

MAXIMIZING MENTAL HEALTH PARTNERSHIPS

Doreen Bradshaw, Executive Director
Shasta Consortium of Community Health Centers

A stylized silhouette of a mountain range in shades of teal, located at the bottom right of the slide.

SHASTA COUNTY MENTAL HEALTH REDESIGN COMMUNITY MOBILIZATION

- ◆ Catalyst-Closing of in-patient facility in June 2004
- ◆ Community members and providers express their concerns regarding emergency psychiatric care
- ◆ Key stakeholders group convened and group agrees on redesign plan to submit to California Endowment
- ◆ TCE challenges Shasta County to come up with match and 15 local agencies invest in project

COMMUNITY INVESTORS

- ◆ City of Anderson
- ◆ Hill Country Community Clinic
- ◆ Mental Health Services Act
- ◆ Mayers Memorial Hospital
- ◆ Mercy Medical Center
- ◆ Mountain Valleys Health Centers
- ◆ North Valley Medical Association
- ◆ Shasta Community Health Center
- ◆ Shasta Consortium
- ◆ Shasta County Board of Supervisors
- ◆ Shasta County Administrative Office
- ◆ Shasta County Public Health
- ◆ Shasta Regional Community Foundation
- ◆ Shasta Regional Medical Center
- ◆ Shingletown Medical Center

MHARC STEERING COMMITTEE LAUNCHED FEBRUARY 2006

- ◆ Board of Supervisors
- ◆ Business Community
- ◆ Community Members
- ◆ Consumers
- ◆ Elpida
- ◆ Family Members
- ◆ First 5 Shasta
- ◆ Good News Rescue Mission
- ◆ Hill Country Community Clinic
- ◆ Mayers Memorial Hospital
- ◆ Mercy Medical Center
- ◆ Mental Health Providers
- ◆ NAMI
- ◆ North Valley Medical Association
- ◆ Opportunity Center
- ◆ Primary Care Physicians
- ◆ Shasta Community Health Center
- ◆ Shasta County
 - Alcohol and Drug Programs
 - Mental Health
 - Sheriff's Department
- ◆ Shasta County Mental Health Board
- ◆ Shasta County Office of Education
- ◆ Shasta Regional Medical Center
- ◆ Veteran's Administration









MHARC WORKGROUPS

- ◆ Access
- ◆ Community Advisory Council
- ◆ Emergency Psychiatric Care
- ◆ Finance
- ◆ Prevention and Early Intervention
- ◆ Rural
- ◆ Substance Abuse

MHARC ACCOMPLISHMENTS

- ◆ Collaboration and Multiple Partnerships
- ◆ Adoption of Standards of Recovery
- ◆ 23 Hour Crisis Stabilization Service
- ◆ Funding for Detox Services (Support to Empire Recovery)
- ◆ Funding for Integrated Primary Behavioral Health Model at FQHCs
- ◆ Rural Community Mental Health (Partnership between MHARC and Prop 63 efforts to increase transportation and case management services)

MHARC BLUEPRINT FOR ACTION

-  Ongoing collaborative to improve Shasta County's community mental health system.
-  Policy and advocacy
-  More community support services
-  More focus on prevention and early intervention
-  Sustainable workforce and ongoing training
-  Improved access
-  Responsive emergency psychiatric care system
-  Continuity of care for dually diagnosed patients

MHARC CHALLENGES

- ◆ Moving towards the vision
- ◆ Blending of providers and community members
- ◆ Agreement on system improvements
- ◆ Regulations/Culture of Mental Health Services
- ◆ Standardization of data
- ◆ Lack of coordinated technology systems to track patients

MHARC SUCCESSES

- ◆ Increased attention to mental health in our community
- ◆ Community buy-in demonstrated by money and participation
- ◆ We have people engaged in community wide planning for Shasta's community mental health system
- ◆ Leveraging of existing resources

MHARC OPPORTUNITIES

- ◆ Combination of all efforts to improve our community's mental health
- ◆ Meaningful participation by consumers and families
- ◆ Fully integrated MH services and increased access to medical home
- ◆ County HHS Agency
- ◆ Prop 63
- ◆ Increased MH services to rural communities

MORE INFORMATION?

Doreen Bradshaw

[530-247-1560](tel:530-247-1560)/dbradshaw@shastaconsortium.org