Trinity County Mental Health Services Act

Fiscal Year 2019-2020
Annual Update
Introduction

Trinity County is located in the far northwest corner of the State. It is renowned for the Trinity Alps which are a destination for individuals looking to explore unblemished wilderness. While the county is roughly the size of the state of Rhode Island it is very sparsely populated with just around 12,726 residents. There are many small communities spread throughout the County and two core towns. The county seat, Weaverville, is the largest of these towns with about 3,600 residents. Hayfork, which is to the south of Weaverville and roughly located in the center of the county, has approximately 2,368 residents. Travel through the county offers a scenic treat but can be a challenge as only two highways run through the county; Highway 299 and Highway 3. Travel can be made seriously difficult by weather or by wildfire which the County, like the rest of California, is experiencing on a more frequent basis.

The following is a brief overview of county statistics gathered for the U.S. Census Bureau.

Ethnicities:

- Caucasian - 86.6%
- Native American - 4.3%
- African American - 0.8%
- Asian American - 1.2%
- Pacific Islanders - 0.9%
- Other Race - 3.2%
- Two or more Races - 3%

Population of Older Adults: 27.3%
Veterans: 1,367

Gender:

- Male-51.4%
- Female-48.6%

Average Median Household Income: $36,563
Individuals Under 65 With Disabilities: 14.3%
Challenges for the Community

Residents of the county continue to struggle with transportation as those in the most remote areas of the county find it a challenge to access needed services and resources. The single provider of public transportation, Trinity Transit, continues to struggle with a lack of ridership and has therefore had to decrease the number of routes that it can run. Overall, residents have limited access to educational or employment opportunities.

Purpose of the MHSA 2019-2020 Annual Update

The purpose of this document is to provide the community with a realistic projection regarding ongoing projects under each component of the MHSA. The components that will be discussed in this document will be Community Supports and Services (CSS), Prevention and Early Intervention (PEI), and Innovation (INN). It is required under MHSA regulations that each county produce and submit a program and expenditure plan, updating it on an annual basis based on the estimates provided by the State and in accordance with established stakeholder engagement and planning requirements (Welfare and Institutions Code, 5847). This document is an overview of current or proposed MHSA programs planned for fiscal year 2019/2020.

Title 9 of the CCR section 3300 requires that the MHSA 3-Year Integrated Plan and updates be developed with the participation of the stakeholder, and the description of the local stakeholder process be included in that plan or update. The community program planning process should build on previous and ongoing participation of the local stakeholders. The county is to conduct a 30-day public review period.

1. Briefly describe the Community Program Planning Process for the development of all components included in the 2019-2020 MHSA Annual Update. Include all methods used to obtain stakeholder input.

There were three focus groups held to invite stakeholder input. In the interest of gathering the most input from the varying communities in the county, the focus groups were held in three different areas. The first was held in Weaverville at the main clinic on May 7th, 2019. The second was held at the
satellite clinic located in Hayfork on May 8th, 2019. The third focus group was held on May 16th, 2019 in Southern Trinity. Each of these communities have a unique perspective regarding the wants and needs of the individuals residing in the community and in the county, as a whole.

In order to inform the community of these focus groups and to invite as much participation as possible; flyers were disseminated widely, to the Trinity County Office of Education, the Human Response Network, the Department of Health and Human Services, the Mountain Valley Unified School District, the Trinity County Probation Department, North Valley Catholic Social Services, the Southern Trinity Unified School District, Milestones Wellness Center, and at several ‘central’ community locations. The central locations included; the local grocery stores, the post offices, gas stations, the County Behavioral Health Agency in Weaverville, and the satellite office in Hayfork.

TCBHS provides ongoing information about its programs on a bi-monthly basis at the Trinity County Behavioral Health Services Advisory Board meetings. The advisory board is comprised of one member of the county board of supervisors, staff from the local non-profit social service agency, two consumers/family members, the patients-rights advocate and an interested community member. All members demonstrate an ongoing interest in how MHSA works in the county and the effectiveness of both proposed and established programs.

i. Identify the stakeholder entities involved in the Community Planning Process (i.e. the name, agency affiliation, population represented, age, race, ethnicity, client/family member affiliation, primary language spoken, etc.)

There are several formal venues where information about the 2019/20 MHSA Annual Update was shared and stakeholder input was gathered. This includes the Policy Council for Trinity County Health Children’s System of Care which convenes bi-monthly, the agency’s Quality Improvement Committee bi-monthly meeting, the Behavioral Health Services Advisory Board bi-monthly meeting and the three MHSA Focus Groups that are held every year to specifically address MHSA programming. This is not the only way the county gathers input about its plane. Often it is through more ‘unofficial’ means.
II. Describe the methods used to circulate, for the purpose of public comment, the 2019/2020 MHSA Annual Update.

The 2019/20 MHSA Annual update presented to the community includes the following components: 1) Community Supports and Services (CSS); 2) Prevention and Early Intervention (PEI); 3) Innovation (INN). An announcement describing the purpose of the Mental Health Services Act (MHSA), as well as an invitation for interested community members to attend the public hearing on November 20, 2019 was published on the County Website, the TCBHS Website and posted by Health and Human Services on their Facebook Page. The notice was also sent to partner agencies in the community. Furthermore, in an effort to provide the community with as much information as possible the annual update in its entirety will be posted on the TCBHS website.

III. Include substantive comments received during the stakeholder review and public hearing responses to those comments and a description of any substantive changes made to proposed MHSA Annual Update that was circulated. If no substantiated comments were received.

The 2019/20 MHSA Annual Update was reviewed and discussed at the November 20, 2019 Mental Health Advisory Board Meeting. Proposed changes discussed included allocating up to the 20% allowance of CSS Dollars to CAPTECH and WET funds, to allow the Agency to purchase much needed upgraded computer equipment, as well as provide staff with trainings, such as early psychosis education, cultural competency trainings and WRAP training and certification for our Peer Specialist Staff at Milestones Wellness Center.

The Milestones Wellness Center was moved to Cedar Home in July of 2018. Milestones is currently located at Cedar Home and has experienced staffing shortages over the course of the last two fiscal years. The hours of operation are currently to 10:00 AM until 4:00 PM Monday through Friday. This change will allow for the peer run center to offer wellness activities on business days. While Cedar Home is not MHSA funded, it offers overnight resources for targeted persons five nights a week. Outreach in Hayfork is ramping back up in
the current fiscal year. A Monday morning social hour has been scheduled each week, facilitated by the Peer Specialist that oversaw Horizons before its closure, as well as a Mental Health Clinician. This will take place at the Hayfork Community Center and will allow staff to invite community members in for social interaction, referrals and peer support.

It is the hope that the plan can be reviewed, updated and submitted to the Trinity County Board of Services in on December 17th, 2019. A report back to the larger advisory group will be held in January 2020.

IV. **Introduction of components included in Trinity County’s MHSA Annual Update.**

TCBHS has used its MHSA dollars to fund programs to meet the needs of the community. Prior to the implementation of MHSA programming, Trinity County’s children and youth had gone with minimal intervention services. There was also a shortfall regarding any type of wrap-around service that would help an individual to address functional impairments in various life domains. The medical and deficit-based approaches were the treatment options for those who sought services. Mental Health Services Act dollars allowed for these insufficiencies to be addressed; adding depth and quality to the services being provided. It is now embedded in the array of services offered through the County mental health system.

The general population of the county is predominantly Caucasian and English speaking. The Native American populations, primarily members of the Nor Rel Muk Tribe, a band of the larger Wintu Tribe, are indigenous to Trinity County and represent a small but important population. In the Hayfork and Southern Trinity communities, the Hmong population is increasing, this in large part due to the legalization of marijuana. This community is difficult to engage due to cultural and linguistic barriers as well as the insular nature of the county’s smaller communities, but many County and Community Agencies are addressing the barriers. There have been several Hmong cultural celebrations in the Hayfork area that Trinity County Behavioral Staff have participated in.
Behavioral Health Case Managers and Peer Specialists have been welcomed by the Hmong community to attend and participate in these events.

There continues to be no threshold language in the county; however, over the past five or six years there has been a noticeable shift in the county demographics. The culture that is over-represented within the county is the “culture of poverty” The issues that continue to plague this population are limited employment, educational opportunities, co-occurring mental health and substance use disorders. The human services agencies within the county are consistently searching for effective strategies that will help address these concerns in a consistent manner. To sustain this programming during the 2019/2020 fiscal year, TCBHS has used MHSA dollars to address these concerns throughout all plans within each component. The programs described for the 2019/2020 MHSA Annual Update have been in place since 2010, with the exception of the Innovation plan and a few occasional changes. Innovation has continued to focus on peer support in the improvement of services and/or outcomes. Sustainability is always an integral factor for the success of a given program and this is what TCBHS as strived to achieve. It has implemented strong programs based on the needs and continued input from the community. Hence, effective program monitoring has corrected areas needing improvement or re-focusing and has ultimately created programs which can be carried forward into the coming fiscal years.

**Community Supports and Services (CSS):**

There are several key components that comprise TCBHS’ CSS plan:

1) Milestones Wellness Center in Weaverville, which is responsible for outreach and engagement activities; Horizons Wellness Mobile Outreach. The model for Horizons has shifted and become a mobile outreach instead of being anchored at the Hayfork Community Center.

2) Full-Service Partnership Program (FSP).

3) Utilizing CSS funding as allowed for Capital/Technical assistance. (CAPTECH)

4) Utilizing CSS funding as allowed for Work Force Education and Training. (WET)
5) Increased outreach at local Schools

*Wellness Centers*

The Wellness Center and Mobile Outreach perform a unique and important function in the communities in which they are located. Staff from the wellness centers perform outreach activities in order to engage unserved or underserved individual or groups in the community. The staff from the wellness centers also provide peer support and peer counseling at each center. These interventions help individual manage struggles across life domains. This team is comprised entirely of peer staff who have a unique understanding gained through ‘lived experience’ regarding what it is like to deal with troubling symptoms, what it is like to navigate the county mental health system and who have achieved personal recovery. Peer Specialist Staff are currently supervised by the Cedar Home Triage Manager.

The Triage Crisis Manager, under the direct supervision of the Agency Deputy Director for Clinical Services, will provide oversight to Milestones Wellness Center and the Horizons Mobile Outreach, and the peer specialists employed there. The Triage Crisis Manager will ensure that recovery-oriented programing is being delivered at the Milestones Center, and that community centered activities are offered in Hayfork as a strategy to embed the Horizon Wellness Center in the homes and community gathering locations in Hayfork. Focus is on supporting peer staff to work with participants of the centers from the perspective of lived experience and consumer driven treatment. This peer support is working to reduce the instances of non-psychiatric crises. This support is assisting individuals to stabilize symptoms as well as re-establish meaningful roles in the community.

Milestones Wellness Center and the Horizons Mobile Outreach represents a gateway to more traditional interventions offered through TCBHS. A Peer Specialist can make contact with an individual they feel would benefit from services offered at the agency and will make referrals, as appropriate. Individuals are referred to other community agencies that may have additional supports and services to offer. The wellness center often serves as a bridge back to establishing healthy and positive roles in the community. Basic need
items are provided to participants at the centers. This includes a daily snacks, clothing and hygiene items, as well as, on occasion and when available, sleeping bags or tents for those who are homeless and living out-of-doors. In addition, to addressing some of the most basic needs, activities at the center are geared toward improving social and life skills, assisting those who are applying for entitlement programs and helping to build employment skills. Enriching pursuits include a variety of craft groups, art, seasonal crafts and Wellness Recovery Action Plan (WRAP). When enough members are interested staff present a pre-vocational/vocational skills group that focus on skills, including soft skills, that are needed to obtain and keep employment.

Individuals who are geographically isolated or extremely economically disadvantaged are under-represented in the county mental health system. The Wellness Centers are continuing to play pivotal role in welcoming and helping these individuals gain access to services.

The recovery focused programming and services at Milestones and Horizons Mobile outreach are complimentary to and support the more traditional interventions offered through the TCBHS agency. By utilizing the MHSA-CSS funds, TCBHS has created an adult ‘wrap-around’ program that more traditional service delivery systems may have missed. It is the intent of TCBHS to continue to fund Milestones Wellness Center and Horizons Mobile Outreach. Resources within the Agency are more limited now than in the past, so even though the hours for Milestones are reduced, the Agency will attempt to concentrate the resources, so the Wellness membership still finds multiple benefits by participating.

**Full Service Partnership (FSP) Program:**

Similar in its focus to meet the needs of individuals in the county who have previously gone underserved or inappropriately served, is the Full-Service Partnership Program. This program focuses on those in the community who are high-risk and unable to access services through other means. It is the continuing goal of TCBHS to maintain FSP slots for children, transitional aged youth, adults and older adults.
Trinity County has chosen to structure its FSP program to reflect two tiers. Individuals who are identified as being in tier one are those individuals who are experiencing an acute crisis, have a mental health diagnosis and are experiencing a crisis in one or more other life domains. The first tier will allow individuals to regain stability in their lives and to transition out of the program. The second tier represents those individuals who are chronically mentally ill and who, without ongoing and intensive support, are likely to decompensate and need hospitalization. Though recovery is always the focus of services provided, these individuals will likely be long-term participants in the program.

For fiscal year 2019/2020, TCBHS will identify children from birth to age 18 that may benefit from services provided by the FSP program. Children enrolled in the FSP program will present as being emotionally disturbed or severely mentally ill. In addition, he or she may have experienced multiple psychiatric hospitalizations, have co-occurring disorders, are exiting the juvenile justice or social service system, are uninsured, are unable to function in a mainstream school setting, have parents with a serious mental illness and/or have a family that is homeless. In the recent past, TCBHS has been treating children with serious emotional disturbance but as an Agency we have been slow to identify these children as FSPs. In the coming year TCBHS will redouble our efforts to do so.

Trinity County does not have a youth wrap-around service; however, the agency is continuing to work collaboratively with partner agencies to support a limited wrap-around program. TCBHS is working to anchor a Mental Health Clinician at Trinity High School for up to several hours, once a week. This clinical person will be available for group on individual services to transitional age youth that may not otherwise be eligible for services at TCBHS. This staff person can work with School staff and administration as well as the Prevention Services Officer to identify TAY that may want or be in need of services.

Even though Trinity County has a limited number of children in out-of-home placements, it is the goal of TCBHS to address the needs of these children and to prevent further placements. The FSP program addresses a critical gap in the continuum of care that exists or has existed in Trinity County. TCBHS will continue to partner with the Health and Human Services
Agency to be fully involved in the care of foster children, attending Child Family Team Meetings and ensuring that all foster children receive behavioral health interventions.

TCBHS is committed to enrolling children and transitional age youth (TAY) who meet one or more of the following criteria:

- Have or are experiencing a first psychotic episode;
- Are homeless;
- Have had multiple psychiatric hospitalizations;
- Have co-occurring disorders;
- Lack insurance and are exiting the social service system or are being released from probation;
- Are members of an underserved population due to cultural or linguistic isolation and
- Are members of impoverished communities or communities that are geographically isolated.

TCBHS will continue to enroll TAY into the FSP Program. Individuals in this group who are participating in the program will receive assistance to achieve appropriate housing to stabilize symptoms and return to the community from out of county placement. This group is in particular need of continued support due to the frequent substance misuse issues and considerable lack of educational and employment opportunities. TAY enrolled in the FSP program are assisted in accessing a variety of community resources suited to the culture and language needs of the individual. While a ‘whatever it takes’ approach is used to support the TAY, the goal and focus is to move the individual toward self-sufficiency and independence. Linkage to other services, including mental health, medical care, education, employment and housing will help TAY avoid the label of chronically disabled or ‘unemployable’. Efforts will support the TAY to navigate more successfully in the normal development stages appropriate for their age. The Agency has received training in the First Episode Psychosis from the Felton Institute, and in the coming year it is the goal of the Agency to identify TAY youth as FSPs who are experiencing their first symptoms of psychosis.
Adult FSP enrollees are those individuals who are:

- Chronically mentally ill and one or more of the following;
- Have had numerous psychiatric hospitalizations;
- May be struggling with co-occurring substance abuse disorder;
- Are homeless or at risk of becoming homeless;
- At risk of incarceration; and
- Members of an underserved population

It is the intention of TCBHS to address the needs of these individuals in a manner that is culturally and linguistically competent, as well as focusing on individuals in the community who may be under-represented in the county mental health system. TCBHS is determined to identify more individuals as FSP’s and it is anticipated that the majority of those identified will fall into this age group. The stakeholder process that is completed every year prior to the submission of the annual update, or the integrated plan, continues to reveal the need to include FSP clients in the FSP program who at a stage in their recovery that requires significant support.

Older Adult FSP enrollees are those individuals who are:

- Chronically mentally ill adults sixty years or older and one or more of the following;
- Struggling with acute chronic symptoms of mental illness and who are presenting with co-occurring diagnoses;
- Dealing with multiple functional impairments;
- Isolated, homebound, living in an institutional setting and have limited resources;
- Are homeless or are at the risk of becoming homeless;
- At risk of a psychiatric hospitalization; and
- Struggling with co-occurring substance abuse disorder.

TCBHS will continue to expand its Full-Service Partnership (FSP) program in order to include older adult individuals. This population is typically difficult to engage due to the stigma that is often attached to mental illness for
individuals in this demographic. TCBHS will continue to work toward partnering with both the Golden Age Center in Weaverville and the Roderick Center in Hayfork, providing outreach to this underserved population. The focus of this program will be to deliver culturally and linguistically appropriate services to seniors in the community and to assist older adults in achieving their maximum level of functioning while maintaining independence, if possible, in the community. Efforts will focus on decreasing isolation and minimizing the risk of suicide.

Clinical staff who wish to have an individual enrolled in the FSP program will make referrals to the FSP team, and each referral will be reviewed. The Team is made up of Clinical, Fiscal and Administrative staff and they will be evaluating the enrollment from the perspective of ‘whatever it takes’ support model that speaks to the stipulation of the legislation.

**Prevention and Early Intervention (PEI);**

For the fiscal year of 2019/20, TCBHS has five programs that are funded under this component of the MHSA. During the initial stakeholder processes and during subsequent stakeholder forums, it was identified that the children and youth of Trinity County have historically been over-looked and under-served by the system. The overarching goal was to create Prevention and Early Intervention (PEI) programs to be delivered through the schools and other community agencies who regularly work with children and youth. During the latest round of focus groups, it was stated at all three locations, that the prevention efforts anchored at the schools were effective in helping children develop social and emotional skills to support better functioning. It was noted from school administrative and teaching staff, that they no longer felt like children in need of mental health services and support were getting lost in between the education and mental health system.

**Prevention Services Liaison:**

Stakeholders identified youth in the community as individuals who often ‘fell through the cracks’. While there was an overall gap in services for all
children and youth in the county, it was previously been determined that youth in the juvenile justice system are even more likely not to receive all the services they require to stabilize mental health issues or deal with dysfunctional behaviors. These youth have significant need for support in order to meet the conditions of their probation and to re-integrate successfully back into the school environment. TCBHS has had a contract with the Probation Department and offering a Prevention Service Liaison for many years. The liaison is anchored at the Trinity County Probation Department and funded with PEI dollars. This individual has immediate and regular contact with youth who are either currently in juvenile hall or who have been recently released on probation, as well as has a solid presence on many of the school campuses in Trinity County. The liaison works to support these youth as they transition back into the school environment. In order for the liaison to accomplish this, they must have regular contact with schools in all districts located in the county and also must be able to establish functional and cooperative relationships with these youth and their parents.

Another key element in this program is for the liaison to provide support to the county elementary and high schools by providing educational presentations to the student body at each location. These presentations often focus on the negative consequences of poor choices i.e. possession and use of a controlled substance, driving while under the influence, or making threats of violence toward others. The liaison can also present on more generalized curriculum such as anger management, community involvement and the impact of substance abuse. The Prevention Service Liaison is also available to schools to handle crisis situations. School staff report that the presentation that discuss consequences have been particularly helpful for youth, especially those at risk of perpetuating troubling behaviors.

When identified by the liaison a referral process has been established for those youth who have a possible need for mental health services. When a referral is made to TCBHS, the Prevention Services Liaison is available to do appropriate follow up with the youth and family to ensure that the appointment has been made. The liaison works closely with staff funded by the Substance Abuse and Mental Health Services Administration (SAMSHA) grant as well as the
Substance Use Disorder Services (SUDS) Services Prevention Team from TCBHS. The liaison attends the weekly SUDS Services Prevention meeting in order to provide the best possible intervention for the youth incarcerated in the juvenile hall and the youth released on probation who are also struggling with substance abuse issues.

An important prevention strategy that the liaison utilizes is establishing relationships with parents of the youth who are on probation or in juvenile hall. The key is to work both with the parents and the youth to address concerns regarding substance use and other behavioral issues. By having the liaison available to work closely with parents, as well as with the schools and the probation department, youth who would usually have a difficult time adhering to the terms of their probation, have successfully re-integrated back into the school environment and community life.

Another key element of this PEI project is the Prevention Services Liaison’s relationship with the Trinity County Office of Education and schools located within the county’s three districts. The liaison attends School Attendance Review Board meetings every month, as well as the meetings of the Local Coordinating Coalition. The liaison is in regular contact with the parents of youth, who are habitually absent from school. The liaison also assists the parent in identifying ways to address the behavior, including making referrals to partner agencies and TCBHS, when needed. Initial and ongoing outcomes show that the positive rapport that the liaison is able to build with youth, parents and the schools has been effective. The outreach performed, and the consistent follow-up has contributed significantly to the reduction of recidivistic behaviors and less re-involvement in the juvenile justice system.

**Link Center:**

Originally, the Link Center was one part of a two-part collaborative between Southern Trinity Health Services and Mountain Valley Unified School District. The relationship between the two allowed shared ideas about program development and effective intervention strategies for school aged youth. The Link Center has
since become a stand-alone program that is anchored at the Hayfork Elementary School.

The Link Center provides individual and group psychoeducational counseling to children who may be at risk for school failure due to behavioral problems, family crisis or social concerns that may interfere with concentration and learning. The Link Center staff invites parents and family members of students to visit the on-campus site as a way to promote healthy communication between school and family. This strategy helps promote a more family-based community, earning loyal and strong community support of the Link Center. Key staff at the center present curriculum that deals with the most common issues plaguing students; i.e. bullying, family issues and anger management. The social worker at the Link Center makes an effort to meet and to get acquainted with each student. This relationship building strategy has gone a long way to promoting a sense of trust in the children and, in turn, their parents and caregivers.

**Southern Trinity School Counselor**

In an effort to create consistency among its PEI program, TCBHS is funding a third school-based counselor. This program serves Southern Trinity Joint Unified School District. As with the counselor at the Link Center this counselor provides educational counseling to students who are experiencing behavioral issues and who may at-risk of school failures.

TCBHS is funding, in cooperation with Southern Trinity Unified School District, a school counselor who will serve all the schools located in that district. This counselor will be working with youth from an extremely rural community whose families likely struggle with poverty. The counselor will be available to all children, both at the elementary and high school. Focus will be on children who have been identified as at risk and may be struggling with issues that are interfering with their academic progress. The counselor presents curriculum that deals with the most common issues concerning students; i.e. bullying, family trauma, and anger management. Should a crisis situation arise,
the counselor will be able to meet one-on-one with the child and follow-up with the parents. The counselor will establish a relationship with the parents and families of children seen in the crisis or those that have been referred by the school.

For the 2019-2020 MHSA Annual Update, TCBHS intends to fund the Southern Trinity Counselor approximately $23,000, which is the equivalent of approximately two days a week on campus for the duration of the school year.

**PEI Counselor**

The stakeholder process identified a lack of services for children and youth countywide. A second PEI program was launched in the Trinity Alps Unified School District. This project, like the Link Center, is school based. The PEI Counselor for the Trinity Alps School District is located at the Trinity County Office of Education and therefore is available to serve within the elementary schools located within this district. The PEI Counselor travels from school to school on a set schedule and is available to facilitate individual and group psycho-educational counseling session. The counselor has established cooperative working relationships with school administrators in order to identify issues affecting the student body. In an effort to achieve a consistency across programs, the PEI Counselor from Trinity Alps School District is in regular contact with the social worker from the Link Center.

The PEI Counselor focuses on presenting curriculum that discusses anger management and building social skills. When a child is experiencing crisis at school this counselor is available to come to the campus to de-escalate the crisis situation. The PEI Counselor will act as a liaison for youth transitioning into high school to access ongoing support at this level.

The PEI Counselor establishes a relationship with the parents and families of children that are seen in crisis or those children who have been referred by the school. This relationship helps ease the referral process should one need to be made to another agency including TCBHS. In effect, the PEI Counselor acts as a liaison between parents and TCBHS in order to successfully initiate the intake process. For any referral made to TCBHS, the PEI Counselor will follow up in order to make sure that appointments are kept, and any barriers are
identified. There is a collaborative relationship that has been established between the PEI Counselor and the TCBHS clinicians. The TCBHS clinical staff meets monthly with the PEI Counselor to discuss children who have been referred to services and to assist in the identification of children who may need a more intensive intervention than the PEI Counselor is able to provide.

**PEI Statewide Projects:**

Statewide prevention efforts include large scale campaigns like “Each Mind Matters” and “Know the Signs” that work toward reducing the stigma of mental health and creating awareness through education about suicide prevention. The “Each Mind Matters” campaign has several ways that it aids counties and not the least of which is technical assistance and a network of resources to meet the variety of training needs for counties. “Know the Signs” has provided resources to counties that includes posters, handouts, and print adds that speak to the often-subtle signs people demonstrate when contemplating suicide.

Trinity County Behavioral Health believes that education is an important way to both reduce stigma and the chance for suicides and supports and participates in these statewide efforts. TCBHS staff participated in the local Halloween event in October 2019. Staff handed out candy, business cards, ‘each mind matters” and “know the signs” information on Main Street. It appeared to be well received by the community, and staff plan on continuing this activity in the coming years.

**MHSA Coordinator:**

In early 2018, the TCBHS MHSA Coordinator resigned. Due to fiscal concerns, the Behavioral Health Director and his assistant took over the key functions of the MHSA Coordinator. The MHSA Coordinator had been responsible for oversight and implementation of programs for all components of the MHSA. In August 2019, TCBHS was able to hire a new MHSA Coordinator, who is still learning the ins and outs of the position and all it entails. In terms of PEI, the MHSA Coordinator will act as a liaison for the CalMHSA statewide
projects. The MHSA Coordinator will act as a conduit for information regarding statewide anti-stigma and suicide prevention strategies. The focus will continue to be on monitoring the progress of the projects, as well as to continue informing stakeholders and partner agencies about the success of county level programs and statewide offerings.

Trinity County’s local PEI projects require oversight especially as the county moves forward in collecting more in-depth data to meet the standards outlined in regulation. The coordinator will meet with key staff from each program to ensure that programs are staying on track but also changing as applicable to better meet the needs of the youth served. The school-based PEI programs must submit outcomes bi-annually and it is the job of the MHSA Coordinator that these are completed and submitted in a timely manner. Additionally, the coordinator is working one-on-one with each project contractor to support them in gathering granular data that is to be submitted to the MHSOAC annually.

The Coordinator is instrumental in assisting in the implementation of the county’s Innovation program(s). A complete description of the new phase for TCBHS’s Innovation Plan has been submitted and presented to the MHSOAC and has been approved by the commissioner as of March 22, 2018.

The MHSA Coordinator will work to link peer staff with educational opportunity that will increase their professional development, the coordinator will continue to play a key role in supporting and further developing a career ladder for peer staff wanting employment and advancement within the county mental health system.

In the coming year a MHSA Coordinator will monitor areas like Flex Funding, FSP enrollments, the Wellness Center and Peer Respite utilization and to track PE&I Outcomes and the evaluation processes

**Workforce Education and Training (WET):**

Trinity County will dedicate WET dollars for the purpose of educating staff and consumer/family members on the Recovery Model, cultural competency and
the consumer culture and perspective. Emphasis has also been placed on consumer advocacy and empowerment. The MHSA Coordinator attends trainings that are pertinent to the Mental Health Services Act in order to keep Trinity County Behavioral Health Services apprised of current information. Whenever possible, staff will be encouraged to attend trainings that focus on cultural humility, wellness and recovery. Additionally, consumer/family members and members of the Trinity County Behavioral Health Advisory Board will continue to have the opportunity to attend trainings that focus on self-advocacy, empowerment and the Recovery Model, as well as peer driven services and goals. It is the intention of Trinity County to have staff and interested consumers attend trainings, which are relevant to ideals of the MHSA as are available. A goal that the county has been successful in achieving, is educating the community regarding the scope and purpose of the MHSA as well as the unique peer to peer support available at Milestones and Horizons (wellness centers). This is being achieved by speaking to all of the local service organizations and various other venues in the community and participating in countywide community events.

In this update to the 2019/2020 MHSA Plan, Trinity County has the intention of utilizing CSS dollars to reallocate towards Workforce, Education and Training (WET). Regulations allow up to 20% of CSS funds to be allocated towards WET and/or CAPTECH. All other WET dollars have been spent in prior years, Trinity County will be arranging culturally competency trainings and other trainings of value to the Agency throughout the course of 2019/202 to utilize the revenue. The revenue designated in the MHSA budget will also be used to support administrative functions and the Cultural Competency Chair.

**CAPTECH**

In this update to the 2016/2020 MHSA Plan, Trinity County has the intention of utilizing CSS dollars to reallocate towards Capital/Technological needs (CAPTECH). All other CAPTECH dollars have been expended. Regulations allow up to 20% of CSS funds to be allocated towards WET and/or CAPTECH. TCBHS is in need of upgraded computer equipment, along with a coming
required change to our electronic health records system (EHR). To keep within County, State and Federal requirements, upgrades of computers and computer operating systems are required.

**Prudent Reserve**

Per regulations, TCBHS had to withdraw funds from the Prudent Reserve in FY 18/19 and move to the CSS account. There is no plan to move any funding into the Prudent Reserve in the Current Fiscal Year.

**Summary**

Over the next year 2019/2020, it is the goal of TCBHS to maintain the programs that are currently being funded by MHSA dollars, as well as expand where able based on funding and staffing levels. The programs are working to provide mental health services and other services to clients using a strength-based and prevention focused approach. TCBHS will continue to strive to provide outreach and engagement efforts to underserved populations in the county.

The CSS funded Wellness Center, Mobile Outreach and FSP program have been scaled back the past two years and it is anticipated that this trend has reached its peak, and that over the next fiscal year we will see some growth in services offered once staffing levels are filled. One area that is unique is that the Agency has a 5 day a week Peer Respite Service, which is new to the service model of TCBHS. While not specifically a MHSA program, it will dovetail with the Weaverville Wellness Center, and offer overnight respite for persons who are at risk of inpatient hospitalization. This new program is recovery based and staff have received training in Intentional Peer Support. TCBHS has been successful in maintaining programs that positively impact the community, and it is to the stakeholder’s credit for being key in providing substantive input and support for programs that are effectively serving the community. This is true across all MHSA components; Community Supports and Services, Prevention and Early Intervention and Workforce Education and Training.