



Executive Summary

Tri-City Mental Health Authority

In 1960, Tri-City Mental Health Authority (TCMHA) was formed under a Joint Powers Authority adopted by the cities of Claremont, La Verne, and Pomona. Through this collaborative effort, TCMHA has been the designated mental health authority for a population, which exceeds 219,000. In FY 2017-18, TCMHA served approximately 1,826 unduplicated clients who were enrolled in formal services. TCMHA currently has 167 full-time and 16 part-time employees and an annual operating budget of \$22.4 million dollars.

Mental Health Services Act

Passed by California voters in November 2004, Proposition 63, also known as the Mental Health Services Act (MHSA), created a dedicated 1% increase in income taxes on personal income over \$1 million to be used for community mental health services.

Community Planning Process

To arrive at this Annual Update, TCMHA engaged stakeholders in an eight-month program review, evaluation, and planning process which include multiple stakeholder meetings and program-focused workgroups.

MHSA Plans/Components

To access MHSA funds, Tri-City Mental Health Authority engaged a broad range of stakeholders and prepare five substantive plans. This executive summary provides a brief overview of the MHSA programs funded through the Mental Health Services Act, based on data collected during FY 2017-18.

Community Services and Supports (CSS approved in 2009) This plan provides intensive treatment and transition services for people who experience serious and persistent mental illness or severe emotional disturbances or who are at risk of SMI/SED.

Full Service Partnerships (FSPs): Total Served in FY 2017-18: 482

FY 2017-18 saw an increase in the number of TAY (from 119 to 139 in FY 2017-18) and Older Adults (from 26 to 35 in FY 2017-18) served through Full Service Partnerships. The emphasis is now on reconnecting or building clients' support system to improve long-term recovery and success.

Community Navigators: Total Served in FY 2017-18: 1,950

Community Navigators focus on collaboration with Tri-City's Intensive Outreach and Engagement Team, local shelters, and the new homeless service center, to identify housing options within the three cities. FY 2017-18 saw a slight decrease in the number of unique individuals served. However, Community Navigators continue to experience challenges with engaging the Hispanic and Asian communities and have made these important populations a priority for this next fiscal year.



Executive Summary

Wellness Center: Total Served in FY 2017-18: 2,379

The WC has increased their engagement of older adults. The total number of unique individuals served as well as the number of attendees for Wellness Center events remain steady with a slight increase in FY 2017-18. There was also an increase in the number of individuals securing employment going from 105 (FY 2016-17) to 121 (FY 2017-18).

Supplemental Crisis Services: Total Served in FY 2017-18: 653

FY 2017-18 saw an increase in the number of Supplemental Crisis calls going from 54 (FY 2016-17) to 110 (FY 2017-18). This growth is a result of increased outreach and engagement of community partners to create a heightened awareness of this valuable service.

Intensive Outreach and Engagement Team: Total Served in FY 2017-18: 473

A *Bridging* component was added which helped to ensure that participants enrolled into the Adult FSP and CTay programs stays with the IOET for the first 30-45 days of treatment, resulting in a decrease in dropout rate within the first 30 days of enrollment.

Field Capable Clinical Services for Older Adults: Total Served in FY 2017-18: 22

The total number served remained the same for FY 2017-18 at 22 with the majority of participants being female and residing in the city of Pomona. However, this program experienced an increase in awareness of benefits of services with an upsurge in interest attributed to efforts in promoting this program throughout the community.

Permanent Supportive Housing: 64 Units Completed

This program experienced an increase in individuals who were successfully able to secure housing going from 17 to 49 individuals in FY 2017-18.

Prevention and Early Intervention (PEI approved in 2010) These programs focus on early intervention and prevention services in addition to anti-stigma efforts.

Community Wellbeing Program: Total Served in FY 2017-18: 1,252

The number of community grantees selected for FY 2017-18 remained the same at 18. In addition, the estimated number of community members represented were very similar as last fiscal year with 3,320 for FY 2016-17 and 3,346 for FY 2017-18. Survey results indicate grantees reported an improvement in their ability to work together.

Community Mental Health Trainers: Total Served in FY 2017-18: 213 (MHFA) 92 (CMH)

FY 2017-18 saw a continued decrease in the number of Mental Health First Aid trainings from 30 (FY 2016-17) to 16 (FY 2017-18). Due to multiple factors, this program was retired in June 2018.



Executive Summary

Stigma Reduction/Suicide Prevention: Total Served in FY 2017-18: 209

The number of presentations remained constant for 2017-18 with a total of 48. Four art showcases held; however, the number of artists and pieces nearly doubled in FY 17-18 going from 40 artists to 73. In addition, the number of pieces increased from 53 to 110 in the last fiscal year. Attendees at stigma reduction events reported that they felt motivated to participate in stigma reduction efforts and that their belief that people with mental illness can recover had increased as a result of the training.

Older Adult Wellbeing/Transition Age Youth Wellbeing (Peer Mentor and WC Programs) Total Served in FY 2017-18: 74 Mentees

Thirty-two mentors were maintained throughout the program year. Of these 32 mentors, 19 self-identified with lived experience, which is a significant increase from the previous year with only 12 self-identified. The program also sustains support groups focusing on two important underserved populations: older adults and LGBTQ.

Family Wellbeing: Total Served in FY 2017-18: 1,122

The Family Wellbeing groups were well attended with participants reporting a high level of satisfaction with the Family Wellbeing program, in addition to improved relationships. Twenty campers between the ages of 7 and 12 attended the Wellness Center's annual summer camp which included service learners from the WET program who are interested in working with children in their future careers.

Parents and Teachers as Allies (NAMI): Total Served in FY 2017-18: 110

Effective January 1, 2019, NAMI National will no longer support the NAMI program, Parents and Teachers as Allies. This program has been replaced with NAMI Ending the Silence for school staff and Ending the Silence for Families. The current NAMI funding allocation of \$35,500.00 annually shall remain the same and transfer to the replacement program.

Housing Stability Program: Total Served in FY 2017-18: 73 Landlords

FY 2017-18 saw an increase in the number of new property managers/companies attending the monthly Landlord Luncheons hosted by the Housing Department. This event was well received and 93% of attendees finding the information useful.

Therapeutic Community Gardening (TCG): Total Served in FY 2017-18: 168

There was an increase in garden participants from FY 16-17 (106) to FY 17-18 (168). This increase is attributed to incorporating "Eight Dimensions of Wellness"; a concept referenced from SAMHSA in their program. In addition, collaboration with Pomona Valley Hospital Medical Center (PVHMC) resulted in providing a Mindfulness session for doctors in the Family Medicine Residency Program.



Executive Summary

Innovation (INN approved in 2012) Innovation consists of short-term projects, one to five years, that explore novel efforts to strengthen aspects of the mental health system.

Cognitive Remediation Therapy (CRT): During FY 2017-18, the CRT project completed its final round of programming. Two cohorts were conducted during the reporting year and each cohort demonstrated improvement on various criteria included in the project.

Tech Suite Project: Tri-City joined with 14 other counties to become part of the Innovation Tech Suite Collaborative. Through the use of computers, tablets and smartphones, community members will be able to access a suite of technology-based mental health services.

Workforce Education and Training (WET approved in 2012) The WET efforts focus on strengthening and supporting existing staff and caregivers through trainings while also focusing on attracting new staff and volunteers to ensure future mental health personnel.

By focusing on engaging and motivating Tri-City staff to increase their knowledge base, there was a significant increase in the number of Relias courses, (1,525 courses in fiscal year 2017-2018) completed by staff. In addition, the service learners (volunteers) logged over 3,500 service hours in FY 2017-18.

Capital Facilities and Technology Needs (CFTN approved in 2013) This plan focuses on improvements to facilities, infrastructure and technology of the local mental health system.

The Therapeutic Community Garden located adjacent to Tri-City's adult clinic, is still a primary goal for completion. Plans are currently underway to begin construction of a new parking lot which will be the first step in this renovation project.

Detail Program and Revenue Information

A complete description of all MHSA programs, in addition to the MHSA Revenue and Expenditure plan, is available in the MHSA Annual Update for FY 2019-20 located at www.tricitymhs.org.