



*Campaign for Community Wellness
~ PCOE Nobili Room, Auburn
June 28, 2019
10:00 a.m. to 12:00 p.m.
Minutes*

1. Welcome & Community Updates/Announcements 5 minute

Antoinette opened the meeting 10:10 a.m.
Introductions were made.
Announcements: Elisa September 11 Forum regarding equity; Memorial service for Lisa Bock and acknowledge her work.
CORR – name change and awarded 2nd Cohort grant will be ramping that up as it is larger than previously.
Lighthouse move –last week of July.
Stand down for Veterans will be July 9, 10th
Christina – Youth Development training – 13 – 14 youth – the most youth
KidsFirst-ED Barbara Besana retirement

2. Lived Experience Speaker 15 minutes

Melinda Lacey speakers bureau shared her story and experience as a Mental health consumer so that others can learn from her story. She has a career in Mental Health and Criminal Justice and also suffers from mental health-related issues with bipolar disorder. Message: You are who you are and who you are is beautiful. Finding your way is different than finding your strength to do so. Focus on early intervention and challenges of hope and recovery.

3. Community Feedback Survey Presentation 45 minute.

Announcement: Defined reserve – allowed to keep savings account. No instructions previously. Law passed to define: in 19/20 – as of Monday. We will be required to take \$1M out of our reserve to return to pot from which it came.
Today – continue community planning process. Community Survey one piece of collecting data. High level data-Questions asked of our community. 300 responses. Results: Some stuff added together.

More people said this is -58% did not receive services (see attached pdf)

Targeted Solutions rated:

Homeless and Housing continues to be a priority

TAY

Place inclusive services provided

Prevention and early intervention before issues arise- targeted age groups

Youth

Foster homes/foster youth

Wait times and more people to provide services

Priorities

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Discussion:

Latino – get relevant information and outreach to greater extent to gather better information from that population

How to approach communities that not sufficient information? i.e. LGBTQ;

Work being done specific to target senior community? Even senior community have different generations and possibly different values, needs, priorities?

Work with LLC to get more information to those communities and SNA for native population. And those categories such as veterans who are homeless, TAY who are homeless etc for example as well as active veterans; not yet a senior, not veterans, others than might fall through the cracks

Target for places where consumers come to get targeted outreach and MHA

School populations?

Some identified areas to follow up and gain more information- i.e. to hear from them and revisit

Secondary trauma?

Need everyone's help to customize to certain populations and get more data specific and relevant for us

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Also –Looking at/considering Statewide efforts and priorities and how does that filter /pressure our local priorities/discretionary dollars? Leveraging opportunities

4. MHSA Three Year Planning

45 minutes--

Allocated Funding for Priority Projects

How much? Visual with Twylla's help; graphed out what PC received in MHSA funding – all over the place – as to where funds received/are allocated. When looking at planning – we are at mercy of what is received. Especially when large amounts received periodically and has to be allocated. Actual formal savings account now is defined for when bottom drops out but not down to zero to access.

Also when something is coming so it is necessary to plan. Hold out obligated but unexpended. Those funds will come off the top: Mobile Crisis Team; Family Mobile Team; 12 County Collaborative; Housing.

17/18 received \$13.9M of MHSA; \$Mandatory Housing \$10.6M PSF; \$2.8M PEI; \$700K Innovation; 18/19 \$13.5M; PSF \$10.3M; PEI \$2.5M; Innovation \$670K.

Some funds that may need to get spent. Will be thinking and projecting that as we roll out 20/21 that can be sustained over the life of RFP.

Funds necessary to be spent or ability to carryover – Should be spent – avoid carryover

Unobligated and unexpended: will come back in July or August so 18/19 can be closed out.

Full service partnerships: FSP: validate/different or better work- specific to those that meet the criteria. Younger than 6; wraparound – in County – contract 7 – 19 yo; FSP –TAY (in ASOC); homeless; older adults; Whole person care;

Gathering Additional Feedback

Do those still resonant as a community: Medicare community with mental health issues; supportive services; Supportive services for non-FSP clients- leveraging service ?. Gaps in services when they improve and get better and lose their supports; systems development; focus bring back the bridge program until 18 and bridge receiving support from ASOC for TAY population? Include pieces towards self sufficiency and warm handoff; (tough to stay and transition to acquire housing to where they feel comfortable to meet their values)

Help identify partnerships and alternative to “bridge” the gaps AMIH – has beds for FSP – so for those that don’t qualify. Non FSP but can’t afford to afford on their own? Now don’t qualify cause they are not homeless anymore.

Mild to moderate mental health – non FSP –services and housing needs are not met. Do we need a special look at our homeless population? Targeted FSP? Where are we targeting our \$ is it still a specific FSP for housing; for

We are talking about the in-between- and lose their supports, services or, and fall back into homelessness or difficulties addressing mental health issues.

Is there are not enough trained; knowledgeable professionals to serve our youth? FSP level or general or both- BOTH

Consider those being released from prison/jail with mental health issues; MHSA cannot use MHSA on Parole; Probation is okay.

Some counties do have FSP programs for those exiting jail with health problems.

Additional focus or keep current?

Next meeting July 26, 2019 (PCOE, Seavey Center, Rocklin)
10:00 a.m. to 12:00 p.m.

Your passion and interest in Mental Wellness in Placer can help. If you have interest in supporting and participating in the Campaign, please contact one of our committee chairs below.

1. Outreach/Campaign Development & Program Review.....Shane Libby , Janice LeRoux, Jennifer Price; slibby@unitycare.org or jleroux@placercoe.k12.ca.us or jprice@amihousing.org
MEETS 4TH FRIDAY OF EACH MONTH During CCW
2. Workforce Education and Training.....Stacy Evans
stacye@sierranativealliance.org **MEETS 4TH MONDAY OF EACH MONTH 1:00-2:30 PM**