



VISION

FOR TRANSFORMATIONAL CHANGE

2020-2023
STRATEGIC PLAN

MHSOAC

Mental Health Services
Oversight & Accountability Commission

THE MENTAL HEALTH SERVICES OVERSIGHT AND ACCOUNTABILITY COMMISSION developed this strategic plan in consultation with clients and families, community advocates, state and local policymakers, services providers and a variety of public and private sector partners.

As a result, the plan reflects the urgency of our times as the inadequacy of multiple public systems are compounded by changing social and economic conditions. Despite a seemingly prosperous economy, poverty and housing shortages, low wages and high costs, inadequate access to health care and other risk factors are contributing to unacceptably high levels of homelessness, childhood trauma, substance abuse and a variety of mental health needs.

At the same time, emerging scientific knowledge, new technologies and experience in system design makes it possible to prevent and respond more effectively to mental health needs.

The Commission's experience over the last 15 years – and its engagement with stakeholders over the last year in the strategic planning process – have reaffirmed the imperative for transformational change in public and private mental health systems to achieve the intended vision that everyone who needs care receives effective care when they need it.

California voters in enacting Proposition 63 in 2004 charged the Commission with catalyzing that change and advancing that inclusive vision. This strategic plan affirms the Commission's long-standing commitment to use its authorities, resources, and passion to reduce the negative outcomes of mental illness and promote the mental health and wellbeing of all Californians.

THE COMMISSION'S MISSION

The Commission works through partnerships to catalyze transformational changes across service systems so that everyone who needs mental health care has access to and receives effective and culturally competent care.

OUR CORE PRINCIPLES

- Wellness and Recovery
- Client-Consumer and Family-Driven
- Community Collaboration
- Cultural Competency
- Integrated Service Delivery

TERMINOLOGY

The Commission uses the term mental health throughout this plan to include any services required to support a person's mental health and wellbeing, which could include services for substance use disorder, physical health, housing, or other needs.

— Wellbeing for all Californians —

THE COMMISSION'S VISION STATEMENT





THE PROMISE OF THE MENTAL HEALTH SERVICES ACT

The Mental Health Services Act was crafted to support transformational change in mental health care and the Mental Health Services Oversight and Accountability Commission was given the authority and responsibility to drive that change.

More than a funding stream, the Act seeks to counter the programmatic fragmentation, the rationing of care, and the narrow eligibility requirements that have frustrated efforts to develop effective and sustainable systems of care.

The Act requires counties to engage stakeholders – including those needing care and their families, other public agencies and care providers – to define services and desired outcomes.

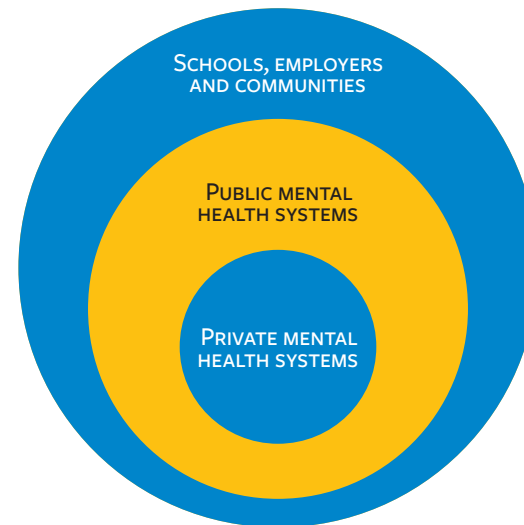
The Act dedicates funds to prevention and early intervention. The Act provides funds that can be used to link and leverage the resources from rigid entitlement programs. And the Act – acknowledging the need for new strategies and solutions to solve “persistent, seemingly intractable mental health challenges” – allocates resources for county-led innovation projects.

To fulfill the potential of the Act, the Commission considers how other financial resources and potential partners can be engaged to advance scientific knowledge, help reduce the risk of trauma, aid in early identification of mental health needs, provide supportive housing and employment, and expand the services covered by employer-sponsored health care.

This holistic perspective puts consumers and families at the center of decision-making. It elevates the integration of activities across systems – from public health, education and employment strategies, to child welfare and public safety – to achieve the shared goals of minimizing harm and maximizing wellbeing. A systems approach connects data to develop common understanding, smart policies and effective programs. Well-functioning systems coordinate funding, facilities and staffing, and they learn by evaluating and improving strategies and services.

Equally important, a holistic perspective illuminates the extraordinary opportunities to advance the mental wellness of all Californians through a public health approach; partnerships with schools, universities and employers; and, by uniting physical and behavioral health

POTENTIAL PARTNERS AND RESOURCES





THE IMPERATIVE OF TRANSFORMATIONAL CHANGE

The Mental Health Services Act, in prioritizing prevention and early intervention to reduce severe and disabling mental illness, lists seven outcomes for improvement: suicide, incarceration, school failure, unemployment, prolonged suffering, homelessness and the removal of children from their home.

Californians continue to experience unacceptably high rates in each domain. The costs and consequences associated with incarceration and homelessness, in particular, are emerging as a priority for the public and public officials. The complexity of these heart-breaking cases requires public agencies to assertively move “upstream” to address the root causes of the problem.

More broadly, public agencies are under pressure to better respond to the social and economic trends that are eroding the social determinants of health, increasing a variety of health-related risks and eroding resiliency factors that enable people to manage and recover from adversity.

TRANSFORMATIONAL CHANGE DEFINED

Transformational change fundamentally restructures organizational operations and cultures, policy frameworks, funding streams, programs and interventions to accelerate the pace and scale of improvements. Transformational change strategies produce exponential rather than incremental improvements. Transformed systems are adaptive, learning and sustainable.

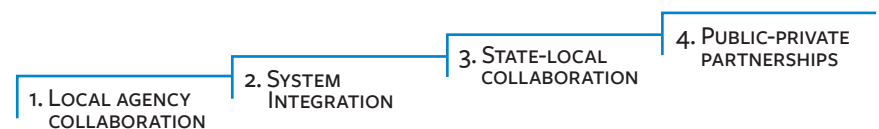
Transformation in public systems requires deeper relationships among government agencies that are serving the same individuals, families and communities. Agencies must overcome organizational silos, a compliance-only mentality, and a scarcity view of resources.

Transformation also requires a new role for state government – aligning statutes, regulations, funding and other policy infrastructure – to enable and encourage local collaboration.

State and local governments also need to partner with the private sector – including nonprofit organizations, philanthropies, employers, innovative companies, social impact investors – to link financial resources, technologies, and the capacity to innovate.

In addition to these new relationships, success will require extreme competence in the ability to execute, evaluate and continuously improve strategies, programs and services.

TRANSFORMATIONAL CHANGE REQUIRES NEW RELATIONSHIPS AMONG GOVERNMENTS



THE LEVERS OF TRANSFORMATIONAL CHANGE

From a State perspective, and particularly from the view of the Mental Health Services Oversight and Accountability Commission, seven levers enable transformational system change:

- 1. Goals and metrics** are required to establish agreement on desired outcomes, the commitment to do whatever it takes, and measure progress.
- 2. Engaged diverse communities** – including consumers and families from different cultural and social backgrounds, service providers, local governments, employers and others involved in the public and privately funded behavioral health systems – drive changes needed to increase access to high quality services and improve outcomes.
- 3. Data systems** inform policy-making, program design, service management and continuous improvement.
- 4. Knowledge transfer** and access to information enables all public agencies, partnerships and communities to deploy the best possible solutions.
- 5. The capacity to design, build and manage** programs and services enables agencies to integrate appropriate resources, develop service delivery systems and improve quality.
- 6. Incentives**, including financial resources, enable and encourage agencies to take risks and take the initiative to start something new and try something different.
- 7. Transparency and accountability** focus agency staff on goals, increase public trust and affirm a public commitment to improved outcomes.

These elements are essential for policymakers, executives, managers and professional staff to better communicate, cooperate, coordinate and collaborate to improve results.

LEVERS FOR TRANSFORMATIONAL CHANGE			SYSTEM IMPACT
GOAL SETTING	DATA SYSTEMS		STRATEGIC DIRECTION & INSIGHT
ENGAGED DIVERSE COMMUNITIES			AUTHENTIC INPUT & FEEDBACK
KNOWLEDGE TRANSFER	MANAGEMENT CAPACITY	INCENTIVES	ABILITY TO EXECUTE
TRANSPARENCY & ACCOUNTABILITY			POLITICAL MANDATE & SUPPORT

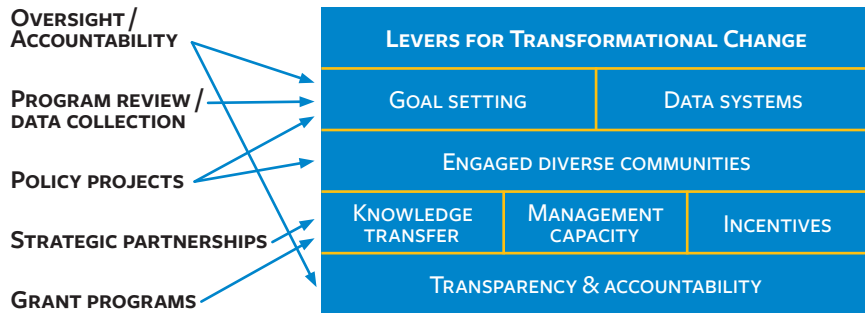
THE COMMISSION'S AUTHORITIES, CAPACITIES TO CATALYZE TRANSFORMATION

The Mental Health Services Act constituted the Commission to promote a public health approach – with Commissioners who are consumers, family members and lawmakers; members from health and mental health care, education and law enforcement, employers and labor.

The Act also grants the Commission specific authorities and responsibilities. The Legislature has interpreted those authorities by directing the Commission to prepare strategies, coordinate actions among state and local governments, administer grants, and prepare voluntary standards to promote mental health far beyond the publicly funded mental health system

- 1. The oversight and accountability functions** provide transparency on funding, services and outcomes; articulate how fragmented and siloed programs can be coordinated and integrated; and, identify opportunities to link and leverage funding streams, including MHSA funds, to improve results.
- 2. Program review and data collection** baseline current practice and impact; assess gaps in the service continuum; assist in developing, monitoring and communicating improvement efforts within and among counties; and, identify opportunities to change practices to support system-scale improvements.
- 3. Policy projects.** The Commission, upon direction from the Legislature and under its own initiative, executes projects designed to elevate and integrate research findings, experiential knowledge, and the wisdom of those with lived experience in order to articulate changes needed in systems and policies. The Commission's projects include criminal justice involvement, the state suicide prevention plan, workplace mental health standards, prevention and early intervention strategies, and school-based mental health.
- 4. Strategic partnerships.** The Commission partners with universities, institutes, civic entrepreneurs and other public agencies to develop, field-test and implement system changes and policy solutions. The Commission's partnerships include the Full Service Partnership Pilot, the Early Psychosis Learning Health Care Network, the Youth Innovation Project, and the multi-county collaboratives of an Innovation Incubator – all of which are connecting researchers, county leaders and practitioners to learn from each other, deploying the latest knowledge and building the capacity for continuous improvement.
- 5. Grant programs.** The Commission manages grant programs that resource essential and innovative services in ways that incentivize stronger partnerships, integrated services, braided funding and the evaluation required for continuous improvement. The Mental Health Wellness Act (Triage), youth drop-in centers, the early psychosis project, and the Mental Health Student Services Act are examples of such grants.

The Commission’s five primary functions align with the levers for transformational change and can be used to strategically drive change to systems, policies and practices.



THEORY OF CHANGE

The theory of change shows how principles inform actions to produce results to advance the vision.

MHSOAC LOGIC MODEL					
PRINCIPLES	COMMISSION FUNCTIONS	COMMISSION RESULTS	PARTNER RESULTS	POPULATION RESULTS	VISION
WELLNESS AND RECOVERY	OVERSIGHT AND ACCOUNTABILITY	TRANSPARENCY IN FINANCES, SERVICES AND OUTCOMES	CONSUMER VOICE IS HEARD AND RESPECTED	REDUCED STIGMA	WELLBEING FOR ALL CALIFORNIANS
CLIENT, CONSUMER AND FAMILY INVOLVEMENT	PROGRAM REVIEW AND DATA COLLECTION	PRACTICES BASELINED; GAPS ASSESSED; IMPROVEMENTS IDENTIFIED	PUBLIC SECTOR IS MORE EFFECTIVE AT ADDRESSING MENTAL HEALTH	EVERYONE CAN ACCESS QUALITY CARE WHEN THEY NEED IT	
COMMUNITY COLLABORATION	POLICY PROJECTS	PRIORITIES ESTABLISHED; CHANGES RECOMMENDED	PRIVATE SECTOR MENTAL HEALTH SYSTEM IS MORE EFFECTIVE	SEVEN OUTCOMES IMPROVE: SUICIDE INCARCERATION SCHOOL FAILURE UNEMPLOYMENT	
CULTURAL COMPETENCY	STRATEGIC PARTNERSHIPS	SYSTEM CHANGE MODELED WITH PARTNERS	SCHOOLS, COMMUNITIES AND EMPLOYERS SUPPORT MENTAL WELLBEING	PROLONGED SUFFERING HOMELESSNESS	
INTEGRATED SERVICE DELIVERY	GRANT PROGRAMS	INCENTIVES TARGETED TO IMPROVED SERVICES		REMOVAL OF CHILDREN FROM THE HOME	

PRIORITIES AND OBJECTIVES FOR 2020-2023

The Commission’s vision – “wellbeing for all Californians” – requires a broad public understanding of the potential to prevent, treat and recover from mental health issues; and those in need of care must have access to high quality, affordable and increasingly effective care. To advance this vision, the Commission commits to the following goals and objectives:

Advance a Shared Vision

Strategic goal 1: The Commission will advance a shared vision for reducing the consequences of mental health needs and improving wellbeing – and promote the strategies, capacities and commitment required to realize that vision.

Objectives:

1a. Promote school mental health as a prime opportunity to reach and serve at-risk children, families and neighborhoods.

- Implement the Mental Health Student Services Act, including working with grantees to capture learnings, improve efforts and achieve system-scale sustainability.
- Advance the principles and recommendations in the Commission’s school mental health report by guiding legislation, future state investments and community partnerships.

1b. Develop and advance a strategy for aligning public and private resources and actions toward the prevention and early intervention of mental health needs.

- As directed in SB 1004, distill and disseminate knowledge on how mental health issues can be prevented, detected early and addressed at population scale.
- Integrate a robust monitoring strategy for prevention and early intervention spending into the Commission’s review of county reporting documents and the Commission’s Transparency Suite.
- Improve technical assistance and related activities to more effectively build capacity at the community level to coordinate resources and services to improve outcomes.
- Communicate the potential to prevent mental health issues to public and private sector decisionmakers.

1c. Establish and promote the adoption of voluntary standards for the workplace to reduce stigma, increase awareness, and guide strategies to support mental health and wellness.

- As directed by SB 1113, and in consultation with employers, employees and other stakeholders, develop voluntary standards for adoption by private and public sector employers.
- Develop and propose an implementation strategy, including ways to promote, support and evaluate programs to document costs, benefits and opportunities for improvement.

ADVANCE DATA, ANALYTICS AND OPPORTUNITIES TO IMPROVE RESULTS

Strategic goal 2: The Commission will advance data and analysis that will better describe desired outcomes; how resources and programs are attempting to improve those outcomes; and, elevate opportunities to transform and connect programs to improve results.

Objectives:

2a. Further develop the Transparency Suite at MHSOAC.CA.GOV to capture more detailed information that is easier to find and interpret.

- Work with state and county agencies to capture accurate and consistent fiscal, program and outcome data from revenue and expenditure reports, three-year plans, annual updates, annual and three-year PEI evaluation reports, and innovation plans and final reports
- Deploy the technology so information can be efficiently integrated into the system and easily found by stakeholders who want the information to design, manage or evaluate policies and programs.

2b. Refine the Commission’s management of county-level information to better inform decision-making by state and county policymakers and administrators.

- Better manage county-level data – including the county reports listed above, as well as Full Service Partnership and client service information – to accelerate the transfer of knowledge and strengthen the capacity of counties to design, build and manage more accessible and cost-effective services.

2c. Further develop the Commission’s capacity to aggregate and integrate cross-system data, including data regarding health and mental health, education, employment and criminal justice to assess system performance and identify opportunities for improvement.

- Acquire and curate data from all relevant state agencies, including the departments of Education, Employment Development, Justice, Social Services and State Hospitals, and the Office of Statewide Health Planning and Development.
- Collaborate with other state-level efforts to integrate and deploy data to improve state policies, resource allocation, and access to services and outcomes, including the Governor’s proposed Center for Data Insights and Innovation.

CATALYZE IMPROVEMENT IN POLICY AND PRACTICE

Strategic goal 3: The Commission will catalyze improvement in state policy and community practice by (1) providing information and expertise; (2) facilitating networks and collaboratives; and, (3) identifying additional opportunities for continuous improvement and transformational change.

Objectives:

3a. Support and evaluate multi-county collaboratives striving to improve data analysis, the transfer of knowledge, and the management capacity required to improve results.

- Support the Full Service Partnership pilot to identify ways to improve this significant investment in addressing serious mental illness.
- Support the Early Psychosis pilot to advance the transfer of knowledge and capacity building for more effective detection and response to early experiences with mental health issues.
- Complete and oversee the projects of the Innovation Incubator and document the value of efforts to form and support collaborations to address specific issues.

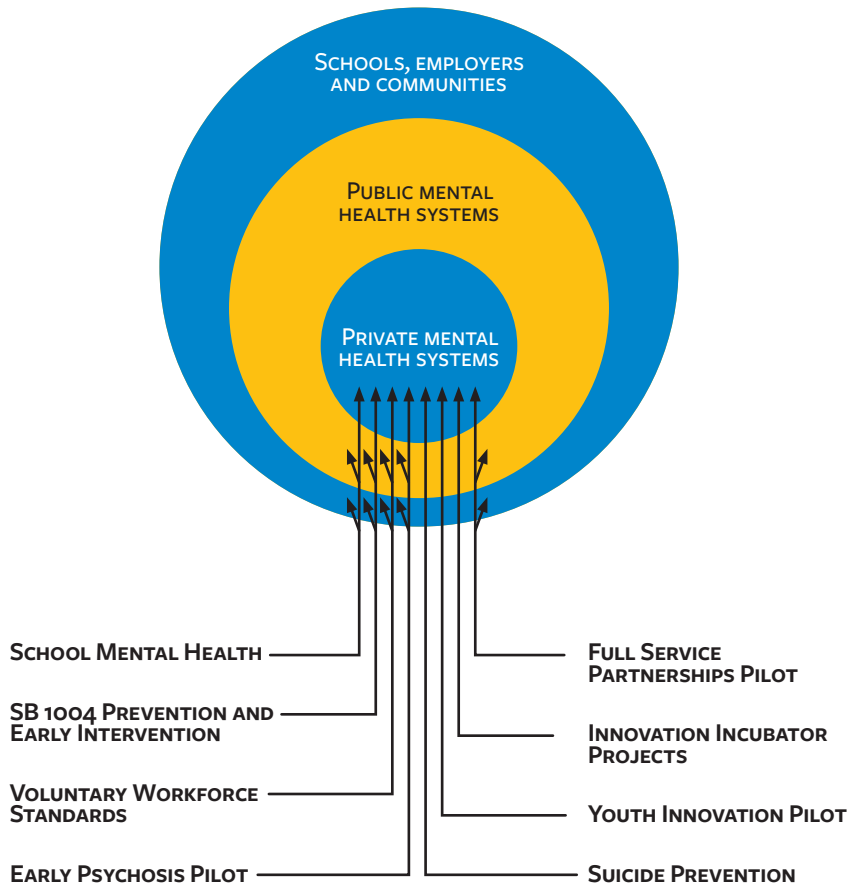
3b. Support implementation of Striving for Zero, the State’s suicide prevention plan for 2020-25.

- Work with the Governor, the Legislature and community leaders to establish an Office of Suicide Prevention, expand training resources, better integrate suicide prevention services into health care setting, and encourage the renewal of community prevention plans.

3c. Support youth-led efforts to advance and expand practices for consumer-led and consumer-centric services and expand access to youth-focused services.

- Support the Youth Innovation Committee in developing practices that engage youth in the design, delivery and evaluation of services; encourage counties to adopt those practices.
- Distribute funds to expand Youth Drop-In centers to improve access to care for young people.

**COMMISSION'S POLICY PROJECTS AND PARTNERSHIPS
TARGET TRANSFORMATIONAL CHANGE**



FROM PLAN TO ACTION

The strategic plan provides a coherent framework to inform and align the Commission's deliberations and decisions. The plan articulates specific objectives to focus the Commission's daily operations. And the plan communicates the Commission's priorities to partners, stakeholders and the public.

The Commission will assertively implement the plan, measure and assess progress, and refine and update the plan in response to legislation, events and experience. Five near-term opportunities:

1. **Effective use of Commission resources.** The Commission will rely on the plan to allocate financial resources and how the Commission spends its time and related staff resources, particularly on policy projects, oversight and accountability activities. In 2020, for example the Commission will develop a state strategy for prevention and early intervention and voluntary standards for workforce mental health – two prime opportunities to advance the vision of wellbeing for all Californians.
2. **Data, measurement and evaluation.** The Commission's Evaluation Committee will play an essential role in refining measures for the seven negative outcomes and in developing an evaluation strategy to inform state policy and community practice. The Commission staff also will develop specific measurable, achievable, realistic and time-bound metrics for each of the objectives in the plan, and publicly report progress using those metrics.
3. **Strategic partnerships.** Many of the strategic partnerships initiated by the Commission in the last four years are beginning to show results in terms of their intended objectives, as well as the potential for collaboration among counties and with the state to initiate transformational change. The Commission in 2020 will work with partners to look across those projects for lessons and insights.
4. **Internal improvements.** The Commission staff in 2020 will review internal procedures and operations to identify ways to more efficiently and effectively perform each of the Commission's functions.
5. **Communications.** The Commission in 2020 will significantly improve the quality and quantity of communications to improve public understanding of mental health needs, the potential for recovery, the value of services and the opportunity for transformational change to significantly improve results.

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