To: Mental Health Board

This is a draft of a budget proposal that, if approved, would be presented to the Mental Health Division from the Mental Health Board. This would be for FY2014/2015. This draft includes continued attendance at the Planning Commission meetings, a once a year trainer for the MHB, as well as mileage reimbursement (for members who wish to ask for it) when we have an off-site MHB meeting or a site visit.

This is just an estimate and is meant to provide guidance to the MHB on where we anticipate spending any allocated funds. All expenditures must follow the proper approval process.

Meetings	
Planning Council and other meetings	$2,800
Off Site MHB meetings – 2 per year Mileage reimbursement	$300
Training One day for MHB (includes speaker and materials)	$1,500
Site Visits	
Mileage Reimbursement (apx. and based on county rate)	$400
Other Incidental Expenses: Might include food for training, meetings, additional materials, etc.	$500
Total Budget request for FY 2014/2015	**$5,500**

Approved 06/2011

NAPA COUNTY MENTAL HEALTH BOARD FACILITY/PROGRAM SITE VISIT QUESTIONNAIRE

PURPOSE OF SITE VISIT:

The Mental Health Board members are interested in learning about the structure and scope of services the contract agency provides. The contractor agency will have an opportunity to learn about the role the Mental Health Board plays in Napa County.

DATE OF SCHEDULED SITE VISIT: THURSDAY, APRIL 17, 2014

PROGRAM/FACILITY NAME: PARENT-CHILD ADVOCACY NETWORK DBA PARENTSCAN

PROGRAM SUPERVISOR/CONTACT: LISA GOMEZ 707-253-7444 EXT. 110

LOCATION: NAPA

STREET ADDRESS: 1909 JEFFERSON STREET

CROSS STREET: E STREET

PROGRAM AGE GROUP: (CHECK APPROPRIATE BOXES)

☐ OLDER ADULT ☑ ADULT ☐ YOUNG ADULT ☐ ADOLESCENT ☐ CHILD

PROGRAM TYPE(S): (CHECK ALL APPROPRIATE BOXES)

☐ OUTPATIENT ☐ INPATIENT ☐ DAY TREATMENT ☐ RESIDENTIAL ☑ OTHER ADVOCACY/SUPPORT/ PARENT EDUCATION

PROGRAM/FACILITY CAPACITY: (NUMBER OF INDIVIDUALS)

MAXIMUM POSSIBLE_____ MONTHLY AVERAGE_____ AND/OR DAILY AVERAGE _____

CURRENT STATE LICENSE (Y OR N) NA CURRENT CITY/COUNTY PERMIT (Y OR N) NA

REPORTS TO BE FORWARDED WITH THIS QUESTIONNAIRE

1. CONTRACT WITH FACILITY/PROGRAM (PROVIDED BY THE COUNTY)
2. PROGRAM QUARTERLY REPORTS TO NAPA COUNTY HHSA

Questions For Facility

1. **What Type Of Individuals Do You Serve?**
   parents of children with Behavioral/mental health needs.

2. **What Kind Of Specialty Mental Health Services Do You Provide, If Any?**
   Services include Advocacy, resource information, system referrals and navigation, parent education and support.

3. **What is the cost of services provided per person per day?**
   parentscan services are provided free to Napa County residents.

4. **How Does The program Provide For Individuals Who Are Not Primarily English-Speaking?**
   Fifty Percent of our staff are bi-lingual and bi-cultural and all staff receive training in cross cultural communication. All service staff are members of families with a Child with a Special Need. Therefore our staff can address the language and cultural issues that arise from ethnicity as well as the "cultural" issues that arise from disability.

5. **What Kind Of Ongoing Training Do You Provide For Your Staff?**
   In accordance with best practices staff receive at least 48 hours of staff development a year and have weekly mentoring and coaching. Training topics include active listening and communication skills, cultural diversity, grief and adjustment processes, community resources, disability specific information, positive philosophy, advocacy, leadership, mandated reporting and confidentiality.

6. **Describe The development of treatment plans and how staff includes the client members in this process?**
   not applicable.

7. **What are the reasons an individual may discharge form the program?**
   Parentscan services are voluntary . We assist families as frequently as is needed at or before birth all the way through transition to adulthood.

8. **FOR INDIVIDUALS TO BE DISCHARGED, IS THE REFERRAL PROCESS TO CONNECT THE INDIVIDUAL WITH OTHER APPROPRIATE SERIVICES? IS THERE FOLLOW UP ON REFERRALS ONCE AN INDIVIDUAL IS DISCHARGED FROM YOUR PROGRAM?**
NOT APPLICABLE. REFERRALS TO OTHER SERVICE PROVIDERS ARE ONE OF THE SERVICES PROVIDED TO CLIENTS AND FOLLOW UPS WITH CLIENTS ARE MADE.

9. **IS THERE ANY EFFORT TO FOLLOW UP AND TRACK THE SUCCESS OF INDIVIDUALS? FOR WHAT PERIOD?**
CLIENTS ARE SURVEYED AT SIX MONTHS FROM ORIGINAL INTAKE DATE AND ANNUALLY THEREAFTER TO MEASURE OUTCOMES OF SERVICES PROVIDED.

10. **WHAT KIND OF INVOLVEMENT, SUPPORT DOES THE COMMUNITY PROVIDE FOR YOUR FACILITY? IS THERE AN AREA YOU WOULD LIKE TO SEE MORE INVOLVEMENT?**
THE SPECTRUM OF CLIENTS DICTATES THAT PARENTSCAN HAS ESTABLISHED RELATIONSHIPS TO WORK WITH AND THROUGH A MYRIAD OF AGENCIES AND ORGANIZATIONS. OVER THE PAST 7 YEARS, PARENTSCAN HAS DEVELOPED RECIPROCAL PROFESSIONAL RELATIONSHIPS WITH OVER 10 LOCAL AGENCIES THAT DIRECTLY SERVE CHILDREN WITH DISABILITIES, TO ENHANCE THEIR CHILD-FOCUSED SERVICES WITH OUR PARENT-FOCUSED SERVICES TO ENSURE THAT THE ENTIRE FAMILY'S NEEDS ARE MET. THEY INCLUDE: 1) NAPA INFANT PROGRAM AND 2) NORTH BAY REGIONAL CENTER SERVING INFANTS AND TODDLERS RECEIVING EARLY INTERVENTION SERVICES, 3) CA CHILDREN'S SERVICES, 4) PEDIATRICIANS, 5) HOSPITALS AND 6) OTHER LOCAL HEALTH PROVIDERS AND THERAPISTS 7) CHILD WELFARE, 8) MENTAL HEALTH WRAPAROUND AND 9) MENTAL HEALTH SERVICES ACT'S CHILDREN'S FULL SERVICE PARTNERSHIP TEAM. PARENTSCAN ALSO MEETS MONTHLY WITH 10) SPECIAL EDUCATION STAFF ACROSS THE COUNTY TO ENSURE THAT PARENTS ARE VALUED AS ACTIVE MEMBERS OF THEIR CHILD'S EDUCATIONAL TEAM.

11. **DESCRIBE THE TYPES OF SERVICES PROVIDED, HOW OFTEN THEY ARE PROVIDED , AND WHAT ARE THE QUALIFICATIONS OF THE PROVIDERS?**
PARENTSCAN IS A FAMILY RESOURCE CENTER WITH A SPECIALIZED TARGET POPULATION, SERVING **ONLY** FAMILIES OF CHILDREN WITH DISABILITIES AND SPECIAL HEALTHCARE NEEDS. WE ASSIST FAMILIES AS FREQUENTLY AS IS NEEDED. EACH STAFF ADVOCATE IS HIRED AND TRAINED IN ACCORDANCE TO RESEARCHED BEST PRACTICES. 100% OF PARENTSCAN DIRECT SERVICE STAFF (ADVOCATES) ARE PARENTS WHO HAVE THE PERSONAL EXPERIENCE OF RAISING THEIR OWN CHILD WITH SPECIAL NEEDS. PARENTSCAN HIRES ALL DIRECT SERVICE EMPLOYEES BASED ON THEIR EXPERIENCE AND THEIR ABILITY TO CONNECT THROUGH A "PERCEIVED SAMENESS" TO CLIENT PARENTS. PARENTSCAN SCREENS FOR 7 KEY AREAS OF READINESS BEFORE HIRING A PARENT ADVOCATE. THOSE AREAS INCLUDE THE PROSPECTIVE SUPPORT PARENT'S LEVEL OF ACCEPTANCE OF THEIR CHILD, ABILITY TO COMMUNICATE AND WILLINGNESS TO SHARE THEIR STORY WITH OTHERS.

12. **ARE INDIVIDUAL GRIEVANCE PROCEDURES PROMINENTLY POSTED? ARE GRIEVANCE FORMS READILY AVAILABLE TO THE INDIVIDUAL? GRIEVANCES IN PAST YEAR (Y OR N) APPROXIMATE NUMBER OF GRIEVANCES? _0____**
NOT APPLICABLE. SERVICES PROVIDED ARE VOLUNTARY. STAFF MEMBERS ARE TRAINED ON AGENCY GRIEVANCE POLICY AND ARE GIVEN AS PART OF POLICY HANDBOOK UPON HIRING.

13. WHAT EFFORTS DOES THE PROGRAM MAKE TO INFORM AND INVOLVE FAMILY MEMBERS IN UNDERSTANDING THE SERIVCES PROVIDED TO LOVED ONES ?

THROUGH OUR PARENT EDUCATION AND PEER TO PEER SUPPORT PROGRAMS PARENTSCAN HIGHLIGHTS THE IMPORTANCE OF PARENTS WORKING IN PARTNERSHIP WITH THEIR CHILD'S PROVIDERS TO REACH INFORMED DECISIONS REGARDING TREATMENT AND SERVICES FOR THEIR CHILDREN. TRAININGS TOPICS INCLUDE ACCEPTANCE, COMMUNICATION AND ORGANIZATIONAL SKILLS, ADVOCACY AND SYSTEM NAVIGATION.

14. DO YOU HAVE OTHER ITEMS YOU WOULD LIKE THE MENTAL HEALTH BOARD TO KNOW ABOUT?

THROUGH MHSA FUNDING PARENTSCAN DOES OUTREACH THROUGHOUT THE COMMUNITY TO CONNECT/EDUCATE FAMILIES OF CHILDREN WITH BEHAVIORAL/MENTAL HEALTH NEEDS ABOUT/TO COMMUNITY SERVICES AVAILABLE, PRODUCES A QUARTERLY NEWSLETTER FOR FAMILIES/PROFESSIONALS, ADMINISTERS THE RESPITE AND FLEX FUNDS ACCOUNTS AND CONDUCTS A MONTHLY SUPPORT GROUP IN SPANISH FOR FAMILIES WHO HAVE A CHILD WITH BEHAVIORAL/MENTAL HEALTH NEEDS. ALTHOUGH FUNDING FOR THE PARENT PARTNER ROLE ON THE COUNTY'S CHILDREN'S FULL PARTNERSHIP TEAM WAS DISCONTINUED, WE CONTINUE TO PROVIDE SERVICES TO THOSE FAMILIES AT THE TEAMS REQUEST AT EDUCATIONAL MEETINGS.

Approved 06/2011

NAPA COUNTY MENTAL HEALTH BOARD
FACILITY/PROGRAM OBSERVATION REPORT

BY: Linda Mallett & Tracey Stuart
Board Member Names

This Report Is Based On A Personal Visit From One Or More Members Of The Napa County Mental Health Board

DATE OF SITE VISIT: APRIL 17, 2014

PROGRAM/FACILITY NAME: PARENT-CHILD ADVOCACY NETWORK, DBA PARENTSCAN

LOCATION: NAPA
STREET ADDRESS: 1909 JEFFERSON ST.

PROGRAM SUPERVISOR/CONTACT
(NAME & PHONE #): LISA GOMEZ, PROGRAM MANAGER, 253-7444 EXT. 110
MARLENA GARCIA, EXECUTIVE DIRECTOR, 253-7444, EXT. 102

OBSERVATIONS

1. HOW DOES THE STAFF INTERACT WITH INDIVIDUALS? FOR EXAMPLE, DOES THE STAFF APPEAR COMPASSIONATE, PATIENT, CARING, RUSHED, INDIFFERENT OR PERFUNCTORY?

   WE DID NOT OBSERVE STAFF INTERACTING WITH CLIENTS, ALTHOUGH THERE WAS A GRANDPARENTS GROUP MEETING WHILE WE WERE THERE. STAFF ARE ALSO PARENTS WHO HAVE CHILDREN WITH "SPECIAL NEEDS", SO THEY ARE BETTER ABLE TO RELATE TO THE PARENTS, PROVIDE EMOTIONAL SUPPORT, AND UNDERSTAND THEIR DIFFICULTIES. PARENT PARTNER'S (STAFF) GOALS ARE TO PROVIDE PEER TO PEER SUPPORT. THEY ARE NOT THERE TO JUDGE THE PARENTS FOR THEIR CHOICES, OR TO COERCE THE PARENTS INTO FOLLOWING A COURSE OF ACTION THAT IS BEING PUSHED BY OTHERS (CLINICIANS).

   PARENTSCAN FOLLOWS GUIDELINES PROVIDED BY THE NATIONAL FEDERATION OF FAMILIES FOR CHILD MENTAL HEALTH. PARENT PARTNERS RECEIVE TRAINING FOLLOWING A SPECIFIC CURRICULUM AND ARE CERTIFIED THROUGH THE STATE, BY THE UNITED ADVOCATES FOR CHILDREN AND FAMILIES.

   THEY HAVE OCCUPIED THIS OFFICE SPACE FOR THREE YEARS, AND IT IS COLORFUL AND WELCOMING. THERE IS A PRIVATE AREA FOR INTAKE MEETINGS, WITH A WELCOMING PLAY AREA FOR CHILDREN. RESOURCES, SUCH AS A LIBRARY AND PAMPHLETS ARE DISPLAYED AS A RESOURCE FOR FAMILIES.

2. What Are The Typical Treatment Goals For Individuals In This Program? How Often Are These Achieved?

   The goals are to ensure the parent is educated and informed about their child's issues, knowledgeable about how to access services for their children, and able to advocate for their child.

   To measure success, parents may complete a survey that asks if they feel better about their ability to achieve the above goals.

3. What Are Two Or Three Obstacles Your Program, Staff, And Individuals Face Which May Make It Difficult To Achieve These Goals?

   One obstacle is a parents unwillingness to accept their child's diagnosis. It is hard to help them through all the associated issues, if they aren't ready to accept the facts.

   A huge issue is when a child turns 18. Very often a child's issues are under control when living with their parents, but once they assert their adult independence they can start having significant problems. The parents are left feeling helpless and frustrated.

4. How Does Your Program Involve Individuals In Their Treatment Plan Development?

   There is no real treatment plan. Parents are interviewed about their children, as well as other factors that might be making it difficult for parents to cope. Other issues may involve employment, housing, immigration and finances.

   The parent is then pared up with a Parent Partner who has experienced many of the same issues. That parent partner then helps educate the parent and assist them where they can on services available and advocacy. The partners can't force a parent into an action, and they support the parent in their decisions.

5. Does Your Agency's Board Of Directors Include Any Mental Health Consumer Members? **Yes** / No

   50% of the board must be parents of a child with special needs. All board members contribute financially, in some way to the organization.

6. How Do You Know When An Individual No Longer Needs The Services You Provide?

   Parents make the decision when they no longer need services. Many parents just need the initial help, others stay for many years, and some come and go as problems arise (usually during transition periods-such as a new school or becoming adult).

7. How Many People Seeking Services Did Your Organization Turn Away Because The Person Did Not Qualify For The Program? (Over The Course Of A Year)

   They didn't turn away anyone.

In 2013, they helped apx. 1,000 families. Most years they see about 500 new/first time families, and another 500 families who are carried over from prior year(s).

8. Is There Any Other Aspect Of The Program You'd Like To Share With Us Today?

They are required to provide a venue where they present information to the community about the services available. Last year, in addition to advertising the services available, they focused on stigma. This year, their community outreach will be at the Napa Library on May 3rd. In addition to providing information about all resources available, they will focus on QPR for "Suicide and Self Harm Prevention" (flyer attached).

They have a fundraising event on May 17th. The event. "Circle the Wagons for ParentsCAN" sounds like a lot of fun and doesn't cost too much (flyer attached)!

SITE VISIT SUMMARY

MENTAL HEALTH BOARD MEMBERS TO COMPLETE THESE QUESTIONS AFTER VISITNG THE PROGRAM

1. WHAT IS YOUR OVERALL IMPRESSION OF THE FACILITY/PROGRAM, INCLUDING STRENGTHS AND LIMITATIONS?

   MOST AGENCIES FOCUS ON THE CHILD WHO HAS THE ISSUES, AND VERY FEW OFFER SERVICES THAT FOCUS ON THE PARENTS. PARENTSCAN'S FOCUS IS ON THE PARENTS, WHO NEED TO BE EMOTIONALLY HEALTHY IF THEY ARE TO SUPPORT THEIR CHILDREN.

   THE CONTRACT REQUIRES THAT PARENTSCAN SPECIFICALLY TARGET LATINO FAMILIES, AND PROVIDE SUPPORT GROUPS FOR SPANISH SPEAKING FAMILIES. ABOUT 60% OF THE FAMILIES THEY SERVE ARE LATINO. THEY OFFER SPANISH LANGUAGE SUPPORT GROUPS EVERY MONTH AND HAVE 5-12 PARENTS WHO PARTICIPATE. A NEWSLETTER IN SPANISH GOES OUT QUARTERLY.

   A LARGE PERCENTAGE OF THEIR FAMILIES ARE LOW INCOME WITH LIMITED OPTIONS AND MANY ADDITIONAL STRESSORS.

   PARENTSCAN HAS 8 PROGRAMS. EACH PROGRAM IS ASSIGNED TWO CERTIFIED PARENT PARTNERS, AND ONE OF THE TWO PARTNERS MUST BE SPANISH SPEAKING. 5 OF THE PARTNERS ARE TRAINED IN MENTAL HEALTH ISSUES.

   FAMILIES WITH MENTAL HEALTH ISSUES, DIAGNOSED OR UNDIAGNOSED, ACCOUNT FOR ABOUT 35% OF THEIR TOTAL LOAD.

   THIS PROGRAM FOCUSES ON THE PARENTS AND THEIR CHOICES. IT DOES NOT AUTOMATICALLY ENCOURAGE THE PARENTS TO FOLLOW THE RECOMMENDATIONS OF THE PROFESSIONAL (CLINICIAN, PHYSICIAN, ETC), IF THAT IS NOT WHAT THE PARENTS CHOOSE.

   IF A PARENT GETS HELP WHEN THE CHILD IS YOUNG, IT SEEMS TO LESSEN THE NEEDS IN LATER YEARS. FOR EXAMPLE, IF A CHILD'S DIFFICULTY SPEAKING IS ADDRESSED EARLY, THEY MIGHT NOT NEED TO BE IN SPECIAL EDUCATION WHEN THEY START SCHOOL.

   WE BELIEVE THIS IS A VALUABLE AND NEEDED PROGRAM; HELPING THE PARENTS HELPS THE CHILDREN. THE STAFF WERE WELCOMING, KNOWLEDGEABLE AND POSITIVE ABOUT THEIR MISSION.

2. ANY RECOMMENDATIONS FOR THIS FACILITY OR PROGRAM FOR THE MENTAL HEALTH BOARD TO CONSIDER?

   THEY SAY THEY HAVE A POSITIVE RELATIONSHIP WITH THE COUNTY AND ON AN INDIVIDUAL CASE BASIS THINGS GO WELL. THEY WOULD LIKE TO SEE THE COUNTY REFER MORE PARENTS FROM THEIR OTHER PROGRAMS TO PARENTSCAN. MOST OF THEIR REFERRALS COME FROM OTHER PARENTS, PEDIATRICIANS, AND THE SCHOOLS.

   IN 2013/2014, THE PARENT PARTNER ROLE, THROUGH PARENTSCAN, IN THE CHILDREN'S FULL SERVICE PARTNERSHIP WAS CUT. THIS ROLE IS NOW FILLED BY COUNTY STAFF. THIS CHANGE SHOULD BE MONITORED TO ENSURE THAT THE TRUE ROLE AS ADVOCATE FOR WHAT THE PARENTS WANT IS BEING RESPECTED AND THAT IT DOESN'T CHANGE INTO A POSITION THAT HELPS PUSH THE AGENDA OF OTHERS, RATHER THAN OF THE PARENTS.