

Responses to Public Comments Received on FY 18-19 Annual Update to the Napa County Mental Health Services Act (MHSA) Three Year Plan

1. Page 4: Not sure that the “No Place Like Home” (NPLH) plan will be implemented as previously expected in FY18-19. As I understand it, NPLH will be brought before the voters in November.

Response – There are two parallel processes going forward regarding NPLH – a lawsuit against NPLH and a NPLH Initiative that will go before voters in November 2018. Our understanding is that the initiative is a Plan B for NPLH in case the lawsuit against it is successful and it appears that the initiative has broad support, so we are anticipating that NPLH will go forward and are planning accordingly.

2. Page 19: It would be good to provide increased resources to eliminate the wait list for the Kids Exposed to Domestic Violence (KEDS) Children’s support group.

Response – The MH Division agrees that this is worthwhile goal and a priority, but at this time, the Division does not have sufficient MHSA Prevention and Early Intervention (PEI) funds to support an increase in resources for the KEDS program or any other PEI Program.

3. Page 20: The article below shows a \$1 Million 5 year grant was awarded for LGBTQ Connection. Are we certain the money through PEI meets the non-supplantation requirement? https://napavalleyregister.com/news/local/napa-lgbtq-program-gets-state-grant-to-expand-services-upvalley/article_d3617982-1b8c-546e-88e0-fb823e2dde78.html

Response – The grant received by the LGBTQ Connection is a California Reducing Disparities Grant awarded from the California Department of Health that does not supplant their current PEI funding. The CRDP Grant will expand the services that the LGBTQ Connection provides in the City of Napa to communities that it has previously been unable to serve including St. Helena and Calistoga as well as Sonoma and Solano Counties.

4. Page 22: “Strengthening Families At Risk Program” Regarding the story about Melanie, who received crisis counseling by Community Connection Network (CCN) obtained in Cope’s private Community Support room. Since CCN has been replaced by Exodus Crisis Stabilization, can people still receive this type of counseling while at Cope?

Response – The Crisis Triage services provided by the Community Connections Network were not replaced by the Crisis Stabilization Center, which is operated by Exodus, Inc., and actually went away because grant funding ended. Crisis Triage services were identified as a need in the MH Division’s continuum of services though our Community Mental Health Needs Three Year Planning Process. The MH Division will continue to explore potential options to address this critical gap in services.

4. Page 22/23, “Strengthening Families At Risk Program” Glad to see that the staff is working with American Canyon elementary, middle and high schools to get a group started in American Canyon.

Response – MH Division hopes that this new American Canyon group will be successful.

6. Page 25, “Court and Community Schools Student Assistance Program (SAP)” It is very concerning to see the challenges, and it does not appear the students are receiving required resources. Isn’t the County Office of Education (COE) responsible for this type of expense (due to AB114: **AB 114: EDUCATIONALLY-RELATED MH SERVICES** (ERMHS) ”Assembly Bill (AB) 114 changed the process by which students in Special Education receive mental health services. Previously, under AB 3632, county mental health departments provided services. However, realignment under AB 114 requires all California school districts to be solely responsible for ensuring that students with disabilities, as designated by their Individualized Educational Plan (IEP), receive the mental health services necessary to benefit from a special education program. Students with IEPs who demonstrate behavioral health issues that impact their ability to learn and access the school curriculum are eligible for AB 114.”

Response – Yes, you are correct. The MH Division, however, will continue to provide services as needed by students or anyone else who is underserved.

7. Page 27, “Children’s FSP” - Same concern as #6 since some of the children should be students drawing resources provided by the COE.

Response – See response to #6 above.

8. Page 28, “TAY FSP” - Same concern as #6 since some of the youth should be students drawing resources provided by the COE.

Response – See response to #6 above.

9. Housing is mentioned as a prominent barrier for adults (including older adults) with mental illness. Will we see future annual updates leveraging MHSA funds for supportive housing, and an augmented Board & Care (either in Napa County, or a regional effort so that people are not placed so far out of our community? Adults and seniors requiring this level of care are currently placed a few hours away in augmented Board & Care, or they are revolving between homelessness, jails, psychiatric hospitals, crisis and transitional housing.)

Response – MHSA funds are projected to decrease in FY 18-19 as well as in FY 19-20, so there are no additional MHSA funds available to leverage. Having said that, the MH Division, Health and Human Services Agency (HHS) and the County recognize that supportive housing and other types of housing for mental health consumers is a major issue and barrier to recovery for individuals with mental illness. The MH Division, HHS, the County and our collaborative partners continue to explore opportunities to develop additional supportive housing resources for consumers and affordable housing for community members as well.

10. Page 35, “Project Access” – There should be plans in place to address the issues identified by Innovations Community Center (ICC)
 - a. Transportation
 - b. Warm Hand-offs from Mental Health providers
 - c. Limited Staffing

Response – The MH Division has augmented the Innovations Community Center’s (ICC) budget to provide additional supports in these areas and staff will continue to work with ICC to address the needs of mental health consumers served by the Center.

11. Page 37 Is there data available to understand why there are 37 people who have revolved repeatedly through the Exodus Crisis Stabilization Services?

Response – The MH Division is aware of this situation and continues to work with Exodus staff, case managers, and consumers to reduce the number of repeat visits to the Crisis Stabilization Services Program. However, some consumers are in greater need of the psychiatric emergency services offered by Exodus than others which serves to stabilize their mental health status and to avoid unnecessary hospitalizations.

12. Page 37 (CSS bullet #3 mentions “Napa County Department of Behavioral Health” – does this mean the Department of Mental Health?

Response – Yes, thank you for catching this error. It should read, “Napa County Mental Health Division staff” and will be corrected in the version that will be submitted to the Napa County Board of Supervisors.