

Discussion at CAC Meeting April 5th, 2006

PROVIDERS	ASSETS	CHALLENGES
<p><u>Ann Martin:</u></p>	<ol style="list-style-type: none"> 1. Assets include agency's prominence as a teaching clinic with focus on trainee development. 2. Emphasis on skill development in child psychotherapy specialty and teaching environment w/multi-cultural issues. Two orientations: Learning disability (funded by outside fund raising); Psycho therapy in Mental Health Treatment. 3. Ann Martin is rolling out integrated management information system, which will add a level of efficiency. 	<p>Challenges include working with schools and how "welcomed" provider agency is on school site; difficult to pay staff for case <u>consultation</u> and <u>collaborative</u> efforts; Out-of-County placement and Medi-Cal; no consistent plan on how to serve non-Alameda County clients.</p>
<p><u>Asian Community Mental Health Services</u></p>	<ol style="list-style-type: none"> 1. Multiple Asian languages serving capacity (13 Asian dialects); has over 45 bilingual and bicultural direct service providers. 2. Multiple service modality: individual, family, group, crisis intervention, psychiatry. After hour crisis support for adult clients. Services can be provided at home, school-based, and community settings. 3. Proven record of community outreach and organizing with many ethnic communities; has been the county designated ACCESS program for Asians since 1996, doing diagnostic screening, referral and short term crisis 	<ol style="list-style-type: none"> 1. Unable to fairly compensate, monetary-wise, and retain highly skilled staff. 2. Outgrown their current space. 3. Staff unable to cover the work of other language team members. 4. Documentation difficulties for staff whose primary language is not English.

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	<p>stabilization treatment.</p> <ol style="list-style-type: none"> 4. Years of experience working with low income, monolingual, refugee immigrants, and CalWORK families; good understanding of the communities' service needs. 5. Capacity to serve clients in both Alameda and Contra Costa counties. 6. Solid training program for more than 40 interns over the years, with excellent reputation. 	
<p><u>Asian Pacific Psychological Services:</u></p>	<p>AOD + MH contract represents a positive blending of services</p>	<p>Q: How to offer both AOD/MH services in all school sites.</p>
<p><u>EBAC:</u></p>	<ol style="list-style-type: none"> 1. Day Treatment doing well. 2. Expanding web based wireless data and charting system to all offsite programs. 3. EPSDT funding for Probation Youth to be leveraged with Measure Y funding. New probation mental health programs starting in Oakland. 4. COST teams are working in Hayward. Referrals are building. 5. EBAC has a broad mix of mental health and family support programs. 	<ol style="list-style-type: none"> 1. Services for non-full-scope Medi-Cal youth. 2. Hiring staff. 3. Hiring bilingual staff.
<p><u>Family Paths (Formerly Parental Stress Services):</u></p>	<ol style="list-style-type: none"> 1. Promotes the development of nurturing, responsible and resilient families within diverse communities. Provides comprehensive services that foster positive change and empowers 	<p>Funding for non-EPSDT eligible clients continues to be a challenge. Need more funding to expand</p>

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	<p>parents.</p> <ol style="list-style-type: none"> 24-hour Family Support line and Foster Parent Service line as "asset" and resource for referrals to clinical programs. Parent education classes are popular with parent/guardians. Cal-Works clinicians and case managers work with parents & support them in efforts to become "work-ready." 	<p>services to parents not served by the MH system.</p> <p>Sustaining of maintenance of effort funding (MOE). Over all costs to run the agency exceed the increase in funding received from County contracts.</p>
<u>Fred Finch Youth Center:</u>	<ol style="list-style-type: none"> Assets include specialized residential center (developmentally delayed + MH) with dual diagnosis issues. Sites in Vacaville, San Diego, and Oakland. Community based programs that deliver MH services in community where child + family are located. Utilizes family driven & client centered approach to delivery of services. TAY: offers variety of programs successfully to homeless youth & foster care youth, primarily in the Berkeley, Oakland area. Providers of both housing & MH services. 	<p>Challenges include competition for jobs for clinicians with language + cultural competency; collaboration with school district.</p> <p>Struggle with morale at school sites. Continued difficulty with getting phone lines and confidential space at school sites.</p> <p>Out-of-county contact an issue at least one time/month.</p>
<u>Lincoln Child Center:</u>	<p>New CEO, Christine Stoner-Mertz</p> <p>New Clinical Program Officer, Toni Taylor</p>	<p>Staffing and pay scales \$10-12/hr.</p>
<u>Pathways to Wellness Assets & Challenges</u>	<ol style="list-style-type: none"> Pathways provides a vital link in the spectrum of services available to children, adolescents and adults requiring mental health pharmacological management services. The 	<p>Keeping up with the growing number of referrals to our facility for pharmacological management services.</p>

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	<p>clinics are staffed by Board Certified Psychiatrists and Licensed Clinicians.</p> <p>2. Provide psychiatric evaluation/assessment, medication management, individual, group & family therapy, & case management services.</p>	
<u>Seneca:</u>	<p>1. Online documentation</p> <p>2. New EPSDT funded program Community Day School/OUSD</p> <p>3. New program funded by EPSDT \$'s for Probation youth: Multi Systemic Therapy</p>	Hiring clinical staff.
<u>STARS:</u>	Evidence based practice with Transition Age Youth Program won a national award	Medi-Cal eligibility and the risk of loss of benefits for 18 y/o ↑
<u>Sunny Hills:</u>	"Asset as their biggest challenge." According to Barry Feinberg. Emancipating youth leave GH with skills or return home with skills and success.	Challenge is hand-off and follow-through when youth go back to public school or other providers. Looking for linkages to allow work Sunny Hill did at residential program continues when youth transition back to community.
<u>Thunder Road:</u>	Integrating MH with AOD on target. Increase use of psych meds with selected clients	Over the past 3 yrs, Thunder Road has sustained \$ loss. The Day Treatment contract is underutilized resulting in concerns by TR's Board.