



Mental Health Services Oversight & Accountability Commission

Commission Teleconference Meeting January 26, 2023 Presentations and Handouts

- 1. MHSOAC Organization Chart
- 2. Commissioner Roster
- 3. MHSOAC Portfolio Update Presentation
- 4. Strategic Plan Reference Sheet



Mental Health Commission

16 members

Executive Director

Toby Ewing

Research and Evaluation

Melissa Martin-Mollard

- Data and Research (7 staff)
- Mental Health Policy Research (3 staff)

UCSF Data and Research

• 5 contract staff

Deputy Director,
Administration and
Performance
Management
Norma Pate

Administrative Services

- Lauren Quintero
- Business
 Services/Commission
 Support (2 staff)
- Accounting/Budgets (3 staff)
- Human Resources (2 staff)

Information Technology

• 3 staff

Deputy Director, Operations

Vacant

Community Engagement and Grants

Tom Orrock

- Community Engagement (3 staff)
- MHSSA (5 staff)
- Triage (2 staff)
- Youth Drop-in (1 staff)
- Early Psychosis Intervention (1 staff)

Program Operations Sharmil Shah

- Innovation (2 staff)
- Plan Review (3 staff)
- Prevention and Early Intervention (1 staff)

Chief CounselGeoffrey Margolis

Asst. Chief Counsel Maureen Reilly (RA)

Consulting Psychologist
Anna Naify

Deputy Director, Legislative and External Affairs
Pending

CommunicationsAndrea Anderson

• Communications (2 staff)



Commissioner Roster

| | Mara Madrigal- Weiss | CHAIR State Superintendent of Public Instruction designee | Executive Director of Student Wellness and School Culture, Student Services and Programs Division, San Diego County Office of Education | | | |
|---|----------------------------------|--|---|--|--|--|
| | Mayra E. Alvarez | VICE CHAIR Attorney General designee | President, The Children's Partnership | | | |
| | Mark Bontrager | COMMISSIONER Representative of a health care service plan or insurer | Behavioral Health Administrator, Partnership HealthPlan of California | | | |
| | John Boyd, Psy.D. | COMMISSIONER Employer with more than 500 employees | CEO, Rogers' Hospital Division at Rogers Behavioral Health | | | |
| | Sheriff Bill Brown | COMMISSIONER County Sheriff | Sheriff and Coroner, Santa Barbara County | | | |
| | Keyondria Bunch | COMMISSIONER Labor Representative | Supervising Psychologist, Los Angeles County Department of Mental Health | | | |
| | Assembly Member Wendy Carillo | COMMISSIONER Speaker of the Assembly Designee | California Assembly Member, District 51 | | | |
| C | Steve Carnevale | COMMISSIONER Employer with fewer than 500 employees | Executive Chairman, Sawgrass | | | |



| Rayshell Chambers | COMMISSIONER Clients and Consumers | Co-Executive Director and Chief Operations Officer, Painted Brain | | |
|-------------------------|---|---|--|--|
| Shuo (Shuonan) Chen | COMMISSIONER Family Member | General Partner, IOVC | | |
| Senator Dave Cortese | COMMISSIONER President pro Tempore of the Senate Designee | California Senator, District 15 | | |
| Itai Danovitch, M.D. | COMMISSIONER Physician Specializing in Alcohol and Drug Treatment | Chairman of the Department of Psychiatry and Behavioral Neurosciences, Cedars-Sinai Medical Center | | |
| David Gordon | COMMISSIONER Superintendent of a School District | Superintendent, Sacramento County Office of Education | | |
| Gladys Mitchell | COMMISSIONER Family Member | Former Staff Services Manager, California Department of Health Care Services | | |
| Al Rowlett | COMMISSIONER Mental Health Professional | CEO, Turning Point Community Programs | | |
| Khatera Tamplen | COMMISSIONER Clients and Consumers | Consumer Empowerment Manager, Alameda County Behavioral Health Services | | |



Transformational Change

Portfolio, Progress, and Challenges

Commission's 2020-2023 Strategic Goals



ı∭ DATA

സ്സ് community

School mental health

Prevention and early intervention

Workplace mental health

Transparency Suite

County-level data

Aggregate and integrate

Multi-community collaboratives

Suicide prevention

Youth-led efforts



How We Work: Levers of Transformational Change





Initiatives



allcove[™] Youth Drop-In Centers



COVID-19 and Emerging Issues



Criminal Justice Prevention



Early Psychosis Intervention Plus



Impacts of Firearm Violence



Innovation and Innovation Incubator



Mental Health Wellness Act



Prevention and Early Intervention



School Mental Health



Suicide Prevention



Transparency Suite



Workplace Mental Health



Youth and Peer Empowerment



Key

Strategic Progress

Strategic Opportunity

Initiatives and Strategic Objectives

| | Strategic Goal 1: Vision | | Strategic Goal 2: Data | | Strategic Goal 3: Community | | | | |
|-------------------------------------|---------------------------------------|---|--|-------------------------------------|------------------------------------|---|---|-------------------------------------|------------------------------------|
| Initiative | Object 1a: School mental health | Objective 1b: Prevention and early intervention | Objective 1c: Workplace Standards & strategies | Objective 2a: Transparency Suite | Objective 2b: County-level data | Objective 2c: Aggregate & integrate | Objective 3a: Multi-community collaborative | Objective 3b: Suicide prevention | Objective 3c: Youth-led efforts |
| allcove™ Youth Drop-in Centers | | | | | | | | | |
| COVID-19 and Emerging Issues | | | | | | | | | |
| Criminal Justice Prevention | | | | | | | | | |
| Early Psychosis Intervention Plus | | | | | | | | | |
| Impacts of Firearm Violence | | | | | | | | | |
| Innovation and Innovation Incubator | | | | | | | | | |
| Prevention and Early Intervention | | | | | | | | | |
| School Mental Health | | | | | | | | | |
| Suicide Prevention | | | | | | | | | |
| Transparency Suite | | | | | | | | | |
| Mental Health Wellness Act | | | | | | | | | |
| Workplace Mental Health | | | | | | | | | |
| Youth and Peer Empowerment | | | | | | | | | |





allcove™ Youth Drop-in Centers offer mental health and wellness services to youth between the ages of 12 to 25, including behavioral health, physical health, housing, education, and employment support, and linkage to other services.

allcove™ provides an integrated approach that puts young people at the center. These centers will provide culturally competent and relevant services for vulnerable and marginalized youth populations including, but not limited to, LGBTQ+, homeless, and Indigenous youth, with the overall goal of reducing suicide and suicide ideation, homelessness, unemployment, and school failure.

In January 2020, the Commission released \$15 million to support the launch of allcove™ centers and technical assistance to grantees and other counties or program providers interested in establishing allcove™ Youth Drop-in Centers in their communities.

Strategic Opportunity

Launch, adopt, and scale evidence-based model for youth



allcove[™] Youth Drop-In Centers

Key accomplishments

- Adapted the model to California
- Launched 2 sites
- 4 sites in development
- Secured eligibility for allcove6 in \$429 million in EDP/CDEP funding
- Expanded local agency partnerships

Challenges

- Scaling integrated care
- Streamlining sustainable financing
- Workforce
- Integration into community continuum of care

- Expand awareness of the model
- Bolster technical assistance strategy
- Develop data and evaluation strategy
- Recruit and fund additional partners
- Engage all payors







In 2020-21, the Commission redirected more than \$4 million to address the impacts of the pandemic and build capacity in ways that reduce racial, ethnic, and cultural disparities exacerbated by COVID-19.

The Commission's investments launched:

- A Rapid Response Network that provided data to inform novel solutions
- A partnership with DHCS to shape FEMA application
- Build out of CalHOPE
- Support for school mental health
- Fortification of community engagement to reduce disparities

Strategic Opportunity

Responding quickly to a moment of urgent need



COVID-19 and Emerging Issues

Key accomplishments

- Launch of Rapid Response Network
- Build out of CalHOPE
- Partnership with DHCS to build and shape FEMA application
- Support for school mental health
- Strengthening of suicide prevention

Challenges

- Sustainable financing
- Lack of robust behavioral health planning for natural disasters

- Fortify California's behavioral health disaster planning
- Support the digital mental health strategy included in CYBHI and CalHOPE







The Commission drafted and adopted *Together We Can: Reducing Criminal Justice Involvement* for People with Mental Illness, a report with findings and recommendations to reduce criminal justice involvement. Consistent with that work, the Commission has developed data tools to monitor justice involvement, sponsor legislation to strengthen Full Service Partnership programs to reduce justice involvement, secured \$5 million to launch the Innovation Incubator focused on reducing criminal justice involvement, and highlighted opportunities to strengthen early intervention in psychosis, recognizing exceptional risk that persons with psychosis have for justice involvement.

Strategic Opportunity

Reduce criminal justice involvement



Criminal Justice Prevention

Key accomplishments

- Launched the Innovation Incubator
- Legislation to evaluate FSP programs
- Sponsored multiple convenings on criminal justice diversion

Challenges

- Data
- Stigma
- Limited understanding of return on investment for diversion
- Lack of technical assistance

- Community engagement
- Strengthening data partnerships and analysis
- Selecting key metrics for criminal justice involvement
- Capacity building for FSPs
- Documenting relationship between initial criminal justice involvement and state hospitalization







In partnership with counties, philanthropy, researchers, and providers, the Commission launched a statewide initiative to improve access to evidence-based care for people in the early stages of psychosis.

Referred to as the Early Psychosis Intervention Plus (EPI Plus) Program, this initiative aspires to ensure that every Californian has access to effective early psychosis diagnosis and care before those needs escalate and become severe or disabling. The Commission has invested \$20 million to scale existing best practices, offer technical assistance, support research and data analysis, and identify sustainable financing strategies.

Strategic Opportunity

Ensure every Californian has an effective response to early psychosis



Early Psychosis Intervention Plus

Key Accomplishments

- Secured funding and established EPI Plus program
- Expanded number of providers offering evidencebased care
- Established a multi-partner learning collaborative
- Secured eligibility for Coordinated Specialty Care (CSC) in EDP/CDEP funding

Challenges

- Workforce
- Sustainable financing
- Inconsistent standards of care
- Limited understanding of return on investment
- Establishment of consistent data collection and reporting procedures.

- Establish statewide goal for access to best practices
- Document service delivery gap, emphasis on disparities
- Support research on improving access to CSC in hard-to-reach communities
- Increase public awareness on the signs and symptoms of psychosis
- Build sustainable financing opportunities







In response to school and other mass shootings, the Commission recently launched a policy project to understand the impacts of and respond to firearm violence. The project will involve public hearings, site visits, community engagement, and related strategies to understand firearm violence in California, the impact on our communities, and opportunities to improve outcomes.

Strategic Opportunity

Reduce impacts of firearm violence in California



Impacts of Firearm Violence

Key accomplishments

- Formed a subcommittee of Commissioners to lead an effort to address the impacts of firearm violence
- Visited the REACH TEAM
 Program in Los Angeles and met with providers who support families in the Watts Neighborhood
- Met with over 30 subject matter experts to explore challenges and solutions

Challenges

- Misconceptions about mental health and firearm violence
- Addressing concerns of government mistrust or intrusion
- Balancing public safety with public health

- Engage community members through site visits and meetings
- Compile information and develop policy recommendations
- Work with prevention partners to promote healthy and safe communities



Innovation and the Innovation Incubator



The Innovation Incubator brings together county behavioral health agencies, subject matter experts, and other partners to drive innovations that improve mental health outcomes for individuals and communities.

In 2018, the Commission secured \$5 million in one-time funding to launch the Innovation Incubator as a strategy to reduce the number of people sent to state hospitals as a result of a felony charge. That funding launched the Commission's opportunity to shape and support multi-county investments in innovation, collaborative learning, and the opportunity to scale effective practices.

A range of multi-county innovations were funded, including psychiatric advance directives, data -driven recovery, Crisis Now, and Full Service Partnerships. The Commission also launched an analysis of its innovation work and developed an Innovation Action Plan to sustain these efforts.

Strategic Opportunity

Enhance the impact of strategic innovations in California



Innovation and the Innovation Incubator

Key accomplishments

- Secured \$5M
- Elevated the MHSA innovation component
- Initiated various multicounty collaboratives
- Youth innovation initiative innovation summit

Challenges

- Continued confusion around uses of innovation funding
- Documenting impacts of innovations
- Scaling successful innovations
- Focusing innovations on systems change
- Opportunities to leverage innovation resources outside of the mental health system

- Implement Commission's
 Innovation Action Plan
- Build out data strategy to inform innovation investments
- Engage new potential innovation partners
- Innovation summit







The Commission receives \$20 million in annual funding to support implementation of the Mental Health Wellness Act. The Commission recently secured support from the Governor and the legislature to flexibly spend those funds. Funding can be used to support crisis prevention, intervention, and response.

Formally known as Triage, the Commission has currently focused these investments on reducing hospitalization, supporting older adults, and has discussed support for 0-5 programs, peer respite, and improving access to substance use disorder services.

Strategic Opportunity

Incentivize the adoption and scaling of best practices



Mental Health Wellness Act

Key accomplishments

- Secured flexibility in the allocation of grant funds
- Over last six years, released more than \$80 million to multiple county partners
- \$20 million approved to expand the number of EmPATH CSUs
- \$20 million approved for Older Adult services

Challenges

- Identification of programs for expansion to address crisis early intervention, prevention, and response for
 - Children ages 0-5
 - Peer Respite
 - SUD treatment access

- Award EmPATH grants
- Release the Request for Applications for Age Wise and PEARLS programs
- Consult with Commissioners, staff and other subject matter experts on approaches for children ages 0-5







The Mental Health Services Act mandates ongoing investments in prevention and early intervention (PEI). Through legislation, the Governor and the legislature called for the development of a strategic statewide approach to PEI. The Commission has drafted a framework to guide PEI efforts for MHSA spending as well as opportunities outside of the MHSA.

Additionally, the Commission promotes PEI through a range of initiatives – e.g. allcove6, school mental health, suicide prevention.

Strategic Opportunity

Elevate awareness of opportunities for prevention and early intervention



Prevention and Early Intervention

Key accomplishments

- Promote policies and practices to increase economic opportunity and health equity
- Increase mental health awareness, reduce stigma, and educate on PEI opportunities
- Clarify uses of and promote best practices for MHSA PEI funding

Challenges

- Building understanding of cross-system prevention opportunities
- Recognizing drivers of disparities
- Limited public expectations
- Inconsistent understanding of and use of MHSA funds
- Lack of technical assistance and capacity building for PEI

- Promote policies and practices to increase economic opportunity and health equity
- Increase mental health awareness, reduce stigma, and educate on PEI opportunities
- Clarify uses of and promote best practices for MHSA PEI funding



School Mental Health



The Commission drafted and adopted a school mental health report – *Every Young Heart and Mind: Schools as Centers of Wellness* – and launched a funding initiative to support robust partnerships between local educational agencies and county behavioral health departments.

Subsequently, the Legislature passed, and the Governor signed, the Mental Health Student Services Act (MHSSA) and allowed the Commission to invest \$75 million in additional dollars in local partnerships. Subsequent investments increased that funding to nearly \$300 million, with additional funding to support the \$4.7 billion Child and Youth Behavioral Health Initiative, of which the Commission is a partner. The Commission is sponsoring learning collaboratives, providing technical assistance, and supporting the evaluation of these initiatives. The Commission has also secured funding to elevate the voice of youth in the school mental health space.

Strategic Opportunity

Elevate schools as centers of wellness



School Mental Health

Key accomplishments

- Elevated schools as centers for wellness
- Established BH/LEA partnerships in 57 counties
- Invested more than \$300M to support school mental health initiatives
- Partnering with state agencies to support \$4.7B CYBHI

Challenges

- Fiscal sustainability
- Technical assistance to counties with varied levels of partnership and service capacity
- Evaluate diverse and complex school mental health investments
- Workforce

- Launch evaluation of school mental health investments
- Roll out Technical Assistance strategy
- Collaboration with state agencies on sustainable funding streams (SBHIP, CYBHI)
- Site visits to various programs







The suicide prevention initiative is a prevention and early intervention strategy aimed at preventing suicide deaths by aligning local and regional efforts with state priorities in delivering best practices for suicide prevention.

Mental Health Services Act calls out suicide prevention as a strategy goal and prevention and early intervention component. Following discussions with the Governor and the legislation, the Commission developed and published a strategic plan for suicide prevention for the State of California – Striving for Zero. Among other recommendations, the Commission worked with the Governor and Legislature to establish a new Office of Suicide Prevention and helped secure the largest investment in suicide prevention efforts for the State of California.

Other suicide prevention efforts include support for CalHOPE, the state's 988 strategy, and grant funding to enhance suicide prevention strategies among local agencies.

Strategic Opportunity

Accelerate strategies to prevent suicide and suicidal behavior



Suicide Prevention

Key accomplishments

- Established the Office of Suicide Prevention with the Department of Public Health
- Delivered 26 virtual training sessions on suicide risk screening to over 1,400 school personnel
- Provided suicide prevention technical assistance to 35 counties through a learning collaborative
- Sponsored W2D convening on 988
- Tax check-off for suicide prevention

Challenges

- Stigma
- Fear and misconceptions around discussing suicide
- Coordinating multiple suicide prevention efforts
- Sustainable funding
- Improving awareness of and addressing upstream suicide risk factors, such as early childhood trauma

- Work with the Office of Suicide Prevention and other partners
- Increase awareness of lethal means safety strategies using an online resource
- Promote suicide prevention awareness and resources among firearm owners







To support public accountability, the Commission developed and displays relevant and timely information to support public understanding of mental health funding, the programs and services those funds support, and the outcomes achieved. The Commission persistently explores avenues to improve access to data that is actionable and to develop data visualization tools that improve public understanding of California's public mental health system, its challenges, and opportunities.

The Commission's Fiscal Transparency Suite is updated annually with information on MHSA revenues, expenditures, and unspent funds. The Transparency Suite also includes dashboards on Client Services Information, Full Service Partnership data on children, suicide prevention, justice involvement, innovation spending, and other topics.

Strategic Opportunity

Supporting accountability through clear and compelling information



Transparency Suite

Key accomplishments

- Inspired legislation on reversion
- Leveraged innovation spending data to jumpstart new innovation investments
- Documented the impacted FSPs to reduce justice involvement

Challenges

- Access to real-time data
- Lack of clarity on key metrics
- Inconsistent data reporting
- Limited investments in data infrastructure
- Public sector data ≠ population level data
- Mismatch between existing data and data needs

- Community engagement around key metrics and data opportunities
- Expand data use agreements
- Explore barriers to data quality
- Consider developing statewide survey
- Update existing dashboards







Consistent with its call for population-based strategies to support mental health, the Commission initiated a project to establish voluntary standards for workplace mental health. A draft report is under review that recognizes opportunities to address stigma and promote prevention and early intervention, resiliency, and access to mental health services through the workplace.

The Commission's efforts on workplace mental health engaged hundreds of employees and employers, labor organizations, mental health peers, family members, and others. The draft report includes recommendations for capacity building, employer engagement, data analytics, and fiscal strategies to improve mental health outcomes.

Strategic Opportunity

Leverage the workplace and employers to support mental health goals



Workplace Mental Health

Key accomplishments

- Draft report released in December 2022
- Heard from over 300
 members of the public
 through community
 engagement and engaged 85
 employers

Challenges

- Reaching new audiences in the private sector
- Technicalities of private health insurance and building connections between standards and available services
- Lack of awareness and engagement in the public around workplace mental health as a topic

- Present report to Commission for adoption
- Support implementation
- Engage the Governor and the Legislature as a large employer



Youth and Peer Empowerment



Consistent with the language of the Mental Health Services Act, the Commission is working to elevate the voices and vision of mental health peers, including youth. Among other strategies, the Commission provides more than \$6 million each year in advocacy grants to community organizations.

The Commission has supported scholarships and travel grants for peers and youth to attend events. The Commission has sponsored legislation to require youth mental health boards across the state, convened a youth leadership committee to identify youth-driven innovations, launched allcove™, investing \$5 million in youth-led anti-bullying initiative, sponsoring a peer fellowship and partnering with the State of California to expand the role of peers in the public sector.

Strategic Opportunity

Amplify the voices of youth and peers



Youth and Peer Empowerment

Key accomplishments

- Hiding in Plain Sight documentary
- Championed peer certification
- Sponsored peers in state government
- Elevate peers in work through fellowship opportunity
- Anti-bullying work
- Advocacy grants to peers and youth
- Youth leadership committee
- Technical assistance on community engagement

Challenges

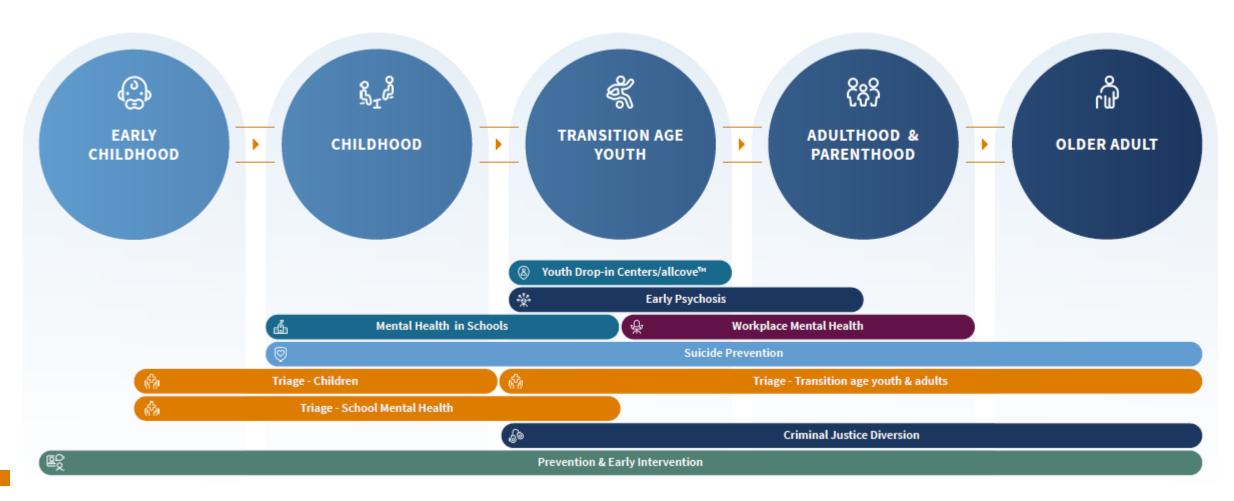
- Stigma
- Inconsistent recognition of youth and peer voices across behavioral system
- Integrating peer and youth voice across initiatives and Commission efforts
- Sustainable funding
- Recruitment of diverse peers and youth

- Youth convening
- Launch peer fellowship
- Enhance engagement of youth and peers
- Expand technical assistance to support local community engagement
- Expand partnership with Wellbeings/WETA project

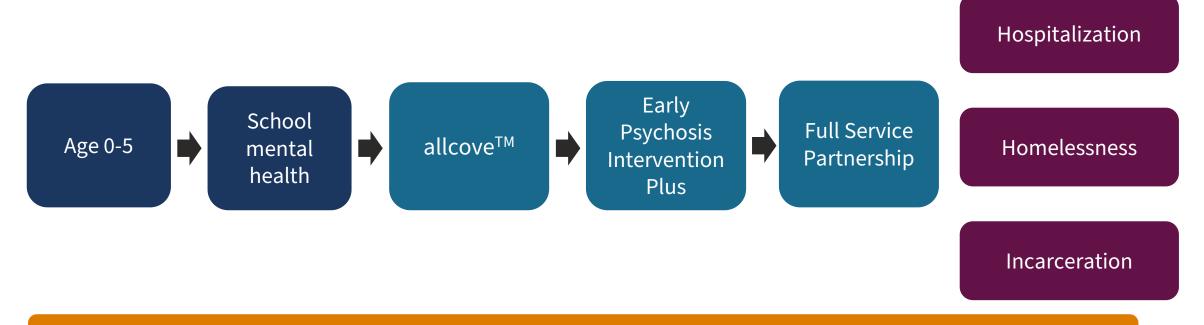


Key Initiatives and Opportunities

Shown below are key programs funded by the Commission across the lifespan. This illustration does not encompass all Commission initiatives and programs.



Focusing Upstream



Youth and Peer Empowerment, Racial Equity and Disparities

PEI, workplace mental health, Mental Health Wellness Act, stigma reduction, data analysis, communications

Commission Staff (56 people)

Mental Health Commission (16 members)

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Research and Evaluation

Melissa Martin-Mollard

- Data and Research (7 staff)
- Mental Health Policy Research (3 staff)

UCSF Data and Research

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CommunicationsAndrea Anderson

Communications (2 staff)

Consulting Psychologist
Anna Naify

Information Technology

• 3 staff



School Mental Health



School Mental Health Timeline

2016

Commission begins exploration of student mental health needs

2017

Allocated \$21
million of Mental
Health Wellness Act
funds to SchoolCounty
Collaborations

2019

MHSSA signed into law. Commission provides \$75 million in grants to 18 partnerships 2020

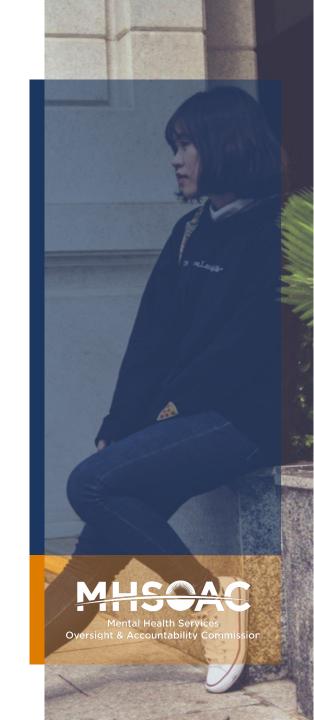
Commission releases report: Every Young Heart and Mind: Schools as Centers of Wellness 2021

Commission
provides additional
\$195 million to 39
additional
partnerships,
evaluation, and
technical assistance



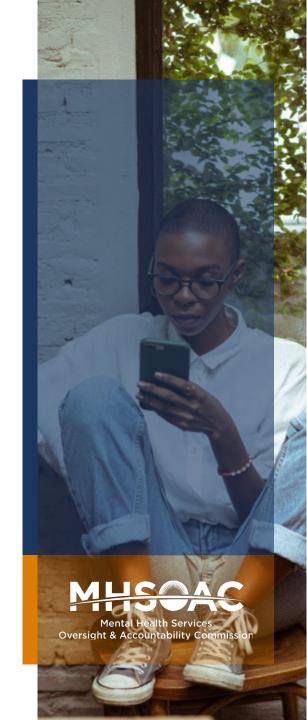
By the Numbers

- \$270 million investment
- 57 counties participating
- 17 counties building wellness centers
- Eight learning collaborative meetings



Next Steps

- Development of metrics and evaluation of outcomes
- Technical Assistance Plan (April 2023) to address:
 - Partnership development
 - Data collection
 - Implementation of mental health services
 - Workforce development
- Fiscal sustainability
- Site visits and report to Commission (April 2023)



Innovation and the Innovation Incubator



Innovation Timeline

2017

 Commission directs staff to explore development of Innovation Incubator

2019

- Innovation Incubator launched in January
 - First multi-county collaboratives initiated in June

2021

- Incubator projects progressed
- Innovation Incubator evaluation began

Prior to 2017

- Fiscal reversion
- Decreased county spending of innovation funds
- Enforcement of unspent funds

2018

- Innovate for Impact innovation summit
- Legislature authorizes
 \$5 million one-time
 funding for Innovation
 Incubator

2020

- County and community engagement on future Incubator projects
- Commission authorizes second round of Incubator projects and innovation review process

2022

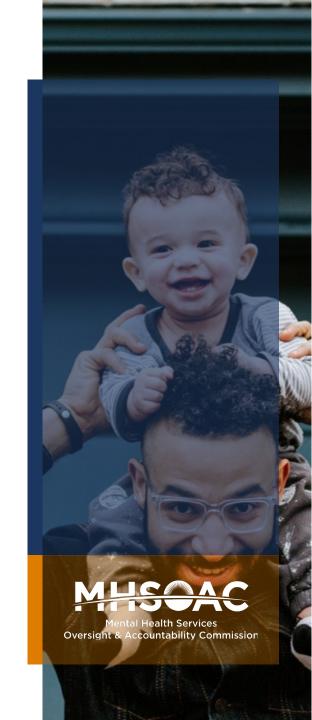
- Incubator projects concluded in July
- Commission adopted Innovation Action Plan in November



Innovation Incubator Projects

The Incubator, created in 2018 with \$5 million in one-time funding authorized by the Legislature, was designed to support county efforts in building and implementing Innovative strategies that reduce unnecessary involvement in the criminal justice system by providing more effective behavioral health responses for individuals with behavioral health needs.

The Commission saw this as an opportunity to engage a diverse set of partners, develop a business model for the incubator, and then create a portfolio of projects that advanced the Legislature's directive, while also strengthening the capacities of counties for innovation and continuous improvement.



Innovation Incubator Projects

| Incubator Project Name | Number of Counties | Commission Incentive Dollars | County INN Investment | Accomplishments | |
|--|-----------------------|------------------------------------|--|---|--|
| Full-Service Partnerships | 9 | \$1,000,000 | \$8,178,392 | \$8,178,392 Successful launch of this multi-county collaborative | |
| Psychiatric Advance Directives | 7 | \$562,500 | \$19,754,565 | Successful launch of this multi-county collaborative | |
| Crisis Now Academy (2) | 11 | \$500,000 | \$3,364,000 projects and now launching a multi-county collaborative using the Crisis Now Model | | |
| Data Driven Recovery Project (2) | 10 | \$1,829,000 | \$3,624,323.39 | Several counties used technical assistance and capacity building to develop Innovation projects | |
| Fiscal Sustainability | 3 | \$375,000 | N/A | Technical assistance and capacity building contract to support counties | |
| Fiscal Mapping | 3 | \$50,000 | N/A | Technical and capacity building contract to support counties | |
| Systems Analysis Project | ALL | \$530,000 | N/A Contract to support counties in innovation plan creation, development, and evaluation | | |
| Dissemination of Learning Projects (2) | ALL | \$198,000 | N/A | Focused on the dissemination of learnings from the Incubator projects | |



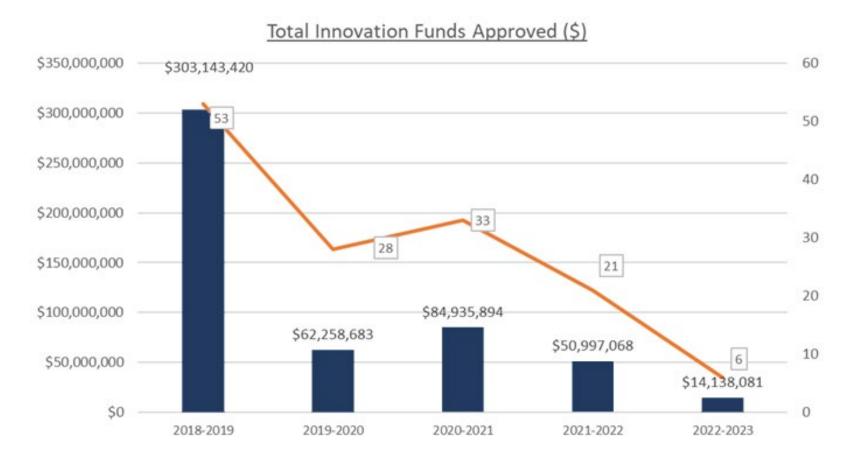
Key Components of the Innovation Action Plan

The Commission contracted with a non-profit consultant Social Finance to better understand the challenges counties face in developing transformative innovations, and to recommend ways to help overcome these challenges. As a result, three areas of opportunity rose to the top with specific recommended actions for each that can support the overall goal to help counties build the capacity to innovate and support the Commission's authority to approve plans.

| Help Counties Develop Transformative Innovation Projects | Strengthen Commission's Review Process | Facilitate Learning Among Counties |
|--|--|---|
| Develop FAQ Develop community engagement resources Review support tools Expand technical assistance | Develop simplified project summary Create a discussion guide for reviewers Enhance support for Commissioners | Develop case studies of stand- out projects Create a database of outcomes Launch an Innovation Summit |



Approved Innovation Funds





Youth and Peer Empowerment



Youth and Peer Empowerment

Peer Projects

- Peers in state government
- Peer certification and peer certification guide
- Psychiatric Advance Directives
- Advocacy grants
- Peer Fellowship
- Art With Impact sponsorship
- Client and Family Leadership Committee
- CLCC
- Support launch of CalHOPE

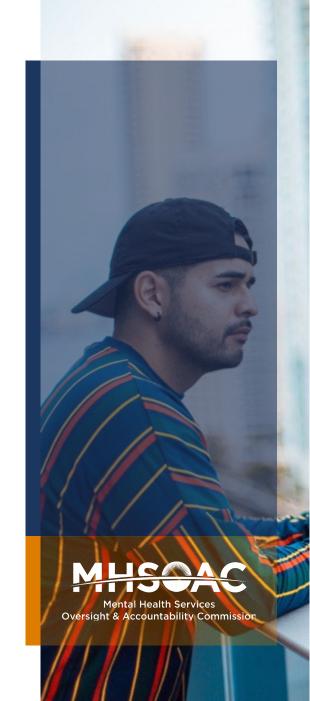
Youth Projects

- COVID-19 relief funding
- allcove[™] Youth Drop-in Centers
- Anti-Bullying Advisory Committee
- Scholarships for youth to participate in community forums
- Recruiting youth to testify in hearings
- Hiding in Plain Sight PBS documentary sponsorship
- Youth Innovation Project Planning Committee



Youth Innovation Project Planning Committee (YIPPC)

- Created in February 2019 with 14 members, ages 15-25, from 12 different California counties.
- Held 19 meetings for training and planning and utilized survey and focus group information gathered from over 485 California youth to guide their project.
- Focused on using innovation and youth-led approaches to increase preventative mental health services in schools
- Next steps: Developing a Youth Engagement Toolkit; several youth are currently working with the Youth Leadership Institute to finalize the draft toolkit for review in early 2023.



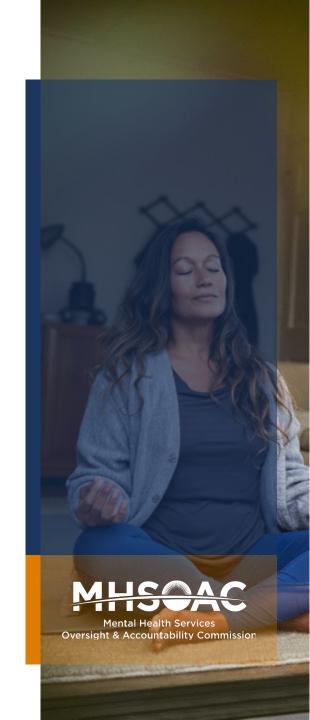
Sally Zinman Consumer and Rusty Selix Clinician Fellows

- Expand opportunities for consumers and practitioners to inform the work of the Commission and public policy.
- Fellowship Advisory Committee
 - Statewide recruitment for members
 - Includes 10 peers, clinicians, and fellowship directors
 - Met three times in early 2022
- Goals
 - Create professional opportunities to be exposed to the policy process and the work of the Commission.
 - Highlight the value of lived experience and experience in mental health practice.
 - Enhance opportunities for the Commission to understand new and emerging challenges facing California's mental health system.



Peer Certification Guide and CFLC

- Draft in progress developed by members of the Commission's Client and Family Leadership Committee (CFLC).
- Intended to support California counties and providers with the implementation of Peer Support Specialist Certifications.
- Includes:
 - Resources for peer support specialist certification, education, and training
 - Job descriptions and templates
 - Agency contact information and helpful tools, statistics and data, and links to supportive services and the history of the peer support specialist movement in California



Planning Ahead



Allocating Commission Resources

| Commission meetings | Subcommittees | Committees | Site visits | Community engagement |
|--|---|---|--|---|
| January February March April May July August September October November Half day Full day | Prevention and Early Intervention Impacts of Firearm Violence Workplace Mental Health Innovation | Anti-Bullying Advisory Committee Children's Committee Client and Family Leadership Cultural and Linguistic Competency Early Psychosis Intervention Plus Advisory Committee Research and Evaluation | EmPATH Firearm violence Full Service Partnerships School mental health Early Psychosis | Listening sessions Key metrics Mental Health Wellness Act Outreach |
| Two day | | | | |



Calendar and Strategic Opportunities

| Upcoming Meetings | | | | | |
|-------------------|---------------|--|--|--|--|
| January | | Business, strategic planning | | | |
| February | Site visit | Business, impacts of firearm violence, adopt workplace mental health | | | |
| March | | Business, adopt PEI | | | |
| April | Site visit | FSP | | | |
| May | | | | | |
| July | | | | | |
| August | | | | | |
| September | | | | | |
| October | | | | | |
| November | | | | | |

Opportunities

- 2024-2027 strategic planning
- Community engagement and establish key metrics
- Establish PEI priorities
- Youth mental health convening
- Establish Innovation priorities/Innovation summit
- Follow up/report out
 - School mental health
 - CYBHI
 - Advocacy grants and contracts
 - Suicide prevention
 - Workplace mental health
 - allcove TM
 - Early Psychosis Intervention Plus
 - Triage
 - Full Service Partnerships
- Mental Health Wellness Act priorities
 - Ages 0-5
 - SUD
 - Peer respite



^{*} Business refers to innovation plans, contracts, etc.

2024-2027 Strategic Planning



Key Opportunities and Tensions

- Publicly funded mental health population health approach to wellbeing
- Driving California's mental health research agenda evaluating ongoing work
- Shaping public understand of mental health and wellbeing communicating program information
- Inspiring innovation, change, scaling monitoring compliance and spending
- Elevating return on investment/program effectiveness growing mental health investments
- Deepen existing partnerships engage with new partners



Strategic Planning Process

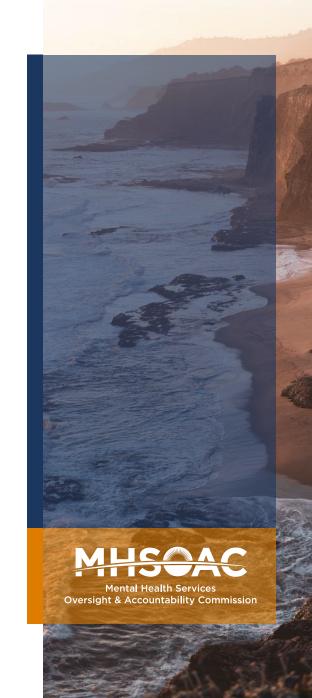
- Goals
 - Reflect on current strategic plan
 - Explore opportunities
 - Engage Commission and communities
 - Review statutory requirements
 - Define Commission authorities
 - Develop strategic plan

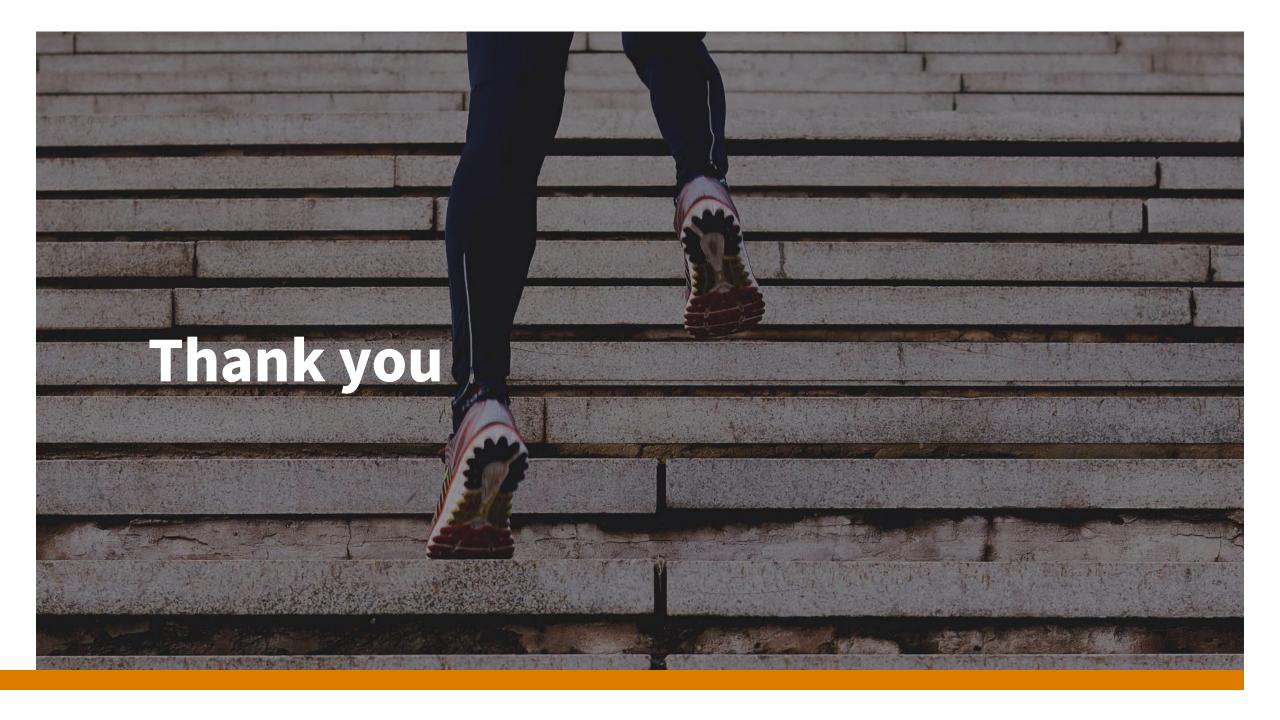
- Proposed Process
 - Appoint a Commission lead
 - Hire a consultant
 - Develop a workplan
 - Calendar specific strategic planning
 Commission meetings
 - Draft a strategic plan
 - Potential adoption November 2023 or January 2024



Motion to approve strategic planning

Proposed motion: Allocate \$300,000 to support a strategic planning process.





PRIORITIES AND OBJECTIVES FOR 2020-2023

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.

- 1a. Promote school mental health as a prime opportunity to reach and serve atrisk children, families, and neighborhoods.
- 1b. Develop and advance a strategy for aligning public and private resources and actions toward the prevention and early intervention of mental health needs.
- 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.

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.

- 2a. Further develop the Transparency Suite at mhsoac.ca.gov to capture more detailed information that is easier to find and interpret.
- 2b. Refine the Commission's management of county-level information to better inform decision-making by state and county policymakers and administrators.
- 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.

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.

- 3a. Support and evaluate multi-county collaboratives striving to improve data analysis, the transfer of knowledge, and the management capacity required to improve results.
- 3b. Support implementation of Striving for Zero, the State's suicide prevention plan for 2020-25.
- 3c. Support youth-led efforts to advance and expand practices for consumer-led and consumer-centric services and expand access to youth- focused services.





Mental Health Services
Oversight & Accountability Commission

VISION FOR TRANSFORMATIONAL CHANGE



2020 – 2023 STRATEGIC PLAN

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

OUR VISION

Wellbeing for all Californians.

THE PROMISE

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. The Act seeks to end the rationing of care and prioritizes prevention and early intervention to reduce seven negative outcomes: suicide, incarceration, school failure, unemployment, prolonged suffering, homelessness, and the removal of children from their home.



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.

Five functions of the Commission to enact transitional change

- 1. Oversight and accountability provide transparency on funding, services, and outcomes.
- 2. Program review and data collection assess gaps and identify opportunities to support system-scale improvements.
- 3. Policy projects elevate and integrate research findings, experiential knowledge, and the wisdom of those with lived experience to articulate changes needed in systems and policies.
- 4. Strategic partnerships with universities, institutes, civic entrepreneurs, and other public agencies to field-test and implement system changes and policy solutions.
- 5. Grant programs resource essential and innovative services in ways that incentivize stronger partnerships, integrated services, and continuous improvement.

