



Mental Health Services
Oversight & Accountability Commission

QUARTERLY REPORT

October 2021 – December 2021

Overview

The Commission maintains a long-standing commitment to using its authorities, resources, and passion to reduce the adverse outcomes of mental health challenges and promote the mental wellbeing of all Californians.

We work every day through partnerships to catalyze transformational change across service systems to fulfill this commitment. This report aims to provide a quarterly snapshot of our work, offering connections and insight to the work through highlights in initiatives, committees, and subcommittees, as well as community engagement and department projects that help connect the Commission’s activities to our mission.

This report covers the second quarter of FY2021-2022, the months of October, November, and December 2021.

Highlights

Commission addresses pre-existing disparities in mental health care with one-time pandemic funding.

(page 14)

→ [READ MORE](#)

Through grants to 55 counties, the MHSSA helped build partnerships to increase on-campus support to students.

(page 8)

→ [READ MORE](#)

Advisory committee for youth, led by youth, develops a social media outreach plan to support vulnerable kids.

(page 16)

→ [READ MORE](#)



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01 COMMUNITY ENGAGEMENT

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COMMUNITY EVENTS

In the last three months of 2021 we hosted a wide range of virtual and in-person events representing the full spectrum of voices that the Commission serves, including commission meetings, learning collaboratives, multi-county workgroups, community partner grant events, and regional and state board meetings and conferences. On average, we hosted an event every other workday.

12

ORGANIZATIONAL TOUCHPOINTS

1. American Public Health Association
2. Anti-Bullying Advisory Committee
3. Art With Impact
4. Behavioral Health Equity Collaborative
5. California Mental Health Advocacy for Children and Youth
6. California Pan-Ethnic Health Network
7. Client and Family Leadership Committee
8. Cultural and Linguistic Competency Committee
9. San Diego Board of Supervisors
10. Striving for Zero Learning Collaborative
11. Two Feathers NAFS Third Annual Native Youth School and Community Wellness Conference
12. United Parents

06

MEETING PLATFORMS

-  Webinar
-  Conference
-  Teleconference
-  Presentation
-  Virtual Listening
-  Sponsored

Community Engagement

Transformational change can only happen when the public and local and state governments are invested in the process.

This commitment is embedded in the Mental Health Services Act, which explicitly includes peers, families, advocates, and community representatives as members of the Commission and in conversations and decision making.

Some of the Commission's most valuable and often unseen work lies in intentionally and consistently constructing ways to convene, through hosting, sponsoring and engaging in conversations, workgroups, and collaboratives designed to create change and in which all voices are represented.

Teleconference Meetings

Routine teleconference meetings for the Commission (October 28 and November 18) and committees allow Commissioners, committee members, and members of the public to work together on establishing goals, deciding future action, and reviewing results. This quarter included meetings of the Client and Family Leadership Committee (October 19 and December 9), Anti-Bullying Advisory Committee (October 28), and Cultural and Linguistic Competency Committee (November 10 and December 8).

Learning Collaboratives

Commission initiatives happen at a local level and collaboration with counties is critical. Learning collaboratives are a way for counties to work together, learn from each other, and accomplish their goals, as 11 counties are doing as part of the Striving for Zero Learning Collaborative. This collaborative met twice during this quarter (October 20 and November 17), advancing suicide prevention efforts. The Commission also hosted a multi-county workgroup teleconference (October 4) to discuss the annual prevention and early intervention report templates.

Community Partner Engagements

Community partner engagement grants help specific communities build understanding of mental health needs and solutions, and these grants support community events. These events range from caregiver storytelling webinars from United Parents to discussions around Black community mental health and criminal justice involvement from the California Pan-Ethnic Health Network. These community partner engagement grants are also built with input from the public; as the Commission prepares another round of grants to support immigrants and refugees, staff held a listening session to hear from members of the public on what is important for them to see in those grants (October 21). The Commission also directly supports other mental health efforts, like the Two Feathers NAFS Third Annual Native Youth School and Community Wellness Conference (November 17-19), and virtual discussions about art and mental health hosted by Art With Impact (October 8, 13, 22; November 5, 12, 18; Dec 2, 16).

State-wide Conversations

Engagement in mental health also drives Commission staff to participate in conversations outside the Commission. In this quarter, Commission staff participated in meetings with the San Diego Board of Supervisors (October 19), the California Mental Health Advocacy for Children and Youth (November 12), the 988 State Advisory Board (December 1), and more. Staff also presented at the American Public Health Association's annual conference (October 25), the Words to Deeds conference (November 5), the Behavioral Health Equity Collaborative (November 23), and more. These activities help Commission staff hear from and share with those in the mental health space who may not attend Commission meetings.

02 INITIATIVES

Initiatives

The Commission is currently supporting 11 initiatives, broad-reaching, often multifaceted projects within the framework of our strategic plan, to improve mental wellbeing in California. These initiatives are supported through a variety of means, including research, statewide and local funding and grants, and training. This report takes a deep dive into the School Mental Health initiative and provides a strategic overview of the Commission’s 10 other initiatives.

FEATURED INITIATIVE: SCHOOL MENTAL HEALTH

Grants to Schools Support Student Return to Campus

The Commission administers the Mental Health Student Services Act and provides grants for partnerships between county mental health agencies and local education agencies to deliver school-based mental health services and supports to young people and their families. These partnerships support outreach to identify early signs of unmet mental health needs, reduce stigma and discrimination, and prevent unmet mental health needs from becoming severe and disabling.

The Commission has awarded nearly \$210 million in grant funding to programs in 55 of California’s 59 county/local mental health departments to support robust school mental health partnerships. Grant funding is available to provide support services both on and off campus that may include suicide prevention, drop-out prevention, placement assistance, and a range of services to students in need. Funding targets outreach to high-risk youth, including foster youth, youth who identify as LGBTQ+, economically disadvantaged communities, and youth who have been expelled or suspended from school.

Across the diverse 55 funded partnerships, grant funds are deployed to support student-run wellness centers, teacher and staff training, crisis support programs, mental health screening, stigma reduction, peer support, case management, clinical treatment, and other approaches to meeting student mental health needs.

In the second quarter of the 2021-22 fiscal year, the Commission focused on extending funding opportunities under the Mental Health Student Services Act to the 20 California counties that had not applied for or received a grant

\$210 million
in grant funding for programs in 55 of California’s 59 county/local mental health departments

under the program. The bulk of those counties were small, rural, and had limited staff capacity to participate in a grant application program. Early in the quarter Commission staff worked with county staff to better understand the barriers they faced in accessing these grant funds. The Commission supported a multi-county listening session, one-on-one county engagement sessions, and a Bidder’s Conference. In response, the grant application process was streamlined to address those concerns while remaining compliant with the administrative rules that govern the use of these funds.

- On November 1, 2021, the Commission released a request for proposals targeting the 20 counties that were not participating in the grant funding program.
- On February 1, 2021, the Commission awarded grants to 17 of the 20 unfunded counties.
- To date, the Commission is funding projects in 55 of California’s 59 county/local mental health departments.
- The Commission is currently working with the remaining four counties to understand the barriers they face to participating in the project.
- Among other barriers, counties report difficulties hiring and retaining needed staff, meeting reporting and data requirements under the grant program, and difficulties expanding services.
- In addition to addressing staffing needs, local partners under the program report challenges identifying the most effective practices in supporting school mental health and determining how to sustainably fund the projects supported with these grant funds.

The Commission will continue to support school mental health moving forward through:

Contract Monitoring: The Commission will continue to work with existing partners and newly funded partners to distribute funding consistent with the grant provisions.

Program Reporting and Evaluation: The Commission is working with local partners, research and evaluation consultants, and others to design and implement a research and evaluation strategy that reflects the diversity of school mental health strategies supported with grant funds and provides actionable information for learning from this program.

Fiscal Sustainability: The Commission’s mental health and education partners are pursuing a range of strategies to explore how to continue the work supported with these grant funds when the grant ends in 2026. The Commission is working with the Department of Health Care Services and the Children and Youth Behavioral Health Initiative to identify and support opportunities to sustainably finance relevant school mental health investments.

Understanding Programmatic Effectiveness: The Commission, in partnership with other state agencies, and local partners, is facilitating a learning collaborative to better understand the range of program types funded through the grant program, their impact on specific needs and ways to scale the most effective interventions.

Complete Initiative Portfolio

Click below to visit the webpage for each initiative and see updated descriptions, timelines, and resources.

- | | | |
|---|---|--|
| → allcove™ Youth Drop-In Centers | → Innovation Incubator | → Triage |
| → COVID-19 and Emerging Issues | → Prevention and Early Intervention | → Workplace Mental Health |
| → Criminal Justice Prevention | → School Mental Health | → Youth and Peer Empowerment |
| → Early Psychosis Intervention Plus | → Suicide Prevention | |

Initiatives Support Strategic Goals

The Commission set out to achieve three key strategic goals between 2020 - 2023: to advance a shared vision of mental health needs; to advance data and analysis to support better outcomes; and to catalyze improvement in state policy and community practice.

Each initiative supports these goals through specific and measurable efforts in a variety of categories identified in the gray tags below. This key will help you see the tangible ways these initiatives are helping the Commission create transformational change in mental health for Californians:

VISION	DATA	COMMUNITY
School mental health	Transparency Suite	Multi-community collaborative
Prevention & early intervention	County-level data	Suicide prevention
Standards & strategies	Aggregate & integrate	Youth-led efforts



allcove™ Youth Drop-In Centers

Half of all mental health conditions begin by age 14, and 75 percent develop by the age of 24, making early detection and treatment urgent and critical.

allcove™ youth drop-in centers will expand early access to integrated mental health care for youth between 12 and 25 years of age and their families.

- School mental health
- Prevention & early intervention
- Multi-community collaborative

[Read more here](#)

1/2
of all mental health conditions begin by age 14

75%
Develop by the age of 24



COVID-19 & Emerging Issues

The pandemic has tested the capacity of the state’s mental health systems to meet pre-existing and emerging mental health needs of Californians.

The Legislature authorized the Commission to redirect existing funds to fortify county, local, and community partners and service providers to rise to the challenge of moments like these to deliver the best mental health services possible.

- Prevention & early intervention
- Multi-community collaborative

[Read more here](#)



Criminal Justice and Mental Health

The Commission is using multiple tools – research, policy development, financial incentives, and technical assistance – to help counties and their community partners build proactive and effective service systems that reduce criminal justice system involvement.

The goal is to assertively advance the Mental Health Services Act (MHSA) goal of reducing incarceration among individuals with mental health needs.

- Prevention & early intervention
- Standards & strategies
- County-level data
- Multi-community collaborative

[Read more here](#)



Early Psychosis Intervention Plus

Nearly 100,000 adolescents and young adults experience their first psychotic episode each year in the United States. With half of all mental disorders manifesting by the age of 14 and 75 percent by the age of 24, the Commission is focusing on early detection and early intervention to improve the lives of adolescents and young adults, significantly reducing the impact of mental health challenges.

- School mental health
- Prevention & early intervention
- Aggregate & integrate
- Multi-community collaborative

[Read more here](#)

~100k
Adolescents and young adults experience their first psychotic episode every year in the U.S.



Innovation Incubator

The Mental Health Services Act (MHSA) includes a rare and explicit commitment to fostering innovation in providing services and supports.

Created in 2018 with \$5 million in one-time funding, 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.

- County-level data
- Aggregate & integrate
- Multi-community collaborative

[Read more here](#)



Prevention & Early Intervention (PEI)

Everyone should have the opportunity to be well and thrive, yet one in four people worldwide will experience a significant disruption to their mental wellbeing at some point in their lifetime. The Commission is developing a report on prevention and early intervention opportunities using data and technical support strategies and supporting innovative approaches to meeting PEI needs.

- Prevention & early intervention
- Standards & strategies
- County-level data
- Aggregate & integrate
- Multi-community collaborative
- Suicide prevention

[Read more here](#)



Suicide Prevention

Suicide in California remains a significant public health challenge. In 2020, 4,075 Californians lost their lives to suicide, and the pandemic has increased suicide risks statewide.

There is hope. Guided by data and community input, the Commission developed a statewide strategic plan for suicide prevention that incorporates the latest information and evidence to guide state and local actions for saving lives.

- Prevention & early intervention
- Standards & strategies
- County-level data
- Aggregate & integrate
- Multi-community collaborative
- Suicide prevention

[Read more here](#)



Triage

Triage personnel or mobile crisis response teams may be the first mental health professionals in contact with someone requiring crisis intervention.

This Mental Health Wellness Act grant program is helping crisis responders connect those having a mental health episode with wellness, resiliency, and recovery-oriented programs that offer the least restrictive settings appropriate for their needs.

Prevention & early intervention Standards & strategies Multi-community collaborative

[Read more here](#)



Workplace Mental Health

Nearly one in five Americans live with a mental health condition, yet there are no well-established and agreed-upon standards in the U.S. to guide public and private employers about how to increase mental health awareness in the workplace, support prevention, and respond to needs with recovery strategies.

The Commission is developing a framework of voluntary standards to support mental health in the workplace for all Californians.

Standards & strategies County-level data Aggregate & integrate Multi-community collaborative

[Read more here](#)



Youth & Peer Empowerment

The Commission is working through advocacy funding, sponsored legislation, sponsored youth participation, and Committees to amplify the voices of youth and peer leaders seeking to create innovative solutions in the pursuit of emotional wellbeing and prevention.

The Youth Innovation Committee identified unmet mental health needs of California youth and identified opportunities for innovation; the Anti-Bullying Advisory Committee has begun work to use social media to support victims of bullying.

School mental health Prevention & early intervention County-level data Aggregate & integrate
Multi-community collaborative Youth-led efforts

[Read more here](#)

03 COMMITTEES AND SUBCOMMITTEES

Subcommittees and Committees

The Mental Health Services Act charges the Commission with engaging the public. Subcommittees and committees allow Commissioners and the public to dive deep into questions and advise the full Commission. This report highlights the Innovation Subcommittee and the Anti-Bullying Advisory Committee, and a list of all Committees and Subcommittees is available on the Commission’s website.

FEATURED SUBCOMMITTEE: INNOVATION

Innovation Project Inspires Pandemic Response

The Commission is using one-time pandemic funding to help counties replicate an innovation project in Solano County that is increasing both access to, and the quality of care received by underserved communities .

The Budget Act of 2020 authorized the Commission to redirect \$2.02 million to respond to the mental health impacts of the COVID-19 pandemic. The pandemic has worsened pre-existing disparities in access to quality care. The stress has been particularly acute for young people and their families due to the loss of traditional school supports, isolation, the ongoing incidences of racial injustice. Economic distress has particularly impacted low-income, racial, and ethnic communities.

The Commission saw an opportunity to address disparities in access to effective and culturally appropriate care, and as result \$790,000 was dedicated to replicate Solano County’s Interdisciplinary Collaboration and Cultural Transformation Model (ICCTM).

Beginning in 2015, Solano County used \$7.2 million of its MHSA Innovation funds and partnered with the UC Davis Center for Reducing Health Disparities to better serve the Latino, Filipino, and LGBTQ+ communities.

The project sought to improve inter-agency and community collaboration related to mental health

services, supports, and outcomes by engaging the community to apply the standards for Culturally and Linguistically Appropriate Services, known as the CLAS standards. The county developed Quality Improvement Action Plans in three focus areas: workforce development, training, and community outreach.

Early results from the project show remarkable results in access and penetration rates for some of the underserved communities and improvements throughout Solano County’s behavioral health department.

Through this project, Solano County:

- Funded 35 wellness centers on K-12 and adult education campuses, which provide culturally inclusive spaces where all students are welcome.
- Implemented a new inclusion statement and changed hiring practices to focus on cultural responsivity and competencies.
- Enhanced community awareness and trust that resulted in a significant increase in calls requesting services.

To support the 40 counties that were interested in replicating the community engagement project, the Commission is contracting with the UC Davis Center for Reducing Health Disparities and Solano County to conduct a virtual training series focused on eight topics:

<p>1</p> <p>Overview of the Solano County ICCTM Innovation Project and outcomes to date</p>	<p>2</p> <p>The impact of COVID-19 on communities of color, particularly the Latinx and African American communities</p>	<p>3</p> <p>Social determinants of health, with a focus on disparities related to COVID-19 and the impact of structural racism</p>	<p>4</p> <p>Implications of trauma on marginalized communities with a focus on traumatic grief and the lingering effects of loss due to the COVID-19 pandemic</p>
<p>5</p> <p>National CLAS standards and how to adapt them for the LGBTQ+ community</p>	<p>6</p> <p>Mental Health Plan data that can be used to monitor disparities and inform the development of community-driven Quality Improvement Action Plans</p>	<p>7</p> <p>Culturally specific community engagement models, including the “Resilient American Communities: COVID-19 Initiative” model</p>	<p>8</p> <p>Project sustainability planning.</p>

Counties will meet quarterly to learn from each other, and Solano County will mentor up to four counties on community engagement activities.

The project’s effectiveness will be determined through participant surveys and information collected on any Quality Improvement Action Plans developed. Success indicators will include confidence with community

engagement models, efforts to implement CLAS standards, and county participation.

The remaining \$50,000 in the budget will fund a project manager to work with counties to develop a Multi-County Innovation Plan to reduce ethnic disparities and scale the Solano County project.

All Subcommittees

Click below to visit the webpage for each subcommittee and see upcoming and past meetings.

- [Innovation Subcommittee](#)
- [Prevention and Early Intervention Subcommittee](#)
- [Workplace Mental Health Subcommittee](#)

FEATURED COMMITTEE: ANTI-BULLYING

Anti-Bullying Advisory Committee is Youth Led

The Commission is working with youth, community leaders and experts to design and launch a social media campaign targeting racial and ethnic bullying.

The Legislature in 2021 allocated \$5 million to the Commission to create a social media-based peer support network for youth who experienced bullying because of their ethnicity, country of origin, or language.

To inform the process, the Commission formed the Anti-Bullying Advisory Committee, led by Commissioner Shuo Chen. The Committee is composed of youth and adults with expertise in youth engagement, Asian Pacific Islander (API) and diversity issues, and bullying prevention.

The Committee met twice in the latter half of 2021. Using youth-led engagement and empowerment

strategies, committee members shared their experiences and expressed their vision and priorities for supporting victims of bullying, sharing resources, and providing peer support.

To achieve these priorities, the Committee agreed on three elements:

- Design a peer support network.
- Make the project by youth, for youth .
- Ensure the project is “always on,” and meets youth where they are.

The Commission authorized a contract with a social media agency that engaged youth and cultural ambassadors in a meeting in November. Staff is identifying contractors to support the project.

All Committees

Click below to visit the webpage for each committee and see upcoming and past meetings.

- [→ Anti-Bullying Advisory Committee](#)
- [→ Research & Evaluation Committee](#)
- [→ Client and Family Leadership Committee](#)
- [→ Fellowship Advisory Committee](#)
- [→ Cultural and Linguistic Competency Committee](#)
- [→ Youth Innovation Project Planning Committee](#)
- [→ Early Psychosis Advisory Committee](#)

04

ADVANCING TRANSFORMATIONAL CHANGE

Advancing Transformational Change

In its efforts to create transformational change for wellbeing in California, the Commission uses research, grants, innovation, and more to explore bold new ideas. These tools underpin Commission initiatives to create more robust evidence and exploration. Read more about how staff are advancing change.

Research and Evaluation

The Research and Evaluation team seeks to improve outcomes, promote opportunities for prevention and effective intervention, and reduce disparities by analyzing data, consulting with experts, and engaging communities to produce information and recommendations that empower community members and inform policymakers and practitioners. The team has five primary activities that are strategically designed to increase public understanding and reduce stigma, document the impact of existing policies and programs, provide the information required for robust community involvement and continuous improvement in services and outcomes, and inform the Commission's agenda.

Tracking community indicators to increase public understanding and awareness. The team reports population-level data on significant outcomes associated with mental health, including hospitalizations, criminal justice involvement and suicide. As part of the Commission's [Transparency Suite](#), the team released its latest dashboard highlighting suicide incidence and rates in late 2021.

Curating an inventory of county plans and programs to improve community planning. The team aggregates data on MHSA-supported programs, including three-year plans and annual reports, data and outcomes reported for Prevention and Early Intervention programs and Innovation projects, program descriptions and outcomes, revenue and expenditures. Team data scientists are working to update the Commission's fiscal transparency tool, which visually displays [information about funding and expenditures](#) by County Mental Health/Behavioral Health departments in programs under the Mental Health Service Act.

Recommending ways to improve mental health strategies and outcomes.

The team compiles data and research with public input to align and adapt statewide policies and community programs with effective approaches to improve outcomes. During the last quarter of 2021, the team partnered with subject matter experts to develop an [online training resource](#) for educators to develop protocols for screening students at risk for suicide, which includes collecting and aggregating data to more accurately describe suicide risk among students.

Linking consumer-level data across service systems to understand the impact of mental services.

The team links consumer-level data across service systems to understand how mental health needs and services impact the health, safety, education, and employment of Californians. At the end of 2021, the team acquired education data on mental health consumers from the Department of Education and birth and death data from 2000-2020 from the Department of Public Health and has completed the process to load that data into the Commission Data Warehouse.

Evaluating new initiatives to accelerate learning, adaptation, and scaling.

The team evaluates existing and pilot interventions to determine effectiveness and identifies opportunities for prevention, improvement and replication. Evaluation of the Commission's [mental health crisis triage](#) grant program is underway. After consulting with the [Research and Evaluation Committee](#), an evaluation plan has been finalized and data on more than 16,000 program clients has been collected.

Stakeholder Engagement and Grants

The Commission's Stakeholder Engagement and Grants team handles multiple external-facing programs that aim to directly serve community members through advocacy contracts, the Triage program, Early Psychosis Intervention Plus (EPI+), allcove™ Youth Drop-In Centers, and COVID-19 response projects.

The Commission supports eight advocacy organizations that are planning mental health advocacy events for 2022 by gathering community input and meeting with county supervisors and behavioral health agencies. In partnership with local level entities, community partner organizations will hold a total of 42 local and state level advocacy events in 2022 across the state. Additionally, seven organizations released their 2021 State of the Community Reports in the fall which summarize last year's advocacy work and outline the current critical needs of Clients and Consumers, Diverse Racial and Ethnic Communities, Families, LGBTQ+ communities, Parents and Caregivers, Transition Age Youth, and Veterans. The Stakeholder Engagement team also conducted four listening session events in prior months in preparation for the next round of Immigrant and Refugee Stakeholder contracts, totaling \$2,010,000 in funding, with the Request for Proposal planned to be released in the Spring of 2022.

Current Triage grantees include 20 counties participating with 30 programs in total consisting of an Adult/TAY, 0-21, and a School/County Collaborative. Grant funding was originally set at three years and would have ended on November 30, 2021. However, due to the COVID-19 pandemic, the Commission has offered counties participating in Triage grants an additional contract year to spend down any unspent funding. The pandemic made it very difficult for counties to hire and retain Triage personnel over the past two years. In all, 25 programs have received extensions for an additional year through November of 2022 to continue funding the program with unspent funds from previous years. Triage staff are in the process of planning for the next round of funding. The Request for Applications is scheduled to be out by June 2022 with contracts in place by October 2022.

As of September 2021, the Commission has executed grant agreements with the seven EPI+ grantees. In January 2022, the Commission and its EPI+ Training and Technical Assistance partners at UC Davis, UC San Francisco, and Stanford University facilitated a Data Collection Forum with the EPI+ grantees to discuss the statewide plan for data collection and the utilization of outcomes data to demonstrate program impact. Commission staff are in process of drafting an EPI Strategic Plan Framework to present to the EPI+ Advisory Committee for input on the key areas of opportunity for expanding and sustaining EPI programs and to refine the strategy for funding workforce expansion, public awareness, and research on barriers to accessing care for diverse communities with the remaining \$1.6 million in available funds. As of January 2022, the Commission has executed grant agreements with the five allcove™ youth drop-in center grantees. The grant execution process was significantly delayed due to COVID-19 impacts and allcove™ trademark negotiations. The time spent negotiating these agreements was necessary to ensure that allcove™ centers are implemented with fidelity to the model around the state under the same branding to provide a consistent look and feel and with shared priorities in serving at-risk youth. Due to this delay, the Commission is seeking a two-year extension of the funding liquidation period from June 30, 2024, to June 30, 2026, in order to provide a four-year grant term.

The Commission's COVID-19 response projects include a project to strengthen school mental health supports for young Californians. As of July 2021, the Commission has executed contracts with Bring Change to Mind (BC2M), NAMI California's NAMI on Campus High School (NCHS) Program, Genders & Sexualities Alliance (GSA) Network, Directing Change Program and Film Contest, and The Goldie Hawn Foundation's MindUP™ Program to provide student mental health supports with an emphasis on youth suicide prevention throughout the 2021-22 school year. Commission staff are facilitating quarterly collaboration meetings to coordinate their activities and ensure the project goals are met and are serving the communities in need.

As of January 2022, this collaboration has resulted in BC2M, NCHS, and GSA significantly increasing the total number of active school-based clubs, Directing Change awarding 13 mini-grants to club-affiliated students to participate in their annual art/film contest, forming a new partnership to pilot a middle school BC2M club model with MindUP's curriculum, and NCHS establishing a new Youth Advisory Council to elevate youth voice in the design of club materials and programming.

The Commission's COVID-19 response also includes an effort to address racial, ethnic, and cultural disparities. As of October 2021, the Commission has executed a contract with Prevention Institute to engage county behavioral health departments and community-based organizations, including the California Reducing Disparities Project's Implementation Pilot Project, in advancing a shared vision into long-term systems change to be more responsive to community needs. Commission staff are also in process of executing contracts with Solano County and the UC Davis Center for Reducing Health Disparities to support the replication of their Interdisciplinary Collaboration and Cultural Transformation Model Innovation Project.

Program Operations

The Program Operations department is just one part of the Commission's overall strategy to help it perform its fiduciary responsibility, identifying trends in mental health systems, and providing support through its review of county submitted reports on the progress of the Mental Health Services Act.

Staff on this team have developed significant relationships with the 59 county/local mental health plans and modeled successful state and local partnerships. Through their work, counties have received consistent technical assistance, capacity building, and support for their ongoing effort to achieve measurable improvements in efficiency, effectiveness and outcomes through quality improvement strategies.

Most notable is that the counties have all expressed a great deal of trust with the Commission and its staff, exemplifying that State and local partnerships are the foundation of an organized effort for change and allows for collaboration and learning – important elements for transformational change! This was exemplified in this quarter when Sacramento County approached Commission staff and shared a local challenge in the area of Crisis Services. The County Board of Supervisors indicated a need for a strategy to strengthen the county's crisis system of care under a tight deadline. Program Operations staff was able to connect the county with a contractor focused on implementing the Crisis Now Model as part of the Commission's Innovation Incubator. That contractor was at the time working with 11 counties, supporting plan development for a comprehensive and sustainable crisis response system through their Crisis Now Academy. The contractor met with Sacramento County staff and within weeks was able to assess the county's current crisis system of care and determine their financial needs to implement a sustainable system. Relationship building created the opportunity to help move the county forward.

In addition to the transformative nature of relationship building and in the spirit of partnership, the Program Operations team successfully reviewed 35 county-submitted innovation plans, 33 of which were approved by the Commission which resulted in over \$84 million in innovation funds to support 22 counties in providing innovative services and or enhanced systems in their communities.

Program Operations also supported the Research and Evaluation Team in evaluating the work of the Innovation Incubator by participating in 13 county exit interviews to better understand the impact the Innovation Incubator is making and how it can be improved to support continuous quality improvement and overall service provision for all Californians.

Legislation

In calendar year 2021, the Commission sponsored one piece of legislation, co-sponsored one piece of legislation, and supported four pieces of legislation. Of these, the Governor signed four pieces of legislation in late 2021. (See below.)



Senate Bill 465

(Eggman), requires the Commission to report on the Full Service Partnership model to the Legislature, was signed on October 5, 2021.

The Commission supported this legislation.



Assembly Bill 638

(Quirk-Silva), authorizes prevention and early intervention strategies that address mental health needs, substance use needs, or needs relating to co-occurring mental health and substance use needs, was signed on October 6, 2021.

The Commission supported this legislation.



Senate Bill 14

(Portantino), excuses school absences for the benefit of a pupil’s mental or behavioral health, was signed on October 8, 2021.

The Commission supported this legislation.



Senate Bill 224

(Portantino), requires schools to incorporate mental health instruction in health education, was signed on October 8, 2021.

Commission co-sponsored this legislation.

Communication

As part of its goal to broaden public understanding of Commission efforts, the Communications team continued to improve the Commission website. Launched in the first quarter of FY2021-2022, the updated website now features clear information on Commission initiatives, with a refreshed layout for Commission events, headlines, and Transparency Suite dashboards. The Communications team continues to work to improve clarity and access on the website with new pages on Committees and Subcommittees, uploading recordings of Commission meetings, and maintenance to keep content accurate and up-to-date. Many of these website updates supported the creation of this first quarterly report, another priority for the Communications team during this quarter.

The Communications team also supported the release of the Commission’s video series [Upstream University](#).

Part of the Commission’s prevention and early intervention efforts, Upstream University features three experts in different areas of mental health, discussing elements of prevention and early intervention – including peers in decision-making, creating “digital apothecaries” to help the public manage stress and avoid more severe symptoms, and examining mental health disparities through a public health lens. This release was supported through web and social media posts.

Reaching new audiences continues to be an important priority for the Commission. At its November 18, 2021 meeting, the Commission authorized staff to contract with Crossings TV to air messages of mental health support.

Crossings TV is an Asian-language television station, delivering programming for Chinese, Filipino, Vietnamese, Japanese, Korean, Hmong, and South Asian communities in the Central Valley, San Francisco, and Los Angeles areas. The Commission created an updated 30-second video for Crossings TV to broadcast throughout the day that speaks to the stress viewers may be experiencing, reassures them they're not alone, and connects them to resources. This video will air in both English and Mandarin hundreds of times over the next two years, reaching Asian American communities in a culturally relevant way. The Commission also supports WETA's Well Beings project. WETA is a flagship PBS station, and their Well Beings

project is focused on destigmatizing mental health through storytelling. Their storytelling efforts include social media and web video, blog posts on Forbes.com, and news segments on PBS NewsHour produced through the Student Reporting Labs. Additionally, WETA is partnering with Ken Burns to create a documentary about youth mental health, and which lists the Commission as a sponsor. PBS stations throughout the country, including California, have done screenings of Well Beings mental health documentaries, bringing local communities together to talk about mental health. This partnership between the Commission and WETA began in 2019.

05 **WHAT'S NEXT**

What's Next

MAY 2022

May 12: Research and Evaluation Committee Meeting
9:00 a.m. – 12:00 p.m.

May 12: Cultural and Linguistic Competency Committee Meeting
3:00 p.m. – 5:00 p.m.

May 26: May Commission Meeting
9:00 a.m. – 1:30 p.m.

JUNE 2022

Commission Meeting TBD

JULY 2022

July 14: Cultural and Linguistic Competency Committee Meeting
2:00 p.m. – 4:00 p.m.

July 28: July Commission Meeting
9:00 a.m. – 1:30 p.m.