

## Evaluation Committee

### 2010 Charter

**Purpose:**

To ensure compliance with the MHSA, Part 3.7, Welfare and Institutions Code (W & I Code) Sections 5845; 5846, and 5847.

**Priority for 2010**

- **2. Implement Accountability Framework**

<b>Date</b>	February 2010
<b>Chair</b>	Larry Poaster
<b>Vice-Chairs</b>	Richard Van Horn, Howard Kahn
<b>MHSOAC Staff</b>	Sandy Lyon, Carol Hood
<b>Composition</b>	Lead Commissioners, Staff <ul style="list-style-type: none"> <li>• CA Council of Community Mental Health Agencies</li> <li>• California Mental Health Planning Council</li> <li>• CiMH</li> <li>• CMHDA</li> <li>• Community Agencies</li> <li>• Counties</li> <li>• Mental Health Data Experts</li> <li>• DMH</li> <li>• Client and Family Members</li> <li>• Representatives of Underserved Racial/Ethnic Communities</li> </ul>
<b>Activities Report</b>	1. <b>MHSA Evaluation Phase I: Scope of Work Development</b> <ul style="list-style-type: none"> <li>• Review and approve RDA's recommendations and directions contained in the MHSA Evaluation Phase II Scope of Work Report (May 2010)</li> </ul> <p style="text-align: center;"><b><u>Phase I-Deliverables:</u></b></p> <ul style="list-style-type: none"> <li>• Project Timeline</li> </ul>

**(Informational Only)**

**Evaluation Phase II Timeline:**

- BID Review and Selection **(October 2010)**
- Execute Vendor Contract **(January 2011)**
- Initial Product-15 months after start of Phase II **(May 2012)**
- Final Product: 30 Months after Start of Phase II **(June 2013)**



- Project Budget
- Scope of Work
- Phase I Report

**2. Comprehensive Evaluation Phase II:**

- Review and approve draft of Request for Proposal (RFP)I **(June/July 2010)**
- Participate in the BID Review and Selection Process

3. Collaborate with California Mental Health Planning Council (CMHPC) to prioritize approved performance indicators and review them for individual client, mental health system and community performance outcomes **(February/March 2010)**.

4. Review nationwide prevention indicators **(March – December 2010)**.

5. Explore usability of California Health Interview Survey (CHIS) questions and data to MHSA outcomes **(March 2010)**.

6. Review RDA summary on MHSA funded research (e.g., Petris Center) to determine what MHSA related studies have already been conducted and what results they have found **(April – December 2010)**.

7. Analyze RDA's findings regarding duplication of data and their recommendations of the next steps needed to reduce superfluous data collection **(June 2010)**.

8. Provide consultation to the MHSOAC Services Committee on what data to collect in regards to PEI services (including disparities data) that are relevant to determine progress of MHSA programs and projects **(July – December 2010)**.

9. In collaboration with the MHSOAC Services Committee, recommend appropriate use of PEI annual update data and future PEI and Innovation data needs **(July – December 2010)**.

When completing the work of the committee and when making policy or strategy recommendations to the MHSOAC, each committee should carefully consider if the recommendations meet the following criteria:

1. Culturally and linguistically competent
2. Likely to promote a client/family/parent driven system
3. Likely to reduce stigma and discrimination, prevent suicide and other negative outcomes
4. Fully informed via a robust stakeholder process
5. Likely to reduce disparities across the lifespan, gender and racial, ethnic and cultural populations.

### **Objectives**

- Ensure that the MHSOAC evaluation accurately depicts the extent to which the objectives of the MHSOAC have been accomplished.
- Ensure that the evaluation is governed by using methods and measures that are consistent with the provisions of the MHSOAC and are meaningful and relevant to stakeholders.
- Ensure that information from evaluative efforts and reports is used and usable for continuous improvements of systems and programs/projects and for revising MHSOAC policy guidelines depending on system outcomes.
- Prepare annual accountability report (after Phase II).

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