



## STAFF ANALYSIS - SANTA CLARA COUNTY

**Innovation (INN) Project Name:** *headspace*  
**Total INN Funding Requested:** \$14,960,943  
**Duration of Innovative Project:** Four (4) Years

### **Review History:**

Approved by the County Board of Supervisors: June 19, 2018  
County submitted INN Project: July 16, 2018  
MHSOAC consideration of INN Project: August 23, 2018

This project was previously brought forward to the Commission on November 16, 2017 and was approved in the amount of \$572,273 for the eight (8) month ramp-up phase. Santa Clara County is returning to the Commission to request approval for the implementation portion of the *headspace* project.

### **Project Introduction:**

The County proposes to increase access to services for individuals between the ages of 12-25 years old by implementing the *headspace* model for treating youth with emerging mental health needs. The *headspace* model is an Australian national network of centers that function as a 'one-stop-shop' for youth to ensure they have the coping skills and support systems in place to successfully transition into adulthood. The County states that incorporating the *headspace* model will lead to better identification of the early warning signs of mental illness and suicide. The County originally presented the plan to the Commission on November 16, 2017 and requested funding to support the initial 8 month ramp up phase of the project which was used for initial startup, planning cost, site visits, and the completion of a feasibility study.

The County is now returning to request the augmentation of the budget in order to begin the remaining four (4) years, known as the implementation phase, of the *headspace* project.

*In the balance of this brief we address specific criteria that the MHSOAC looks for when evaluating Innovation Plans, including:*

- *What is the unmet need that the county is trying to address?*

- *Does the proposed project address the need?*
- *Are there clear learning objectives that link to the need?*
- *Will the proposed evaluation allow the county to make any conclusions regarding their learning objectives?*

*In addition, the MHSOAC checks to see that the Innovation meets regulatory requirements, that the proposed project aligns with the core MHSA principles, promotes learning, funds exploration of a new and/or locally adapted mental health approach/practice, and targets one of the four (4) allowable primary purposes: increases access to mental health services to underserved groups; increases the quality of mental health services, including better outcomes; promotes interagency collaboration; and increases access to services, including, but not limited to, services provided through permanent supportive housing.*

Santa Clara County states this Innovation Project meets the primary purpose of increasing access to mental health services and meets the innovation project category by making a change to an existing mental health practice that has not yet been demonstrated to be effective, including but not limited to, adoption for a new setting, population, or community. The County will achieve this innovation by adapting the *headspace* model from functioning in the national healthcare system in Australia to a public/private healthcare system in the United States.

## **The Need**

The County states the Innovation project is a result of the Community Planning Process (CPP). The County solicited ideas for Innovation projects from the community which resulted in four (4) needs that were identified by the community. Two (2) of the areas identified by community stakeholders focused on Transitional Aged Youth (TAY) and their wellness to prevent involvement in the child welfare and juvenile justice system, and ensure successful transitions into the community. More specifically, Santa Clara County states that young people with emerging mental health issues have difficulty accessing timely and appropriate services because the current mental health system is unresponsive to their needs. As a result of the lack of access to mental health systems early on, youth do not receive services until their mental health issues are severe.

There is research that shows that 75% of mental health issues surface in individuals before the age of 25 and it is the County's assertion that providing services for youth in combination with possible early detection and treatment of mental illness may reduce the burden and stigma of mental illness.

Our research validates the County's findings of nationwide identified goals. Studies show that only about half of all children and TAY in need of mental health services receive them. Furthermore, in 2009 the Congressional Research Service published a report with policy discussion items to address the lack of access to competent services in rural and some urban areas, and the issue of mental health services not being integrated with other services. The report indicates approximately one (1) in four (4) adults, 18 and older, living in the United States suffer from a diagnosable mental illness in any given year and

recommends that effective treatment options be offered at a greater availability in order to address society's perception of mental illness.

### **The Response**

As a result of stakeholder input, Santa Clara County has come forward with an Innovation Project which is an adaptation of the *headspace* model, specifically targeting children and Transitional Aged Youth (TAY). Created in Australia, *headspace* was designed to provide early intervention for children and TAY between 12-25 years of age. Australia developed *headspace* in an effort to address mental health in children and TAY as mental health issues were affecting about 1 in 4 children and TAY. As of June 30, 2017, *headspace* indicates they provided over two (2) million services thru its centers and online services, assisting a total of 355,000 young people.

The County intends to create Santa Clara County *headspace* in an effort to support all youth, regardless of their insurance coverage and will follow a "no wrong door approach" with zero exclusion. The County states that bringing the *headspace* model into the United States would be valuable in that it would provide early detection for children and TAY with the hopes of reducing the mental health population, ultimately making a change to an existing mental health practice that has not yet been demonstrated to be effective, including, but not limited to, adaptation for a new setting, population or community.

The County has completed the ramp-up period that encompassed in-depth research, site visits, planning and input from the youth advisory group, which will now serve as the foundation for the implementation portion of this project. Due to the conclusion of the ramp-up period, Santa Clara is returning to the MHSOAC with a budget augmentation to seek approval to begin the implementation phase of the *headspace* project. The County states that they estimate that 1,000 children and TAY will seek services from each of the two (2) *headspace* centers, serving a total of 2,000 children and TAY between ages 12-25 annually.

With funding from the Robert Wood Johnson Foundation, the Stanford Psychiatry Center for Youth Mental Health and Wellbeing, a feasibility study was conducted in the United States on how to replicate *headspace* in Santa Clara County. The study indicated that developing the model in the United States would be complicated due to the lack of national healthcare in the United States; however, it would be valuable to bring *headspace* into the United States. The feasibility study also exposed the following essential components:

- The *headspace* sites should be stand-alone sites so that youth feel this program is their own independent place for health care and mental health care
- Each *headspace* site should provide integrated care services to treat those with mild to moderate mental health conditions, including but not limited to: substance abuse issues, education and employment support, and access to health care
- Individuals who may need more intensive behavioral health treatment may be referred into the behavioral health system, if needed

- *headspace* sites should be marketed and advertised in an effort to draw in young people to access mental health supports and reduce the overall stigma associated with mental illness

The County will seek to lease two (2) *headspace* sites located in San Jose and the Palo Alto/Mountain View area. Several potential sites were reviewed by the County within the past several months and it is likely the County will enter into contract negotiations by November 2018 to secure both sites. The County indicates the leasing of both sites will not exceed five (5) years, as required per Innovation Regulations. The County indicates that MHSA Community Services and Supports (CSS) funds will likely sustain *headspace*; however, **the County may wish to clarify if CSS funds will also be utilized for the leasing of the *headspace* sites or if other funds will be utilized. Also, the County may wish to discuss how they will address any potential NIMBY-ism once the sites have been selected.**

Both *headspace* sites will incorporate the following four (4) integrated and co-located service components:

1. Behavioral health support
2. Primary care services
3. Educational support
4. Employment Support

The County will select Community Based Organizations (CBOs), selected through a bidding process, who will work with the County to provide services and resources for young people. This private-public partnership will allow a range of services that may be provided for youth at each of these sites. Santa Clara indicates that the incorporation of both mental health care and primary health care will assist in providing earlier detection of warning signs which may lead to more effective and preventive care. **The County may wish to clarify the process to ensure that data shared outside of *headspace* is safeguarded. Additionally, County may want to provide information on how they will ensure HIPAA compliance.**

The County, in collaboration with the selected CBOs, Stanford Center, and the Youth Advisory Group, will hire staff who will provide services at both *headspace* sites. Staff recruitment will begin once the plan has been approved by the Commission. In alignment with the feasibility study and in keeping with the conformity of *headspace*, staff will include, but will not be limited to the following: Psychiatrists, Psychologists, Physician/Nurse Practitioners, Substance Use Treatment Counselors, Mental Health Service clinicians, Community Coordinators and Peer Partners (**see pg. 9 for complete list of staff**).

**The selected CBO will provide two (2) staff at each *headspace* site who will work in the capacity of Peer Partners and Case Manager – the County may wish to consider hiring additional staff who will strictly provide youth/peer services, given the large amount of individuals expected to be served.**

The County states the innovative component of this project is bringing the *headspace* model into the United States, which incorporates an early intervention structure for youth

that has not yet been introduced. Additionally, developing the financial model of *headspace* in the United States in order to provide services for youth regardless of health insurance is another key innovative component. The County asserts this project will serve youth between the ages of 12-25 regardless of insurance coverage. The County and the Stanford Center has entered into discussions with Kaiser Permanente and professionals from Australia and Canada to seek guidance and input on how to create a blended fiscal model of both private and public insurance.

Santa Clara County indicates there are other states (New York, Michigan, Illinois) who have expressed interest in the development of *headspace* sites in their own state, along with counties here in California (Sacramento, San Mateo, and Santa Barbara) who may wish to replicate this model in their own community. For this reason, the County would like to ensure the building of a sustainable model so that it can be successfully replicated state and nation-wide.

In recognition of lessons learned during the first phase of this project and presentation from the Foundry Youth Mental Health Integrated Care Model on March 7, 2018, the Commission may wish to encourage Santa Clara County to reach out to other counties with similar needs in order to foster cross-county learning as well as possible statewide implementation.

### **The Community Planning Process**

The County has provided details regarding the first phase (ramp up) of the *headspace* project which was inclusive of stakeholders and the public. Beginning in August 2016, Santa Clara held MHSA Stakeholder Leadership Committee (SLC) meetings to explain the Innovation planning process to stakeholders and the public. The *headspace* project was ultimately selected through two (2) separate “submission windows”, where stakeholders and the public electronically submitted their innovation ideas and then provided feedback on which innovation plans should be brought forward.

In continuing its effort of meaningful stakeholder involvement and in preparation of the implementation phase of the *headspace* project, Santa Clara County focused its effort on creating a Youth Advisory Group to assist in the guiding and framing of the *headspace* project. The County states it was important to include youth that mirrored the diversity found within Santa Clara, and as a result, targeted outreach campaigns were held in partnership with over 45 community based organization and service providers including, but not limited to: school districts, high schools, probation departments, and local community colleges.

An application to solicit participants for the Youth Advisory Group was created to recruit youth regardless of race, ethnicity, gender, sexual orientation, lived experience, and socio-economic status. Applications were completed and submitted online; and while questions were general in nature, there were questions that were not required to be answered. For example, applicants had the option of self-disclosing any lived experience with mental illness and whether they associate or identify with a particular culture and/or group (Asian, Iranian, homeless, LGBTQ, etc.).

In January 2018, a total of 52 youth applied as a result of recruitment efforts; however, the County decided to launch a second round of targeted outreach focusing on the recruitment of foster youth, young men and the LGBTQ community. Youth Advisory Group applicants were interviewed by staff from Santa Clara County Behavioral Sciences and Stanford Center for Youth Mental Health and Wellbeing and as a result, a total of 27 youth representing various backgrounds and life experiences were selected in February 2018 as part of the Youth Advisory Group. The County states the Youth Advisory Group includes, but is not limited to the following cultural groups: Asian, Hispanic, Mexican, Caucasian, Iranian, and Vietnamese. The County states they will continue efforts to ensure the Youth Advisory Group is a fair representation of the cultural diversity found within the County.

**County may wish to provide information as to how they will ensure that the Youth Advisory Group accurately reflects the County's demographic and cultural population. Additionally, County may wish to provide information on whether there are stipends or rewards provided or made available for the Youth Advisory Group volunteers.**

As part of the *headspace* project, Stanford Youth Mental Health entered into contract with IDEO.org, who has worked in collaboration with the Youth Advisory Group to inform the County on possible site locations, site design, branding development, and the future identity of the *headspace* experience.

Once the Youth Advisory Group was selected and formed in February 2018, the Stakeholder Leadership Committee (SLC) began brainstorming ideas surrounding the County's needs, gaps and program development. In March 2018, the County presented detailed information surrounding the *headspace* implementation, soliciting feedback and comments from SLC members and the public. These comments were summarized by staff and shared at the SLC meeting on March 27, 2018, receiving overall positive feedback and interest.

The 30-day public comment period at the county level began on May 11, 2018 and concluded on June 10, 2018, followed by the Mental Health Board meeting held on June 11, 2018. The County indicates their Board of Supervisors unanimously approved the implementation of *headspace* on June 19, 2018. The MHSOAC shared this Innovation Project with stakeholders beginning May 24, 2018 while the project was in the 30-day review at the County level. It is unknown if any comments or letters were received at the County; however, no letters of opposition or support were received at MHSOAC in response.

### **Learning Objectives and Evaluation**

Among the goals of the ramp-up period, Santa Clara County sought to gain insight into how the implementation of the *headspace* project would be evaluated. During this time, the County entered into a contract with Informing Change to assist in the development of the evaluation plan. Informing Change is an organization that works with and supports other organizations who provide support for youth and young adults. The evaluation plan is not only informed through lessons learned during prior evaluations of the

Australian *headspace* project, but also in cohort with the Stanford Psychiatry Center on Youth Mental Health and Wellbeing, as well as the Youth Advisory Group (YAG). The target population for the project will be youth ages 12 to 25, and it is estimated that approximately 2,000 youth will be served annually. The learning goals of the project remain the same, and include:

1. Understand the efficacy of integrating multiple service components to increase youth access and engagement in behavioral health services
2. Distinguish the barriers and facilitators to access *headspace* sites among youth who are currently engaged and not engaged in the integrated care model
3. Understand how to effectively and successfully adopt a financial model that allows all youth to access integrated care services regardless of their ability to pay and insurance coverage
4. Identify best approaches to include youth, family members, and community stakeholders in the development, implementation and evaluation of an integrated care model intended for young people; and
5. Learn the effects of the integrated model on clients' social-emotional, and physical wellbeing, as well as life functioning.

Santa Clara County will evaluate a number of different domains in order to meet the project goals, and include: (1) access and engagement, (2) outcomes for clients, (3) service delivery model, (4) cost effectiveness, and (5) process data. The County has stated three (3) intended outcomes: (1) *headspace* sites will increase access for youth who may need behavioral health, physical health, and other services; (2) empower youth; (3) increased partnership and improvement of service coordination.

Quantitative indicators that are proposed to evaluate these domains include experience and satisfaction, intensity and duration of services, comprehensive service use and need, client-specific outcomes, as well as service costs and uptake. Additionally, qualitative methods will be utilized to explore experience and satisfaction, cultural sensitivity and responsiveness, adherence to principles of recovery, and "least restrictive means," coordination, and partnership. Specific measures for each domain have also been identified, and will be developed in cohort with the YAG (**see pgs. 9-10 of County plan**).

Data will be gathered through the County's BHS Management Information System (MIS), which contains information needed for specific measures, such as: intake information, treatment plan and assessments, CANS assessment information, key events, services, etc. Other information will be gathered through Kessler K10 assessments, client questionnaires, and other self-reported data using interviews and surveys with youth, parents and caregivers, and program partners. In order to evaluate the domains proposed, the County will utilize propensity score matching to establish a comparison group to those not engaged in *headspace*.

The final evaluation will be completed by their contracted evaluator, Informing Change, in cohort with program partners. Findings from the program evaluation will be shared during quarterly stakeholders meetings, across counties and states that may be interested in implementing a similar program, as well as at local and national conferences.

## **The Budget**

The initial eight (8) month “ramp-up” period for the *headspace* project was presented to the MHSOAC on November 16, 2017 which resulted in the approval of MHSA innovation funds for the amount of \$572,273 (total ramp-up budget: \$704,155).

For the implementation phase of *headspace*, the total MHSA innovation funds being requested is \$14,960,943, and the total project budget is \$16,500,004 and is expected to last four (4) years in duration. In addition to the total amount of innovation funds being requested (\$14,960,943), the County is utilizing \$1,539,061 of other funding which consists of Capital Facilities Technology Needs (CFTN) funds that are subject to reversion from FY 07/08 (total amount subject to reversion for FY 07/08 is \$3,423,132). A total of \$940,000 will come from these CFTN funds and will be for the improvement of the two (2) *headspace* facility sites. The County is also using a total of \$599,061 which still remains from the original ramp-up budget.

The County will be contracting and collaborating with a Community Based Organization (to be selected pending MHSOAC approval) and the Stanford Center for Youth Mental Health and Wellbeing. Innovation funding will be provided to these agencies for staffing at the *headspace* sites which includes, but is not limited to: clinicians, case managers, physicians, clerical staff and education/employment specialists. (See table below for specific staff employed at each of the *headspace* sites). It is anticipated that there will be two (2) *headspace* sites located in San Jose and Palo Alto/Mountain View.

Santa Clara County is allotting a total of \$8,684,734 (53% of total budget) to cover their own County costs. This amount is broken down by personnel costs (\$3,327,331); operating costs (\$4,957,403); and the evaluation component (\$400,000). The operating costs cover items such as the rent of the *headspace* sites (discussed later in section), utilities, program supplies, kitchen supplies, office supplies, training, and administrative costs. The evaluation component (2.4% of total budget) will be contracted out through a Request for Proposal (RFP) process.

The County will select a Community Based Organization (CBO), procured through an RFP process, who will provide case management services, peer support, and community planning. The County will be paying the selected CBO a total of \$3,174,000 (19% of total budget) for the employees who will be providing these services at the *headspace* sites. This amount is broken down between personnel costs (\$2,460,000) and operating costs (\$714,000). The operating costs are for items such as program supplies, office supplies, and professional development.

The County is paying Stanford Center for Youth Mental Health and Wellbeing a total of \$1,660,317 for clinical staff employed at each of the *headspace* sites. In addition, the County will be paying Stanford Center for Youth Mental Health and Wellbeing a total of \$1,441,892 for the technical assistance team. Out of this amount (\$1,441,892), a total of \$1,049,548 is for personnel costs and the remaining \$392,344 is for operating costs. The operating costs for the Stanford Center are for items such as program supplies, office supplies, training, and professional development.



The County will partner with Stanford and the Youth Advisory Group to locate and secure two (2) *headspace* sites for lease and anticipates entering into contract negotiations by November 2018. The County states they will ensure the leases for both sites will not exceed five (5) years, as mandated by MHS Innovation funding regulations (**see pgs. 6 & 19 of County plan**). The amount allocated for the leasing of these two (2) sites (3,456,000) is incorporated as part of the County's total operating costs (\$4,957,403).

In reference to Assembly Bill 114, the County is utilizing funds subject to reversion from Fiscal Year (FY) 08/09: a total of \$1,882,772 will be utilized and will be applied to FY 18/19 (\$1,802,691) and FY 19/20 (\$20,081).

The table below lists the specific personnel that will be provided at each of the *headspace* sites. Innovation dollars requested for this project will be paid by the County to ensure appropriate staffing at the *headspace* sites. Staffing will be provided from either the County, the CBO, or the Stanford Center as identified below:

Location site / Team	Position Title	FTE	Employees provided by:
<b>headspace – San Jose</b>	Licensed Clinical Manager	0.50	Santa Clara County
	Clerical Staff	1.00	Santa Clara County
	Licensed Clinician	1.50	Santa Clara County
	Primary Care Physician	0.40	Santa Clara County
	Psychiatrist	0.20	Stanford Center
	Psychologist	0.20	Stanford Center
	Community Coordinator	1.00	CBO
	Case Manager (Youth Partner)	2.00	CBO
	Administrative Assistant	1.00	CBO
	<b>headspace personnel @ San Jose</b>	<b>7.80 FTE</b>	
<b>headspace – Palo Alto</b>	Licensed Clinical Manager	0.50	Santa Clara County
	Clerical Staff	1.00	Santa Clara County
	Licensed Clinician	1.50	Santa Clara County
	Adolescent Medicine Specialist	0.40	Stanford Center
	Psychiatrist	0.20	Stanford Center
	Psychologist	0.20	Stanford Center
	Community Coordinator	1.00	CBO
	Case Manager (Youth Partner)	2.00	CBO
	Administrative Assistant	1.00	CBO
	<b>headspace personnel @ Palo Alto</b>	<b>7.80 FTE</b>	
<b>Stanford Tech Asst Team</b>	Eval Implementation Scientist	0.05	Stanford Center
	Clinical / Medical Director	0.10	Stanford Center
	Program Implementation Manager	0.10	Stanford Center
	Youth Development Specialist	1.00	Stanford Center
	Education / Employment Specialist	1.00	Stanford Center
	<b>Technical Assistance Team</b>	<b>2.25 FTE</b>	

The County states they will attempt to implement *headspace* with this staffing structure and may refine as the project moves forward or if the utilization of services require additional staffing. **There appears to be a ratio of 4:2000 Youth Partners (Case Managers) for both *headspace* sites – County may wish to consider hiring additional Youth Partners given the large volume of individuals expected to be served annually. Similarly, there is a ratio of 3:2000 licensed clinicians at both *headspace* sites – County may wish to consider hiring additional licensed clinicians given the number of individuals expected to be served annually.**

### **Additional Regulatory Requirements**

The proposed project appears to meet the minimum requirements listed under MHSA Innovation regulations.

### **References**

<https://www.headspace.org.au/about-us/who-we-are/>

Adelsheim, S., Tanti, C., Harrison, V., and King, R. (2015). *headspace*: US Feasibility Report.

Merikangas, K. R., He, J., Burstein, M. E., Swendsen, J., Avenevoli, S., Case, B., Georgiades, K. Olfson, M. (2011). Service utilization for lifetime mental disorders in U.S. adolescents: Results from the National Comorbidity Survey Adolescent Supplement (NCS-A). *Journal of the American Academy of Child and Adolescent Psychiatry*. 50(1), 32–45.

<https://fas.org/sgp/crs/misc/R40536.pdf>

<http://informingchange.com/areas-of-expertise/youth-engagement>

### **Full project proposal can be accessed here:**

<http://mhsoac.ca.gov/document/2018-07/santa-clara-county-headspace-innovation-project-august-23-2018>