

COLTON COURIER

YOUR COMMUNITY COMMENTARY!

8/4/11

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'Spirit' of MHSA has been realized in SB County

Two recent articles have explored the notion that the funding provided by the Mental Health Services Act (MHSA Prop. 63,) has been less than effective. The articles, "Mental health spending creating haves and have-nots," posted by the San Jose Mercury News June 26, 2011, on MercuryNews.com, and "Overhaul mental health treatment," posted by The San Bernardino Sun, July 8, 2011, on sbsun.com, suggested that the State missed the mark in meeting the intent of the Act approved by voters November of 2004.

For the County of San Bernardino, the experience has been very positive and the "spirit" of the act has been realized. Over 104,700 individuals have received services tailored to be inclusive and to meet the needs of the diverse populations in this region. Over the past six years, and with the use of MHSA funding, the Department of Behavioral Health (DBH) has been able to implement over 30 significant programs that address issues such as Crisis Intervention, Prevention and Early Intervention and homelessness. The following are six examples of programs put into place:

- Community Crisis Response Teams (CCRT) that operate 24/7. The program, referred to by Lt. Dale Mondary, Crisis Intervention Training Coordinator for the San Bernardino Sheriff's Department, as a "God Send," consists of teams of specially trained mental health professionals who provide mobile crisis assessment and intervention for children and adults brought to the attention of law enforcement and other emergency responders. - Due to the collaborative efforts of DBH, law enforcement and local hospitals in fiscal year 2009/10 CCRT received 7,344 calls for assistance, including 5246 crisis calls. Of those 5246 crisis calls 3,177 (61%) were diverted to more appropriate and less restrictive levels of care.
- Three Crisis Walk-In Centers (CWICs) throughout the county. CWIC staff assess children and adults who are in need of urgent mental health services. The programs are outpatient models, which are used by law enforcement, CCRT and the community.
 - o In fiscal year 2009/10 CWIC staff were able to provide services to 6020 clients. Of those 5708 (95%) were diverted from hospitalization.
- A Psychiatric Diversion Program which offers community based services to individuals who go Arrowhead Regional Medical Center (ARMC) Psychiatric Emergency Room for behavioral health services. Services provided by the program allow for treatment and care in an outpatient setting, thereby, avoiding unnecessary hospitalizations.
 - In fiscal year 2009/10 the team was able to avoid hospitalization for 3,193 of the 4,434 consumers who presented at ARMC for behavioral health services by linking them to less restrictive and more appropriate care within the community.
- Crisis Intervention Training. A community partnership that has resulted in 400 Sheriff Deputies and police officers receiving behavioral health education intended to equip them with alternative methods of interaction when encountering individuals living with a mental illness.
- Two Military Services and Family Support Centers. Funding provided by the Prevention and Early Intervention component of MHSA has made it possible for DBH to collaborate with two contracted providers, Victor Community Support Services and Morongo Basin Mental Health Services to provide rehabilitative support for military service members and their families. The objectives of the programs are to improve access to behavioral health care; increase knowledge of social, emotional and behavioral issues and reduce stigma. Services include assessments; rehabilitative support; family services and in home visits.

"Without MHSA funding we would have been unable to conduct veteran-community outreach and education events around the county. Furthermore, this funding has resulted in new partnerships between the county, state, and

federal VA from which our veterans and their families benefit,” stated Bill Moseley, Director of the county’s Department of Veterans Affairs.

- Transitional Age Youth (TAY) One Stop Centers. Through MHSA funding, DBH and its contracted providers Pacific Clinics and Victor Community Services, as well as, other county partners are addressing the TAY, ages 16-25, throughout the county by providing coordinated and comprehensive support and direct services. Services include: housing (which includes for pregnant and parenting TAY), employment; educational opportunities; life skills; medication support; drug and alcohol services; domestic violence and physical, emotional and sexual abuse counseling, with a focus on wellness and recovery. TAY are encouraged to utilize the services to best maximize their individual potential.

MHSA funding has been used to develop new and expanded programs to address behavioral health needs in the County of San Bernardino. The approach to develop these programs has been innovative, culturally and linguistically competent, community-based and consumer and family driven.

In spite of a decline in realignment funding, which has affected the ability to continue to provide some very effective behavioral health services, one cannot deny the fact that the “spirit” of MHSA has been realized in the County of San Bernardino. The promise has been kept!

If I can be of further assistance please call my office at (909) 382-3179 or visit the department’s www.sbcounty.gov/behavioralhealth.

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Health
County of San Bernardino