



APPENDIX IV.

Focus Group Results

Community Collaborative Needs Assessment Focus Group, 2-16-09

Group Number	Priority 1 Need	Priority 2 Need	Priority 3 Need	Priority 4 Need
1	Knowledge of available services and resources, especially for children and families.	Transportation to services once identified and/or established		
2	Transportation	Appropriate Competent evidence based services		
3	Pro-social after school programs for children	Positive community recreation activities	Alternative School Options	
4	Treatment for Batterers	Specialized treatment in general in timely fashion		
5	Youth Activities	Consolidated list of support programs	Parent Programs/Classes/ Support with transportation available	
6	Transportation	Food, Shelter, Medical services	Substance Abuse Services for Families	Walk in clinics for services
7	Adequate number of competent service providers	Walk in face/face STR services	Timely services in general	

As part of the 2/16/09 Community Collaborative meeting, Attendants broke out into 7 groups of about 5 to 8 persons each to discuss their perceptions on services needed in the Five County area. Results of each group discussion were then shared with the Collaborative as a whole, with priorities noted as in the above chart.

A number of common themes emerged. There appears to be a strong perceived need for transportation, competent service providers, a comprehensive list of available services, walk in face to face services, timely services, resources/treatment for parents and families, and pro-social recreational activities for children.

CFAC-Consumer and Family Advisory Committee-1

2/10/09

Service Delivery	Youth Services	LME Staff & State Leadership Improvement	Education of Services of the LME and support groups	Transportation	
Counselors	Support groups for youth dealing with mental challenges	Better state leadership	Educational info about mental health	Access to transportation	
Prompt appointments	Facilities or programs for hard to place youth that suffer from MH needs	Better LME staff leadership	Make consumers aware of support services & support groups	Better transportation especially for Halifax and Warren Counties	
Faster approval of plans of care for consumers		Bigger facilities for inpatient	Tell the general public about support services	Help with transportation money for consumers	
More supervision of staff of MH facilities			What services are in Warren Co.	Help people who do not have their own transportation	
Help with counseling people who need it.			Education of all citizens on stigmatizing groups	Transportation	
Counselors					

CFAC-Consumer and Family Advisory Committee-2

2/10/09

Housing	Insurance	Job Training	Medication	Resource	
More services for the homeless	Help for people with no insurance	Job training	Medication	More activities for consumers	
	Help with transportation money for consumers with no insurance			More training workshops	

Service delivery and education about available services and how to access them were the main themes in this focus group process. Transportation continues to be a concern for consumer groups in general.

CIT- Crisis Intervention Team Training for

LE-Law Enforcement

2/17/09

Family Involvement	Education	Communication /Coordination	Transportation	Treatment Compliance	Custody Issues
A way for MH to communicate with the family members before taking action on a consumer	Too many diagnosis for kids	Better communication between MH / Doctor / LE	Transporting to facility after diagnosis	Tx to reduce recidivism	When to use restraints during the process
Family or caretaker understanding of their responsibilities of the person with these disorders	Educating or should I say training for LE Officers in dealing with mentally ill	Doctors not understanding LE	Waiting for deputy	Reoccurring problem with same person	Which weapon to use if force is needed
Family involvement	Education for police and citizens	MH not understanding our problem	IVC process takes too long	Outpatients receiving help on maintaining medication	Don't wait to hear back from one location (hospital) before checking with another
Family should do regular checks on their family members	Magistrate to receive more training or guidelines to follow before issuing IVC papers	A.I.D. system so we know as police officers who we are dealing with	Released too soon from the hospital. Not enough tx on a commitment	Maybe for future come up with guidelines that DSS may enforce to clients that are mentally ill to take their meds, those that are receiving DSS assistance	
	Continuing education	Bing able to get in touch with someone to answer questions			
	Training for LE/ Magistrates/ etc.				
	The magistrate knowing if he should issue the paper or not				
	Training for magistrates on when and when not to write IVC papers				
	Community info on these disorders				

HIV/AIDS Task Force-Focus Group

February 10, 2009

Lack of local resources in each county.	General Follow-up	Employment	Education about resources and mh/dd/sa in general.		
Ex. Warren Co. does not have MH-Providers and lack of knowledge of when new Providers come to the area.	Poor follow-up after STR makes the 1 st referral.	MH consumers need both part-time and full-time employment opportunities.	Lack of information that is easy to read-5 th grade level on mental health illnesses.		
Community agencies don't know about natural resources like support groups, etc. sometimes happening in their own buildings.	Difficulty with hospital discharge planning.	Transportation is needed particularly in areas like Warrenton.	Lack of info to groups like schools, senior centers, library presentations, churches, etc.		
Not enough support groups. Example-Divorce and Grief, etc.			Increase stress due to a lot of factors. Stress in the workplace-people maybe responding to this stress in ways they have not before. Staff need help dealing with stress themselves.		

There were three main themes of concern for this committee not necessarily in this order.

1. Employment opportunities including transportation to get to employment and other community resources. MH consumers need both part-time and full-time employment opportunities.
2. Education on MH/DD/SA resources available in each community for consumers, the community at large and stress management for staff in the workplace.
3. Poor follow-up by the LME to ensure the consumer is actually being hooked up with a Provider once the referral is made for service.