

Research and Evaluation Committee Meeting

MONDAY, AUGUST 24, 2020
9:00 – 11:00 AM



Agenda

Welcome and Introductions

Overview of MHSA and MHSOAC

Overview of the Commission's Research and Evaluation Work

The Role of the Research and Evaluation Committee

Next Steps

Adjourn

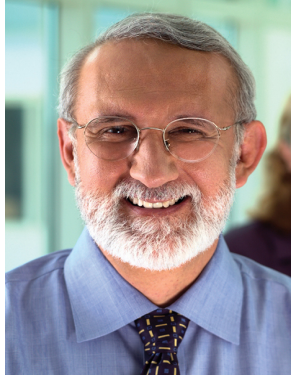
Welcome and Introductions

COMMISSIONERS DR. ITAI DANOVITCH AND MR. KEN BERRICK

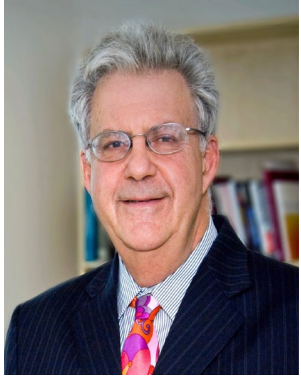




RIKKE ADDIS, M.A.



SERGIO AGUILAR-GAXIOLA, MD, PHD



ROBERT H. BROOK M.D., SC.D.



VICTOR G. CARRIÓN M.D.



ELEANOR CASTILLO SUMI Ph.D., BCBA-D



JONATHAN FREEDMAN M.S.P.H.



SHARON ISHIKAWA Ph.D.



BRIDGETTE LERY M.S.W. Ph.D.



GUSTAVO LOERA Ed.D.



APRIL LUDWIG LMFT



BELINDA LYONS-NEWMAN MBA



LAYSHA OSTROW Ph.D



MARI RADZIK Ph.D.



RUTH S. SHIM M.D., M.P.H.



LONNIE R. SNOWDEN, JR. Ph.D.



KATHERINE WATKINS M.D., M.S.H.S.

Overview of MHSA and MHSOAC

COMMISSIONER DR. ITAI DANOVITCH





Population:

- 40,000,000

Economy:

- \$3 trillion

Industry:

- Agriculture; Tech;
Media; Services

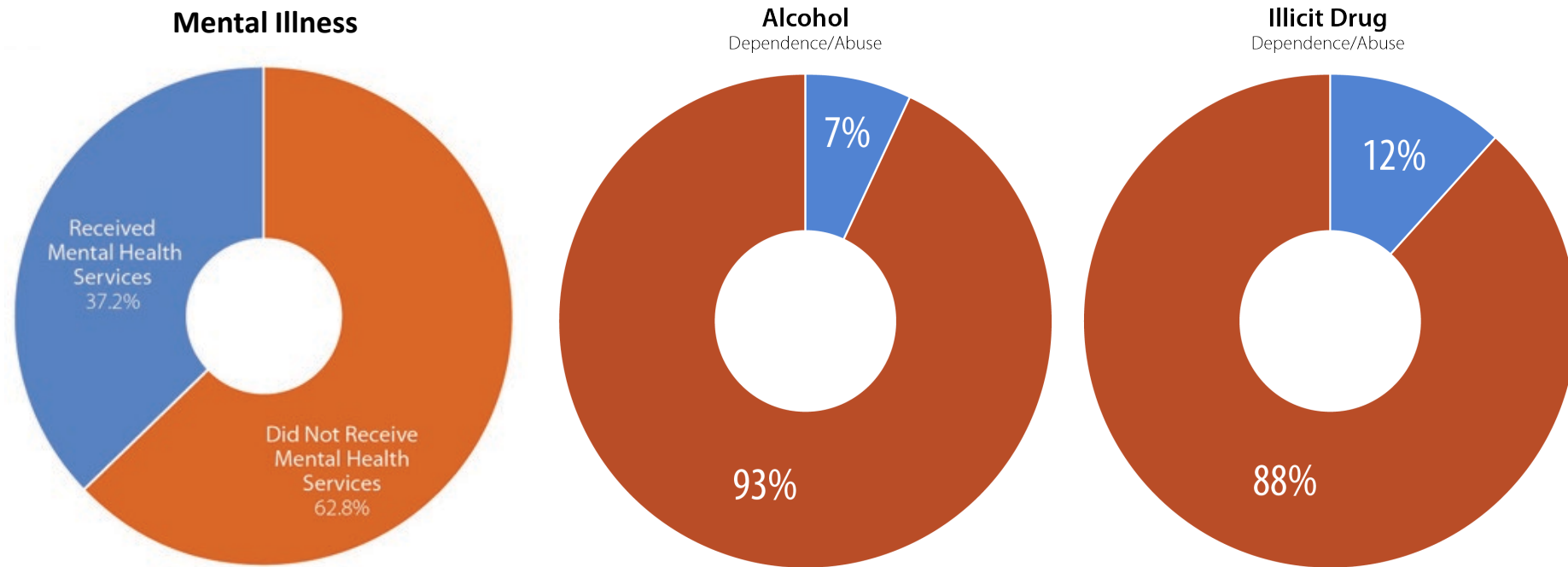
Geography:

- 840 mi of coast;
highest & lowest pts

Parks:

- 9 national; 118 state

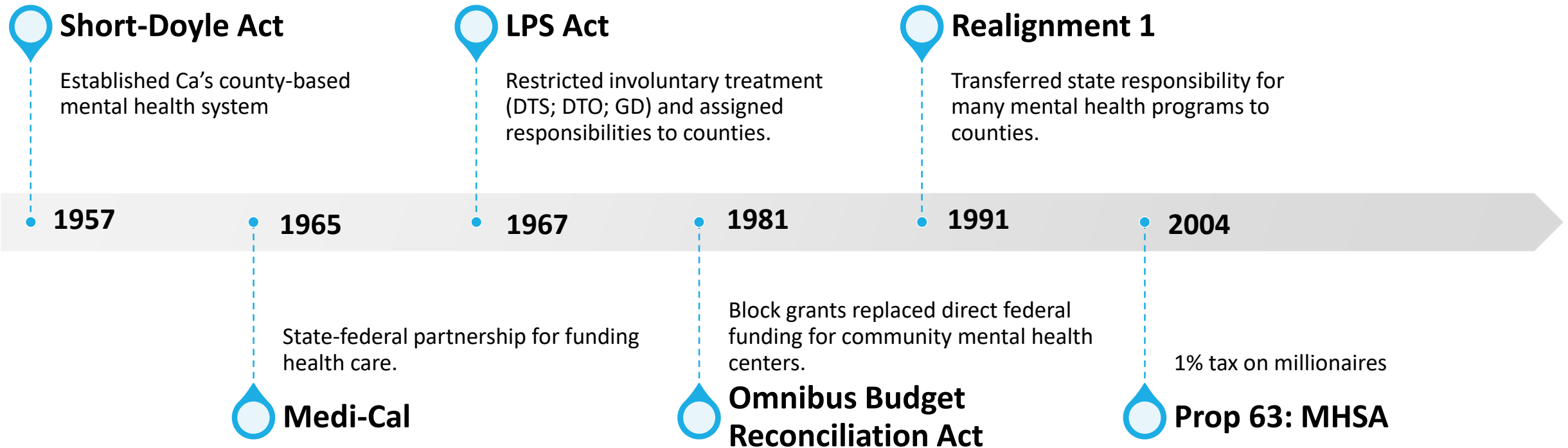
Treatment for Mental Illness, Alcohol, Illicit SUD California, Annual Average 2010 - 2015



% OF POPULATION WITH MENTAL HEALTH OR SUBSTANCE USE DISORDER

- RECEIVED TREATMENT FOR...
- DID NOT RECEIVE TREATMENT FOR...

Over time, state transferred responsibility for many mental health programs to counties





WELLNESS • RECOVERY • RESILIENCE

The Mental Health Services Act

- Voter approved in 2004 – Prop 63
- Address the shortcomings of and drive transformational change in the mental health system
 - Provide funding to expand and improve **mental health services**
 - Shift the emphasis toward **wellness and recovery**
 - Support **prevention and early intervention** and **innovation**
 - Improve **outcomes** associated with untreated mental illness including:
 1. Homelessness, 2. School failure, 3. Incarcerations, 4. Unemployment,
 5. Suicide, 6. Removal of children from their homes and 7. Prolonged suffering.
 - Promote awareness and **public engagement**
 - Reduce **stigma** and discrimination associated with mental illness
 - Ensure **oversight and accountability**

Mission

“Provide vision and leadership, in collaboration with clients, their family members, and underserved communities, to ensure Californians understand mental health is essential to overall health. Hold public mental health systems accountable. Provide oversight for eliminating disparities; promote wellness, recovery and resiliency; and ensure positive outcomes for individuals living with serious mental illness and their families.”



Components of the MHSA

1. Community Services & Support

- Provide **direct services** to individuals with severe mental illness using a client-centered, wellness and recovery-focused approach. Included is **full-service partnerships** and **housing**.

2. Prevention & Early Intervention

- Recognize early signs of mental illness, improve the implementation of timely services and **prevent mental illness** from becoming severe and disabling, **especially for underserved** populations.

3. Innovation

- Explore and develop **new mental health models** and **strategies** to increase access to underserved groups, increase the quality of services, promote interagency collaboration and increase access to services

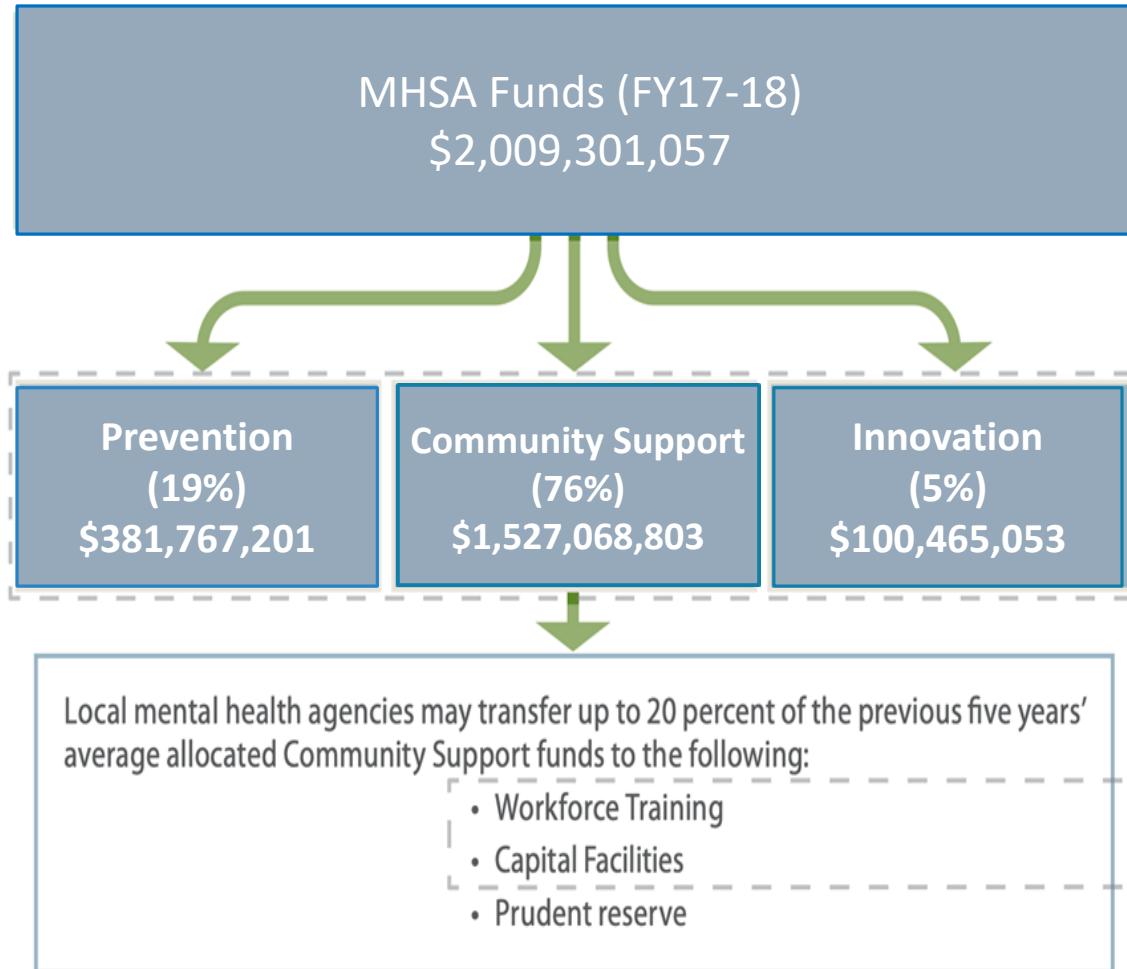
4. Workforce Education & Training

- Develop and **grow a diverse mental healthcare workforce** that provides services that are linguistically and **culturally competent** and includes the viewpoints of clients and their families.

5. Capital Facilities & Technology

- Supports creation of facilities or development of technologies used for administrative services or the **delivery of MHSA services**.

Funds allocated via 59 Local Mental Health Agencies



MHA Fiscal Reversion Requirements*

State law requires local mental health agencies to spend MHA funds within the following designated time frames or return (revert) those unspent funds to the MHS Fund for reallocation:

3 years:

Community Support, Prevention, and Innovation

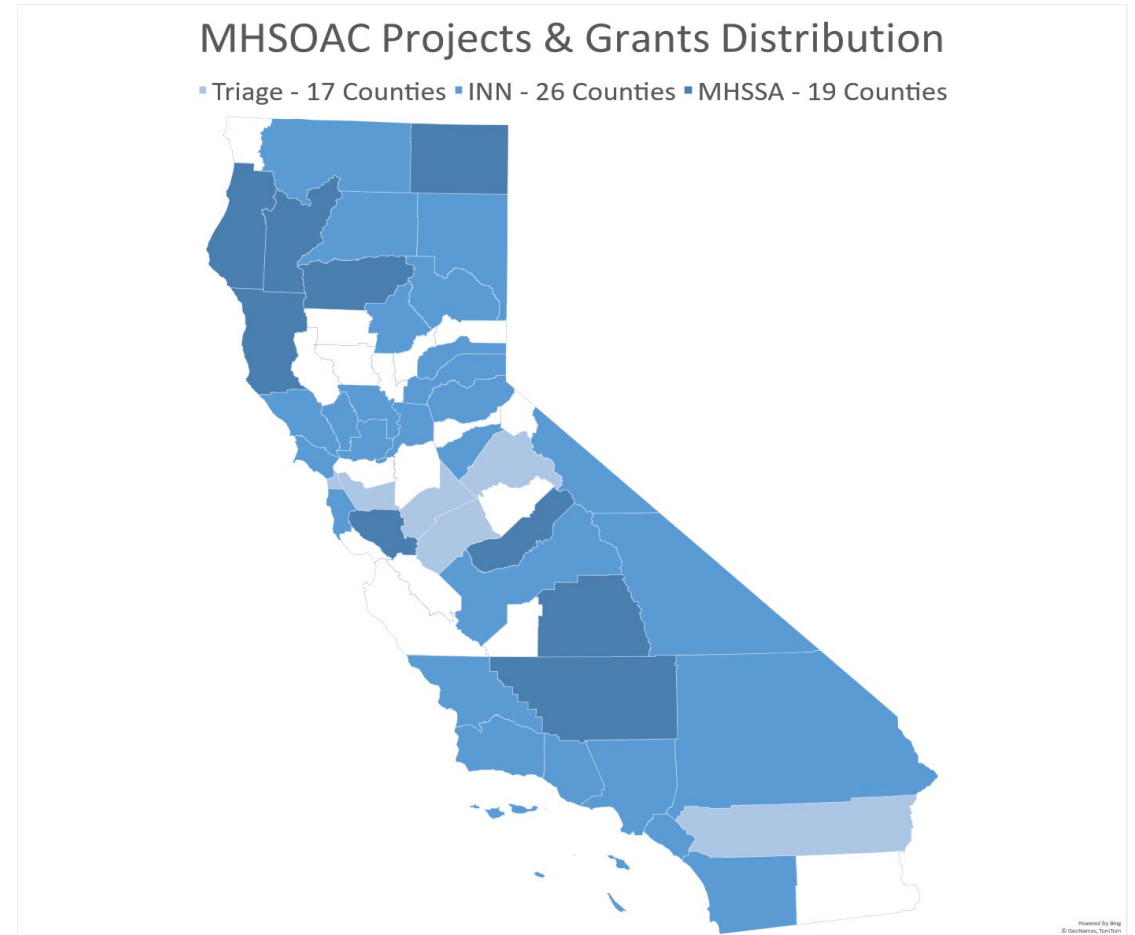
10 years:

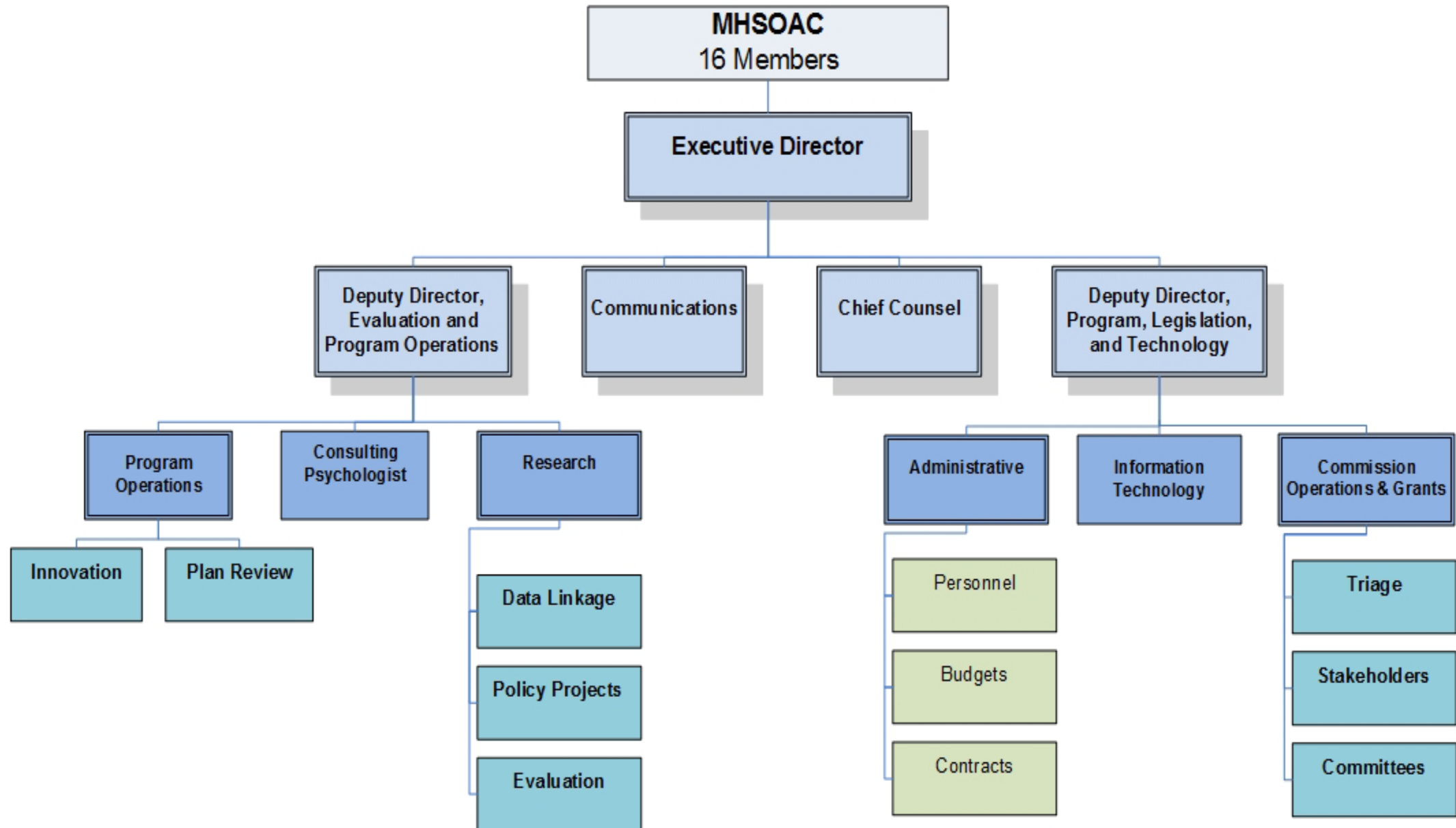
Workforce Training and Capital Facilities

Prudent reserve funds are not subject to reversion requirements.

The Commission's portfolio of collaborative projects and grant programs are key elements of a strategic plan for transforming mental healthcare in California

- Early Psychosis Prevention and Early Intervention
- Triage Crisis Grants and School Mental Health
- Innovation Incubator / Criminal Justice





The Strategic Plan affirms the Commission's long-standing commitment to use its authorities and resources to reduce the negative outcomes of mental illness



VISION
FOR TRANSFORMATIONAL CHANGE

2020-2023
STRATEGIC PLAN

MHSOAC

Mental Health Services
Oversight & Accountability Commission

SET DIRECTION AND ESTABLISH PRIORITIES

- Policy projects
- Legislative positions
- Incentive funding
- Research and data analysis

IMPLEMENT PRIORITIES AND DRIVE CHANGE

- Regulations for PEI and innovation
- Technical Assistance
- Stakeholder Contracts
- Triage grants for crisis intervention
- Early Psychosis Plus
- Workplace mental health standards

MONITOR AND EVALUATE WHAT WORKS

- Transparency projects (fiscal, services, outcomes)
- Mental health metrics
- Evaluation

DISSEMINATE, COMMUNICATE, AND SUPPORT

- Communication

Public mental health system:

- Counties will continuously improve access, quality, and outcomes
- Scaling up of effective strategies across the state
- Policy, funding, and regulatory barriers are addressed

Population:

- Public will to support mental health as an essential part of overall health and wellbeing

Private sector:

- Private insurance market will change the way it supports mental health
- Employer standards & policies support mental health

Mental health system is transformed

Everybody who needs care gets care when & where they need it

Wellness

Evaluation



Documenting Prog & Services

- Features of activities funded by the MHSa
- 5 components



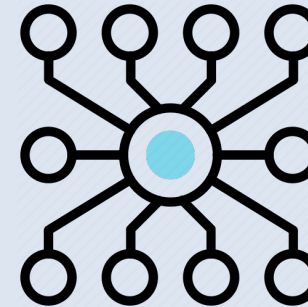
Measuring Outcomes

- 7 key outcomes
- Evaluation projects
- Impact of MHSa programs



Ensuring Fiscal Accountability

- Spending
- Reversion
- Program ROI
- Cost-offsets
- Value based outcomes



Improving Data Quality

- Transparency suite
- Planning tools
- Cross linking
- County reporting



OAC Function

- Strategic Plan
- Results framework
- RFP processes
- External audits

Overview of the Commission's Research and Evaluation Work

DAWNTÉ R. EARLY, PHD, MS, CHIEF OF RESEARCH AND EVALUATION

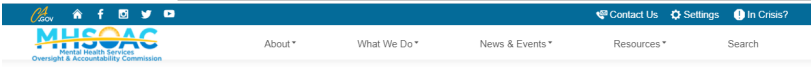


Advance Data, Analytics and Opportunities to Improve Results

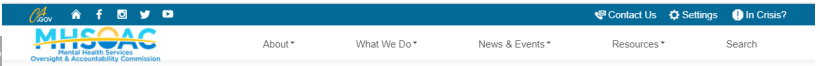
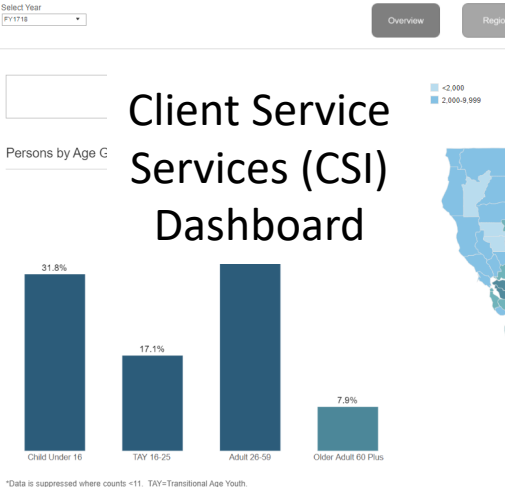
The Role of the Research and Evaluation Division in the Commission's Strategic Plan, 2020-2023

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.

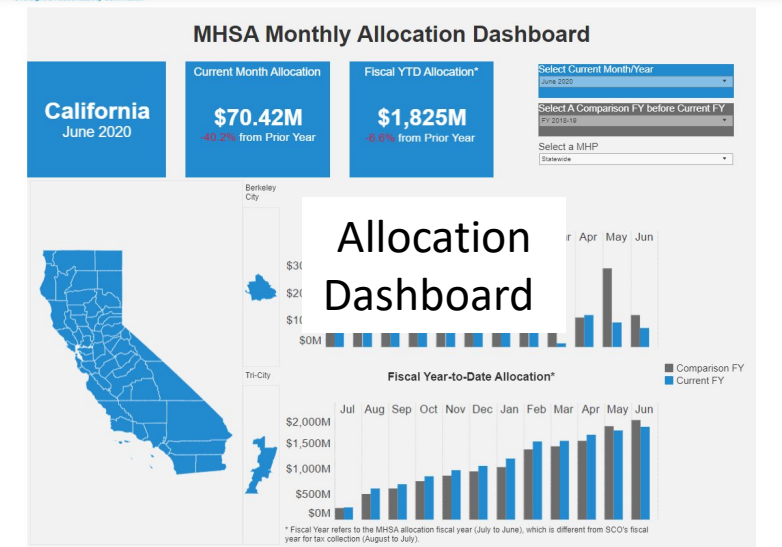
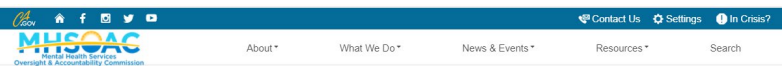
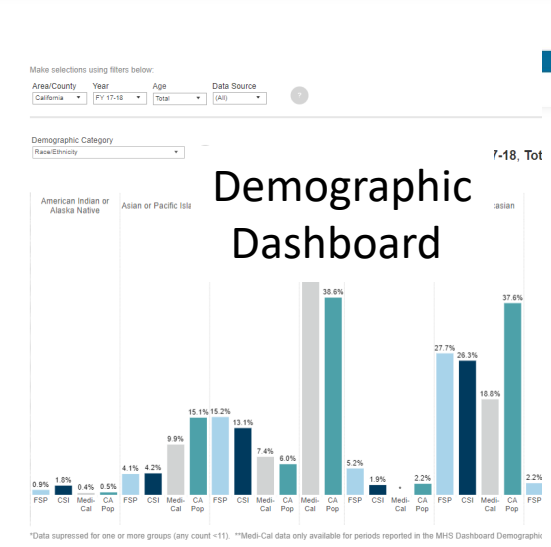
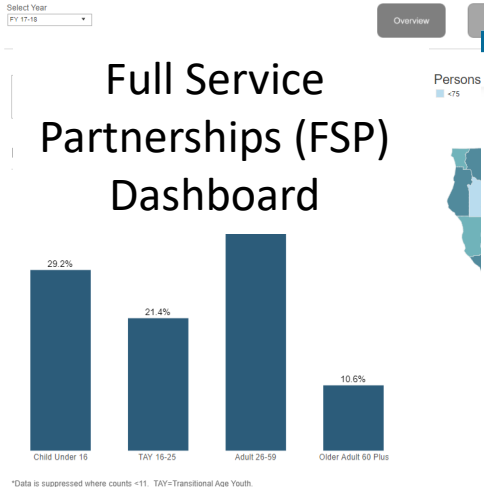
The Transparency Suite promotes understanding and accountability for finances, services and outcomes



Persons in Client & Service Information (CSI) Statewide FY1718



Persons in Full Service Partnerships (FSP) Statewide FY 17-18



The *Reducing Criminal Justice Involvement for People with Mental Health Needs Project* links Department of Justice and Full-Service Partnership (FSP) data

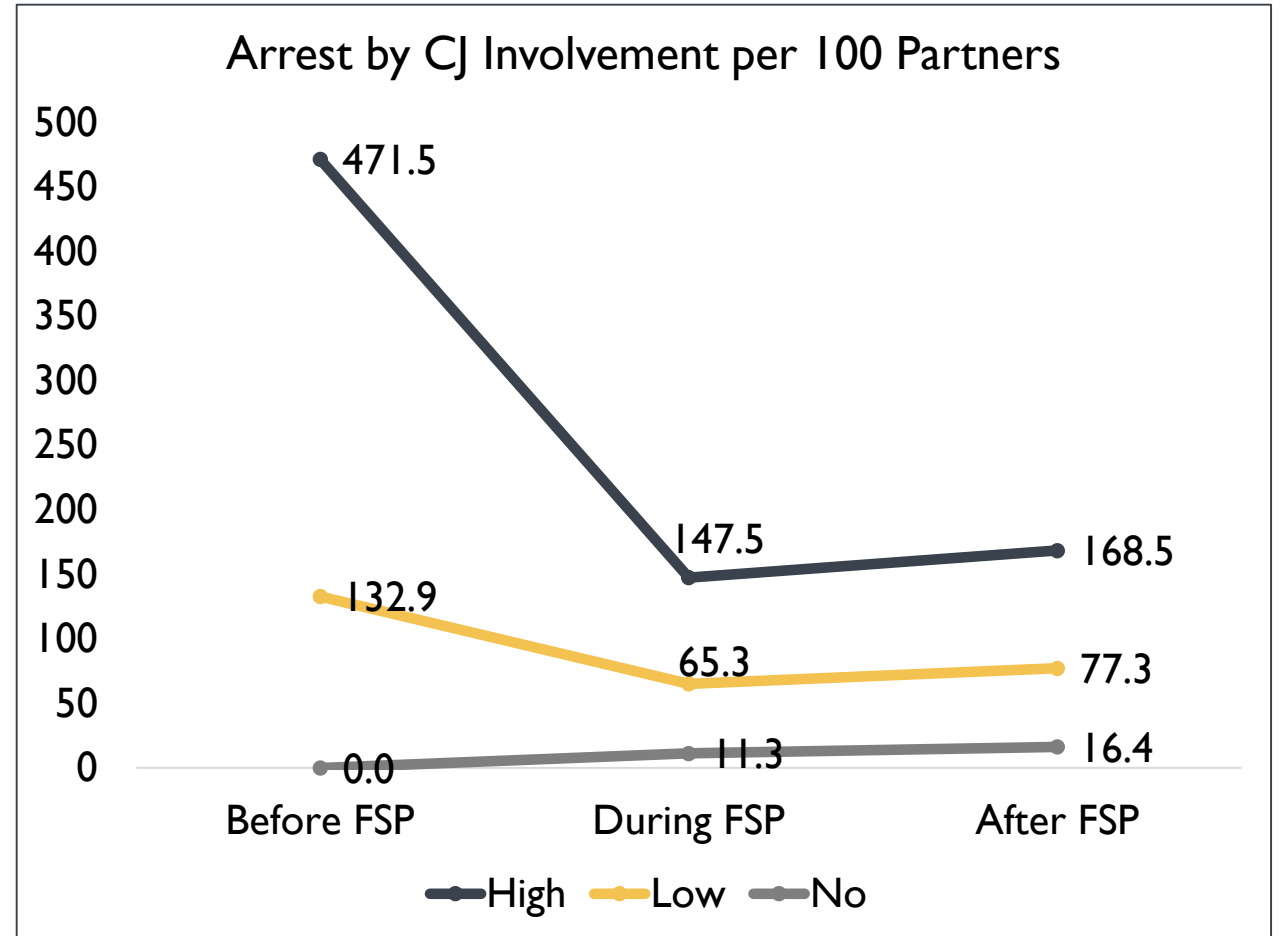
Partners were classified as No (0 arrest), Low (1-2 arrests) or High Criminal Justice (CJ) Involvement (3+ arrests) according their before enrollment arrest history.

High CJ Involvement

- Arrest rate declined by 69% from before to during FSP.
- Arrest rate declined by 64% from before to After FSP.

Low CJ Involvement

- Arrest rate declined by 51% from before to during FSP.
- Arrest rate declined by 42% from before to After FSP.



The Data Driven Recovery Project (DDRP) improves outcomes for behavioral health clients in the criminal justice system



The cohort of counties, led by Yolo County Health and Human Services include:

- Yolo
- Nevada
- Plumas
- Sacramento
- San Bernardino

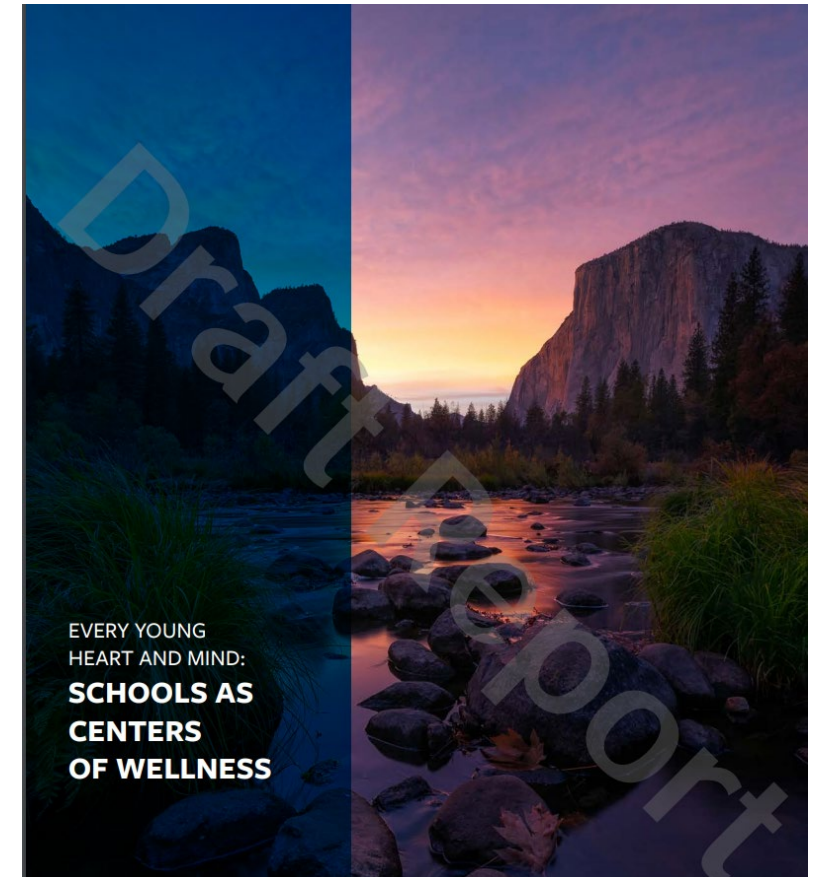
- Identify strategies for reducing the incidence, duration, and recurrence of arrests and incarcerations of people with behavioral health conditions
 1. Developing an individualized set of analytic tools to assist in identifying programmatic and systemic innovations and improve data resources that connect across agencies.
 2. Facilitates small inter-county workgroups

Policy projects document and recommend effective state and local policies and practices that can drive systems improvement.

- *Prevention and Early Intervention Project*, establishes priorities for investment and to develop a monitoring strategy for Prevention and Early Intervention, as directed by Senate Bill 1004 (Wiener, 2018).

The *Schools and Mental Health Project* has led to building and strengthening school-county partnerships

- The Triage School-County Collaboration grant program
- The Mental Health Student Services Act (MHSSA) - \$40 million one-time and \$10 million ongoing funding



Future Research and Evaluation Work

Memorandums of understanding are being pursued:

- California Department of Education
- Employment Development Department
- Vital Statistics

QUESTIONS
or
COMMENTS

The Role of the Research and Evaluation Committee

COMMISSIONER MR. KEN BERRICK



The Committee's Role

- Expert advice and guidance to the Commission to ensure that the Research and Evaluation Division meets the needs of the Commission
- Bagley-Keene Open Meeting Act
- Committee charter

Committee Charter

Purpose

The Commission's vision is *wellbeing for all Californians*. 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.

Core Functions

The core functions of the Committee are to provide expert advice and guidance to the Commission to ensure that the Research and Evaluation Division meets the needs of the Commission.

Public Comment

Next Steps

Meeting Adjourned
