing.

Program Name: Native American Collaboration

Component: CSS-OESD

Program Description: Funding is provided for a therapist to address the unmet needs of the Native American Community. The therapist is located at the reservation of the Cachil dehe Wintun Tribe. Services provided are based on the individual needs of the client/family through community collaboration and a unique integrated experience. Some services the therapist provides, include: organizing a variety of community events, groups for youth, Transitional Age Youth (TAY), adults, and older adults, crisis intervention, and linkage to community resources. The therapist and staff collaborate with behavioral health to provide culturally competent services that are wellness, recovery, and resilience focused.

Program Name: CSOC-Outreach and Engagement

Component: CSS-OESD

Program Description: CSOC-Outreach and Engagement allows for community collaboration and outreach through Multi-Disciplinary Teams (MDT), the use of a therapist, and outreach through community events. The MDT meets monthly and includes representatives from the various county service departments, in which they discuss children's' cases in order to be more culturally competent; focusing on wellness, recovery, and resilience. The use of a therapist provides an integrative experience that allows the family and the client to lead the services through school collaboration and providing in home support services when needed. The Department of Behavioral Health organizes community events and also provides support at events hosted by other organizations in the community as a way to reduce stigma and raise awareness around mental health.

Program Name: WET Action Volunteer Program

Component: WET

• • •

Program Description: WET Action Volunteer program works in collaboration with vocational services and focuses on wellness, recovery, and resilience by giving consumers an opportunity to build vocational skills that can be used in the workforce. The program provides opportunities to adults and older adults of the community. Volunteers are offered job-related trainings, participate in community outreach events, and can be connected with job employment opportunities. The program works in collaboration with the local One-Stop to allow individuals an opportunity to grow and gain new schools in hopes of moving into more permanent employment in the community.

Program Name: 2nd Step

Component: PEI

Program Description: This program works in collaboration with the Colusa County Office of Education to provide 2nd Step services in various school of the community. 2nd Step works with students in pre-school to third grade, focusing on socially appropriate behaviors between the teacher and the student, peer to peer, and classroom behaviors. Students are taught in a classroom setting or small group setting lead by a facilitator, who engages them in a variety of activities involving music, dancing, and storytelling. Through this program students are able to develop appropriate coping and social skills that are reiterated as they progress through elementary school.

Program Name: CSOC-Friday Night Live (FNL)/Club Live (CL)

Component: PEI

Program Description: Friday Night Live/Club Live (FNL/CL) programs are youth led action groups that meet weekly on high school or Middle School campuses throughout Colusa County. The programs build leadership skills, broaden young people social networks, and implement youth led projects to improve school climate and reduce youth access to alcohol and other drugs. Through the positive youth development model, individual's focus on their strengths and their potential to contribute positively to their own lives and to their communities.

Program Name: ASOC-Safe Haven/Leadership Advocacy Committee (LAC)

Component: CSS-OESD

Program Description: Safe Haven is a peer supported drop-in center that serves adults and older adults who are in recovery from substance abuse, dealing with mental health issues, and or avoiding isolation. The center provides a number of recovery and resiliency focused groups run by peers and Behavioral Health staff. A peer support specialist is funded to provide support in linking members to other services

• • •

in the community through collaboration and outreach events, which allow for increased awareness around mental health and reduce stigma and discrimination in the community. Members can also participate in the Leadership Advocacy Committee, to aid in the day-to-day operation of the center, this allows for growth in leadership skills and peer advocacy.

Program Name: Juvenile Forensic Program

Component: INN

Program Description: This program, in collaboration with juvenile probation, allows for the use of a therapist who provides support services for mentally ill juvenile offenders while incarcerated and in the community. Services are client and family driven that focus on wellness and recovery through discharge planning, medication management referrals, groups, crisis intervention, and works in collaboration with probation, juvenile hall, and other services in the community. The program seeks to reduce recidivism rates, crisis, and increase mental health access for the target population.

Program Name: CSOC-Learn to Earn

Component: CSS-OESD

Program Description: Program will be discontinued at the end of the 2015 school year as it lacked

long-term sustainability.

Program Name: ASOC-Training/Internship/Student Loan Repayment

Component: WET

Program Description: This program provides incentive to the Department of Behavioral Health staff to not only continue with their education, but to continue with providing services to the Colusa County community. Supervision for registered interns and scholarships funds to assist in the repayment or full repayment of student loans are available to staff pursuing a Bachelor's in the Mental Health field, Master's degree in Social Work, or Marriage and Family Therapy.

Program Name: ASOC-Outreach and Engagement

Component: CSS-OESD

• • •

Program Description: ASOC-Outreach and Engagement allows for community collaboration and outreach through Multi-Disciplinary Teams (MDT) and community outreach events. The MDT meets monthly and includes representatives from the various county service departments, in which they discuss adult and older adult cases in order to provide more culturally competent services that focus on wellness, recovery, and resilience. Staff provides support to various community outreach events hosted by other departments as well as organized by the Department of Behavioral Health as a way to reduce stigma and raise awareness around mental health.

Program Name: Hispanic Outreach

Component: INN

Program Description: With over 50% of the population in the community identifying as Hispanic/Latino, outreach is provided to build rapport and increase overall collaboration within this underserved population. This is done by identifying staff at Behavioral Health who can participate in community events, attend meetings such as English Learner Advisory Committee (ELAC), and crisis intervention as necessary. The goal is to identify natural leaders of the community to better understand the needs of the population and how they can be better served in the community through a more integrative process.

Friday Night Live/Club Live Demographics and Outcomes

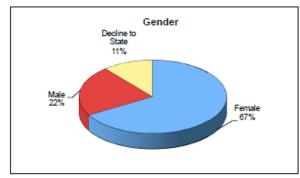
Youth Development Survey Results: Club Live

Gender

n=27 missing=0

Female: 67% Male: 22%

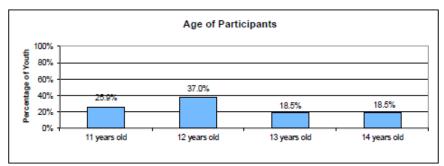
Decline to state: 11%



Age n=27

missing=0

Participants' ages range from 11 to 14. The average age of participants = 12.3 years old.

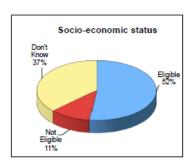


Produced by The Samuels Center for the California Friday Night Live Partnership with funding provided by the California Department of Health Care Services

Socioeconomic Status

n=27 missing=0

Socio-economic status was gauged by asking youth to report whether they were eligible for free- or reduced-price meals at school. A family of four earning \$44,123 or less annually qualifies. This data can be used on grant proposals as an indication of the socioeconomic status of your program participants.



Produced by The Samuels Center for the California Friday Night Live Partnership with funding provided by the California Department of Health Care Services

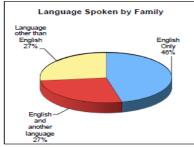
Section III: Page 3

Youth Development Survey Results: Club Live

Language

n=26 missing=1

Survey respondents reported which language is spoken by their families:



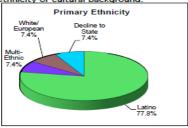
Languages other than English include:

Primary Ethnicity

n=27 missing=0

Youth who took the survey were asked to check the category that best describes their

ethnicity or cultural background:



Specific ethnicities listed include: Mexican/Chican(-a/-o)

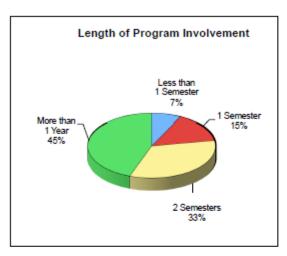
Produced by The Samuels Center for the California Friday Night Live Partnership with funding provided by the California Department of Health Care Services

Youth Development Survey Results: Club Live

Length of Program Involvement

n=27 missing=0

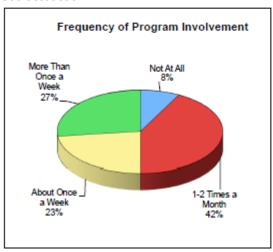
Youth who took the survey were asked how *long* they have been involved with your program:



Frequency of Program Involvement

n=26 missing=1

Youth who took the survey were asked how frequently they attend program meetings, events and activities:

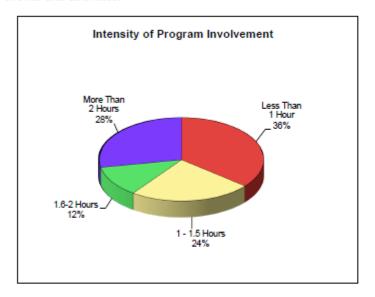


Youth Development Survey Results: Club Live

Intensity of Program Involvement

n=25 missing=2

Youth who took the survey were asked how *long* they typically stay at program meetings, events and activities:



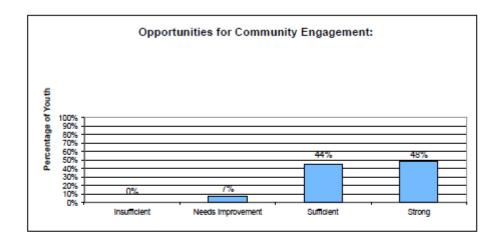
22 percent of youth indicated that they were involved in a club and/or sports team outside of CL. The average number of clubs and/or sports teams youth were engaged in was 1.89.

Youth Development Survey Results: Club Live

Community Engagement

mean=4.7 standard deviation=0.63

Did involvement in your program help young people feel like they can make a difference and feel more connected to their community?



Survey Questions that Measured Community Engagement:

	N	Mean	SD
In my program we go to many events in the community.	27	4.4	0.97
Through my program, I have learned a lot about other youth groups, events, and activities.	27	5.2	0.56
People in my community and school think my program is important.	25	4.5	1.1
We actively let people in the community know about our program.	26	5	0.8
My program has helped make things better in our community.	27	5	0.9
Members of the community ask us to talk about our program with other groups.	27	4.4	1.24

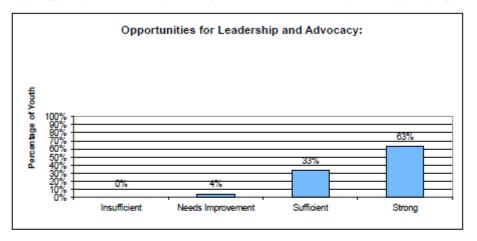
Produced by The Samuels Center for the California Friday Night Live Partnership with funding provided by the California Department of Health Care Services

Youth Development Survey Results: Club Live

Leadership & Advocacy

mean=5.1 standard deviation=0.59

Do young people have the opportunity to build their leadership skills in your program?



Survey Questions that Measured Leadership and Advocacy:

	N	Mean	SD
In my program, we try to make things better in the community or school.	26	5.5	0.76
Youth and adults make decisions together in my program.	27	5	0.98
Adult staff make sure that youth in my program have the chance to be a leader (for example, planning activities, leading meetings, etc.).	26	4.8	1.17
Because of being in the program, I want to take action in my community.	27	5.1	0.86
I would feel okay about asking a staff person for help in an emergency.	27	4.9	1.01

Produced by The Samuels Center for the California Friday Night Live Partnership with funding provided by the California Department of Health Care Services

 \bullet

2nd Step Program Outcomes

TABLE 1
CHANGES IN SOCIAL COMPETENCE AND SCHOOL ADJUSTMENT
(TOTAL SCALE) RATINGS FOR PARTICIPANTS

(TOTAL SCALE) RATINGS FOR PARTICIPANTS									
		Average Scores for Total WSI Scale							
		Before After Participation Participation				Net Cha	inge and S	Significano	e Testing
School Name	n	Raw Score	%ile Score	Raw Score	%ile Score	Net Raw Change	Net %ile Change	Effect Size	P-Value
Arbuckle Elementary	61	60.9	23	64.4	29	+3.6	+6	.32	.012
Burchfield Primary	209	74.6	52	76.1	57	+1.6	+5	.13	.057
Grand Island Elementary	45	73.5	47	74.1	50	+0.6	+3	.08	.600
Maxwell Elementary	16	62.2	25	67.9	36	+5.8	+11	.60	.012
Williams Elementary	121	73.9	50	83.2	71	+9.3	+21	.58	<.001
Project Tot/Avg	452	72.0	45	76.0	57	+4.0	+12	.31	<.001

Effect Size: As generally agreed among researchers, effect sizes lower than .30 are considered "small," those in the range of .30 to .70 are considered "moderate," with effect sizes above .70 considered as "large."

P-Values: Values less than .05 are considered statistically significant, although this test is less sensitive with smaller sample sizes (n's).

Also see page 3 for expanded definitions of column headings.

TABLE 2
CHANGES IN TEACHER-PREFERRED SOCIAL BEHAVIOR
(SUBSCALE 1) RATINGS FOR PARTICIPANTS

		<u>- '/ '</u>				W TIO			
		Average Scores for WSI Subscale 1							
		Bef Partici			Net Change and Significance Testing				
School Name	E .	Raw Score	%ile Score	Raw Score	%ile Score	Net Raw Change	Net %ile Change	Effect Size	P-Value
Arbuckle Elementary	61	16.9	37	17.4	37	+0.5	0	.13	.322
Burchfield Primary	209	19.7	67	19.9	67	+0.2	0	.06	.369
Grand Island Elementary	45	18.7	48	18.7	48	+0.0	0	.01	.958
Maxwell Elementary	16	16.9	37	17.4	37	+0.6	0	.20	.450
Williams Elementary	121	19.7	67	21.9	76	+2.2	+9	.53	<.001
Project Tot/Avg	452	19.1	48	19.9	67	+0.8	+19	.21	<.001

Effect Size: As generally agreed among researchers, effect sizes lower than .30 are considered "small," those in the range of .30 to .70 are considered "moderate," with effect sizes above .70 considered as "large."

P-Values: Values less than .05 are considered statistically significant, although this test is less sensitive with smaller sample sizes (n's).

Also see page 3 for expanded definitions of column headings.

TABLE 3
CHANGES IN PEER-PREFERRED SOCIAL BEHAVIOR
(SUBSCALE 2) RATINGS FOR PARTICIPANTS

		Average Scores for WSI Subscale 2							
			ore pation	After on Participation		Net Change and Significance Testing			
School Name	c	Raw Score	%ile Score	Raw Score	%ile Score	Net Raw Change	Net %ile Change	Effect Size	P-Value
Arbuckle Elementary	61	24.3	25	25.0	29	+0.8	+4	.13	.304
Burchfield Primary	209	28.2	52	29.1	57	+0.9	+5	.20	.004
Grand Island Elementary	45	27.8	52	27.9	52	+0.0	0	.01	.936
Maxwell Elementary	16	23.1	22	26.1	33	+3.0	+11	.61	.010
Williams Elementary	121	27.6	52	31.0	65	+3.4	+13	.58	<.001
Project Tot/Avg	452	27.3	39	28.8	57	+1.5	+18	.31	<.001

Effect Size: As generally agreed among researchers, effect sizes lower than .30 are considered "small," those in the range of .30 to .70 are considered "moderate," with effect sizes above .70 considered as "large."

P-Values: Values less than .05 are considered statistically significant, although this test is less sensitive with smaller sample sizes (n's).

Also see page 3 for expanded definitions of column headings.

TABLE 4
CHANGES IN CLASSROOM ADJUSTMENT BEHAVIOR
(SUBSCALE 3) RATINGS FOR PARTICIPANTS

			Average Scores for WSI Subscale 3							
			ore pation	After Participation		Net Change and Significance Testing				
School Name	n	Raw Score	%ile Score	Raw Score	%ile Score	Net Raw Change	Net %ile Change	Effect Size	P-Value	
Arbuckle Elementary	61	19.7	21	22.0	30	+2.3	+9	.44	<.001	
Burchfield Primary	209	26.7	49	27.1	49	+0.4	0	.08	.235	
Grand Island Elementary	45	27.0	49	27.6	58	+0.6	+9	.14	.351	
Maxwell Elementary	16	22.2	30	24.4	36	+2.2	+6	.49	.048	
Williams Elementary	121	26.6	49	30.3	66	+3.7	+17	.57	<.001	
Project Tot/Avg	452	25.6	44	27.2	49	+1.6	+5	.30	<.001	

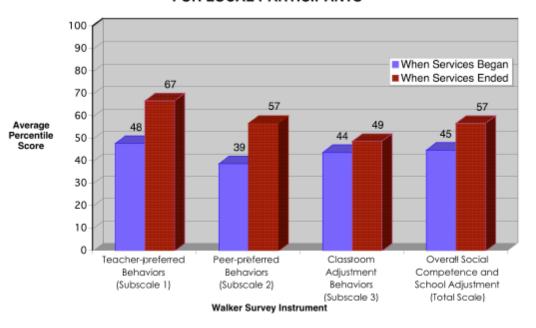
Effect Size: As generally agreed among researchers, effect sizes lower than .30 are considered "small," those in the range of .30 to .70 are considered "moderate," with effect sizes above .70 considered as "large."

P-Values: Values less than .05 are considered statistically significant, although this test is less sensitive with smaller sample sizes (n's).

Also see page 3 for expanded definitions of column headings.

 \bullet

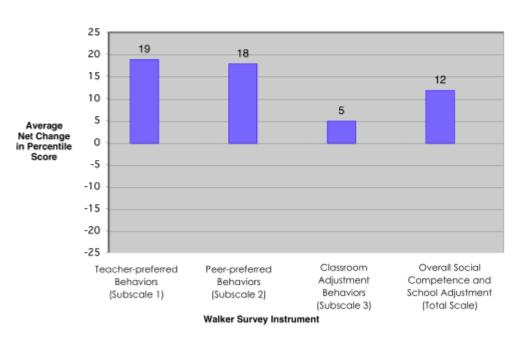
CHART 1 PRE-POST SCHOOL ADJUSTMENT RATINGS FOR LOCAL PARTICIPANTS



A1

2014/15 Local Evaluation Report Colusa County Office of Education

CHART 2 AVERAGE NET CHANGES IN PRE-POST SCHOOL ADJUSTMENT RATINGS



MHSA Budget