



INNOVATION PLAN APPROVAL SUMMARY

Marin County

Total Requested for Innovation: \$ 1,481,800

Staff Recommend: APPROVAL

Review History:

- County Submitted Innovation Work Plan: December 22, 2010
- MHSOAC Vote regarding Plan Approval: January 27, 2011

County Demographic Profile:

Population: 250,750

- Latino: 14.7%
- API: 5.8%
- Native American: 0.6%
- African American: 3.1%
- Caucasians: 73.9%

Age

- 20.4% under age 18
- 16.2% age 65 or older

Work Plan Name: Client Choice and Hospital Prevention Program

Duration: Two years and five months

Key Features of Innovation Program

- Provides a new approach for dealing with psychiatric crises by combining three strategies to build a sustainable, wellness and recovery oriented system.
- Three strategies include the systematic use of consumer-driven crisis plans, community-based crisis services, and integration of consumer and family providers with professional staffing in the adult psychiatric crisis services.
- Pilots using the Screening, Brief Intervention, and Referral for Treatment (SBIRT) that is used for treating substance use problems in an early intervention approach.
- This system transformation project tests whether the combination of these three strategies will result in reducing hospitalization and improving outcomes.

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

Marin County expects to learn whether and how:

- Family partners and peer providers' involvement in this integrated system will reduce participants' stigma and increase their participation in crisis and post-crisis services
- Consumer-driven crisis plans implemented through this unique combination of various system level approaches result in better outcomes on the illness self-management and a reduction in hospitalizations
- Integration of SBIRT in a community-based crisis setting result in better outcomes in early identification of substance use problems/risk

Similar to other MHSA Innovation Programs: None

Example Reviewer Comments

- Reviewers appreciated that during their community program planning, Marin County sent sixteen stakeholders to a neighboring county to visit and observe their crisis residential unit.
- Reviewers requested and received clarification about participation from diverse communities.
- Reviewers requested and received clarification about summarizing which program elements will be funded respectively by Innovations and other various MHSA funds, such as Community Services and Supports (CSS), Capital Facilities and Technological Needs (CFTN) and Prevention and Early Intervention (PEI).
- DMH expressed concerns on how many people will be served with Mental Health Services Act Innovation funding, and the County provided additional information for clarification.