

EXHIBIT A

**INNOVATION WORK PLAN
COUNTY CERTIFICATION**

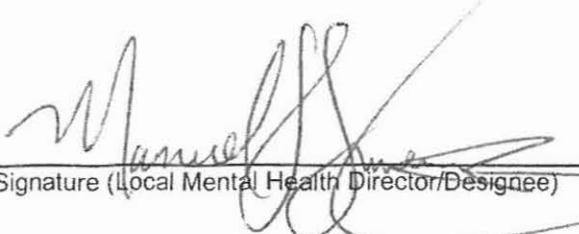
County Name: Merced County

County Mental Health Director	Project Lead
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I hereby certify that I am the official responsible for the administration of public community mental health services in and for said County and that the County has complied with all pertinent regulations, laws and statutes for this Innovation Work Plan. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code Section 5891 and Title 9, California Code of Regulations (CCR), Section 3410, Non-Supplant.

This Work Plan has been developed with the participation of stakeholders, in accordance with Title 9, CCR Sections 3300, 3310(d) and 3315(a). The draft Work Plan was circulated for 30 days to stakeholders for review and comment and a public hearing was held by the local mental health board or commission. All input has been considered with adjustments made, as appropriate. Any Work Plan requiring participation from individuals has been designed for voluntary participation therefore all participation by individuals in the proposed Work Plan is voluntary, pursuant to Title 9, CCR, Section 3400 (b)(2).

All documents in the attached Work Plan are true and correct.



Signature (Local Mental Health Director/Designee) 7/13/10 Director
Date Title



Department of Mental Health
PO Box 2087
Merced, CA 95344

MENTAL HEALTH SERVICES ACT
INNOVATION COMPONENT OF THE COUNTY'S THREE-
YEAR PROGRAM AND EXPENDITURE PLAN

Executive Summary

INNOVATION PROJECT

*We are in community each time we find a place
where we belong - Peter F Block*



**EL NIDO
PLANADA/LE GRAND
DOS PALOS/SOUTH DOS PALOS**

Introduction

“We need to make sure that no boy or girl in America is growing up without having in his or her life the presence of a responsible, caring adult. Where else does a child learn how to behave? Where else does a child learn the experiences of the past, the totems and traditions of the past? Where else does a child look for the proper examples except from responsible, caring, loving adults in his or her life?”

--America’s Promise Founding Chairman, General Colin L. Powell

Attachment is an emotional bond to another person. The Psychologist John Bowlby was the first attachment theorist; describing attachment as a “lasting psychological connectedness between human beings.” Bowlby believed that the earliest bonds formed by children with caregivers have a tremendous impact that continues through life.

According to Bowlby, attachment also serves to keep the infant close to the mother, thus improving the child’s chances of survival. The central theme of attachment theory is that mothers who are available and responsive to their infant’s needs establish a sense of security. The infant knows that the caregiver is dependable, which creates a secure base for the child to then explore the world.

Attachment is an ongoing relationship between a parent or other caregiver and child that begins in infancy and continues throughout the child’s developmental stages. It develops from a parent’s “sensitive care” by which we mean the ability of the parent to empathize with the baby and pick up on the baby’s signals about what it needs and wants. Having a trusted caregiver who consistently provides care, affection and support to the child in infancy and early childhood is important for a child to reach his or her full potential. Children need to have a sense of security in all aspects of their lives so that they can grow up to be healthy and productive adults. An infant or toddler is considered “securely attached” if, as they mature and move through their normal developmental stages, they can use their mother or other consistent caregiver as a secure base from which to explore their environment.

The securely attached baby or toddler trusts that care will be given to them, their needs will be met consistently, they will be helped to learn self regulation and they will be encouraged to learn and explore their environment. Because they feel safe and secure, they have the confidence and sense of competence they need to try new things and to learn. Insecure attachment can develop if the primary caregiver, usually the mother, does not consistently respond to the infant in warm, affectionate, loving, dependable and sensitive ways. Babies who are frequently left to cry by themselves, or who are not offered comfort and care, learn not to trust other people and to be fearful of the world around them. They can go on to develop a mental representation of the world as hostile or uncaring. They may believe that they cannot make a difference in their own life, which can lead to a kind of pessimism and sense of helplessness that significantly reduces their ability to achieve in life.

In the 1970's research psychologist Mary Ainsworth expanded upon Bowlby's original work revealing the profounding effects of attachment on behavior. There is extensive research linking healthy child development to effective parenting. Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations and safe opportunities that promote independence. Successful parenting fosters psychological adjustment, helps children succeed in school, encourages curiosity about the world and motivates children to achieve. A child's early experience of being nurtured and developing a bond with a caring adult affects all aspects of behavior and development. When parents and children have strong, warm feelings for one another, children develop trust that their parents will provide what they need to thrive, including love, acceptance, positive guidance and protection. Research shows that babies who receive affection and nurturing from their parents have the best chance of healthy development. A child's relationship with a consistent, caring adult in the early years is associated later in life with better academic grades, healthier behaviors, more positive peer interactions and an increased ability to cope with stress. Infants with insecure attachment status are at risk of developing social, emotional or behavioral problems in childhood or later in life. Children who live in poverty and are unsure whether they will have a place to live or enough food to eat can

experience chronic anxiety that interferes with their ability to learn and their attachment to school or community. Teenagers who have not developed secure attachment behaviors are more prone to depression or anxiety and more likely to get involved with drug abuse, antisocial behavior/aggression or engage in risky sexual activities.

Secure attachment in infancy has lifelong consequences for a person’s ability to engage in relationships with others, to maintain commitments to school or work and to raise healthy, happy children of their own. **Although insecure attachment in early childhood can set the stage for further risk factors, its consequences can be overcome by later positive attachments.**

Community Stakeholder Feedback

In reviewing the overall feedback received from the Merced County Community Planning Process, it was determined that Merced County wants healthy children and families as stated in the Merced County Children’s Bill of Rights

CHILDREN’S BILL OF RIGHTS FOR MERCED COUNTY

PROCLAIMING OUR ASPIRATIONS FOR ALL YOUNG PEOPLE IN OUR COUNTY

KNOWLEDGEABLE AND PREPARED PARENTS AND PRIMARY CAREGIVERS

1. ALL CHILDREN HAVE THE RIGHT TO have parents and caregivers who are prepared and educated to become the “most important persons in the world” to their children.

STABLE AND NURTURING RELATIONSHIPS

2. ALL CHILDREN HAVE THE RIGHT TO have parents and caregivers who recognize and effectively fulfill their responsibilities for nurturing, loving and supporting their children.

HOME ENVIRONMENTS THAT MAKE LEARNING A PRIORITY

3. ALL CHILDREN HAVE THE RIGHT TO live in stable home environments with routines that prioritize learning and optimal development,

including regular healthy meals, enough sleep, support of learning, good hygiene, and plenty of physical activity.

RICH AND MEANINGFUL LIFE EXPERIENCES

4. ALL CHILDREN HAVE THE RIGHT TO participate in varied and meaningful enrichment experiences introducing them to the arts, nature, Sciences and cultures, which demonstrate life's beauty, richness and human potential.

SAFETY AND FREEDOM FROM ABUSE AND VIOLENCE

5. ALL CHILDREN HAVE THE RIGHT TO live in homes free from mistreatment, abuse, neglect and in communities without violence, drug use, and gang influence.

A HEALTHY ENVIRONMENT

6. ALL CHILDREN HAVE THE RIGHT TO live and grow in a healthy environment with clean air and water, affordable healthy foods and spaces safe for exploring, play and physical activity.

QUALITY HEALTH CARE

7. ALL CHILDREN HAVE THE RIGHT TO affordable and accessible physical, dental and mental health care, including early identification and timely services.

EXCEPTIONAL CARE, EDUCATION, AND GUIDANCE

8. ALL CHILDREN HAVE THE RIGHT TO high-quality care, education and guidance--from their earliest years through young adulthood--that promote achievement, success in life and a love for lifelong learning.

DREAM BIG!

9. ALL CHILDREN HAVE THE RIGHT TO be encouraged to "dream big", to be challenged and to live their lives with hope and inspiration.

THE COMMUNITY'S HIGHEST PRIORITY

10. ALL CHILDREN HAVE THE RIGHT TO live in a community that demonstrates daily that all of its children are its #1 priority as evidenced through its commitment of time, money, effort and unified support.

The Mental Health Services are currently being under utilized as reflected by the low Latino penetration rate for Merced County. This may be due to the lack of inadequate transportation, geographic isolation or lack of visibility of the mental health department in the community. While interviewing a key informant in Merced County it was verbalized that Merced County needs to increase access to racial and ethnic groups along with cultural and linguistic competence. Merced County has 11 unincorporated Communities that are being unserved/underserved (Ballico, Cressey, Delhi, Hilmar, Le Grand, Planada, Santa Nella, Snelling, South Dos Palos, Stevinson, and Winton). The mental health department needs to increase the quality of services for better outcomes. It was expressed that information is not getting to all of the communities in Merced County information needs to be accessible. Some members of the community are ineligible for services. Infant family mental health is needed in the community, bonding and attachment, developmental milestones education as a prevention and early strategy. This Program would be developed to strengthen families and build on their all ready in place resiliency factors in a culturally responsive manner. The project is being developed to decrease risk factors and build upon protective factors.

- 1) Nurturing and attachment
- 2) Knowledge of parenting and or child, youth and adolescent development**
- 3) Parental resilience
- 4) Social connections
- 5) Concrete supports for parents

Learning/Change Goal

The **Strengthening Families Project** will be an adapted program from the ideal of the importance of the community “It takes a village to raise a child.” It will contribute to learning because it is an approach that has never been brought into mental health. It will

test out the benefits of recruiting family and community developmental partners as “Community Educators” focused on prevention and early intervention.

Purpose of proposed Innovation Project

The purpose of the proposed Innovation Project will be to improve access to services and to increase the quality of services for better outcomes.

Reason for selecting the purpose (s)

The purposes (s) were selected to assist with increasing mental health presence in the community and developing resources that are culturally and linguistically appropriate. The plan will improve the mental health of our communities, address the issue of individuals ineligible for other services, increase awareness of the community resources and train the community in providing early screenings to identify developmental milestones and life transitions and to operate in a culturally responsive manner.

Describe the Project

The Project will introduce an adapted mental health practice/approach brought into mental health. Merced County plans to test out the benefits of recruiting family and community developmental partners to focus on learning the developmental milestones of life transitions in diverse and non-traditional settings in order to increase the quality and outcome of services and to improve access to services.

This Project will be developed to strengthen families and build on their all ready in place resiliency factors. The Project will focus on decreasing risk factors and build upon protective factors.

- **Nurturing and attachment**-A child's early experience of being nurtured and developing a bond with a caring adult affects all aspects of behavior and development. When parents and children have strong,

warm feelings for one another, children develop trust that their parents will provide what they need to thrive, including love, acceptance, positive guidance and protection.

- **Knowledge of parenting and or child, youth and adolescent development**-Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations and safe opportunities that promote independence. Successful parenting fosters psychological adjustment, helps children succeed in school, encourages curiosity about the world and motivates children to achieve.
- **Parental resilience**-Parents, who can cope with the stresses of everyday life, as well as an occasional crisis, have resilience; they have the flexibility and inner strength necessary to bounce back when things are not going well. Multiple life stressors, such as a family history of abuse or neglect, health problems, marital conflict, domestic or community violence—and financial stressors such as unemployment, poverty and homelessness—may reduce a parent's capacity to cope effectively with the typical day-to-day stresses of raising children.
- **Social connections**-Parents with a social network of emotionally supportive friends, family and neighbors often find that it is easier to care for their children and themselves. Most parents need people they can call on once in a while when they need a sympathetic listener, advice or concrete support. Research has shown that parents who are isolated, with few social connections, are at higher risk for child abuse and neglect.
- **Concrete supports for parents**-Many factors affect a family's ability to care for their children. Families who can meet their own basic needs for food, clothing, housing and transportation—and who know how to access essential services such as childcare, health care and mental health services to address family-specific needs—are better able to ensure the safety and well-being of their children. Partnering with

parents to identify and access resources in the community may help prevent the stress that sometimes precipitates child maltreatment. Providing concrete supports may also help prevent the unintended neglect that sometimes occurs when parents are unable to provide for their children.

Core Competencies

The project will focus on the following core competencies:

(Dr. Bruce Perry)

- **Attachments-making relationships-** A special form of emotional relationship. Attachment involves mutuality, comfort, safety and pleasure for both individuals in the relationship.
- **Self Regulation-Containing impulses-**Developing and maintaining the ability to notice and control primary urges such as hunger and sleep-as well as feelings of frustration, anger and fear-is a lifelong process. Its roots begin with the external regulation provided by parents or significant caregivers. Its healthy growth depends on a child's experience and the maturation of the brain.
- **Affiliation-Being part of a group-**The capacity to join others and contribute to a group springs from our ability to form attachments. Affiliation is the glue for healthy human functioning: It allows us to form and maintain relationships with others-and to create something stronger, more adaptive and more creative than the individual.
- **Attunement-Being Aware of others-**The ability to read and respond to the communicated needs of another. This involves synchronous and responsive attention to the verbal and non-verbal cues of another.
- **Awareness: Thinking of Others** Awareness is the ability to recognize the needs, interests, strengths and values of others. Infants begin life self-absorbed and slowly develop awareness-the ability to see beyond themselves and to sense and categorize the other people in their world. At first this process is simplistic: "I am a boy and she is a girl. Her skin is brown and mine is white." As children grow, their awareness of differences and similarities becomes more complex.
- **Tolerance-Accept differences-**Tolerance is the capacity to understand and accept how others are different from you. This core strength builds upon another-awareness (Once aware, what do you do with the differences you observe?).
- **Respect-Finding value in differences-**Appreciating your own self-worth and the value of others grows from the foundation of the preceding five strengths.

An aware, tolerant child with good affiliation, attachment and self-regulation strengths gains respect naturally. The development of respect is a lifelong process, yet its roots are in early childhood, as children learn these core strengths and integrate them into their behaviors and their worldview.

The project will focus on several unincorporated Merced communities to implement and test out innovative strategies for their mental health benefit. The communities identified are: Planada, LeGrand, Dos Palos, South Dos Palos and El Nido. The priority population will be Latino families, children born into stressed families, at risk youth and trauma exposed youth and all ethnicities within the community. Merced County plans to test the benefits of recruiting family members from the Merced Community to work with an expert trainer (s) in developing training that addresses the issues of developmental milestones and life transitions to promote healthy children and families.

Age groups:

Age 0-5

Age 6-11

Age 12-18

The families will be selected from the five communities above and will identify a caring adult in the family or family system to assist in developing the developmental milestones culturally compatible training. The caring adults will work with an expert trainer to develop the training for their community. Once the training curriculum is developed by the developmental partners and expert trainer in each community, the developmental partners will train family members, Mental Health Clinicians, faith-based communities and community partners to promote cross cultural learning. The training will be developed to assist families with increased education on developmental milestones, the milestones of life transitions in diverse and non-traditional settings. The project will reach and benefit communities and people of all ages and socioeconomic status out in their natural settings. The **Strengthening Families Project** will be proactive, will be brought into communities and reach people of all ages and socioeconomic status rather than wait for them to come into clinics or other mental health settings.

Caring Adult Description:

A Caring Adult is a member of the family or extended family who has a desire to learn and develop competencies to improve overall family mental health to promote and support well being to reduce family stressors contributing to challenging life circumstances.

Caring Relationship:

- Being there
- Models caring
- Showing interest in
- Getting to know compassion
- Listening/Dialogue
- Patience
- Basic trust/safe

Community Developmental Partner Description:

The **Community Developmental Partner** will serve as the educator and link for the Strengthening Families Project. The Developmental Partner must be a “Caring Adult” residing in the community which includes the following:

- Good mentor
- Trusted counselor or guide
- Wise, loyal advisor or coach
- Invested in the health of the community
- Assist in identifying developmental milestones and life transitions
- Collaborative partner in relationships with families in the community
- Dedicated to training others to establish a healthier community
- Increased knowledge by training others
- **Culturally responsive** community liaison
- Assist in the development of a community consortium to help families and the community

Expert trainer

The five communities identified in the ***Strengthening Families Project*** will participate in the selection of their expert trainer. The Mental Health Department will utilize the National Compadres Network to identify appropriate expert trainers that are culturally competent. The National Compadres Network provides a comprehensive array of services that include community forums, workshops, conferences and one-on-one consultation designed for individual agencies and their staff, volunteers and boards.

MHSA General Standards

The project supports the General Standards of the Mental Health Services Act (as set forth in CCR, Title 9, section 3320) and supports following the guiding principles of Innovation.

Wellness, Recovery and Resilience

The Strengthening Families Project will be the catalyst a transforming agent in looking at wellness and recovery of the community, identifying protective factors, risk factors, developmental milestones as prevention and early intervention.

Individual/Family Driven

The project will focus on community health with a mental health benefit the focal point of the project will be the family and the community and their needs. The families in the community will be the driving force in the project. The project will enhance the quality of life and inspire families and the community with recovery and hope.

Community Collaboration

It is the goal of this project that collaboration will occur throughout Merced County especially with partners under the Merced County Prevention and Early Intervention Plan and contract providers throughout Merced that provide services, schools, juvenile system and child welfare.

Cultural Competence

The highest priority of this project is cultural competence, to begin and avalanche of the importance of cultural competence by reaching out to individuals who care about their community and the families, The goal is to reach those isolated and in need of assistance, to embrace communities with dignity and respect letting them know that they are important and valued in society.

Outcome Based

The expectation of this project is to engage, inspire and equip the community with knowledge and a toolkit to build on resiliency and protective factors. The project will monitor positive outcomes, the impact on the community and the assets that have been built in the community. It will include measuring improvement, quality of services, increase access and cultural competence transforming lives and the system

Relationships matter, Relationships heal

Mary Claire Heffron, PhD

Children's Hospital, Oakland Ca



One generation plants the trees; another gets the shade-Chinese proverb

**INNOVATION WORK PLAN
COUNTY CERTIFICATION**

County Name: Merced County

County Mental Health Director	Project Lead
Name: Manuel J Jimenez Jr	Name: Sharon Jones
Telephone Number: 209-381-6813	Telephone Number: 209-381-6800 x3611
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All documents in the attached Work Plan are true and correct.

Signature (Local Mental Health Director/Designee)

Date

Title

INNOVATION WORK PLAN

Description of Community Program Planning and Local Review Processes

County Name: Merced County
Work Plan Name: Strengthening Families
Project _____

Instructions: Utilizing the following format please provide a brief description of the Community Program Planning and Local Review Processes that were conducted as part of this Annual Update.

1. Briefly describe the Community Program Planning Process for development of the Innovation Work Plan. It shall include the methods for obtaining stakeholder input. (suggested length – one-half page)

The Innovation Community Planning Process began in August 2009 with a review of feedback and comments from previous Community Planning Process, a Power point presentation on the MHSa Innovation Component and a review of the Innovation guidelines to the representative stakeholder group. The stakeholder group included consumers, family members, community partners, mental health staff, the underserved, Parent partners, faith-based communities and community-based organizations. The Innovation group met once a month to discuss Merced County’s community needs and to review the identified needs through previous MHSa focus groups and key informant interviews. The group dialogue focused around the essential purposes of Innovation: increase access to underserved groups, increase quality of services, including better outcomes, promote interagency collaboration and increase access to services. It was verbalized by the representative stakeholder group that Mental Health needs to spend more time in the community setting. “Consumers live in the community in apartments so, if we want to reach them we must go to them.”

Top Key Mental Health Community Needs identified by Work group

- Services in the Community
- More access to resources
- Assistance for non Medi-Cal individuals
- Decrease the Mental Health stigma
- Help from the conception of the program
- Lack of service in outlying areas
- More community and client engagement
- Higher quality of service for a better outcome
- Train the community leaders to help educate

The workgroup started in August 2009 and in December 2009 the second phase began when a letter went out to the community requesting innovative ideas and strategies that will provide new learning experiences for mental health consumers. The work group

feedback and the innovative strategies presentations were used as a starting point for the Innovation Community Planning Process. The Innovative ideas and strategies were presented at the Ongoing Planning Council meeting on January 14, 2010 from a variety of Merced County Stakeholders as follows:

- Potter's Life Leadership Academy
- Radio Bilingue
- Merced County Office of Education
- Merced Lao Family Community, Inc:
- Boys and Girls Club
- Healthy House
- Sierra Vista Children and Families
- Merced County Wellness Center
- AspiraNet
- Hope for Youth
- First 5
- Merced County Community College District

Top Key Mental Health Community Needs Identified by Stakeholder Presentations

- Increase access to racial and ethnic groups
- No transportation to seek assistance
- Home based services
- Early detection of Mental Health problems
- Programs in the Community
- Cultural and Linguistic Competence
- Cultural compatibility
- Infant Mental Health
- Early screenings
- Stigma reduction
- Mental health education and resources
- Early assessment and screening
- Adjusting to new family roles in the US

2. Identify the stakeholder entities involved in the Community Program Planning Process.

The MHSA Coordinator established an Innovation workgroup, conducted focus groups, key informant interviews and Stakeholder Comment cards that included a comprehensive representation of individuals with lived experience, community members, consumers, family members, staff providing services, faith based communities, law enforcement and community partners. The day to day planning activities were the responsibility of Sharon Jones, MHSA Coordinator and Maurina Erickson Office Assistant. Using the departmental expertise and the Ongoing Planning Council, a county wide outreach and engagement strategy was created that the

community at large would receive notification of the focus groups and key informant interviews in order to participate in the process. A Spanish and Hmong interpreter participated in the limited English and monolingual participant's presentations to ensure full participation of underserved and unserved groups. Focus groups were held in the City of Los Banos Police Annex Building, the City of Merced Wellness Center, Merced County Local Childcare and Development Planning Council, Merced County First 5 and at the Planada Elementary School. The MHSA Coordinator conducted key informant one to one interviews throughout the Community. Key informants included the following:

- Merced County Office of Education
- Human Services Agency All Dads Matter
- Between Friends Magazine
- Department of Workforce Investment
- Christian Life Center
- (Healing Rooms of Merced)
- Merced College
- Liberty Fellowship
- Hope for Youth
- Merced Lao Family
- ASPIRAnet
- Healthy House
- Boys and Girls Club
- Merced County Wellness Center
- Radio Bilingue
- Sierra Vista Children and Family Services
- Potter's Place
- Mental Health participants
- Planada Community
- First 5
- Merced Community College District
- Planada Community Church

After receiving all of the feedback and information from the focus groups, key informant interviews, community presentations and stakeholder comment cards the Ongoing Planning Council (Representative Stakeholder Group) reviewed the information and ranked the priorities for Merced County. After ranking the priorities the Ongoing Planning Council voted on their selection and developed a strategy for developing the Innovation Plan. At the heart of the strategy was the vision that everyone needs caring relationships and that bonding and attachment is very important. In reviewing the feedback it was determined by the Ongoing Planning Council that the Merced Community wants healthy children and families and this should begin at birth and go throughout the lifespan. The five areas were identified through feedback given in Ongoing Planning Council meetings by the Chief of Police from the Westside of Merced County where Dos Palos/South Dos Palos and El Nido are located. A focus group was held in the Planada/LeGrand area at the Planada Middle School. The Mental Health Director attended Town meetings throughout Merced County.

3. List the dates of the 30-day stakeholder review and public hearing. Attach substantive comments received during the stakeholder review and public hearing and responses to those comments. Indicate if none received.

The date of the public hearing

<u>Date</u>	<u>Time</u>	<u>Hearing</u>
July 6, 2010	4:30 pm-6:00 pm	Merced County Mental Health Board

The Merced County draft Innovation Plan was posted for public review and comment on May 26, 2010 to July 6, 2010 for 30 days. The public hearing was held at 4:30 pm on Tuesday, July 6, 2010. The Merced County Department of Mental Health MHSA Coordinator gave a presentation on the Innovation Component and Project. Following the presentation the Mental Health Board invited members of the public to provide input and comments. Please view minutes from Mental Health Board meeting attached. The draft Innovation Plan was approved by the Merced County Board of Supervisors on July 13, 2010.

Innovation Work Plan Narrative

Date: May 26, 2010

County: Merced County

Work Plan #: 1

Work Plan Name: Strengthening Families Project

Purpose of Proposed Innovation Project (check all that apply)

- INCREASE ACCESS TO UNDERSERVED GROUPS
- INCREASE THE QUALITY OF SERVICES, INCLUDING BETTER OUTCOMES
- PROMOTE INTERAGENCY COLLABORATION
- INCREASE ACCESS TO SERVICES

Briefly explain the reason for selecting the above purpose(s).

The general purposes were selected as a way of measuring improved access and quality outcomes, to understand “developmental milestones” and parent’s responses to them from a cross cultural perspective. The primary purpose of the **Strengthening Families Project** is to increase access to services and to increase the quality of services, including better outcomes. The representative stakeholder group identified the need for all four purposes: increase access to underserved groups, increase the quality of services, including better outcomes, promoting interagency collaboration and increase access to services.

During the Innovation Community Planning Process ongoing feedback was received from stakeholders that the Mental Health Department is not visible in the community and not at the table enough in the community. Therefore, the following purposes were selected as the main priority: to increase the quality of service, including better outcomes and increase access to services. Another reason for selecting to improve quality and outcomes and increase access to services is centered on the issue of lack of transportation in Merced County.

Transportation has been identified as a major barrier in all Community Planning Process since the Mental Health Services Act (MHSA) began in Merced County in 2004. Due to the demographics in the County most of the services have been established in the City of Merced making access to services difficult. In Merced County some families are unable to access services due to lack of transportation, lack of funds to access public transportation and the overall stigma associated with going to mental health for services. Often times the language is viewed as negative and not strength based preventing individuals from returning for services.

The **Strengthening Families Project** will focus on families residing in five of the unincorporated communities of Merced County but the overall goal is to provide information to the people in the community when they need it. To provide education and tools to families on the developmental milestones and stages of life transition to improve

community health and to improve prevention and early intervention in families by training caring adults in the developmental milestones and life transitions.

The **Strengthening Families Project** will contribute to learning by closely measuring the impacts of recruiting and training family members as developmental partners to increase awareness of developmental milestones and the overall benefit of having a caring adult in life. The project will also assist with the engagement of the underserved communities in Merced County and provide needed outreach to the Hispanic community. The project will involve bringing into the community a trainer with experience working with the underserved communities.

The expert trainer will play an important role in the contribution to learning by developing training that is expected to evolve and develop with ongoing community and family input. The training will improve Merced County Cultural Competence for working with underserved groups, will provide cross cultural learning from the parents perspective, the child's perspective and the communities perspective. The expert trainer will assist the families in understanding the developmental milestones and how they impact healthy growth. They will assist and identify the challenges, the benefits and the contribution to each cultures understanding of life transitions and developmental milestones. The training will also inspire hope and recovery to the community and the people within the community.

Project Description

Describe the Innovation, the issue it addresses and the expected outcome, i.e. how the Innovation project may create positive change. Include a statement of how the Innovation project supports and is consistent with the General Standards identified in the MHS and Title 9, CCR, section 3320. (suggested length - one page)

The approach will build on successful approaches not currently considered part of mental health delivery. The project will address the definition of an adapted approach from the community never brought into the mental health system. Many have heard the words "It takes a village to raise a child."

The kinship system is like a vast network stretching laterally (horizontally) in every direction, to embrace everybody in any given local group...each individual is a brother or sister, father or mother, grandmother or grandfather, or cousin, or brother-in-law, uncle or aunt, or something else, to everybody else...everybody is related to everybody else, and there are many kinship terms to express the precise kind of relationship pertaining between two individuals.

John S. Mbiti, African Religions and Philosophy

The adapted approach will bring to mental health the state of the art knowledge in brain development and go to the villages of Merced to share knowledge and learn from the communities. The National Center for Infants, Toddlers and Families states a significant portion of parents rely regularly on someone else to care for their child and most

parents are satisfied with these arrangements. Half of parents (51%) have a regular caregiver for their child other than themselves or their spouse or partner and these parents most frequently rely on a family member to provide care.

- 23% of parents rely on a child's grandparent
- 14% use a childcare center
- 9% rely on a family member other than the child's grandparent
- 4% use in-home child care

The Innovation Project will include all extended family caregivers' foster care, non-relative caregivers, Child Care, Teachers, Social workers, Clinicians etc.

The Search Institute Identifies "Thriving Indicators" as a measure of well-being for our children. These indicators include:

- **Caring Adults**
- Safe Places
- Constructive Use of Time
- A Healthy Start
- Effective Education
- Opportunities to Make a Difference

The project will be relationship based focusing on the family and the caring adult. Focusing on the relationship between parent/ guardian and their children has proven to have long-term positive outcomes, not only for the child but for the parents. The project will focus on reducing the risk for emotional, behavioral and developmental issues and concerns for individual's age 0 to 18 by:

- Establishing a trusting and collaborative relations with parents/guardians
- To have the parent/guardian teach us so we can better serve families
- Strengthening parents/ guardians relationships with their young children
- Identifying other community resources and services that might be helpful to the child or family

The **Strengthening Families Project** will be centered on the very valuable research of the importance of having a caring adult in life at the developmental touch points and throughout the stages of life transitions. The project is to encourage families to increase their protective factors, and reduce risk factors. The project will help communities build assets to focus on:

- Support
- Empowerment
- Boundaries and Expectations
- Constructive Use of Time
- Commitment to Learning
- Positive Values
- Social Competencies
- Positive Identity

The project will be a transforming agent for the Mental Health Department. As part of the Prevention and Early Intervention General Public Awareness and Education Campaign a banner was placed across G Street in Merced stating “Mental Health Happens in the Community”. The **Strengthening Families Project** will focus on five unincorporated outlying communities in Merced County: Planada, LeGrand, Dos Palos, South Dos Palos and El Nido. The project will take place in the communities to build capacity, to provide prevention and early intervention and to improve awareness of mental health by providing information and training on developmental milestones.

Merced County plans to test the benefits of recruiting and training Caring Adults as developmental partners in the family to focus on the milestones of life transitions in diverse and non-traditional settings in order to increase the quality and outcomes of services and to improve access to services. The **Strengthening Families Project** will be proactive, will be brought into communities and reach people of all ages and socioeconomic status rather than wait for them to come into clinics or other mental health settings. The Project will provide outreach to the communities and provide training in developmental milestones and life transitions. The Strengthening Families Project will be inclusive of families that have children starting at age 0 all the way to age 18. Our grand strategy will be to assist families in becoming aware of developmental milestones and life transitions as a means to act in a timely manner if their child has a problem. Also, another part is to encourage and strengthen parents and guardians to build healthy relationships with their young children and young adults (age 0 to age 18). The Ongoing Planning Council wanted the age range from age 0 all the way to age 18 it was verbalized that nurturing relationships having a caring adult in your life is important to a healthy and productive life.

The **Strengthening Family Team** will include a Caring Adult/family member recruited as a developmental partner, community developmental partner, and expert trainer. The project will be implemented by the Merced County Mental Health Department under the direction of the MHSA Coordinator. The project will begin with a presentation in each community explaining the innovative project details. The next step will be to develop a contract with an expert trainer (s) that is culturally aware and linguistically appropriate to work with the family members/developmental partners within the communities identified in the innovative project. After contracting with the appropriate expert trainer, another

community presentation will take place addressing the importance of the caring adult and developmental milestones. After the community is aware of the innovative project, the expert trainer will work with the identified families participating in the **Strengthening Families Project** to design their developmental milestone training.

The training will be designed to build on protective factors:

1. Nurturing and Attachment
2. **Knowledge of parenting and or child, youth and adolescent development**
3. Parental resilience
4. Social connections
5. Concrete supports for parents

The project supports the General Standards of the Mental Health Services Act (as set forth in CCR, Title 9, section 3320) and supports following the guiding principles of Innovation.

Wellness, Recovery and Resilience

The Strengthen Families Project will be the catalyst a transforming agent in looking at wellness and recovery of the community, identifying protective factors, risk factors and developmental milestones as prevention and early intervention.

Individual/Family Driven

The project will focus on community health with a mental health benefit the focal point of the project will be the family, the community and their needs. The families in the community will be the driving force in the project. The project will enhance the quality of life and inspire families and the community with recovery and hope.

Community Collaboration

It is the goal of this project that collaboration will occur throughout Merced County especially with partners under the Merced County Prevention and Early Intervention Plan and collaboration with agencies throughout Merced that provide services, schools, juvenile system and child welfare.

Cultural Competence

The highest priority of this project is cultural competence to begin an avalanche of the importance of cultural competence by reaching out to individuals who care about their community and their families, to reach those isolated and in need of assistance and to embrace communities with dignity and respect letting them know that they are important and valued in society.

Outcome Based

The expectation of this project is to engage, inspire and equip the community with knowledge and a toolkit to build on resiliency and protective factors. It will monitor positive outcomes, the impact on the community and the assets that have been built in the community. The plan will measure improvement, quality of services increase access and cultural competence transforming lives and the system

Contribution to Learning

Describe how the Innovation project is expected to contribute to learning, including whether it introduces new mental health practices/approaches, changes existing ones, or introduces new applications or practices/approaches that have been successful in non-mental health contexts. (suggested length - one page)

We need to make sure that no boy or girl in America is growing up without having in his or her life the presence of a responsible, caring adult. Where else does a child learn how to behave? Where else does a child learn the experiences of the past, the totems and traditions of the past? Where else does a child look for the proper examples except from responsible, caring, loving adults in his or her life?"
--America's Promise Founding Chairman, General Colin L. Powell

The **Strengthening Families Project** will be an adapted program from the ideal of the importance of the community "It takes a village to raise a child." It will contribute to learning because it is an approach that has never been brought into mental health. The **Strengthening Families Project** will create a new model that is developed by the community and family similar to Big Brothers and Big Sisters program focusing on the role of the caring adult as it relates to developmental growth and milestones. The project will provide teaching/learning development of support systems in the family and community. The community will develop the model; learn the model, how it works the approach and what is most useful for the community. As the training is implemented and rolled out the final training component will be delivered by the expert trainer, Clinicians, peer staff, family members and the community for a cross cultural perspective. One of the final goals is to develop a train the trainers component so that more family members/peers can be recruited as "expert trainers" The contribution to learning of this project is to understand "developmental milestones" and parent's responses to them from a cross cultural perspective.

While meeting with the MHSA representative stakeholder group the idea of the Caring Adult/family member became a very important part of the innovative project. It was mentioned that the Big Brothers and Sisters is an example of the caring adult. The Big Brothers and Sisters program in New York proved that adolescents who met their mentors regularly stayed away from substance abuse, attended school on a regular basis and did not show psychological problems of depression or withdrawal from society. The children became more responsible, more trusting development and self esteem and got along in society without problems.

The Innovative project will assist parents with understanding basic child growth and development. Increasing their knowledge of what to expect in terms of when their child should be reaching their developmental milestones. A child's development refers to the rate at which they grow and change physically, mentally, emotionally and socially. Being aware of developmental milestones allows a parent to be better aware if there is any significant delay in their child's development by allowing them to note if their child is falling well behind in reaching their developmental milestones.

The best way to help develop your child is to be there for them. Providing time for your children is a great way to ensure that they grow to be well-adjusted adults. Though sometimes we have to let them discover the world on their own, it is also vital that you give time for bonding moments with your kids. This makes them feel loved and important and boosts their morale. It also gives them a chance to open up problems and worries and for parents to help them work things out.

Time spent with children is time well spent. It allows unforgettable moments with fun and learning. It also reduces behavior problems of the children in their later ages since it builds and strengthens parent-child communication. Also, this will help your child meet his or her developmental milestones because of the support that they get from you as their parents. Interact with your child and give them insights every now and then. Understand the needs of your child and he or she will become an asset of the society

Timeline

Outline the timeframe within which the Innovation project will operate, including communicating results and lessons learned. Explain how the proposed timeframe will allow sufficient time for learning and will provide the opportunity to assess the feasibility of replication. (suggested length - one page)

The time line for the Strengthening Families Project is from September 2010 through September 2013 as outlined below:

<u>Implementation /Completion dates:</u>	MM/YY – MM/YY
Develop referral forms, evaluation methodology, participant and staff surveys and measurement tools	<u>July 2010</u>
Setup community meetings on the Innovative project in each community-Dos Palos, South Dos Palos El Nido and Planada/LeGrand	<u>August 2010 to September 2010</u>
Develop contracts with expert trainer or trainers	<u>August 2010</u>

Have MHSAs Coordinator along with community developmental partner and expert trainer provide a community presentation	<u>October 2010</u>
Begin recruitment for community developmental partners/family /caring adult	<u>October 2010</u>
Have expert trainer work with family members developmental partners to develop curriculum/training for their community	<u>January 2011 to March 2011</u>
Finalize Curriculum, Train Staff, and begin Scheduling Workshops	<u>March 2011 to April 2011</u>
Begin Program Implementation	<u>May 2011</u>
Review First Round Evaluations and Performance Indicators Make Recommendations and changes	<u>August 2011</u>
Review Second Round Evaluations and Performance Indicators Make Recommendations and changes	<u>November 2011</u>
Make Recommendations and changes	<u>May 2012</u>
Develop train the trainer	<u>May 2012-November 2012</u>
Community Celebrations	<u>May 2012</u>
Evaluate and Communicate Final Results and Lessons Learned	<u>November 2012</u>
Share results with stakeholders at various meetings	<u>January 2013</u>
Final Training Component (Expert trainer, Clinicians, Family Members, Staff, Community members etc.	<u>February 2013</u>

Budget Timeline
Strengthening Families Project
Three –Year Funding Request \$1,663,400

The budget expenses identified below is \$1,902,757 due to the Innovation funds already received for the Community Planning Process that will be transferred to program and services.

Year 2010-2011	\$714,537
<i>Administrative cost equals 10% of the overall budget</i>	
INN Program Implementation and Coordination	
Community Developmental Partners Four (4) (0.5) PT	\$61,110
Family Developmental Partners Four (4) (0.5) PT	\$61,110
Innovation Evaluation	
Quality Assurance Specialist One (1.0) FT	\$87,000
Operating costs	
Facilities, materials, supplies, travel financial incentives	\$25,000
System Coordination and Community Collaboration	
Community Outreach/ Community Presentations	\$120,000
Expert Trainer/s	\$240,000
Year 2011-2012	\$594,220
INN Program Implementation and Coordination	
Community Developmental Partners Four (4) (0.5) PT	\$61,112
Family Developmental Partner Four (4) (0.5) PT	\$61,112
Innovation Evaluation	
Quality Assurance Specialist One (1.0) FT	\$87,000
Operating costs	
Facilities, materials, supplies, travel, financial incentives	\$25,000
System Coordination and Community Collaboration	
Community Outreach/ Community Presentations	\$120,000
Year 2012-2013	\$594,000
INN Program Implementation and Coordination	
Community Developmental Partners Four (4) (0.5) PT	\$61,112
Family Developmental Partners Four (4) (0.5) PT	\$61,112

Innovation Evaluation	
Quality Assurance Specialist One (1.0) FT	\$87,000
Operating costs	
Facilities, materials, supplies, travel, financial incentives	\$25,000
System Coordination and Community Collaboration	
Community Outreach/ Community Presentations	\$120,000

Project Measurement

Describe how the project will be reviewed and assessed and how the County will include the perspectives of stakeholders in the review and assessment.

The main learning goals of the innovation project are:

- 1) Will members of the community be more likely to access and respond to developmental training if it is implemented in non-traditional settings when they need it?
- 2) Are there positive impact on individuals receiving developmental training in non-traditional settings, as well as for families and others providing the services?
- 3) Are there positive outcomes associated with training family members in the developmental milestones and life transitions and transadapting the information into people language?
- 4) Will there be increased participation among diverse communities and positive individual and system outcomes if family members are trained as developmental partners?

Outcome measures will focus on the impact of family members becoming developmental partners in non-traditional settings and receiving information in a language in which they are able to understand. It will focus on the impact of recovery on the family and the community. To measure the project, a pre-survey and a post survey will be developed for families participating in the project, a sign-in sheet and demographic sheet will be filled out at each training/event. A participant comment card will be filled out at each training event.

Project measurement:

The project will measure increased access and improvement in mental health outcomes as follows:

- People currently unserved will be served
- People will gain access to other services
- Increased knowledge of developmental milestones
- Increased confidence in parenting
- Decrease parental stress
- Increase perceived social support
- Increase community education and awareness
- Increase community support systems
- Reduce the stigma of mental services

The above outcomes are the kind of outcome measures the project will focus on. Also, part of the project will be to select or create culturally relevant outcome measures. To identify the outcomes that participants are looking for and what changed as a result of the project.

Staff will be responsible for project measurement which will include creating and maintaining ongoing database for outcomes tracking, creating evaluations, number of participants and pre and post surveys.

Group	Activities	Outcomes	Measurements
Community Developmental Partner	Work with expert trainer on developing curriculum for the community Distribute flyers Present to each identified community	Increased acknowledgement of the developmental milestones and the importance of a caring adult Positive impact on recovery for the family and the community	Change in knowledge of training and presentation participants

	<p>Train family developmental partners</p> <p>Establish resource binder</p>		
<p>Family Developmental Partner</p>	<p>Work with expert trainer on developing curriculum for the community</p> <p>Participate in Developmental Milestones workshops/training events</p> <p>Facilitate a training for partners in the community</p>	<p>Knowledge of special issues for different populations</p> <p>Knowledge of the developmental milestones and life transitions</p> <p>Decreased stigma regarding mental health and increased engagement in mental health wellness and recovery</p>	<p>Change in knowledge of training and presentation participants</p>
<p>Expert Trainer</p>	<p>Facilitate a presentation in the community prior to working on the curriculum.</p> <p>Work with the Community and Family Developmental Partners on developing curriculum</p> <p>Develop a train the trainer after the original curriculum is developed</p>	<p>Increase capacity building in the community</p> <p>Enhance protective factors and decrease risk factors</p> <p>Bring together community members and mental health to work together to identify and address Community issues.</p>	<p>Change in knowledge of trainer and presentation participants</p>

<p>Mental health Clinician and Community Partners</p>	<p>Will participate in developmental Milestones training facilitated by Community and family members</p> <p>Will facilitate a training along with family and community members, peer staff, and the expert trainer</p>	<p>Increased acknowledgement of the developmental milestones and the importance of a caring adult</p> <p>Positive impact on recovery for the family</p> <p>Increased knowledge and tools on how to engage unserved communities</p>	<p>Change in knowledge of training and presentation participants</p>
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The project will focus on improving the quality of services for better outcomes and increasing access to services.

System Level Outcomes

- Importance of Prevention and Early intervention
- Reducing stigma and discrimination
- Providing intervention for lack of transportation
- To increase the understanding of how critical the role of the caring adult and awareness of developmental milestones to the family and community
- Going to the community recruiting community development partners and family developmental partners
- To strengthen and improve the collaboration between the outlying communities and Mental health

Personal level Outcomes

- People will have increased developmental milestones tools and information to intervene earlier
- Improve the relationship with mental health
- Improve family relationships
- increase improved community health
- Improve nurturing and bonding in family
- To enhance and inspire hope
- To increase cross cultural knowledge

Leveraging Resources (if applicable)

Provide a list of resources expected to be leveraged, if applicable.

The innovative project will further develop collaboration and linkages between Merced County Mental Health and strategic partners to extend the innovative projects impact and capacity building potential.

- Community partnerships with organizations typically outside the mental health system
- Expansion of the use of community resources
- Interagency collaboration and partnership

Merced County Budget Narrative (MHSA Innovation)

The operation of the Strengthening Families Program is being established according to the amount of sustainable Innovation funding. The allocations being applied for at this time consist of funding for fiscal years 08/09, 09/10 and 10/11 available funding of \$1,924,800. Merced County has already received for the Community Planning Process \$261,400 in which we would like to transfer over to program and services. Merced County Mental Health will provide administrative oversight of the project. This will include personnel to develop the project, assess ongoing implementation status of the project and evaluate and report status of the project with stakeholders, the community and the Mental Health Services Oversight and Accountability Commission (MHSOAC)

The majority of the funding will go to the designated communities: South Dos Palos, Dos Palos, El Nido, Planada and LeGrand to hire community and family developmental partners, for staff training and curriculum development and community financial incentives. We intend to contract with an expert trainer with experience in the areas of family strengthening, community mobilization and culturally based violence prevention/intervention issues.

Estimated Merced County Personnel

Project Administrator

The function of this position will be to provide oversight of the program, coordination and implementation.

Quality Assurance Specialist

The function of this position will be to provide administrative support, charts, and reports, provide training and assist with development, evaluation, implement of policies and projects.

Office Assistant

The function of this position will be to provide clerical program support and assistance to the Project Administrator.

Operating expenses

Operating expenditures include all expenses for travel, office occupancy, office supplies and equipment, program services and supplies, financial incentives (gift cards).

Community Developmental Partners (4) Part-time

Will serve as the educator and link to the community for the **Strengthening Families Project** and must be a "Caring Adult" residing in the community. The Community Developmental Partner will assist in community outreach through the school and other organizations. The Community Developmental Partner will be assigned a specified area and recruit volunteers to assist with the Innovation Project.

Family Developmental Partners (4) Part-time

A member of the family or extended family who has a desire to learn and develop core competencies to improve overall family mental health, to promote and support well being and to reduce family stressors contributing to challenging life circumstances. The Family Developmental Partner will assist in community outreach through the school and other organizations. The Family Developmental Partner will be assigned a specified area and recruit volunteers to assist with the Innovation Project. The Community and Family Developmental partner will serve as a liaison to the Mental Health Department bridging the gap that currently exist between outlying areas and provide a resource within the community.

**Innovation Work Plan Description
(For Posting on DMH Website)**

County Name	Annual Number of Clients to Be Served (If Applicable)
Merced County	<u>1000</u> Total
Work Plan Name	
Strengthening Families Project	

Population to Be Served (if applicable):

The population to be served through the Strengthening Families Project is inclusive of all the ethnicities residing in the identified five (5) communities. Priority populations are Latino families, children born into stressed families and trauma exposed youth.

Ages 0-5
Ages 6-11
Ages 12-18

Project Description (suggested length - one-half page): Provide a concise overall description of the proposed Innovation.

The Strengthening Families Project is a family driven, community based endeavor to identify caring adults within the family system to work with an expert trainer in family strengthening to train family members as developmental partners to increase awareness of developmental milestones and the stages of life transitions to provide prevention and early intervention and increased emotional well-being to the families in unserved and underserved communities. As identified through the community planning process there is a need for an intervention for young people of color, living in stressed families being exposed to trauma. The research indicates although insecure attachment in early childhood can set the stage for further risk factors, its consequences can be overcome by later positive attachments.

The project will focus on identifying and decreasing risk factors

- Poverty
- Low Birth Weight
- Community and Family Violence
- Child/Sexual Abuse
- Unemployment
- Parental Isolation
- Mental Illness

- Criminality

And to build upon protective factors.

- Nurturing and attachment
- **Knowledge of parenting and or child, youth and adolescent development**
- Parental resilience
- Social connections
- Concrete supports for parents

The projects two key learning goals include:

- Evaluate the impact of recruiting family members as developmental partners on immediate and long-term outcomes for consumers.
- Evaluate the impact of increased community participation with a developmental milestone and life transitions focus on the entire mental health system.

The Strengthening Families Project will be implemented by the Merced County Mental Health Department. The allocations being applied is from FY 08/09 \$522,700, FY 09/10 \$522,700 and FY 10/11 \$879, 400 available funding \$1, 924,800. Merced County has already received \$261,400 for Community Planning Process that we are requesting to transfer to programs and services. Merced County Mental Health will provide administrative oversight of the project. This will include establishing a contract with several expert trainers to provide the training to community and family developmental partners, personnel to work with the communities to develop the project, assess the implementation status, and report the status of the program to the Mental Health Board, stakeholders, the community, State Department of Mental Health and the MHSA Oversight and Accountability Commission. The majority of the funding will be allocated for the five (5) identified communities by providing training to the communities from an expert trainer, for financial incentives for the developmental partners, training material and supplies, special cultural events and for the overall oversight of the project.

Estimated Merced County Mental Health Personnel

The Merced County MHSA Coordinator will provide oversight over the Innovation Project which includes ongoing planning and development and establishing and identifying appropriate expert trainer (s).

Family Strengthening Team

- Expert Trainer
- Family Developmental Partner
- Community Developmental Partner
- Community Resource Educator (s)

Expert Trainer

The qualified expert trainer must have experience in cultural responsiveness, program development, recognized as an expert in the area of family strengthening and community mobilization and prevention/intervention issues

Resource Educator

The Resource Educator (s) will be voluntary participants from the MHSA Ongoing Planning Council and will develop a resource binder for each community that will connect them to available resources.

The **Strengthening Families Project** will encourage cross cultural learning for all service providers and community partners

Consistent with 6 MHSA Principles:

Wellness, Recovery and Resilience

The Strengthen Families Project will be the catalyst a transforming agent in looking at wellness and recovery of the community, identifying protective factors, risk factors, developmental milestones as prevention and early intervention.

Individual/Family Driven

The project will focus on community health with a mental health benefit the focal point of the project will be the family, the community and their needs. The families in the community will be the driving force in the project. The project will enhance the quality of

life and inspire families and the community with recovery and hope.

Community Collaboration

It is the goal of this project that collaboration will occur throughout Merced County especially with partners under the Merced County Prevention and Early Intervention Plan and collaboration with agencies throughout Merced that provide services, schools, juvenile system and child welfare.

Cultural Competence

The highest priority of this project is cultural competence to begin and avalanche of the importance of cultural responsiveness by reaching out to individuals who care about their community and their families. The goal is to reach those isolated and in need of assistance, to embrace communities with dignity and respect letting them know that they are important and valued in society.

Outcome Based

The expectation of this project is to engage, inspire and equip the community with knowledge and a toolkit to build on resiliency and protective factors. The project will monitor positive outcomes, the impact on the community and the assets that have been built in the community. Measuring improvement, quality of services increase access and cultural competence transforming lives and the system

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Innovation Projected Revenues and Expenditures

County: Merced

Fiscal Year: 2009/10

Work Plan #: 1

Work Plan Name: Strengthening Families

New Work Plan

Expansion

Months of

Operation: 07/10-02/13

MM/YY - MM/YY

	County Mental Health Department	Other Governmental Agencies	Community Mental Health Contract Providers	Total
A. Expenditures				
1. Personnel Expenditures	\$ 971,960.00			\$971,960
2. Operating Expenditures	\$ 151,200.00			\$151,200
3. Non-recurring expenditures	\$ 103,000.00			\$103,000
4. Training Consultant Contracts	\$ 240,000.00			\$240,000
5. Work Plan Management	\$ 197,240.00			\$197,240
6. Total Proposed Work Plan Expenditures	\$ 1,663,400.00	\$0	\$0	\$1,663,400
B. Revenues				
1. Existing Revenues				\$0
2. Additional Revenues				
a. (insert source of revenue)				\$0
b. (insert source of revenue)				\$0
c. (insert source of revenue)				\$0
3. Total New Revenue	\$0	\$0	\$0	\$0
4. Total Revenues	\$0	\$0	\$0	\$0
C. Total Funding Requirements	\$1,663,400	\$0	\$0	\$1,663,400

Prepared by: _____

Date: _____

Telephone Number: _____

Mental Health Services Act Innovation Funding Request

County: Merced County

Date: 26-May-10

Innovation Work Plans			FY 09/10 Required MHSA Funding	Estimated Funds by Age Group (if applicable)			
No.	Name			Children, Youth, Families	Transition Age Youth	Adult	Older Adult
1	1	Strengthening Families Project	\$1,314,950	\$657,475	\$657,475		
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26	Subtotal: Work Plans		\$1,314,950	\$657,475	\$657,475	\$0	\$0
27	Plus County Administration		\$197,240				
28	Plus Optional 10% Operating Reserve		\$151,210				
29	Total MHSA Funds Required for Innovation		\$1,663,400				

Strengthening Families Project Survey

Name of Participant _____

Name of county location where you live _____

Do you have children under the age of 18 living with you? _____

Evaluation for the Strengthening Families Project
How your **community supports** healthy development and life transitions

Please evaluate each of the questions below on the following 4-point Likert type scale				
	<i>Strongly Agree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Strongly Disagree</i>
Support from adults other than parents	4	3	2	1
Neighbors that care about them	4	3	2	1
Schools that are caring and encouraging	4	3	2	1
Parents who are actively involved in helping young people succeed in school	4	3	2	1
A community that places value on youth	4	3	2	1
Opportunities to serve and volunteer	4	3	2	1
Safe homes, schools, and neighborhoods	4	3	2	1
Neighbors who take responsibility for monitoring young peoples behavior	4	3	2	1
Parents and other adults who are good role models	4	3	2	1
Friends who are good role models	4	3	2	1
Regular attendance at church or other religious activities	4	3	2	1
Focus on child learning, development or behavior	4	3	2	1
How your child gets along with others	4	3	2	1

Name	Decipline or Organization
Adrian, Monica	MCOE
Allison, Michelle	Department of WI
Bobbitt, Chris	Probation
Bogus, Dr. S. Diane	Hope for Youth
Brown, Shirley	Community Member
Campos, T. "Easy"	Consumer
Chang, Vong	Turning Point
Codallos, Kym	Aspiranet
Coston, Susan	MCOE
Darbo, Joyce	MCOE-Head Start
Diaz, Martin	Golden Valley Health Clinic
Duarte, Jose	Consumer
Eubanks, Aaron	Mental Health-Wellness Center
Freitas, Liz	Community Member
Frost, Taylor	Caring Kids
Gomez, Olivia	Planada Elementary School
Granados, Fernando	Sierra Vista
Hubbard, Nailah	Non-profit
Huey, Jerry	Community Member
Johnson, Altia	Public Health
Jones, Sharon	Mental Health-MHSA
Kelly-Ortega, Melissa	Golden Valley Health Clinic
Keswick, Memo	Community Member
Knapp, Mark	Los Banos Police Department
Lange, Weston	Aspiranet
McClure, Chuck	Consumer
McMurray, Linda	Non-profit
Melgoza, Eusebio	Consumer
Mimura, Brian	First 5
Mochel, Marilyn	Healthy House
Mockus, Jennifer	Central CA Alliance for Health
Mojica de Tatum, Iris	Community Member

Morris, Gloria	Hope for Youth
Nicholas, Linda	HSA
Pierce, Stephen	Aspiranet
Reed, Myisha	First 5
Name	Decipline or Organization
Rising, Linda	Consumer
Robinson, Sharon	Mental Health-Fiscal
Scott, Amanda	Consumer
Segars, Samantha	SVCFS
Slaton, Tony	Boys and Girls Club
Smith, Victor	Consumer
Spangler, Janet	Mental Health-CSOC
Stewart, Tatiana	Healthy House
Thao, Ge	LAO Family-SAECAP
Thomas, Susan	MCOE
Tuggy, Susan	Planada Community Church
Wilson, Steven	Consumer