

INNOVATION PROGRAMS



Examples of Programs Serving Whole Communities

County	Populations	Program	Implementation
Los Angeles	Uninsured, homeless, under represented ethnic populations	4 Models of integration: <ol style="list-style-type: none"> 1. Integrated Clinic: non-traditional setting for mental, physical, substance abuse needs 2. Mobil Health Team: provide services (mental, physical, substance abuse, other) at various entry points (streets, housing, jail) 3. Community Advocate Teams: work in distinct communities to help consumers navigate traditional and non-traditional services 4. Integrated Peer Model: Peer Service Management and Peer-run houses (2) 	Community based approach: RFP process to solicit ideas on 4 criteria. Committee picked final 4 programs out of 150 submitted. Programs being run by community organizations.
Sonoma	All people experiencing mental health crisis	Mobile Intervention Team. Work with primary care and law enforcement to provide mobile, crisis mental health services. Includes services and training	County program with some contracting to outside partners
Alameda	All people living with mental health issues	Innovative process pushed out to non-traditional community to respond	Used a foundation style funding process designed to engage non-traditional mental health providers. Expect to fund 10-20 small project grants and 2-4 large projects Small=>\$50K Large=<\$50K

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Peer-Based Examples

County	Populations	Program	Implementation
Santa Cruz	Adults, TAY with co-occurring at risk of homelessness, jail	New Program called Avenues: Work for Individuals with dual disorders. Creation of a work center as part of recovery model. Non-traditional programs at center: massage, yoga, acupuncture. 50% of staff at Center will be peers.	County program with some contracting to outside partners
Kern	Adults experiencing severe mental illness	Consumer/peer run crisis residential program (after hospital or as stabilization to avoid hospitalization)	Sole sourced to non-profit to run
Los Angeles	Uninsured, homeless, under represented ethnic populations	Peer Service Management and Peer-run houses (2) as part of integration models	Community based approach: RFP process to solicit ideas on 4 criteria out of 150 submitted. Committee picked final 4 programs. Programs being run by community orgs
Humboldt	Older transition aged youth (21-25yrs old) with severe mental illness who are in and out of jail, emergency rooms, hospitals	Peer Support Program. Builds on PEI program but targets a unique age group/pop (older TAY) who needs more cultural appropriate services. Adult Peer Support supervisors will be trained and hired to work with this population. Working closely with Youth Collaborative to design and run program.	County based
San Diego	Clients navigating MH system. Underserved adult and older adults	1. Peer and Family Engagement Project: addresses quality and access issues with a recovery focused manner 2. Mobility Management: provides peer based strategies to increase access to transportation.	Programs contracted to community based organizations and County

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