



Annual Report for FY 2015-16

The Central Service Area Authority (CSAA) is a non-profit corporation of the State of Montana. The central area is defined by the Montana Department of Public Health and Human Services, and includes the counties of Blaine, Broadwater, Cascade, Chouteau, Gallatin, Glacier, Hill, Jefferson, Lewis & Clark, Liberty, Meagher, Park, Pondera, Teton, and Toole. Three Indian Reservations are included in the CSAA: Blackfeet Reservation, Browning; Rocky Boy Reservation, Box Elder, and Fort Belknap Reservation, located in Blaine County. There are (10) LACs within the CSAA that participated in FY 2016. Each LAC appoints a representative to the CSAA Board of Directors. The CSAA was established by State Statute to collaborate with the DPHHS and Local Advisory Councils in the planning, implementation and evaluation of a consumer-driven, recovery-oriented and culturally competent public mental health care system.

Central Service Area Authority Mission Statement

Our mission is to ensure that people living with mental illness (also known as individuals with lived experience), their families and other community stakeholders have a strong voice in defining, developing, managing and monitoring public mental health care delivery in Montana, with a focus on the Central region of the state.

Activities

Monthly meetings were held in Helena with the exception of a March Summit Net meeting. Congress was held in April of 2016. Each meeting agenda items include: LAC Reports; Provider Reports; AMDD Report; Children's Services Report; Veteran/Military Report; and Peer Network Report. Grants were given to 10 LACs for \$1,250.20. Each LAC will be responsible to report on activities accomplished with these funds during the coming year. Last year activities are included in the accomplishments below.

Accomplishments

- The directors were surveyed prior to Congress for the most important aspects of the CSAA meetings. The following is a list of those top priorities identified by the Congress: 1. *Funding Cradle to Grave – Community Driven Initiatives so not locked into silo funds: communities could choose from a menu for initiatives*
2. *Housing. Affordable housing in each community that is adequate and is there for transitional, dementia care and youth.*
3. *Workforce Development: Trauma informed care/working with licensure boards for MT and community driven initiatives so that barriers to hiring are mitigated as much as possible and loan repayment and state incentives are in line with what other states are doing to recruit and retain providers*
- A member has been attending the Children and Family Services Interim Committee to pay attention to the legislative process for funding mental health services and how aligns with CSAA suggested priorities.
- MH 1st Aide 5 Youth and 3 Adult presentations in Hill County

- Mental Health Month celebrated in many of the counties with presentations on Mindfulness, Suicide Prevention, Jason DeShaw MH Awareness and Song
- Representation from 79% (11 of 14) of our counties compared to 60% in FY 2015.
- Updated resource guides in many of the communities
- Mental Health Directories from each county added to the CSAA website
- Lewis & Clark- Strategic Mapping and Integration training for the committees working on public safety and jail efforts.
- Gallatin County spent much of their funds to development Resource guide through different sources in Bozeman area, West Yellowstone, Park and Madison County.
- Cascade County sponsored two Mental Health First Aid trainings.
- Jefferson County sponsored an Open House for different groups to become involved in the LAC.
- Speakers at monthly meetings included: Jim Anderson, CIT; OPI; Jim Hajny, Peer Support; Scott Malloy, MT Healthcare Foundation
- Letter on behalf of CSAA sent to AMDD Director regarding impact of SDMI changes and Medicaid Expansion process

Recommendations

- 1) CSAA to develop a strategic plan by October 2016 and coordinate action steps to support AMDDs strategic plan.
- 2) Increase communications between the State AMDD, Governor's Office and the Legislators regarding the list of goals that the CSAA Congress set forth.
- 3) Revisit and update the SAA Work Plan in coordination with the other SAAs and AMDD and hold quarterly meetings for the Summit.
- 4) CSAA to continue monthly meetings with options for MetNet and to develop plan for mini grants or dispersion to LACs in coming year.
- 5) CSAA Committee to reassess and make recommendations for changes to by-laws. Coordinate with AMDD for bylaws to be similar in all SAA Regions.
- 6) Request State AMDD to report monthly on progress or planning of Integration of MH and Addictions programs
- 7) Recommend funding Peer Support services through changes in the Medicaid State plan.

Cindy Smith, Chair
CSAA