



## **INNOVATION PLAN APPROVAL SUMMARY Santa Clara County**

**Total Requested for Innovation: \$ 3,515,789**

**Staff Recommend: APPROVAL**

### **Review History**

County Submitted Innovation Work Plan: September 3, 2010  
MHISOAC Vote regarding Plan Approval: September 23, 2010

### **County Demographic Profile**

Population: 1,879,700

- Latino: 26.3%
- API: 32.1%
- Native American: 0.8%
- African American: 2.9%
- Caucasian: 37.2%

Age

- 32% under age 18
- 12% age 65 or older

### **Work Plan #1 - Early Childhood Universal Screening Project**

**Duration:** two years

**Budget Request:** \$170,158

#### **Key Features of Innovation Program**

- Tests parent administration of multi-language electronic developmental screening in “kiosks” located in pediatricians’ offices
- Pilots a Spanish audio component of the ASQ-III to increase independent use by monolingual Spanish families
- Develops a model to increase access to services and improve outcomes for young children with developmental disabilities and social emotional delays by strengthening screening and referrals
- Screening results will inform the information pediatricians provide to parents about appropriate developmental tasks, areas for growth, parent-child activities to strengthen child’s skills, and referrals if indicated

## **Expected Contribution to Learning and Development of New/Improved Mental Health Approaches**

- Complete design of a culturally appropriate electronic mental health screening model utilizing kiosks in pediatricians' offices, including parental and pediatrician satisfaction and ease of use
- Assesses participant outcome measures
- Measures accessibility and usability of Spanish audio screening tool by monolingual and Limited English Proficiency Spanish-speaking parents.

**Similar to other MHSA Innovation Programs:** none

## **Work Plan #2 - Peer-Run Transition Age Youth Inn Project**

**Duration:** three years

**Budget Request:** \$703,529

### **Key Features of Innovation Program**

- This Innovation Program will develop the leadership of Transition-Age Youth (TAY) in the design and delivery of services in a voluntary 24-hour care setting. TAY staff members make significant program decisions and are the primary providers of services.
- This peer-led and recovery-based approach intends to help TAY who are homeless, in crisis, and at risk of or experiencing mental health problems.

## **Expected Contribution to Learning and Development of New/Improved Mental Health Approaches**

- The Innovation Program examines whether the experience of receiving services in an environment chiefly designed and offered by peers will increase engagement and improve outcomes (symptom management and recovery, relationships, living situation, school/work, and satisfaction with service) for TAY.

**Similar to other MHSA Innovation Programs:** Humboldt, Monterey, San Bernardino

## **Work Plan #3 - Mental Health Disorders in Adults with Autism/ Developmental Disabilities**

This Innovation Program is pending; Santa Clara County will submit by the end of 2010.

## **Work Plan #4 - Older Adults Project**

**Duration:** three years

**Budget Request:** \$252,060

### **Key Features of Innovation Program**

- Develops a model, including a 12-week curriculum, of life review, story telling, and engagement of natural support systems to help isolated older adults reminisce and express significant memories and personal accomplishments to people with whom they have meaningful relationships, especially family members and caregivers

- Uses expressive art in various media to record oral histories
- Older immigrants, especially in Spanish and Vietnamese communities who are not fluent in English, will be cared for and supported through this program, with services provided by Spanish- and Vietnamese-speaking “community workers”
- Seeks to promote recovery from depression, especially for older adults from underserved cultural and ethnic groups, including immigrants and refugees

**Expected Contribution to Learning and Development of New/Improved Mental Health Approaches**

- Develops and assesses a curriculum and training program
- Measures reduction in older adults’ depressive symptoms and cognitive decline and increases in quality of life
- Assesses increased interpersonal understanding and strengthened relationships with family members and caregivers.

**Similar to other MHSA Innovation Programs:** San Francisco

**Work Plan #5 - Multi-Cultural Center Project**

**Duration:** three years

**Budget Request:** \$481,791

**Key Features of Innovation Program**

- Develops a model to increase access to underserved and inappropriately served ethnic communities by establishing a Multi-Cultural Center to house activities and services for multiple ethnic communities delivered by peer and family partners
- Aims to create a welcoming, accessible, and safe place where members of all ethnic communities can experience cultural resonance, belonging, and support.
- Provides peer support to individuals with mental health issues and engages individuals in mental health services, including prevention and early intervention
- Offers opportunities for videos and life presentations of testimonials from ethnic community members recovering from mental illness to de-stigmatize the condition, discuss deep-seated cultural beliefs, and reduce fear about using mental health service.

**Expected Contribution to Learning and Development of New/Improved Mental Health Approaches**

- Demonstrates whether and how the inclusion of multi-cultural services in one setting can facilitate an innovative cross-cultural collaboration among ethnic communities to promote mental health and support people with mental illness
- Aims to create a new governance model grounded in ethnic traditions, synergy, and inter-cultural learning from collaboration among multiple ethnic groups
- Informs and guides efforts to increase the capacity of new immigrant populations to support peers with mental health issues.

**Similar to other MHSA Innovation Programs:** San Bernardino

## **Work Plan #6 - Transitional Mental Health Services to Newly Released County Inmates Project**

**Duration:** three years

**Budget Request:** \$256,025

### **Key Features of Innovation Program**

- Tests a model to increase access to services and improve outcomes for newly released county inmates with mental health needs through an innovative collaboration between the County Mental Health Department, faith communities, and other service providers. Data estimate that at least 80% of released inmates have a substance-related issue and 64% have a recent untreated mental health problem.
- Offers training on mental health interventions, supports coordination among diverse faith communities, increases organizational capacity and infrastructure, and works to remove systemic barriers to effective services and supports
- Offers services without regard to participant's belief, adherence, or participation in any faith.

### **Expected Contribution to Learning and Development of New/Improved Mental Health Approaches**

- Demonstrate the most effective supports and training to increase the faith community's capacity to facilitate successful re-entry of newly released inmates with mental health needs, and their families
- Assess mental health recovery outcomes of program participants
- Map existing resources/efforts and additional priority resources needed to serve newly released inmates with mental health needs, and their families
- Demonstrate success in removing systemic barriers to treatment.

**Similar to other MHSA Innovation Programs:** San Francisco

## **Work Plan #7 - Mental Health and Law Enforcement Post-Crisis Intervention Project**

**Duration:** two years

**Budget Request:** \$285,209

### **Key Features of Innovation Program**

- Provides immediate (within 24 hours), voluntary, compassionate, post-crisis contact by a culturally competent team comprised of a peer/family advocate and a clinician to individuals and families who experience a law enforcement-involved mental health and/or suicide related event
- Serves the San Jose community and all ethnic and cultural groups, especially Hispanic and Vietnamese communities

- Includes frequent debriefings with consumers/family members, mental health law enforcement liaisons, and various advisory committees to continually improve the effectiveness in providing timely compassionate interventions.

### **Expected Contribution to Learning and Development of New/Improved Mental Health Approaches**

- Tests the impact of post-crisis responses in engaging consumers and family members who are currently falling through the cracks
- Assesses outcomes, including a reduction in repeat law enforcement interventions, use of force, multiple hospitalizations, and avoidable suffering
- Provides the opportunity for individuals and families in crisis to provide input about what is most helpful to them during or after a mental health crisis
- Measures increased collaboration in effective crisis response.

**Similar to other MHPA Innovation Programs:** Butte, Sonoma

### **Work Plan #8 - Interactive Video Simulator Training Project**

**Duration:** 32 months

**Budget Request:** \$214,500

#### **Key Features of Innovation Program**

- Creates and implements the first mental health training delivery system for field law enforcement officers using Interactive Video Simulator Training (IVST) technology to address scenarios involving mental health-related crises
- Gives law enforcement personnel opportunities to practice skills to recognize people with mental illness who are in crisis, analyze and make good decisions in “real time,” de-escalate crisis situations, increase referrals to services, and improve outcomes in culturally diverse environments
- Utilizes expertise of consumers and family members, especially from ethnic communities, to take leading roles in designing and delivering an IVST training program for law enforcement
- Collaborative effort involving consumers, families, ethnic community members, NAMI, the San Jose Police Department, the Santa Clara County Sheriffs Department and the Santa Clara County Mental Health Department
- Potential widespread application in other jurisdictions.

### **Expected Contribution to Learning and Development of New/Improved Mental Health Approaches**

- Creates a new, potentially significant, use of IVST technology
- Assesses how the collaboration between consumers, family members, ethnic/underserved communities, NAMI, Mental Health Department staff, and law enforcement affects the content and training delivery of training program
- Measures improved service engagement and mental health, law enforcement, and related outcomes for consumers

- Measures impact on law enforcement response to mental health-involved crises, including strengthened community trust in and support for law enforcement.

**Similar to other MHSA Innovation Programs:** none

## **Innovation Administration**

These administrative expenses apply to all of Santa Clara County's Innovation Programs.

**Innovation Administration, Direct Service: \$604,788 (evaluation, coordination)**

**Santa Clara County, Indirect Services and Operating Reserve: \$547,729**

## **Example Reviewer Comments**

- *Early Childhood Universal Screening Project:* Appreciation for focus on meeting the needs of monolingual Spanish-speaking families
- *Early Childhood Universal Screening Project:* "Learning about the human-tech interface will be useful."
- *Older Adults Project:* Appreciation for the family component and the value the program gives to the lives and experiences of older adults
- *Older Adults Project:* Appreciation that older adults from diverse cultures are likely to feel more comfortable sharing their stories with community workers with similar cultural and linguistic understanding
- *Older Adults Project:* Protections need to be built in for people who have experienced trauma.
- *Multi-Cultural Center:* Appreciation for emphasis on culturally specific food and materials – "this is a strength that brings people to the table. It transcends cultural boundaries."
- *Multi-Cultural Center:* It's hard to find what services exist for diverse communities without knowing specifics. It will be useful to have this information in one place."
- *Law Enforcement Post-Crisis Intervention:* Requested and received clarification that all services are voluntary and confidentiality protections are in place
- *Interactive Video Simulator Training:* "The active learning element is very important."
- *Interactive Video Simulator Training:* Appreciation for the multi-cultural dimension of the program.