

MADERA COUNTY
BEHAVIORAL HEALTH SERVICES
RFP MEETING
7th STREET BUILDING
February 21, 2013/ 1:00 p.m.-2:00 p.m.
MINUTES



Name	Title/Department	Present	Absent
Dave Lockridge	ACE Overcomers	X	
Felix Vigil	Madera Rescue Mission	X	
Virginia Sanchez	Hope House	X	
Tracie Scott-Contreras	Workforce	X	
Jeff Gorski	Kings View	X	
Robin Leppo	MCCAPC	X	
Debbie DiNoto	Behavioral Health Services	X	
Debby Estes	Behavioral Health Services	X	
David Snelling	Behavioral Health Services	X	

<p>1. Request for Proposal Introduction</p>	<p>Debby Estes opened the meeting at 1:11 p.m.</p> <p>Debby said this is the first time Madera BHS has put this type of project out to bid as in the past, projects have been kept in-house. This year, BHS received feedback the community wanted to get more involved in mental health decisions and as community-based providers, BHS would like to see ideas on how to improve the mental health system. There is \$200,000 per year for three years to be offered.</p> <p>Debbie DiNoto urged attendees to read the Department of Health Care Services links placed in the RFP to see what the State is looking for in a proposal and what criteria it needs to meet. She said the State is looking for unique and innovative ideas which are not an evidence-based practice and the State will do its research to make sure they are unique. As an example, the Innovation Plan three years ago had two components. The first was to find a better way to get those in crisis into the mental health system, especially those who were seen in the emergency room. BHS proposed peer support in which peer staff engaged people in the emergency room along with family members. This provided a seamless entry into the BHS system via the Almond Access Center.</p> <p>The second component was to find a successful link between clients and primary care providers. Debbie said on the average, mentally ill clients die 25 to 30 years earlier than the average populace due to a number of factors including chronic health conditions, lack of medical care and the stigma surrounding the mentally ill. The successful idea has the BHS contract pharmacist personally contacting doctors on behalf of clients and linking them to primary care. The peer support idea had been proposed by San Diego County at the same time and the State ruled the timing was close enough to be unique. The pharmacist idea was the first of its kind.</p> <p>Debby Estes stressed ideas need to be Googled to make sure they haven't been done before. The deadline to submit the proposals is March 25. A committee consisting of Debby Estes, Debbie DiNoto, Cesar Velasquez and three members of the Behavioral Health Board will rank the proposals and make a recommendation to the Director who will forward these to the Board of Supervisors. Following their approval, the requests will be considered by the State for funding.</p>
<p>2. Discussion</p>	<p>Questions were taken from attendees.</p> <p>Q: Felix Vigil: Can one unique element be approved? For example, if I wanted to hire clowns, would that be unique enough?</p> <p>A: Debbie said yes, but only as long as it is demonstrated, researched and proven that the idea is truly unique and the idea increases access to services. Going with the "clown" idea, she said if clowns were hired to teach clients how to walk the high-wire as part of a trust-building exercise, the monies could be used to cover the salaries and cost of the wire. Felix said the Rescue Mission works to educate those who stay there in personal finance, vocational training and other life-skills. Debbie</p>

said ideas need to be shown as being unique and different to be approved. She provided a more realistic example with how Kern County developed a Crisis House. The idea of a Crisis House was not new, but the one Kern County proposed as being staffed with peer staff was new and innovative. She added that it could be the delivery system that makes it unique. Debby added BHS would consider multiple offers adding up to \$200,000.

Q: Jeff noted that in the RFP, some of the project descriptions appeared to be the same.

A: Debbie said the RFP mirrors the State letter which asks for some duplication in the project description. Debby said the State does not consider the Innovation grants to be long-term projects and expects the organization to find ways to incorporate them into their ongoing projects after the funding ends in three years. The project or projects will be reviewed annually to see if they need to be modified, continued as is or have the funding dropped if not successful.

Q: Jeff also asked if BHS foresaw any issues with the Board of Supervisors approving their recommendations.

A: Debby said the proposals will be closely looked at by the review committee and the BHS Director prior to submission to the BOS. She believes the BOS will trust BHS' recommendations. She also added submissions should also look for ways to leverage their resources which, though not required, is a plus for both receiving funding and stretching the grant money. As an example, she said organizations may want to consider not using the money to buy fixed assets such as furniture but to use existing resources and list them as in-kind contributions. She also said proposals can target children, youth, adult, and older adult populations.

Q: Dave Lockridge asked if a component could be evidence-based but the application of it would not be and if that would be acceptable

A: Debbie said it would and added the State looks for outcomes and urged detailed information be included regarding staffing time, equipment, short and long term goals and ways to measure them. Debby urged attendees to be creative and reminded them to submit a careful budget which does not go over the \$200,000 a year.

3. Adjournment	The meeting was adjourned at 1:53 p.m.
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Approved:

Debby Estes, Chair
RFP Meeting 2-21-2013

Date

<p>Additional Questions 2/26/13</p>	<p>Q. Donna Wadell the Special Education Administrator for Raymond School asked if the proposal could be to have a therapist provide outpatient services at the local schools.</p> <p>A. Debbie responded that the proposal must have a new and innovative feature to it in order to be considered. Just “regular” outpatient therapy would not be new or innovative. Debbie encouraged Donna to review the literature to see what could be provided in a unique manner for the school or community. Debbie used the “clown” example from above to illustrate the point.</p>
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