



C A L I F O R N I A D E P A R T M E N T O F
Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-2309

March 18, 2008

DMH INFORMATION NOTICE NO.: 08-08

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: IMPLEMENTATION PROGRESS REPORT FOR THE
COMMUNITY SERVICES AND SUPPORTS (CSS) COMPONENT
OF THE THREE-YEAR PROGRAM AND EXPENDITURE PLAN
FOR CALENDAR YEAR 2007

REFERENCE: WELFARE AND INSTITUTIONS CODE 5847(a) through (d)

This Department of Mental Health (DMH) Information Notice transmits instructions for completing the Implementation Progress Report for the CSS Three-Year Program and Expenditure Plan for calendar year 2007.

The summary report developed from the initial Implementation Progress Reports can be found at http://www.dmh.ca.gov/Prop_63/MHSA/Community_Services_and_Supports/docs/ImplementationProgressReportSummary.pdf.

I. Purpose of the Implementation Progress Report

The Implementation Progress Report on the CSS component of the Three-Year Program and Expenditure Plan provides counties with an opportunity to:

- Provide a briefing on the implementation of the CSS component of the County's Three-Year Program and Expenditure Plan,
- Highlight their early successes and challenges in implementing the CSS component of the Three-Year Program and Expenditure Plan.

II. Proposed Guidelines for the Implementation Progress Report

All Counties¹ are to complete and submit an Implementation Progress Report. The Implementation Progress Report covers only the period of January 1, 2007 through December 31, 2007, or as much of the year in which the county's approved Plan was effective. Counties may update their Implementation Progress Report if one was submitted for a prior period. The submission date for the Implementation Progress Report is June 30, 2008.

The Implementation Progress Report will contain the following elements:

A. Program/Services Implementation

- 1) The County is to briefly report by Work Plan on how implementation of the approved program/services is proceeding. The suggested length for the response for this section is no more than half a page per Work Plan. Small counties may combine Work Plans and provide a comprehensive update in two to three pages.
 - a. Report on whether the implementation activities are generally proceeding as described in the County's approved Plan and subsequently adopted in the MHSA Performance Contract/MHSA Agreement. If not, please identify the key differences.
 - b. Describe for each FSP Work Plan what percent of anticipated clients have been enrolled. Counties that have submitted their current Exhibit 6, Three-Year Plan—Quarterly Progress Goals and Report, have the option of not including the FSP information in this report.
 - c. Describe for each System Development Work Plan what percent of anticipated clients have received the indicated program/service. Counties that have submitted their current Exhibit 6, Three-Year Plan—Quarterly Progress Goals and Report, have the option of not including the System Development information in this report.
 - d. Describe the major implementation challenges that the County has encountered.
- 2) For each of the six general standards in California Code of Regulations, Title 9, Section 3320, very briefly describe one example of a successful activity, strategy or program implemented through CSS funding and why you think it is an example of success e.g. what was the result of your activity. Please be specific. The

¹ "County" means the County Mental Health Department, two or more County Mental Health Departments acting jointly, and/or city-operated programs receiving funds per WIC Section 5701.5.

suggested length for the response to this section is three pages total (or one page for small counties).

- a. Community collaboration between the mental health system and other community agencies, services, ethnic communities etc.
- b. Cultural competence
- c. Client/family driven mental health system
- d. Wellness/recovery/resiliency focus
- e. Integrated services experience for clients and families: changes in services that result in services being seamless or coordinated so that all necessary services are easily accessible to clients and families

3) For the Full Service Partnership category only:

- a. If the County has not implemented the SB 163 Wraparound (Welfare and Institutions Code, Section 18250) and has agreed to work with their county department of social services and the California Department of Social Services toward the implementation of the SB 163 Wraparound, please describe the progress that has been made, identify any barriers encountered, and outline the next steps anticipated.
- b. Please provide the total amount of MHSA funding approved as Full Service Partnership funds that was used for short-term acute inpatient services.

4) For the General System Development category only, briefly describe how the implementation of the General System Development programs have strengthened or changed the County's overall public mental health system. The suggested length for response to this section is one page. If applicable, provide an update on any progress made towards addressing any conditions that may have been specified in your DMH approval letter.

B. Efforts to Address Disparities--The suggested response length for this section is three pages (or one page for small counties)

- 1) Briefly describe one or two successful current efforts/strategies to address disparities in access and quality of services to unserved or underserved populations targeted in the CSS component of your Plan. If possible, include results of the effort/strategy.
- 2) Briefly describe one challenge you faced in implementing efforts/strategies to overcome disparities, including where appropriate what you have done to overcome the challenge.

- 3) Indicate the number of Native American organizations or tribal communities that have been funded to provide services under the MHSA and what results you are seeing to date if any.
- 4) List any policy or system improvements specific to reducing disparities, such as the inclusion of linguistic/cultural competence criteria to procurement documents and/or contracts.

C. Stakeholder Involvement

As counties have moved from planning to implementation many have found a need to alter in some ways their Community Program Planning and local review processes. Provide a summary description of any changes you have made during the time period covered by this report in your Community Program Planning Process. This would include things like addition/deletion/alteration of steering committees or workgroups, changes in roles and responsibilities of stakeholder groups, new or altered mechanisms for keeping stakeholders informed about implementation, new or altered stakeholder training efforts. Please indicate the reason you made these changes. The suggested response length for this section is two pages (or one page for small counties).

D. Public Review and Hearing

Provide a brief description of how the County circulated this Implementation Progress Report for a 30-day public comment and review period including the public hearing. The statute requires that the update be circulated to stakeholders and anyone who has requested a copy. The suggested response length for this section is two pages (or one page for small counties). This section should include the following information:

- 1) The dates of the 30-day stakeholder review and comment period, including the date of the public hearing conducted by the local mental health board or commission. (The public hearing may be held at a regularly scheduled meeting of the local mental health board or commission.)
- 2) The methods that the county used to circulate this progress report and the notification of the public comment period and the public hearing to stakeholder representatives and any other interested parties.
- 3) A summary and analysis of any substantive recommendations or revisions.

III. Submission Format

The Implementation Progress Reports should be submitted in hard copy (three copies) and on a CD (preferably in Microsoft Word). Counties are to submit their completed Implementation Progress Report to DMH on or before June 30, 2008. The report should be sent to:

Assistant Deputy Director
Community Program Support
California Department of Mental Health
1600 9th Street, Room 130
Sacramento, CA 95814

If you have questions, please contact your County Liaison.

I would like to thank you in advance for completing the Implementation Progress Reports. As you can see in the enclosed report summary, we collectively receive information that assists DMH and the Mental Health Services Oversight and Accountability Commission by increasing our understanding of the successes and the challenges faced by counties in implementing the CSS Component of the Three-Year Program and Expenditure Plan.

Sincerely,

Original signed by

STEPHEN W. MAYBERG, Ph.D.
Director