State Departments Mental Health Services Act (MHSA) Progress Report Fiscal Year (FY) 2009-10

Reporting Period: July 1, 2009 - December 31, 2009

DEVELOPMENTAL SERVICES (DDS)

1. Identify 2-3 highlights for this reporting period

- San Gabriel/Pomona Regional Center (SG/PRC) completed Year 1 of their training program. San Andreas Regional Center (SARC) began Year 1 of their training program.
- San Diego Regional Center (SDRC) convened two Regional Planning Summits as of December 31, 2009.
- DDS continues to collaborate with agencies to gather relevant needs assessment data from many sources concerning consumers at risk and the costs of criminal justice involvement.
- 2. Please list all the goals/objectives/activities/deliverables for this reporting period as listed in the MHSA Work Plan and provide an update.

See the attached

State Departments MHSA Progress Report Fiscal Year (FY) 2009-10

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~Goal 1 – Improve care for consumers with a dual diagnosis (developmental disability and mental illness) by training direct service providers (DSPs), families and consumers *Goal 2 - Expand community capacity - best practice training for clinicians & other professionals

Activity 1 -

Regional Center (RC) MHSA Training Projects

Major activities/ deliverables:	Due Date	Status on achieving objective, activities and deliverables (insert links)	Identify outstanding policy and program issues	Identify activities being coordinated with the local mental health system and other partners	Upcoming events/opportunities/ resources anticipated during the next six months
a. Innovative training projects for consumers, families, direct service providers (DSPs), clinicians, and other professionals will focus on early intervention and	Fiscal Years 2008-2011	The following six projects, funded by MHSA through DDS, relate to this deliverable.			
treatment.		~*Golden Gate Regional Center (GGRC) is developing and implementing an innovative training focusing on infant mental health. The interagency collaborative has been meeting regularly. The interagency collaborative has developed and distributed an electronic survey to gain an understanding of what participants would like to learn. The curriculum committee is currently developing the training program based on the survey results. Activities Phase: Development	n/a	GGRC is contracting with the Easter Seals Northern California and Jewish Family and Children's Services. The interagency collaboration team consists of First Five, Early Head Start/Head Start, Family Resource Centers, County Offices of Education, Community Mental Health/Behavioral Services. The interagency collaborative will consult with professionals affiliated with the Parent Infant Program at the University of California, San Francisco and the Childhood Mental Health Program at Children's Hospital and Research Center in Oakland, California.	Trainings will take place on April 30, May 3, and May 10, 2010, at the Fort Mason Center in San Francisco, California. GGRC anticipates that 250 to 300 individuals will participate in all three training events. Based on participant feedback from the aforementioned trainings, intensive small group and individual on-site consultations will occur in FY 2010-11. DDS will provide dates to Department of Mental Health (DMH) as soon as they become available.

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a. Innovative training projects for consumers, families, direct service providers (DSPs), clinicians, and other professionals will focus on early intervention and treatment. (cont.)	Fiscal Years 2008-2011	~*Harbor Regional Center (HRC) is conducting a project entitled <i>Promoting Optimal Service Delivery to the Dually Diagnosed Individual and Cross-Systems Collaboration.</i> The interagency collaborative has met twice and will continue to meet until all tasks and deliverables have been completed. After reviewing the training schedule, the interagency collaborative eliminated one of the panel discussions and added a third, all-day workshop for DMH service providers on adaptations of <i>Trauma Focused Therapy</i> for persons with intellectual disabilities. Activities Phase: Development	n/a	HRC is contracting with Ms. Paula Luna, consultant, to develop and coordinate the conference and the two concurrent one-day cross-training workshops. The interagency collaboration team consists of the Lanterman Regional Center, Los Angeles County Department of Mental Health, and the Mental Health Administrative SPA 8.	The trainings will take place on October 14 and 15, 2010, at the Long Beach Hyatt Regency. HRC anticipates that 500 individuals will participate in this two-day training.
	Fiscal Years 2008-2011	~*SARC is offering the Santa Clara County Infant Family Early Childhood Mental Health Certificate Program. As of December 31, 2009, three trainings have occurred. Surveys were distributed to participants and their supervisors following each training. The planning committee is meeting to assess the program outcomes and to begin planning for Year 2. The committee is using the survey results in the planning process. Activities Phase: Implementation	n/a	SARC is contracting with Kidango, Inc. The interagency collaboration team consists of the Santa Clara County Office of Education, First 5, and Behavioral Health Care.	Year 1 of the Santa Clara County Infant Family Early Childhood Mental Health Certificate Program began September 24, 2009, and continues through June 24, 2010. There is a group of 25 RC staff, service providers, clinicians and other professionals; and 24 supervisors participating in the program. SARC will convene Year 2 of the training program in FY 2010-11. There will be a group of 25 RC staff, service providers, clinicians and other professionals participating in Year 2, as well. DDS will provide dates to DMH as soon as they become available.

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a. Innovative training projects for consumers, families, direct service providers (DSPs), clinicians, and other professionals will focus on early intervention and treatment. (cont.)	Fiscal Years 2008-2011	*SG/PRC is presenting Best Practices for Medication, Treatment, and Monitoring of Individuals with Developmental Disabilities and Mental Illness. Twelve Los Angeles County licensed Psychiatrists participated in this training. Events were held September 23, October 14, and November 18, 2009. The interagency collaborative revised the curriculum for each training based on feedback from the psychiatrists. The interagency collaborative will continue to improve the format for future training. Training materials and updates can be found on line at www.mhsagrants.com . Activities Phase: Implementation	n/a	SG/PRC is contracting with Alma Family Services and College Hospital. The interagency collaboration team consists of the Los Angeles County Department of Mental Health, Department of Children and Family Services, Department of Probation, Juvenile Camps, Juvenile Halls, Specialized Foster Care, and direct and county-contracted mental health clinics.	SG/PRC will begin Year 2 of Best Practices for Medication, Treatment, and Monitoring of Individuals with Developmental Disabilities and Mental Illness. The trainings are scheduled for March 10, June 9, & September 8, 2010. The morning session will be held at College Hospital's Developmental Disabilities/Mental Illness Adult and Youth units. The afternoon session will be held at SG/PRC. Currently, there are 12 psychiatrists registered for Year 2.

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a. Innovative training projects for consumers, families, direct service providers (DSPs), clinicians, and other professionals will focus on early intervention and treatment. (cont.)	Fiscal Years 2008-2011	~*SG/PRC –The Infant Project will provide extensive training focusing on the best strategies for working with and supporting the children and families of consumers at risk for abuse and trauma. Contracts have been signed, securing the two presenters developing and presenting the curriculum for the training. Training locations and dates have also been secured. Activities Phase: Development	n/a	SG/PRC is contracting with Dr. Robert Fletcher and Dr. Karen Finello, responsible for developing and presenting curriculum for the trainings. The interagency collaboration team consist of Dr. Carol Tomblin, Dr. Stephen Mouton, and Margarita Salazar with Parent's Place Family Resource Center.	The training for DSPs who work with infants and toddlers will be held on May 14, 2010, at the SG/PRC. The training for community clinicians and RC service coordinators will be held on October 7, 2010, at the Embassy Suites in Arcadia, California. The training for direct residential service providers who work with individuals with developmental disabilities and co-occurring mental health diagnoses will be held on October 28, 2010, at SG/PRC. SG/PRC anticipates 200 individuals will participate in each training event.

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a. Innovative training projects for consumers, families, direct service providers (DSPs), clinicians, and other professionals will focus on early intervention and treatment. (cont.)	Fiscal Years 2008-2011	~*Westside Regional (WRC) is convening Los Angeles Mental Health and Developmental Disabilities Education (LA MHaDDe). The project's interagency collaborative has created four subcommittees (Needs Assessment, Recruitment, Curricula, and Evaluation). All four subcommittees are charged with executing the goals and objectives of the LA MHaDDe. A short needs assessment survey was developed to assist the interagency collaborative learn about the target audience. Additionally, a task force (consisting of 19 representatives from each stage of the service delivery system) was created to oversee the activities of the four subcommittees. The task force will also develop and implement the final area-wide southern conference. Activities Phase: Development	n/a	The interagency collaboration team consists of the North Los Angeles County Regional Center; Los Angeles County Department of Mental Health; University Center for Excellence in Developmental Disabilities at the University of Southern California; and Robert Fletcher, National Association of the Dually Diagnosed. There is also a team of nurses, allied health professionals, community psychologists, and client advocates. Representatives from Didi Hirsch Community Mental Health Center, Family Resource and Empowerment Center, and the Los Angeles Chapter of the National Alliance on Mental Illness are also part of the collaborative.	The first round of cohort-based trainings will take place in May 2010. The second round of cohort-based trainings will take place in October 2010. The final area-wide southern conference is being planned for 2011. DDS will provide dates to as DMH as soon as they become available.

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b. Projects are being implemented by RCs and monitored by DDS.	Fiscal Years 2008-2011	DDS staff is working with the RCs and their contractors to streamline the RC MHSA Projects invoice process. A revised MHSA Invoice Form with detailed instructions was e-mailed to the RCs. DDS continues to receive calls from the RCs regarding the invoice process. DDS will provide ongoing technical assistance. DDS staff has received and is reviewing the first MHSA Progress Reports (due December 31, 2009). DDS is contacting the RCs to ask questions and clarify information regarding project status. DDS will use the information in the Progress Reports to provide updates to DMH. DDS has worked with DMH to clarify program expenditure questions received from the RCs.	n/a	n/a	n/a

Activity 2 Dissemination of Training	and Support M	otorials			
Major activities/deliverables:	Due Date	Status on achieving objective, activities and deliverables (insert links)	Identify outstanding policy and program issues	Identify activities being coordinated with the local mental health system and other partners	Upcoming events/opportunities/ resources anticipated during the next six months
a. A series of training and support materials will be developed by RCs for the training events offered in regional locations statewide. The training and support materials will be available on-line for DSPs, families and consumers. b. DDS will post	Development of materials has begun and will continue through FY 2010-11, as scheduled.	SARC has developed their training and support materials for the three events already convened. SG/PRC has developed their training and support materials for their training events. Materials will be added and revised based on feedback from the psychiatrists. DDS staff is contacting these two RCs to collect the training and support materials. DDS will collect other RCs training materials, as they become available. DDS is working with our Information Systems	n/a n/a	n/a	n/a
training curriculum and other materials developed by RCs so that consumers with a dual diagnosis, families, RCs, and others can access training materials.	2011, as RC curricula and materials are finalized.	Division (ISD) to coordinate the posting of the training curriculum and other materials developed by the RCs.			
c. DDS will include the Family Resource Center Network of California (FRCNCA) in the distribution of support materials for consumers and families.	Ongoing for the 3-year funding period.	DDS is gathering and organizing the support materials developed by the RCs for distribution to the FRCNCA.	n/a	DDS is collaborating with the FRCNCA to accomplish this activity.	n/a

Activity 3 Track MHSA Training Project deliverables								
Major activities/deliverables:	Due Date	Status on achieving objective, activities and deliverables (insert links)	Identify outstanding policy and program issues	Identify activities being coordinated with the local mental health system and other partners	Upcoming events/opportunities/ resources anticipated during the next six months			
Track MHSA Training Project deliverables	Winter 2009	DDS staff has completed the MHSA Project Deliverable Status Worksheet to track the training project deliverables.	n/a	n/a	n/a			
	Ongoing	As the Progress Reports are submitted, DDS is utilizing the worksheets to track completion of the deliverables.						

Goal 3 – Address oppor	Goal 3 – Address opportunities and obstacles towards improving the delivery systems at the local level.							
Activity 1 RC MHSA Training Proje	cts							
Major activities/deliverables:	Due Date	Status on achieving objective, activities and deliverables (insert links)	Identify outstanding policy and program issues	Identify activities being coordinated with the local mental health system and other partners	Upcoming events/opportunities/ resources anticipated during the next six months			
Regional Planning Events								
a. Regional Planning Summits will focus on early intervention and treatment for children and families.	Fiscal Years 2008-2011	SDRC is convening Regional Planning Summits statewide to promote and facilitate collaboration between RCs and county mental health programs in meeting the needs of individuals with developmental disabilities and mental illness. Two Regional Planning Summits have been held as of December 31, 2009. The first Summit was held in Sacramento on August 6, 2009. Approximately 100 staff representing the counties of Alpine, Amador, Calaveras, Colusa, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Sierra, Stanislaus, Sutter, Tuolumne, Yolo, and Yuba counties participated, as well as staff from Alta California and Valley Mountain RCs. The second Regional Planning Summit was held in Redding on October 28, 2009. Approximately 85 staff representing the counties of Butte, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Plumas, Shasta, Siskiyou, Tehama, and Trinity participated, as well as staff from Far Northern and Redwood Coast RCs. Activities Phase: Implementation	n/a	SDRC is contracting with the Association of Regional Center Agencies (ARCA). The interagency collaboration team consists of the Mental Health/Developmental Disabilities (MH/DD) Collaborative, which includes representatives from DMH, DDS, ARCA, the California Mental Health Directors' Association (CMHDA), California Statewide Special Education Local Plan Area (SELPA) Organization, county mental health programs, RCs, the State Council on Developmental Disabilities, The Arc, and service providers specializing in dual diagnosis.	The third Regional Planning Summit will take place on February 18, 2010, in Emeryville, California. The target RCs are San Andreas Regional Center, Golden Gate Regional Center, Regional Center of the East Bay, and North Bay Regional Center. The twelve target counties include Alameda, Contra Costa, Marin, Monterey, Napa, San Benito, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, and Sonoma. Approximately 100 attendees will participate. Those in attendance will be individuals responsible for ensuring children and their families receive services from Mental Health Departments, RCs, SELPAs, Social Services, Child Protective Services, Probation, and First 5 Organizations.			

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b. Regional Planning Summits are being implemented via SDRC.	FY 2008-2011	DDS staff is working with SDRC and contractors to streamline the RC MHSA Projects invoice process. A revised MHSA Invoice Form with detailed instructions was e-mailed to the RC. DDS continues to receive calls from the RC regarding the invoice process. DDS will provide ongoing technical assistance. DDS staff has received and is reviewing the first MHSA Progress Report (due December 31, 2009). DDS is contacting SDRC to ask questions and clarify information regarding project status. DDS will use the information in the Progress Reports to provide updates to DMH. DDS has worked with DMH to clarify program expenditure questions received from SDRC.	n/a	n/a	n/a

<u>Activity 2</u> Dissemination of Training and Support Materials							
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a. A series of training and support materials will be developed by ARCA, the MH/DD Collaborative, and SDRC. The training and support materials will be offered in regional locations statewide and materials will be available on-line.	Development of materials has begun and will continue through FY 2010-11, as scheduled.	SDRC has developed the training and support materials for the first two Regional Planning Summits. DDS staff will collect the training and support materials from future Regional Planning Summits.	n/a	n/a	n/a		
b. DDS will post curriculum and materials on-line from the Regional Planning Summits so that consumers, families, professionals, and others can access training materials.	Through 2011, as RC curricula and materials are finalized.	DDS is working with our ISD to coordinate web posting of the curriculum and materials developed by SDRC in collaboration with ARCA and the MH/DD Collaborative.	n/a	n/a	n/a		

Activity 3
Mental Health/Developmental Disability Collaborative (MH/DD) Collaborative

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This group meets quarterly and provides an opportunity to address issues facing the service delivery	Quarterly	DDS staff are participating in the quarterly meetings. Topics include resource development for consumers with mental health issues.	n/a	The MH/DD Collaborative is providing guidance in the planning and development of the Regional Planning Summits.	The next MH/DD Collaborative meeting is February 3, 2010, in Sacramento.
systems for person with a dual diagnosis.		Previous MH/DD Collaborative meetings convened on June 3rd and October 21st, 2009. See the attached minutes from the June 3rd meeting. DDS will forward a copy of the October 21st minutes as soon as they are available.			

Activity 4 Track deliverables of MHSA funded Regional Planning Summits					
Winter 2009	DDS staff has completed the MHSA Project Deliverable Status Worksheet to track the deliverables of the Regional Planning Summits	n/a	n/a	n/a	
Ongoing	As the Progress Reports are submitted, DDS will use the worksheets to track completion of the deliverables.				

Activity 5 Needs Assessment

Major activities/deliverables:	Due Date	Status on achieving objective, activities and deliverables (insert links)	Identify outstanding policy and program issues	Identify activities being coordinated with the local mental health system and other partners	Upcoming events/opportunities/ resources anticipated during the next six months
The needs assessment was developed to improve the delivery systems at the local level for consumers with a dual diagnosis.	12/31/10	DDS provided an overall estimate to show the sizable population of consumers with dual diagnoses in California. As of December 2008, DDS data indicates that there are 239,918 active consumers served by the RCs and Developmental Centers (DCs).	n/a	DDS is working with MH/DD Collaborative, ARCA, RCs, and California Mental Health Departments (CMHD).	n/a
		As of January 7, 2008, DDS reported 11.9 percent of these consumers (20,033) had co-occurring mental disorders. This figure comes from the Client Developmental Evaluation Report, an instrument used to collect diagnostic and evaluation information on people with developmental disabilities.			
	12/31/10	DDS will identify a subset of DDS consumers at the DCs who account for the most readmissions and require the most intensive treatments and services.	n/a	n/a	Data will be requested from DDS' Developmental Centers Division (DCD) and reported in the December 31, 2010, MHSA Progress Report.
	12/31/10	DDS continues to collect information on consumers at RCs that require the most extensive services.	n/a	DDS is collaborating with ARCA, RCs, and the Mental Health Consultants.	Request data from RCs of active clients by age, gender, eligibility, category, legal classification, inpatient hospitalization stays, challenging behaviors, and mental health diagnosis for residents of RC funded psychiatric facilities. Trends across all RCs will be determined and reported in the January 31, 2010, MHSA Progress Report.

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5a. Identify consumers at risk (cont.);	12/31/10	Number of **Regional Resource Development Projects (RRDPs) referred for assessment is 175 (January – December 2009). Over 80 percent (144 consumers) had an Axis I diagnosis.	n/a	n/a	Data will continue to be collected and analyzed.
	12/31/10	The total number of active consumers incarcerated (Penal Facilities, California Youth Authority, and County Jails) is 177 (2008 Data).	n/a	DDS will collaborate with the Mental Health Consultants.	Data will be gathered from DDS' ISD showing the costs of consumers with dual diagnoses in the criminal justice system. Costs will be reported in the January 31, 2011, MHSA Progress Report.
	12/31/10	DDS will determine costs for consumers with an Axis I diagnosis. DDS has located data sets, within the Community Mental Health Services Block Grant 2009, offering data concerning criminal justice system involvement. DDS is developing a Data Use Agreement with DMH for access and use of the data in the Community Mental Health Services Block Grant.	n/a	DDS is working with the Research Program Specialist II and others from DMH to develop a Data Use Agreement and conduct data extraction.	After the Data Use Agreement has been signed by DDS and DMH, data will be extracted from the Community Mental Health Services Block Grant. Data will be analyzed and reported in the January 31, 2011, MHSA Progress Report.

^{**}The RRDPs are assigned to assist RCs in activities related to admissions to DCs, transition planning for community placement, deflection from DCs, and resource development for consumers.

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5b. Assess the need for inpatient diversion programs;	6/30/11	DDS has found data showing that California has a drastic shortage of inpatient psychiatric beds, compared to the national average, as well as a steadily increasing population.	See 5A	DDS is contacting the California Hospital Association to review information concerning inpatient facilities, inpatient and outpatient visits and emergency room visits for mental disorders, visits for people with developmental disabilities and co-occurring mental disorders, treatment services, and other relevant data variables and sources.	Data will be analyzed and reported in the July 31, 2011, MHSA Progress Report.
5c. Investigate the use of mobile urgent care teams;	6/30/11	DDS has identified Mobile Crisis Intervention Services by RC across the state. These services vary widely depending on geographic location, with some areas in critical need of additional services, given the number of active DDS consumers in the catchment area. Total number of Mobile Crisis Intervention Services is 100.	n/a	n/a	Usage of these facilities, including average length of stay, and associated Purchase of Service costs, will be collected and reported in the July 31, 2011, MHSA Progress Report.
5d. Evaluate the use of 24-hour beds for future assessment and observation;	6/30/10	DDS will contact RCs regarding the need for 24-hour beds.	n/a	DDS is collaborating with the RCs.	This data will be included in the July 31, 2010, MHSA Progress Report.
5e. Assess the need for aftercare options following intensive treatment;	6/30/11	DDS continues to collect information on Mental Health Rehabilitation Centers (MHRCs). The California Psychiatric Transitions in Merced County is a model that DDS has examined. This MHRC provides aftercare options to 44 males with dual diagnoses and provides services for individuals needing a diversion program. Presently, there are 23 MHRCs statewide.	n/a	DDS will collaborate with all MHRCs.	DDS' Consulting Psychologist will contact all MHRCs to determine what aftercare options they provide.

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5f. Assess the need for crisis residential facilities and evaluate successful programs and research options for programs with blended funding; including the potential use of federal funds;	12/31/10	DDS continues to identify examples of crisis facilities across the state that provides model mental health treatment. North Valley Behavioral Health Services in Yuba City is developing a 16-bed delayed egress psychiatric treatment program for RC consumers. This facility will be licensed as an Adult Residential Facility. Additional mental health treatment facilities will be identified and reported in the December 31, 2010, MHSA Progress Report.	n/a	DDS is collaborating with county mental health departments, RCs, ARCA, and Mental Health Consultants.	n/a
	12/31/10	DDS will continue exploring successful blended funding programs such as the Children's Assessment Center in Fresno.	n/a	DDS is collaborating with the Children's Assessment Center in Fresno.	Key components of successful blended funding programs will be outlined in the January 31, 2011, MHSA Progress Report.

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5g. Explore less restrictive transitional placement options for consumers in a restrictive environment; and	12/31/10	DDS will investigate the transitional placement options which might be available for consumers in a restrictive environment (like a DC) to move to a less restrictive setting.	n/a	DDS is collaborating with the Mental Health Consultants.	DDS' Health Development Section (HDS) will meet with DDS' DCD to discuss placement options in DCs.
5h. Investigate the use of DCs as a community resource.	6/30/11	DDS will investigate this issue and consider whether the DCs could be used in a manner other than for long-term placement in a highly restrictive setting.	n/a	n/a	DDS' HDS will meet with DDS' DCD to discuss placement options in DCs.

Attachments:

MH/DD Collaborative Meeting Minutes – June 3, 2009

Submit electronic copies of reports by January 31, 2010 to:

Debbie Manas

Department of Mental Health
Community Services Division
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