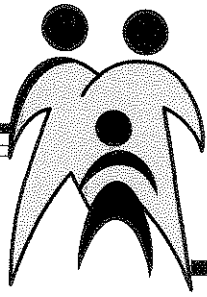


RIVERSIDE COUNTY

JERRY A. WENGERD, DIRECTOR



## DEPARTMENT OF MENTAL HEALTH

Reply to: P.O. Box 7549  
Riverside, California 92513  
951-358-4500

July 22, 2009

Local Program Support  
Department of Mental Health  
1600 9<sup>th</sup> Street, Room 100  
Sacramento, CA 95814

Dear Program Support:

Based on discussions with MHSOAC, and in compliance with DMH Information Notice No. 09-02, Riverside County is submitting a revised narrative for the 'Recovery Arts Core Project' Innovation Work Plan for review and approval.

The Riverside County is requesting \$224,949 to conduct a pilot Recovery Arts Core Project as part of the MHSA Innovation Component. This request will fund a mobile-based arts project that uses the creative arts to foster wellness and recovery for individuals with a mental health diagnosis.

Should you have any questions or comments regarding this plan, please contact Bill Brenneman, Mental Health Services Act Manager, at 951-358-4563 or e-mail to [MHSA@co.riverside.ca.us](mailto:MHSA@co.riverside.ca.us).

Sincerely,

Bill Brenneman  
MHSA Manager  
Riverside County  
Department of Mental Health

cc: MHSOAC  
1300 17<sup>th</sup> Street, Suite 1000  
Sacramento, CA 95811  
Attn: Sheri Whitt

Enclosure

**EXHIBIT A**

**INNOVATION WORK PLAN  
COUNTY CERTIFICATION**

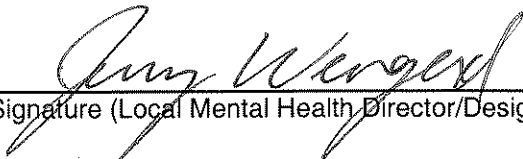
**County Name:** Riverside County

<b>County Mental Health Director</b>	<b>Project Lead</b>
Name: Jerry Wengerd	Name: Bill Brenneman
Telephone Number: 951-358-4500	Telephone Number: 951-358-4563
E-mail: wengerd@rcmhd.org	E-mail: bhbrenneman@rcmhd.org
Mailing Address: 4095 County Circle Drive Riverside, CA 92503	Mailing Address: 4095 County Circle Drive Riverside, CA 92503

I hereby certify that I am the official responsible for the administration of public community mental health services in and for said County and that the County has complied with all pertinent regulations, laws and statutes for this Innovation Work Plan. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code Section 5891 and Title 9, California Code of Regulations (CCR), Section 3410, Non-Supplant.

This Work Plan has been developed with the participation of stakeholders, in accordance with Title 9, CCR Sections 3300, 3310(d) and 3315(a). The draft Work Plan was circulated for 30 days to stakeholders for review and comment and a public hearing was held by the local mental health board or commission. All input has been considered with adjustments made, as appropriate. Any Work Plan requiring participation from individuals has been designed for voluntary participation therefore all participation by individuals in the proposed Work Plan is voluntary, pursuant to Title 9, CCR, Section 3400 (b)(2).

All documents in the attached Work Plan are true and correct.

  
\_\_\_\_\_  
Signature (Local Mental Health Director/Designee)

6-15-09  
\_\_\_\_\_  
Date

Mental Health Director  
\_\_\_\_\_  
Title

**INNOVATION WORK PLAN**  
**Description of Community Program Planning and Local Review Processes**

County Name: Riverside County  
Work Plan Name: Recovery Arts Core Project

Instructions: Utilizing the following format please provide a brief description of the Community Program Planning and Local Review Processes that were conducted as part of this Annual Update.

**1. Briefly describe the Community Program Planning Process for development of the Innovation Work Plan. It shall include the methods for obtaining stakeholder input. (suggested length – one-half page)**

The Department built upon previous Community Services and Supports (CSS) and Prevention and Early Intervention (PEI) Planning Process efforts to establish support and focus for this Innovation project. The Department also relied on previously developed MHSA Planning Committees to help make decisions and recommendations.

The original CSS and PEI Planning Process included consumers, family members, staff, key agencies, specialty groups, and general community stakeholders. The methods for obtaining their input included focus groups, community forums, surveys, interviews, facilitated workgroups, and public hearings. The Department estimates close to 2,300 stakeholders participated in the Community Planning Process for CSS and PEI with another 2,500 providing input through surveys.

The emphasis for the proposed Innovation Project originally stemmed out of the CSS Stakeholder process. Stakeholders repeatedly suggested the Department move toward consumer driven and operated support services. These recommendations resulted in the development of three regionally located Peer Support and Resource Centers.

During the Stakeholder Process for the 2008/09 Plan Update, the Department continued to be encouraged to dedicate more resources toward Peer Support Services. However, at that time the focus shifted toward the provision of Peer Support Services in the form of expressive arts programs. As a result, an expansion of the Riverside Peer Center known as the 'Art Works' Program was developed.

Over the course of the next year, the Department conducted several other community planning and input opportunities. These included Community Planning Processes for PEI and the Annual Plan Update. Again, support for on-going consumer-oriented services and expressive arts programs surfaced.

## Exhibit B

Based on the desired stakeholder recommendations, the Department explored an alternative to the Art Works Program. Since the Art Works Program was funded only on a one-time basis and not sustained through CSS, the Department proposed to pilot a new mobile community-based program 'Recovery Arts Core Project' with Innovation funds.

The Department took this concept forward through several venues to help facilitate the direction of the project. This included receiving recommendations, toward the impact, learning goals, and purpose of the project. This included input from an AdHoc Mental Health Board Committee, a Peer Advisory Committee from our Peer Centers, and a special session of members from the MHSA Planning Committees that included Adult System of Care, Transition Age Youth, Older Adults, Cultural Competency, and GLBTQ committee members.

What stemmed as a result of these additional planning meetings was overwhelming support of the Innovation Project with some specific recommendations regarding purpose and implementation. In particular, the Peer Advisory Committee recommended the main purpose of the Recovery Arts Core Project be enhancing quality of services and better outcomes. In essence, the learning value of the project becomes taking the arts practice and adapting it to new settings and communities while evaluating its effectiveness.

This purpose and focus was reiterated by the Mental Health Board AdHoc Committee and the MHSA Committee Planning Group. The MHSA Committee Planning Group did suggest that the Department consider the underserved communities during the implementation phase, although the primary purpose will be to establish better quality of services and outcomes.

### **2. Identify the stakeholder entities involved in the Community Program Planning Process.**

The Innovation project proposal was presented and input solicited from the MHSA Planning Committees and Mental Health Board (MHB).

Both the CSS and PEI Planning Process involved consumers, family members, and parents affected by mental illness, as well as stakeholders which included service providers and system partners, representatives from community-based organizations, Social Services, Probation, Office on Aging, County Office of Education, Health Department, Board of Supervisors, Executive Office, Law Enforcement, Public Defender and the Stakeholder Leadership Committee to name a few. Key stakeholders were the National Alliance for the Mentally Ill (NAMI), Family Advocate, and Parent Partners representatives. In addition, consultants worked with the Department to provide Gay, Lesbian, Bi-sexual, Transgender, and Questioning (GLBTQ), Native American, African American, and Deaf community perspectives.

## Exhibit B

The additional planning groups included a MHB AdHoc Committee, a Peer Advisory Committee, and a MHSA Planning Group. The MHB AdHoc was comprised of consumers and family members. The Peer Advisory Committee included consumers receiving services through the Peer Support and Resource Centers, and MHSA Planning Group included cross representation from the Adult System of Care, Transition Age Youth, Older Adult, Cultural Competency, and GLBTQ committee representatives.

- 3. List the dates of the 30-day stakeholder review and public hearing. Attach substantive comments received during the stakeholder review and public hearing and responses to those comments. Indicate if none received.**

The Recovery Arts Core Project was posted for public review and comment from May 1 through June 2, 2009 on the Department's website and distributed to County clinics and libraries as well as to the Stakeholder Leadership and MHSA Committees. A Public Hearing was held on June 3, 2009 by the Mental Health Board and all community input and comments were documented. The MHB Executive Committee met on June 9, 2009 to review input and determine if changes to the project were necessary. All input, comments, and Board recommendations are documented and included in Attachment 1.

## EXHIBIT C

### Innovation Work Plan Narrative

Date: 7/20/09

County: Riverside County

Work Plan #: INN-01

Work Plan Name: Recovery Arts Core Project

#### **Purpose of Proposed Innovation Project (check all that apply)**

- INCREASE ACCESS TO UNDERSERVED GROUPS
- INCREASE THE QUALITY OF SERVICES, INCLUDING BETTER OUTCOMES**
- PROMOTE INTERAGENCY COLLABORATION
- INCREASE ACCESS TO SERVICES

#### **Briefly explain the reason for selecting the above purpose(s)**

**Increase the quality of services, including better outcomes:** The primary purpose of the Recovery Arts Core (RAC) Project will be to increase the Quality of Services, including the development of more systematic outcomes to measure the effectiveness of the program. This Innovation Project will contribute to learning by closely measuring the impacts of peer-delivered arts services on consumers receiving services through the Riverside County Department of Mental Health (RCDMH). Peer-delivered services and expressive arts opportunities have continually been recommended through MHS Community Planning activities and have helped to inform the Department on the selection of this particular Innovation Project.

Currently there is only anecdotal evidence to support the impact of peer-delivered art education within the Riverside County Mental Health system and relation to consumer's recovery. By adapting the 'Art Core' Project to be a mobile, community-based approach, and then systematically evaluating its effectiveness, the Department will be able to determine it's usefulness in future programmatic decision making. In difficult economic times, the Department has identified the need to pilot and explore services that are more cost effective and less intensive but are proven effective models. This Innovation Project allows Mental Health the opportunity to measure the direct impact that peer-delivered art education has on our consumers, their recovery, and the mental health system.

The Department acknowledges that the Arts Core Project will have many additional benefits to our system and consumers as described below:

Expected secondary outcomes of the project are lessons regarding activities to **increase access to underserved groups** within Riverside County Department of Mental Health. As stakeholders reviewing this project have noted, the nature of the intervention (a mobile unit with a focus on underserved groups) can provide lessons about how to better engage consumers from underserved groups throughout the

## EXHIBIT C

community. The project's planned outreach includes groups such as Hispanic, GLBTQ, Native American, and other identified underserved communities.

Additionally, the study can provide lessons regarding activities to **increase access to services**. As the project involves a mobile unit, it will speak to the effectiveness of bringing peer-delivered services, recovery education, and occupational therapist services (helping individuals develop meaningful roles and activities by identifying specific strengths and functional challenges) to organizations that currently offer little to none of these supports.

The study can also provide lessons on activities to **promote interagency collaboration**. This study will work with many different organizations within the community to leverage not only funding, but also programming and other essential support thus building broader community support for the mentally ill. For example, the project relies on art teachers and consultants from different universities in the area (Cal State San Bernardino, University of California Riverside, and Loma Linda School of Occupational Therapy) for programming as well as the Riverside Arts Council, the Riverside Cultural Consortium for funding and marketing. In addition, to reach the goal of outreaching to underserved populations, interagency collaboration is essential to the success of this project. These agencies can include schools, primary care organizations, including community clinics and health centers, housing and homeless services, employment programs, law enforcement, spiritual organizations, and other pertinent organizations.

### **Project Description**

**Describe the Innovation, the issue it addresses and the expected outcome, i.e. how the Innovation project may create positive change. Include a statement of how the Innovation project supports and is consistent with the General Standards identified in the MHSA and Title 9, CCR, section 3320. (suggested length - one page)**

The Department believes that by piloting a mobile community based peer delivered Arts Core Project it will not only increase the Quality of Services offered to our consumers, but will provide an opportunity to develop systematic measures and outcomes to prove its effectiveness. Based on the outcomes, the Department can then make more informed decisions about the use of this promising model in future program and implementation planning. The Department firmly believes that Arts Core Project fits uniquely within the parameters outlined in the Innovation guidelines as well as meeting the General Standards required of MHSA.

The Recovery Arts Core Project, which is managed out of the peer-run centers, creates a mobile unit of peer support specialists, peer artists, local artists, professional educators, and occupational therapist interns who together facilitate a 6 - 8 week program of peer-based recovery and creative arts activities within community organizations throughout Riverside County. The curriculum consists of peer presentations on recovery (such as "In Our Own Voice" and an original play written and

## EXHIBIT C

performed by peer artists); two peer-taught “Recovery Pathways” classes; and two to four art classes (art fundamentals, drama, creative writing, music, and/or dance). At the end of the 6 - 8 week program, the curriculum is provided to the organization, so they may continue to teach these methods after the initial program is completed. Additionally, the artwork and other projects created by the peers, family members and friends will be exhibited (for visual arts) and performed (for performance art) throughout Riverside County.

The Recovery Arts Core Project proposes to impact the quality of service and achieve better outcomes by:

- Providing a proactive mobile unit that will go into the community and reach people of all ages and socioeconomic status rather than wait for them to come into clinics for services.
- Providing value, not only to the consumers receiving the arts services, but enhancing recovery to those who provide the services, as well. The other main benefit is to the consumers in the community organizations that are trained in the model and become facilitators themselves.
- Being structured, so the core team is assembled to best suit specific populations’ needs and the program can be customized to explore the richness of specific cultures. A bi-lingual peer support specialist will also be a member of the team for Spanish-speaking populations.
- Facilitating a new paradigm in the professional-client relationships of health care with its peer-based recovery and wellness environment. This new paradigm enlists the essential support of peer-driven activities that can address the multiple, ongoing, psychological, social, emotional, and spiritual needs among individuals who have similar life experiences.
- Expanding engagement and introduction to peer support for consumers through expressive art.
- Bringing additional paths and assistance for recovery to more consumers, especially those in underserved communities.
- Moving beyond arts and crafts as a pastime and using creative expression to teach recovery principles. It enhances a sense of recovery, identity, and self-worth through the development of personal interests, which are essential to development for community integration and independence.
- Bringing the arts into the mental health setting. Arts have been proven to work for individuals in finding and expressing their own individuality, and for communities to express a group’s identity and accomplishments.
- Creating community support and involvement of consumers in community activities.
- Building bridges within the community, encouraging interagency collaboration, by involving local artists, art organizations, schools, and other nonprofits at the grassroots level. The arts are a point around which groups from many different organizations collaborate, which is an essential part of a civic community.



## EXHIBIT C

- Incorporating a preventive and early intervention element that teaches individuals about adopting positive activities as well as providing locations for healthy expression within the community. Additionally, it encourages individuals to seek help when needed and provides education on where to find help.
- Providing services for individuals when other treatment or services have not previously worked.
- Addressing stigma issues through community education and other non-traditional methods such as exhibitions and performances.
- Being designed for individuals of all age groups and at all stages of life.
- Presenting a creative approach to persistent, seemingly intractable challenge of fighting stigma through stories of recovery and hope as well as stressing the talent of individual artists through exhibitions and performances targeted for the general community. It focuses on the individual as an artist rather than a person with a diagnosis.
- Encouraging participants to speak about mental illness in a different medium - that of art.
- Using Occupational Therapists, who have a holistic view of each individual, and are instrumental in helping individuals address their diagnosis and lead fulfilling lives.

This project supports and stems from the General Standards identified in the MHSA (as set forth in CCR, Title 9, section 3320) and supports following the guiding principles of Innovation:

- **Wellness, Resilience, Recovery:** The Recovery Arts Core (RAC) Project will be a working recovery model that empowers individuals to thrive by developing wellness roles and activities that are meaningful to them and of value in the larger community. Peers receive mental health services in a normalizing role (artist) and context (taking art classes, learning creative expression skills), learning recovery concepts while developing strengths and skills that connect them to the larger community.
- **Individual/Family Driven:** The RAC Project will work to empower peer artists and peer support specialists to use their talents and life experiences to encourage, inspire, model wellness recovery practices, and teach wellness recovery concepts through creative expression. Families will be invited to all performances and exhibitions and will be encouraged to participate in the RAC whenever possible.
- **Community Collaboration:** Through displaying their artwork in public venues and sharing their personal story of recovery through or alongside their art, peers can decrease stigma and increase public awareness of mental illness and recovery. The art project enriches the network of community support and increases community acceptance and integration. It promotes community collaboration as it is leveraged significantly with local Inland Empire organizations such as the universities, the Riverside Arts Council, the Riverside County Transportation Commission, and

## EXHIBIT C

Riverside Community Health Foundation - all entities not traditionally defined as part of mental health care.

- **Cultural Competency:** The RAC Project will be evaluated with special attention given to diverse populations and will work to address their needs.
- **Outcome Based:** This project focuses on taking a promising community-based approach in order to monitor the evaluations and performance indicators throughout the project to ensure outcomes.
- **Focus on underserved communities:** The RAC Project will provide special attention to populations who are marginally engaged in services and will create a different type of outreach to them and will work to address their needs.

The expected positive outcome of the project is to see evidence on the impact to the Riverside County Department of Mental Health system. For example, one outcome will be to see a reduction of individuals being reliant on core system services, such as clinics, and instead transitioning to utilizing peer-run centers and/or community supports where they can find self-help and self-sustaining resources for their recovery.

### **Contribution to Learning**

**Describe how the Innovation project is expected to contribute to learning, including whether it introduces new mental health practices/approaches, changes existing ones, or introduces new applications or practices/approaches that have been successful in non-mental health contexts. (suggested length - one page)**

The project is expected to contribute to learning by evaluating a new application to the mental health system for a promising community-driven practice/approach. It will demonstrate a combination of three components – art, peer-delivered educational opportunities, and mobility – and work to engage individuals to take the next steps in their recovery and to utilize peer centers and supports, thereby becoming less reliant on core RCDMH services.

If positive outcomes are established that impact the mental health system, improve quality of services, and establish better outcomes, then the RCDMH will learn that this type of program is an evidence-based practice and could be eligible for funding through other sources within RCDMH.

Additional expected lessons from the project include the effects of building partnerships with local arts communities, organizations and schools to create programs that promote essential aspects of mental health recovery: individual expression, positive community recognition (in a role other than “mental health client”), group participation, introduction to community roles and possibilities outside of mental health system, educational opportunities, vocational training, and paid employment. It will connect

Additional expected lessons also include the effects of a mobile-unit that outreaches to underserved populations, increases access to services, and connects consumers with community organizations.

## EXHIBIT C

The project organizers will publish a final report with their findings and recommendations. In addition, the project organizers will share their results by participating in the NAMI conferences, the Depression Bipolar Support Alliance Conference, as well as other pertinent conferences. The project organizers will publish in appropriate journals whenever possible.

- This project is expected to demonstrate how actively outreaching to, and educating, individuals can increase general knowledge of mental health recovery with a long-term outcome of reducing mental health stigma.
- This project is expected to introduce the importance of linking the creative arts, a nontraditional mental health activity, and the community with Riverside County Department of Mental Health. It will show how bridging partnerships with local arts communities, organizations, and schools can create programs that promote essential aspects of mental health recovery: individual expression, positive community recognition, group participation, introduction to community roles and responsibilities (outside the mental health system), educational opportunities, vocational training, and paid employment.
- This project is expected to show how art can enhance recovery and be a key component of recovery-based practice and how creative arts can improve recovery for not only those who participate, but those who teach and perform.
- This project is expected to demonstrate an effective means of anti-stigma outreach, as it uses non-traditional methods such as exhibitions and performances to communicate the experiences, thoughts, and feelings of individuals with a mental health diagnosis. Moreover, the public recognizes the individual in the role of artist, performer, and creator before the role of “mentally ill”.
- This project is anticipated to increase involvement of consumers from underserved populations and increase involvement in the peer support system.
- This project is expected to contribute to ideas of how peer-run programs can encourage community integration. Additionally, this project can show how arts can be incorporated into the peer-run centers and how these activities are a positive way to participate in civic life.
- This project is anticipated to show how creative arts are a valuable means of community education and how they arts can bring together consumers and community organizations to integrate consumers into the community and to create supportive networks.

The Core Project builds upon those approaches not currently considered part of the traditional mental health delivery system. It reflects a collaborative effort of artists, peers, professionals, educators, occupational therapists and community organizations.

The project organizers will publish reports with their findings and share their results by participating in the NAMI conferences, the Depression Bipolar Support Alliance (DBSA) Conference, as well as other pertinent conferences and will publish in pertinent journals

## EXHIBIT C

whenever possible. The project organizers will be available for training to educate and support the current mental health workforce on the principles of recovery-based creative arts.

The Department anticipates favorable outcomes as a result of implementing the Recovery Arts Core Project such as improved quality of life, increased self-esteem, increased knowledge, and application of recovery principles and less reliance on acute mental health crisis and/or intensive services. Testing and evaluating this Innovation Project, will increase understanding of the impact and relations between art and recovery as part of our mental health system. See the 'Project Measures' section on page 8 for outcome methodology.

## EXHIBIT C

### Timeline

**Outline the timeframe within which the Innovation project will operate, including communicating results and lessons learned. Explain how the proposed timeframe will allow sufficient time for learning and will provide the opportunity to assess the feasibility of replication. (suggested length - one page).**

The time line for the Recovery Arts Core Project implementation is from October 2009 through December 2010 as outlined below.

Implementation/Completion Dates:	MM/YY – MM/YY
Develop Evaluation Methodology, Participant and Staff Surveys, and Measurement Tools	9/09 – 10/09
Finalize Curriculum, Train Staff, and Begin Scheduling Workshops	10/09
Begin Program Implementation	11/09
Review First Round Evaluations and Performance Indicators, Make Recommendations/Changes	12/09 – 01/10
Review Second Round Evaluations and Performance Indicators, Make Recommendations/Changes	3/10 – 04/10
Review Third Round Evaluations and Performance Indicators, Make Recommendations/Changes	5/10 – 7/10
NAMI Conference Presentation	8/10
Year-End and Fourth Round Evaluations and Performance Indicators, Make Recommendations/Changes, Conduct Focus Groups	9/10 – 11/10
DBSA Conference Presentation	10/10
Evaluate and Communicate Final Results and Lessons Learned	11/10 – 12/10
Share Results w/Stakeholder Meetings	12/10

## EXHIBIT C

### **Project Measurement**

**Describe how the project will be reviewed and assessed and how the County will include the perspectives of stakeholders in the review and assessment.**

Project measurement will be administered and monitored by the contractor's Occupational Therapist (OT), who with the aid of RCDMH Research Department and Loma Linda School of Occupational Therapy, will create and refine the system of evaluations. In addition, the OT will interface with RCDMH Research Department to follow a core sample group of individuals who are concurrently enrolled in the Full Service Partnership programs.

Stakeholders will be invited to review and assess the program's outcomes at a year-end focus group.

The chart, shown on the following page, outlines factors that will be considered in the construction of the system of evaluations. This system will incorporate recommendations from the best and most current research methods on measuring recovery. This system will take into consideration that recovery is not a linear process, but one that has peaks and plateaus.

## EXHIBIT C

<b>Group</b>	<b>Activities</b>	<b>Outcomes</b>	<b>Measurements</b>
RCDMH: Staff-Level	Recovery Arts Core (RAC) Project brought to organizations within RCDMH continuum of care.	Increased acknowledgement of effectiveness of recovery education and importance of fostering consumer choice and self-direction by Mental Health professionals.	A survey for staff at organizations where the program is facilitated will ask their perceptions of the program and their likelihood to incorporate peer-delivered, recovery, and/or creative arts activities in the future. It will also obtain their perceptions of effectiveness of recovery education courses. Designed to bring peers into the peer-run centers.
	Peer Support Specialists and peer artists hired to outreach within the RAC to consumers.	Increased acceptance for employment and integration of Peer Specialists into the Public Mental Health System. Positive impact on recovery for those providing the services.	
Participants: Group Level	Art curriculum customized to meet needs of groups, especially for underserved populations.	Decreased stigma regarding mental health and increased engagement in mental health recovery opportunities.	A longitudinal study of project participants by using pre-and post-program surveys, and a follow up study, will measure the benefits of the project as perceived by the peer.
Participants: Consumer-Level	Participants learn self-help skills through recovery arts education.	Fewer individuals being reliant on core system services, such as clinics, and instead transitioning to utilizing peer-run centers where they can find self-help and self-sustaining resources for their recovery.	A longitudinal study of project participants by using pre-program, post-program surveys, and a follow up study, will measure the benefits of the project as perceived by the peer. This study will use both a qualitative and a quantitative approach. It will be life-based, not diagnosis-based, and look for perceptions of hope, empowerment, self-responsibility, the attainment of meaningful roles apart from the illness, and other indicators of perceived improvement of quality of life (subjective measures). It will also measure participation (activity in the various domains) and utilization of peer-run centers.
	Program comes to the participants.		
	Participants observe peers modeling wellness and recovery.		
	Development of wellness roles by participants through learning news skills, exhibitions, and presentations.		

## EXHIBIT C

### **Leveraging Resources (if applicable)**

**Provide a list of resources expected to be leveraged, if applicable.**

The Recovery Arts Core Project expands collaboration and linkages between Riverside County Mental Health systems along with organizations and other practitioners not traditionally defined as part of the mental health care. Specifically, the following Recovery Arts Core Project strategic partners extend the program's reach and impact:

- Riverside Arts Council - The Riverside Arts Council is a private, nonprofit corporation whose mission is "to provide, develop, support, and sustain the arts." It is Riverside County's central source for arts-related services, information, education, and outreach. This organization will help develop and market the Recovery Arts Core Project as well as team artists and art educators with the program.
- The Riverside Cultural Consortium - The Riverside Cultural Consortium is a collaboration of community organizations working together to raise the profile of arts and culture in Riverside through shared resources, networking and joint programming. Through participation in the Riverside Cultural Consortium, the RAC Project will meet supporters, be able to participate in community-wide events, and promote the project.
- Cal State San Bernardino Department of Theatre Arts - Michelle Ebert Freire, associate professor in California State San Bernardino's Theatre Arts Department, has experience as an educator, actor and director, as well as drama therapist. She has worked with the peer-run centers in Riverside to develop a pilot drama program that pulls from various drama therapy philosophies, as well as creative drama, playmaking, Playback Theater, and the Theater of the Oppressed. In addition to coordinating the graduate program at CSUSB, teaching theater studies, and directing University Theater productions, Michelle volunteers at San Bernardino Juvenile Hall and the Rainbow Pride Youth Alliance. Michelle will be a consultant for the RAC Project, advising on drama curriculum, as well as teaming graduate arts students and interns as volunteers in the program.
- Loma Linda School of Occupational Therapy - Occupational therapy can be very effective in the mental health setting. Since 2003, occupational therapists have interned at the peer-run centers advising on curriculum development, program methodology, and volunteer program structure. The goal of the occupation therapists in the RAC Project will be "to help people develop the skills and obtain the supports necessary for independent, interdependent, productive living (American Occupational Therapy Association).



## EXHIBIT C

- Riverside Community Health Foundation - This mission of this nonprofit organization is to improve the health and well-being of the community of Riverside. They have provided funding for an Occupational Therapist position at the peer-run centers that will be integral to working with the occupational therapist interns in the RAC Project.
- Riverside County Transportation Commission - Through Measure A and New Freedom funding, the Riverside County Transportation Commission is enabling the peer-run centers to create a transportation program to pick up and drop off participants throughout Riverside County at the peer-run centers. For the RAC Project, this means involving more individuals in the program.
- National Alliance on Mental Illness (NAMI) - NAMI is the National Alliance on Mental Illness, the nation's largest grassroots organization for people with mental illness and their families. The Recovery Arts Core Project presents NAMI's "In Our Own Voice: Living with Mental Illness" which is a multi-media, interactive, public education program presented by consumers for both consumers and other community audiences. Through example and discussion, participants learn how people with serious and persistent mental illness cope with the realities of their own disorders while recovering and reclaiming productive and meaningful lives.

In addition to these supporters, the Recovery Arts Core project will work to increase funding by writing grants, organizing fundraising events, and selling artwork.

## EXHIBIT D

### Innovation Work Plan Description (For Posting on DMH Website)

County Name	Annual Number of Clients to Be Served (If Applicable)
<u>Riverside County</u>	<u>650</u> Total
Work Plan Name	
<u>Recovery Arts Core Project</u>	

Population to Be Served (if applicable):

The Core Project will provide services to Transition Age Youth, Adults, and Older Adults with serious emotional disorder and/or serious mental illness, and their families. It will also provide supports for individuals who have co-occurring substance abuse disorders, are dually diagnosed, or have other disabilities. The Project will target, and outreach to, underserved populations including Hispanic, Native American, Gay, Lesbian, Bi-Sexual, and Transgender (GLBT) populations. The project's services will be tailored to address each community's specific needs.

Project Description (suggested length - one-half page): Provide a concise overall description of the proposed Innovation.

The Recovery Arts Core (RAC) Project creates a mobile unit of peer support specialists, peer artists, local artists, professional educators, and occupational therapist interns who together facilitate a 6 - 8 week program of peer-based recovery and creative arts activities throughout Riverside County. This Innovation Project will contribute to learning by closely measuring the impacts of peer-delivered arts services on consumers receiving services through the Riverside County Department of Mental Health. The primary purpose of the RAC Project will be to increase the quality of services, including the development of more systematic outcomes, to measure the effectiveness of the program. The Department believes that by piloting a mobile community-based, peer-delivered, recovery oriented arts program, it will not only increase the quality of services offered to our consumers, but will provide an opportunity to develop systematic measures and outcomes to prove its effectiveness.

The project is expected to contribute to learning by evaluating a new application to the mental health system for a promising community-driven practice/approach. It will demonstrate a combination of three components – art, peer-delivered educational opportunities, and mobility – and work to engage individuals to take the next steps in their recovery and to utilize peer centers and thereby become less reliant on core RCDMH services.

## EXHIBIT D

The curriculum consists of peer presentations on recovery (such as “In Our Own Voice” and an original play written and performed by peer artists); two peer-taught “Recovery Pathways” classes; and two to four art classes (art fundamentals, drama, creative writing, music, and/or dance) according to the community needs. At the end of the 6 – 8 week program, the curriculum is provided to the organization, so they may continue to teach these principles after the initial program is completed. Additionally, the artwork and other projects created by the peers, family members and friends will be exhibited (for visual arts) and performed (for performance art) throughout Riverside County.

The RAC Project is a proactive mobile unit that will outreach to people of all ages and socioeconomic status rather than wait for them to seek services at traditional mental health sites. It will bring these services not only to programs within Riverside County Mental Health, but also to locations where individuals with mental health diagnosis are served such as board and cares, juvenile halls, and homeless shelters. The program will also outreach to churches and other community organizations where at-risk people frequent as well as to underserved populations, assembling a core team to best suit each specific populations’ needs. For example, a bi-lingual Peer Support Specialist will be part of the team which will provide services in the Hispanic communities. The project can also be customized to explore the richness of other specific cultures.

The RAC Project will address the need to increase access to underserved communities with a goal to increase quality of services including better outcomes (particularly the continued transformation of the infrastructure of mental health to include recovery and peer-based components as well as more effective services to support community integration). It will also promote interagency collaboration, increase access of services; and provide anti-stigma outreach and education.

The RAC Project builds bridges within the community, encouraging interagency collaboration, by involving local artists, art organizations, schools, and other nonprofits at the grassroots level. The arts are a point around which groups from many different organizations collaborate, which is an essential part of a civic community. The project can show how building these bridges create programs that promote essential aspects of mental health recovery: individual expression, positive community recognition (in a role other than “mental health client”), group participation, introduction to community roles and possibilities outside of mental health system, educational opportunities, vocational training, and paid employment.

**EXHIBIT E**

**Mental Health Services Act  
Innovation Funding Request**

County: Riverside County

Date: 4/29/2009

Innovation Work Plans			FY 09/10 Required MHSa Funding	Estimated Funds by Age Group (if applicable)			
No.	Name	Children, Youth, Families		Transition Age Youth	Adult	Older Adult	
1	1	Recovery Arts Core: A Peer-Based Project	\$177,825		\$54,514	\$123,311	
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26	Subtotal: Work Plans		\$177,825	\$0	\$54,514	\$123,311	\$0
27	Plus County Administration		\$26,674				
28	Plus Optional 10% Operating Reserve		\$20,450				
29	Total MHSa Funds Required for Innovation		\$224,949				

**EXHIBIT F**

**Innovation Projected Revenues and Expenditures**

County: Riverside County Fiscal Year: 2009/10  
 Work Plan #: INN-01  
 Work Plan Name: Recovery Arts Core: A Peer-Based Project  
 New Work Plan   
 Expansion   
 Months of Operation: 09/09 - 01/11  
MM/YY - MM/YY

	County Mental Health Department	Other Governmental Agencies	Mental Health Contract Providers	Total
<b>A. Expenditures</b>				
1. Personnel Expenditures			174,000	\$174,000
2. Operating Expenditures		10,000	31,000	\$41,000
3. Non-recurring expenditures				\$0
4. Training Consultant Contracts			8,000	\$8,000
5. Work Plan Management			0	\$0
<b>6. Total Proposed Work Plan Expenditures</b>	<b>\$0</b>	<b>\$10,000</b>	<b>\$213,000</b>	<b>\$223,000</b>
<b>B. Revenues</b>				
<b>1. Existing Revenues</b>				
a. Riv. Community Health Foundation for Occupational Therapist		10,000		\$10,000
b. RivCo. Transportation Commission Match Funds for Fuel			32,175	\$32,175
<b>2. Additional Revenues</b>				
a. In-Kind Support from Michelle Ebert Freire (Drama Professor)			3,000	\$3,000
<b>3. Total New Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,000</b>	<b>\$3,000</b>
<b>4. Total Revenues</b>	<b>\$0</b>	<b>\$10,000</b>	<b>\$35,175</b>	<b>\$45,175</b>
<b>C. Total Funding Requirements</b>	<b>\$0</b>	<b>\$0</b>	<b>\$177,825</b>	<b>\$177,825</b>

Prepared by: Roize Basallo  
 Telephone Number: (951) 358-4562

Date: 4/29/2009

# ATTACHMENT A

## County of Riverside Mental Health Board (MHB) Executive Committee Review June 9, 2009

for

### Innovation – Recovery Arts Core Project Public Hearing Held on Wednesday, June 3, 2009

1. **Comment:** I see a lot of strengths in the program and it's nice to see it is moving forward. I like that it is (1) peer driven (2) uses the creativeness to heal, (3) uses the recovery model, and (4) the mobile unit will be very beneficial for the communities in Riverside because it is so large. I do have a couple of questions. In the Plan it does say that it will address all age groups – but when I went to Exhibit E, it says that the majority of the funding was for transition age groups and adults, so my question is: Will children and older adults be able to come for services and will funding go toward providing arts for those age groups?

**Response:** With the state budget sheets, we have to allocate funds by age groups, and it didn't necessarily address that specifically in the plan. Based on what we know about the Art Works program, transitional age youth (TAY) and adults use those services more, so that is where we put the bulk of the funding. We don't know the full impact of what we are going to experience once we implement the plan.

It is a difficult call, because this program will impact a lot of different people indirectly through education and outreach. We anticipate that the whole family (of all ages) will be impacted by the presentations and involvement and the integration into the community. We discussed this during the planning process, and children will be impacted positively by this program. However, they may not be impacted directly because they are not enrolled in the peer center, but through their family and community presentations and through stigma awareness and other factors.

The older adults will not be excluded and they have already expressed an interest and we look forward to that participation.

## ATTACHMENT A

2. **Comment:** I would just like to say that specifically one of the things that will be beneficial across the program and as it relates to prevention and early intervention, is that it would be necessary, and should be expanded, to include direct services to children and youth.
3. **Comment:** Will this give us an opportunity to go into the schools?

**Response:** Schools have many rules and regulations about who comes on campus, so there may be school age children impacted but we don't think we would go directly in the schools.

**MHB RESPONSE to Comments 1, 2 and 3:** The Mental Health Board recommends that the Department examines development of some type of art expression program specifically targeting children and youth with future Innovation funding proposals.

4. **Comment:** The plan also says it will go into the different areas and in the narrative it specifically says in the Desert Region, it will be in Palm Springs. Is that the only place?

**Response:** Every site that we're going to conduct this service is not outlined in the proposal. If we can identify any underserved community, we can go there. It will be based on need, so it can be offered in any area.

5. **Comment:** So they were just examples, and it can be provided anywhere?

**Response:** Yes, the key is that we're expanding it county wide where as before it was just centered in Riverside and local areas. That's why we're excited because we can we can go to other regions and communities based on need.

**MHB RESPONSE to Comments 4 and 5:** The Mental Health Board recommends that the wording in Exhibit C, page 1, the last sentence under "**Increase access to underserved groups**" be expanded to say that 'services will be provided in all three regions which include, **but not be limited to**. . ." in order to more clearly reflect potential geographic areas to be served.

The MHB also asked for clarification on how 'need' would be defined and determined because they are concerned that there will be too many requests from the community for service and that everyone who has a need will not be able to receive the service.

## ATTACHMENT A

**Response to MHB:** After the plan is approved for implementation, one of the first responsibilities will be related to development of the curriculum, selection criteria, evaluation methodology, etc. At that time, the selection criteria will be more fully defined. This will be a pilot project and as with all programs with limited funding, the community needs are anticipated to exceed the resources available. However, the results of the project will be evaluated and if it is determined that the program is successful, expansion may be a consideration.

**MHB RESPONSE:** The MHB determined this was a reasonable course of action and recommended no change to the Innovation – Recovery Arts Core Project Plan at this time related to this issue.

6. **Comment:** Maybe people don't have specialized talents or maybe they are not artistic - what does this program hold for them? Maybe they are very black and white thinkers or maybe they are more technical kinds of thinkers. What are we offering them as far as trainings and those kinds of things? Do we have things that are going to be offered in the peer centers for them, which are also innovative, that are going to help them find jobs and help them to do things? Maybe the arts isn't for them, maybe they don't use that artistic side of the brain that other people do. There are black and white thinkers who don't think in the artistic fields.

**Response:** I don't think there are any exclusionary criteria. In the peer centers they do have vocational support services. Part of what is built into the plan is instruction and I don't know if there would necessarily be an entry level requirement. But I think the staff of the program would be available to meet with them (the person) and provide instruction and assistance on whatever area of assistance they required. There are all ranges of skill levels, but no one would be excluded.

Part of the proposal is peer artists telling their story and peers talking about their recovery. So as much as art is important, the act of expressing themselves and developing something that helps their self esteem is established at the very beginning. So the concept of peer recovery is established as the number one goal of the program.

7. **Comment:** I know what the program is all about. But they (other people) are asking me about those people that don't have the kind of talent to do arts kinds of things - what kind of vocational things are there for them? They are real concerned that they can't be expressive that way so are they going to be left behind. The big fear is that they are not going to get any help for what they want to do.



## ATTACHMENT A

**Response:** I want to take a different slant. Recovery is about choice and part of what we are taking about is wanting to add more options. It doesn't necessarily mean that this program will be available, and of interest, to every person. We don't expect it to be – not every program is all encompassing. There are a number of supports that are offered at the peer centers, and people can choose to participate in them. So again, I don't want to assume that everybody is interested in it and from my perspective that is ok because it is a choice and it is expanding the kinds of options and the recovery paths they can utilize.

**MHB RESPONSE to Comments 6 and 7:** The MHB determined that as other program/support options are available to clients through the peer centers, no change to the Innovation – Recovery Arts Core Project Plan is recommended.

8. **Comment:** The plan says mobile proactive unit. Is it one unit that goes to a different place in the city every day or is it more units, is it six units? How many units are there? Is a unit out there every day all over the city or county?

**Response:** It is a team that will be mobilized to different areas for a certain period of time.

The MHB also asked for clarification on the definition of a mobile unit. Would it be a van, motor home or something else?

**Response:** The peer centers have been provided with vans and JTP has also received transportation funds under Measure A grant, so transportation is available. As the service locations have not been determined and services will be provided at locations throughout the county, this will be part of the logistics assessed as the project is implemented.

**MHB RESPONSE to Comment 8:** The MHB determined this was a reasonable course of action and recommended no change to the Innovation – Recovery Arts Core Project Plan.

9. **Comment:** How will we advertise - are we going to the schools, colleges, hospitals, mental hospitals, and what about outreach?

**Response:** The services will be based out of the peer centers in each of the three regions. I anticipate there will be outreach to various underserved areas in the community but then there can be presentations and promotions through the peer centers and outreach will come from them.

## ATTACHMENT A

10. **Comment:** And will they put flyers out at Bobby Bonds or La Sierra and places like that?

**Response:** It wouldn't be unlike the art works program that already exists, where by virtue of being a participant in the Western Region or Mid-County Region services; you would be privy to the activities that were going on at the Art Works program. So this would make it available for all regions and certainly makes it possible for us to promote directly to our consumers from those sites about the types of activities that are going on. The peer centers will also work through organizations and service providers within the communities to promote participation.

**MHB RESPONSE to Comments 9 and 10:** The MHB determined this was a reasonable course of action and recommended no change to the Innovation – Recovery Arts Core Project Plan.

11. **Comment:** You mention that you're going to do bi-lingual is that Spanish only are you going to Tagalog or any other languages?

**Response:** In the proposal, it's Spanish. But that's not to say if there was a need it couldn't be expanded to other languages.

**MHB RESPONSE to Comment 11:** The MHB determined this was a reasonable course of action and recommended no change to the Innovation – Recovery Arts Core Project Plan.

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**MHB RESPONSE to Comments 12 through 25:** Comment only – No recommended change to the Innovation – Recovery Arts Core Project Plan.

12. **Comment:** We really need to expand on this. We're talking about arts but the field that arts covers is not just art or acting, but writing or making crafts. This arts program, even though it's called arts, is going to be expanded to all levels and fields of self help and people getting back into helping themselves and how to express themselves again. This is a recovery program we've talked about - not just art.

**Response:** Part of having the Occupational Therapist (OT) intern on board is working with the Peer Support Specialists establishing that recovery is possible through things like 'In Our Own Voice', artistic expression or drama performance. The art activities are not necessarily going to be things like 'today we're going to draw this landscape and it's going to be perfect'. It is much like learning fundamentals, expressing yourself and things like 'what

## ATTACHMENT A

color do you feel today', things like that. It's not so much just arts - it's more about creative expression and recovery principles. The proposal indicated that the core staff would be working with the people at the site and find out what their needs are: such as if we went into a bi-lingual community, there would be a bi-lingual Peer Support Specialist available. So we would make an effort to address all levels and all needs so that the program really speaks to them.

13. **Comment:** I think it's a great idea. I think the arts are essential to creating a humane way of looking at life and a way to express yourself in such a way that you don't feel isolated and it fights against stigma. It's kind of like if you are an artist you are kind of funky anyway. You can be an artist and do odd things and people just say "oh, she's an actor" and it takes away the stigma and helps people believe in themselves more.
14. **Comment:** I think that believing in yourself is a core recovery concept, with empowerment, and expression. I believe the art program, using peer artists and peer support specialists, can work through those important elements imperative to recovery. With the arts, it makes it fun.
15. **Comment:** I have seen this from personal experience with my son. The job he held before he got ill and used to be able to do, he can't do anymore. But with art, he has seen a greater appreciation of art in poetry. That's what I see as the biggest benefit - it gives them some longer functioning ability and a hope for the future with a different concept.
16. **Comment:** Art therapy is proven. It is not one these hypothetical things and it has been used in physical health for years and years. I think of all the therapies - if you can call it that - it is probably the one that is less intimidating. It really opens an avenue to express their thoughts and feelings. A lot of things people can't talk about or wade through in their emotions, but they can doodle and stuff. It will encompass many different areas and I give the department high marks for looking into this type of program.
17. **Comment:** As an employee and consumer – you don't have to have artistic ability to participate in this program. I have witnessed many who never were able to express how they felt, what was going on, that really deep part of them that they had no idea how to express and through some type of art - which encompasses a lot of different things - they have really come alive. So as far as working on that type of thing, there are other classes available for teaching other types of things. I am speaking personally that if not for the arts, I would literally have committed suicide. The arts program (not just this program but the arts in my life) have saved my life. The arts gave me an

## ATTACHMENT A

avenue to express and get out my deepest feelings. From that standpoint, I can't express how important this is and as you said, it really works and whether you call it therapy or not, it works.

18. **Comment:** I think it is about expression and how you grow through expression through the art works. You see yourself in a different light and you see yourself as capable of doing things and through that expression you grow, in my opinion. I was, with a mental disability, going to RCC or UCR and personally my opinion is that it was intimidating because of my disability. When I'm with my peers and with Art Works and JTP, I feel 'yes, I can do this'. My peers understand and especially when someone who is teaching me also understands what I am going through – it's a great idea.
19. **Comment:** I was on the prevention and intervention team and we talked about this. We thought this was a good idea because it's going to reach the people like myself who had a hard time reaching out. This would be a great starting ground for someone with mental illness who has not gotten help and it will bring out many different talents. Now I feel I can do 'this' and can do 'that'. It will bring this to those people in the population who would not come out for treatment or a mental health program, like the Hispanics. They might go to an art program or take their kids to go see this and I think it's a really good idea myself.
20. **Comment:** Some of the outreach programs that are being talked about are going to the pregnant women/single mother home on Magnolia and to participate in going into the parks on Saturday. So is arts a possibility for them to pass their time and really find themselves? And what about sober living homes so we can have a program to outreach to them and bring them into our program.
21. **Comment:** When I was growing up we had almost 'rights of passage' like when I was in third grade, we had an art contest, and it was in a town of about 20 thousand. All our drawings and paintings were put on the windows downtown at Halloween time. In the 4th grade, we got to sing on the radio; in the 5<sup>th</sup> grade, I can't even remember what it was; and in the 6th grade you got to go to summer camp for a week. So there was something you were going to do for each grade as you progressed. I think the main thing I want to point out is when your picture was displayed on the window and you had used everything you could to do it – you might not have been the best artist - people recognized you and your parents came to see the picture and you shared in what everybody else was doing and were recognized. I think that is the most important thing with arts that we are looking at. They created, they participated, and they were recognized. Also at the May is Mental Health Month event, when we had our open house, the young lady that went

## ATTACHMENT A

with me from Hemet at the NAMI table had an art tablet and she was sketching and they were the most beautiful drawings that I think I have ever seen. What an opportunity for her to participate in something we are putting on so that she can be recognized. She can't afford to go to Hemet Valley Art Association to take art lessons, but she certainly can participate through Jefferson or whoever the provider is going to be in Hemet. I just thing this is going to be a fabulous project.

**Response:** I don't think this proposal really states accurately what will actually come out of this program. There will be much more opportunity and many more outcomes than what is written. When we start implementing it there are so many other opportunities that will arise because it seems that every other week we're notified about an art exhibit or an opportunity to present art work or a contest and to me it's just a lot that can really come out of this if we're organized.

22. **Comment:** I wanted to find out if this is the city of the arts in the way the mayor says it is - that it is the renaissance of time and he really supports the arts. Has this project been presented to the mayor?

**Response:** Probably not this project, but the Art Works has and I think the Art Works program was actually recognized by the city. But this proposal hasn't be implemented, so we haven't shared it yet and we won't until it's been approved.

23. **Comment:** I just want to make everyone aware that in addition to our main Mental Health Board, we also have Regional Boards, and our Desert Board is very progressive. Every year they have an annual art contest where they have drawings and paintings and have for a long time recognized that (in advance of the department) how important this is and we need to complement them in doing that and being progressive in what they are doing.

24. **Comment:** I am on the Desert Regional Mental Health Board and my favorite time of the year is May when we get to put on our May is Mental Health Month event which is our art contest or art show and now we're up to our 6<sup>th</sup> annual. We get a whole gammet of art from stick figures to really elaborate paintings and elaborate sculptures and I don't think there is anything more thrilling than to see the story these stick figures tell. So it doesn't matter your ability, it really doesn't, because some of the most powerful expressive artwork I have seen are those little stick figures. I commend the artists in the community and we seem to have a lot of artists. This is a great way to express your thoughts and stories and your trials and hurts and everything else, so I'm all for it.

## ATTACHMENT A

25. **Comment:** I think strength is also to reach underserved populations like the Hispanic community and some of the different place where stigma is really high in other populations. The good thing about art is that it transcends cultural lines so not only will people be attracted to it with their family, but it is a better way of expressing a story, a play, or a visual medium.

## ATTACHMENT A

### Additional Clarification Requested from the MHB

26. **Comment:** This component appears to be under budgeted for the potential needs of those who will take advantage of it

**Response:** As this project will be a pilot program, the funding requirements were assessed and discussed during the development process and determined to be sufficient to support the initial implementation.

27. **Comment:** What about outcomes for the project and will that information be collected?

**Response:** The "Project Measurement" section in the Plan, Exhibit C, page 8, addressed how the project will be reviewed and assessed. Outcomes will be provided at the conclusion of the project for evaluation.

28. **Comment:** Will the state look at this as a new innovation program or just a continuation of the Art Works Project that was funded under CSS?

**Response:** The Art Works and Recovery Arts Core project are two separate and distinct programs. The Recovery Arts Core project has yet to be approved or funded for implementation. The Arts Works was provided start up funds under CSS to establish a gallery and classes in Riverside and surrounding areas and is sustainable through outside grants and donations. The Recovery Arts Core project enables the concept of arts recovery to be delivered throughout the county in a mobile format and to a variety of communities through both existing peer centers and other community organizations.

29. **Comment:** If this has great measurements and outcomes, does it have to be evidences-based in order to continue?

**Response:** The results of the project will be evaluated and is not required to be an evidenced-based practice.

# ATTACHMENT A

## Feedback Form Comments

**Of the 23 Feedback Forms submitted: 18 were “Very Satisfied”, 3 were “Somewhat Satisfied”, 1 was “Satisfied” and 1 did not indicate a Response**

### **1. What do you feel are the strengths of the plan? Please identify the program and age group if applicable:**

- Writing about our feelings on paper and sharing it with others. The short exercises that they have us do.
- We show the community about the service that the arts have to offer for them. It will help them in their recovery.
- Painting.
- I believe the strength of this plan is being out and connecting people to the right agency.
- I think it's a good idea because it will help to understanding us as individuals plus it helps others by telling our story and letting others know that everyone is the same.
- We need programs for children of all ages.
- Getting in touch with feelings in a deeper way.
- Art Works deals with adult and young adults and inspires them to create art and release tension inside themselves. The strengths are the creativity and inspiration it holds and gives.
- Provides peer driven outreach innovative ideas to express change. Meets people where they are. Creates opportunities for peers.
- The strengths of this plan incorporate peers teaching basic fundamentals of art, creativity, and inspiration.
- Help with arts – less stress.
- I think it sounds good. Very educational and interesting.



## ATTACHMENT A

- I really believe that the Art Program is great. I really feel it helps peers get in touch with themselves. I believe that we should look at all different.
- To give those who want and need to express themselves the opportunity to share and display their artwork. It appears that "In Our Own Voice" can be done and this is a wonderful program.
- The strengths are: mobile unit(s), peer artists, drama, and OT (OT saved my sanity many times). There is the Fox Theatre opening soon and could there be a possibility of collaboration with Fox in RSA?
- To provide opportunities to create and hopefully appreciate the Art Works Program in the greater community. To peak interest and incentive towards providing interesting classes and activities.
- To broaden role and scope of peer-based services to enhance recovery education. This will be a very effective anti-stigma outreach activity, I believe.
- Positive approach to individual recovery.
- Recovery Model. Innovative. Reaching more consumers.
- The strengths are some good ones. I believe it should be for all ages.
- This is a great program that will benefit our community.
- Peer Driven. Creative, Mobile Unit, Recovery and Wellness Model.
- Appears to be a well thought, proven and will enhance the lives of consumers involved.

## ATTACHMENT A

### 2. What Concerns do you have about the plan? Please identify the program and age group, if applicable.

- I'm concerned about us not having enough funding for the program. (See page 10, Response to Comment 26)
- I think this plan will help the youth program and older program to let the organization know that in mental health there is recovery.
- May it work? (See page 10, Response to Comment 27)
- May it get filled up? The project will run in 6 to 8 week cycles at each location and provide training to facilitators at those locations. This mobile 'train-the-trainer' concept allows each organization to incorporate and sustain arts recovery programs within their organization and continue to reach more people in the community after the initial training has been concluded.
- This program will only benefit everyone in the communities and families who would otherwise be at a loss as to where to go for help. I have no concerns, just optimistic.
- I do not have any real concerns about it because the age should be maybe 16 and up.
- We need adult programs for all adults.
- Need for me.
- The only concern I have is the funding or not enough funding it receives. Another concern is that young adults and adults might not have transportation. (See page 10, Response to Comment 26)
- Concerned that Art will be taken out of education.
- Only concern is to have the funds to start this program as well as creating jobs. (See page 10, Response to Comment 26)
- Arts Gallery.
- Types of art from different cultures.

## ATTACHMENT A

- That there is sufficient outreach and publicity in all regions of the County to know about this opportunity. (See page 5, Response to Comments 9 and 10)
- Mobile Unit – insurance for drivers who travel to cities.
- That it is funded properly and that people would feel comfortable in being able to express themselves in a care-free environment. It is also a tremendous therapy for coping skills. Very beneficial.
- Make sure all populations of need are outreached to. (See page 5, Response to Comments 9 and 10)
- Outreach to non-compliant, indigent mentally ill. (See page 5, Response to Comments 9 and 10)
- My concern should be that it should be recreational.
- Exhibit C – 1<sup>st</sup> paragraph: Services provided in all three regions. The plan narrative says Western, Perris, Hemet, and Temecula in Mid-County Region and Palm Spring in the Desert. There may be additional cities with ethnic disparities that will benefit from the “Arts Work” Program. (See page 2, Response to Comments 4 and 5)
- Exhibit E – Only funding is for TAY and Adults. To be inclusive of all ages and address prevention and early intervention, direct services should be given to children and youth ages 0-15. They, too, would benefit from the “Arts Work” Program. (See page 2, Response to Comments 1, 2 and 3)
- This component appears to be under budgeted for the potential needs of those who will take advantage of it.