



MENTAL HEALTH SERVICES ACT (MHSA) – “PROGRESS AND HIGHLIGHTS” PETRIS CENTER EVALUATION, MAY 2010 UNIVERSITY OF CALIFORNIA, BERKELEY FACT SHEET

THE MENTAL HEALTH SERVICES ACT (MHSA) FULL SERVICE PARTNERSHIPS

Over 400,000 individuals were served with MHSA funding in FY 2008/09, including 25,000 clients in Full Service Partnership (FSP) Programs.

The FSP Programs provide clients with severe mental illness with a broad spectrum of services to aid in their recovery. FSP Programs are more intensive, comprehensive and broader in their range of services than the usual mental health care. In addition to treatment, medication management, crisis intervention, case management and peer support FSP Programs, also provide non-mental health services such as food, housing, respite care, and treatment for co-occurring disorders, such as substance use.

PETRIS CENTER EVALUATION

The FSP Programs were recently evaluated by the Nicholas C. Petris Center at the University of Berkeley in May 2010. The study, titled “Evidence on the Effectiveness of Full Service Partnership Programs in California’s Public Mental Health System,” showed very successful outcomes for clients in FSP Programs. Several of these positive outcomes are highlighted below:

- Homelessness rates decreased from 11% to 0.02% for those individuals living without shelter, services or supports
- The proportion of consumers living independently after 12 months of FSP Program participation increased by approximately 20% and were able to maintain self-sufficiency beyond the one year in the FSP Program
- After 12 months, the odds of using mental health-related emergency services was 67%

lower for clients in FSP Programs compared to those receiving usual care

- The probability of being arrested dropped by 56 percent as compared to those receiving usual care
- Employment outcomes were improved by 25% after 12 months
- Consumers were 30% more likely to start an education program after 12 months
- Functioning, which includes reduced psychiatric symptoms, improved ability to take care of one’s needs and being better able to deal with problems, was increased by 27% compared to those with usual care
- Overall outcomes, such as problem solving, self-control, crisis management, social effectiveness, housing, and psychiatric symptoms, were improved in some clients by 30%

NOTE:

PETRIS CENTER RESEARCH STRUCTURE

The Petris Center study focused on the effectiveness of FSP programs for adults and older adults through 2008 and early 2009 in reducing five of the seven negative outcomes that the Mental Health Services Act (MHSA) emphasizes which include: incarceration, prolonged suffering, school failure/dropout, unemployment, and homelessness. The study did not include the other two domains of suicide and removal of children from their homes.