

Text of Modified Proposed Prevention and Early Intervention Regulations  
Sections 3560, 3560.010, 3560.020 and 3750

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The Mental Health Services Oversight and Accountability Commission (MHSOAC) at the October 23, 2014 meeting voted to modify the proposed language of the sections listed below that were the subject of the notice published on June 6, 2014 for a 45-day public comment period. The MHSOAC has illustrated changes to the original text in the following manner: regulation language originally proposed in June 2014 is underlined; deletions from the language originally proposed are shown in underline and strikeout using a “-“; and additions to the language originally proposed are double-underlined.

**Article 5. Reporting Requirements**

**Adopt Section 3560 as follows:**

**Section 3560. Prevention and Early Intervention Reports.**

- (a) The County shall submit to the Mental Health Services Oversight and Accountability Commission the following Prevention and Early Intervention reports:
- (1) The Annual Prevention and Early Intervention Program and Evaluation report as specified in Section 3560.010.
  - (2) The Three- Year Program and Evaluation Report as specified in Section 3560.020.

**Adopt Section 3560.010 as follows:**

**Section 3560.010. Annual Prevention and Early Intervention Program and Evaluation Report.**

- (a) The requirements set forth in this section shall apply to the Annual Prevention and Early Intervention Program and Evaluation Report ~~to be included in the Annual Update for fiscal year 2015/16 and each Annual Update and Three-Year Program and Expenditure Plan thereafter.~~
- (1) The Annual Prevention and Early Intervention Program and Evaluation Report is due to the Mental Health Services Oversight and Accountability Commission on or before December 30, as part of the Annual Update or Three-Year Program and Expenditure Plan for the fiscal year immediately following the effective date of this section and no later than December 30<sup>th</sup> every year thereafter except for years in which the Three-Year Program and Evaluation Report is due.
  - (2) The Annual Prevention and Early Intervention Program and Evaluation Report shall report on the required data for the fiscal year prior to the due date.
- (b) The County shall report the following information annually as part of the Annual Update or Three-Year Program and Expenditure Plan. The report shall include the following information for the reporting period:
- (1) For each Prevention program and each Early Intervention program list:
    - (A) The program name.
    - (A) (B) Unduplicated numbers of individuals served annually in the preceding fiscal year



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- (C) ~~(B)~~ Number of referrals of members of underserved populations to a Prevention program, an Early Intervention program and/or to treatment beyond early onset including kind of care that resulted from the outreach.
- (D) ~~(C)~~ Number of individuals who followed through on the referral, defined as the number of individuals who participated at least once in the program to which they were referred.
- ~~(D) Interval between onset of risk indicators and initial symptoms of a mental illness as self-reported or reported by a parent/family member or as identified by medical records and if applicable, entry into treatment or services of a Prevention program or an Early Intervention program.~~
- (E) Average interval between referral and engagement in services to which referred, defined as participating at least once in the service to which referred, including treatment.
- ~~(F) How long the individual received services in the program to which the individual was referred.~~
- (F) Description of ways the County encouraged access to services and follow-through on referrals
- (5) For the information reported under subdivisions (1) through (4) of this section, disaggregate numbers served, number of potential responders engaged, and number of referrals for treatment and other services by:
- (A) The following age groups:
- (i) 0-15 (children/youth);
  - (ii) 16-25 (transition age youth);
  - (iii) 26-59 (adult);
  - (iv) ages 60+ (older adults).
  - (v) Declined to state
- (B) Race by the following categories:
- (i) American Indian or Alaska Native
  - (ii) Asian
  - (iii) Black or African American
  - (iv) Native Hawaiian or other Pacific Islander
  - (v) White
  - (vi) Other
  - (vii) More than one race
  - (viii) Declined to state
- (C) Ethnicity by the following categories:
- (i) Hispanic or Latino as follows
    - (a) Caribbean
    - (b) Central American
    - (c) Mexican/Mexican-American/Chicano
    - (d) Puerto Rican
    - (e) ~~(d)~~ South American
    - (f) ~~(e)~~ Other

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- (g) Declined to state
- (ii) Non-Hispanic or Non-Latino as follows
  - (a) African
  - (b) Asian Indian/South Asian
  - (c) ~~(b)~~ Cambodian
  - (d) ~~(c)~~ Chinese
  - (e) ~~(d)~~ Eastern European
  - (f) ~~(e)~~ European
  - (g) ~~(f)~~ Filipino
  - (h) ~~(g)~~ Japanese
  - (i) ~~(h)~~ Korean
  - (j) ~~(i)~~ Middle Eastern
  - (k) ~~(j)~~ Vietnamese
  - (l) ~~(k)~~ Other
  - (m) Declined to state
- (iii) More than one ethnicity
- (iv) Declined to state
- (D) Primary language spoken used listed by threshold languages for the individual county
- (E) Sexual orientation,
  - (i) Gay, Lesbian or Bisexual
  - (ii) Heterosexual
  - (iii) Other
  - (iv) Declined to state
- (F) Disability, if any, that is not the result of a severe mental illness
  - (i) Yes, specify the disability(ies)
  - (ii) No
  - (iii) Declined to state
- (G) Veteran status,
  - (i) Yes
  - (ii) No
  - (iii) Declined to state
- (H) Gender identity,
  - (i) Male
  - (ii) Female
  - (iii) Transgender
  - (iv) Other
  - (v) Declined to state
- (6) ~~(4)~~ Any other data the County considers relevant.
- (7) ~~(6)~~ For Stigma and Discrimination Reduction Programs/Approaches and Suicide Prevention Programs/Approaches, the County may report available numbers of individuals reached,

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including demographic breakdowns. An example would be the number of individuals who received training and education or who clicked on a web site.

- (8) ~~(7)~~ For all programs and strategies, the County may report implementation challenges, successes, lessons learned, and relevant examples.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code; Sections 2 and 3 of MENTAL HEALTH SERVICES ACT.

### **Adopt Section 3560.020 as follows:**

#### **Section 3560.020. Three-Year Program and Evaluation Report.**

- (a) The County shall submit the Three-Year Program and Evaluation Report to the Mental Health Services Oversight and Accountability Commission every three years as part of the Three-Year Program and Expenditure Plan. The Three-Year Program and Evaluation Report answers questions about the impacts of Prevention and Early Intervention component programs on individuals with risk or early onset of serious mental illness and on the mental health and related systems.
- (1) The Three-Year Program and Evaluation Report is due to the Mental Health Services Oversight and Accountability Commission on or before December 30, 2018 as part of the Three-Year Program and Expenditure Plan for fiscal years 2017/18 through 2019/20. The Three-Year Program and Evaluation Report shall be due no later than December 30th every three years thereafter and shall report on the evaluation(s) for the three fiscal years prior to the due date.
- (b) The Three-Year Program and Evaluation Report shall describe the evaluation of each Prevention and Early Intervention Component program and strategy, two strategies: Access and Linkage to Treatment and Improving Timely Access to Services for Underserved Populations. including approaches used to select outcomes and indicators, collect data, and determine results, and how often the data were collected. The Report shall include the following:
- (1) The name of each program for which the county is reporting
- (2) The outcomes and indicators selected for each Prevention, Early Intervention, Stigma and Discrimination Reduction, or Suicide Prevention Program
- (3) The approaches used to select the outcomes and indicators, collect data, and determine results for the evaluation of each program and the Access and Linkage to Treatment and Improving Timely Access to Services for Underserved Populations strategies
- (4) How often the data were collected for the evaluation of each program and for the Access and Linkage to Treatment and Improving Timely Access to Services for Underserved Populations strategies
- (c) The Three-Year Program and Evaluation Report shall provide results and analysis of results for all required evaluations set forth in Section 3750 for the three fiscal years prior to the due date.
- (d) The County may also include in the Three-Year Program and Evaluation Report any additional evaluation data on selected outcomes and indicators, including evaluation results related to the impact of Prevention and Early Intervention Component programs on mental health and related systems.

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- (e) The County shall include the same information for the previous fiscal year that otherwise would be reported in the Annual Prevention and Early Intervention Program and Evaluation Report in response to requirements specified in 3560.010(b).
- (f) ~~(e)~~ The County may report any other available evaluation results in the County's Annual Updates.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code; Sections 2 and 3 of Mental Health Services Act.

**Article 7. Prevention and Early Intervention**

**Adopt Section 3750 as follows:**

**Section 3750. Prevention and Early Intervention Program-Component Evaluation.**

- (a) For each Early Intervention program the County shall evaluate the reduction of prolonged suffering as referenced in Welfare and Institutions Code Section 5840, subdivision (d) that may result from untreated mental illness by measuring reduced symptoms and/or improved recovery, including mental, emotional, and relational functioning. The County shall select, define, and measure appropriate indicators that are applicable to the program.
- (b) For each Prevention program the County shall measure the reduction of prolonged suffering as referenced in Welfare and Institutions Code Section 5840, subdivision (d) that may result from untreated mental illness by measuring a reduction in risk factors, indicators, and/or increased protective factors that may lead to improved mental, emotional, and relational functioning. The County shall select, define, and measure appropriate indicators that are applicable to the program
- (c) For each Early Intervention and each Prevention program that the County designates as intended to reduce any of the other Mental Health Services Act negative outcomes referenced in Welfare and Institutions Code Section 5840, subdivision (d) that may result from untreated mental illness, the County shall select, define, and measure appropriate indicators that the County selects that are applicable to the program.
- ~~(d) For Outreach for Increasing Recognition of Early Signs of Mental Illness as either a stand-alone program or a strategy within another program, referenced in Section 3715, the County shall track:~~
  - ~~(1) The number of potential responders.~~
  - ~~(2) The type of potential responders.~~
  - ~~(3) The setting in which the potential responders were engaged.~~
    - ~~(A) Settings providing opportunities to identify early signs of mental illness include, but are not limited to, family resource centers, senior centers, schools, cultural organizations, churches, faith-based organizations, primary health care, recreation centers, libraries, public transit facilities, support groups, law enforcement departments, residences, shelters, and clinics.~~

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- (d) ~~(e)~~ If the County chooses to offer a Stigma and Discrimination Reduction Program/~~Approach~~ referenced in Section 3725, the County shall select and use a validated method to measure one or more of the following:
- (1) Changes in attitudes, knowledge, and/or behavior related to mental illness that are applicable to the specific program/~~approach~~.
  - (2) Changes in attitudes, knowledge, and/or behavior related to seeking mental health services.
- (e) ~~(f)~~ If the County chooses to offer a Suicide Prevention Program/~~Approach~~ referenced in Section 3730, the County shall select and use a validated method to measure changes in attitudes, knowledge, and/or behavior regarding suicide related to mental illness that are applicable to the specific program/~~approach~~.
- (f) ~~(g)~~ For each strategy or program to provide Access and Linkage to Treatment the County shall track:
- (1) Number of referrals to treatment, and kind of treatment to which person was referred.
  - (2) Number of persons who followed through on the referral and engaged in treatment, defined as the number of individuals who participated at least once in the program to which the person was referred.
    - (A) The County may use a methodologically sound sampling method to satisfy this requirement.
  - (3) Duration of untreated mental illness.
    - (A) Duration of untreated mental illness shall be measured by the interval from onset of symptoms of mental illness, based on available medical records or if medical records are not available, on self report or report of a parent or family member, until initiation of treatment.
  - (4) How long the person received services in the program to which the person was referred.
  - (4) The Interval between the referral and engagement in treatment, defined as participating at least once in the treatment to which referred
    - (A) The County may use a methodologically sound sampling method to satisfy this requirement.
- (g) ~~(h)~~ For each strategy or program to Improve Timely Access to Services for Underserved Populations the County shall measure:
- (1) Number of referrals of members of underserved populations to a Prevention program, an Early Intervention program, and/or treatment (beyond early onset) including the kind of care.
  - (2) Number of persons who followed through on the referral and engaged in ~~treatment services~~, defined as the number of individuals who participated at least once in the program to which the person was referred.
    - (A) The County may use a methodologically sound sampling method to satisfy this requirement.
  - (3) Timeliness of care.
    - (A) Timeliness of care for individuals from underserved populations with a mental illness is measured by the interval between referral and engagement in services, defined as participating at least once in the service to which referred from onset of symptoms of a mental illness, based on available medical records, or if not available, on self-report or report of a parent or family member, until initiation of treatment.

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- ~~(B) Timeliness of care for individuals from underserved populations with risk factors for a mental illness is measured by the duration between onset of indicators of risk of mental illness and initial receipt of services.~~
- ~~(4) How long the person received services in the program to which the person was referred.~~
- ~~(A) The County may use a methodologically sound sampling method to satisfy this requirement.~~
- (h) ~~(i)~~ The County shall design the evaluations to be culturally appropriate and shall include the perspective of diverse people with lived experience of mental illness, including their family members, as applicable.
- (i) ~~(i)~~ In addition, to the required evaluations listed in this section, the County may also, as relevant and applicable, define and measure the impact of programs funded by Prevention and Early Intervention funds on the mental health and related systems, including, but not limited to education, physical healthcare, law enforcement and justice, social services, homeless shelters and other services, and community supports specific to age, racial, ethnic, and cultural groups. Examples of system outcomes include, but are not limited to, increased provision of services by ethnic and cultural community organizations, hours of operation, integration of services including co-location, involvement of clients and families in key decisions, identification and response to co-occurring substance-use disorders, staff knowledge and application of recovery principles, collaboration with diverse community partners, or funds leveraged.
- (j) A County with a population under 100,000, according to the most recent projection by the California State Department of Finance, is exempt from the evaluation requirements in this section for one year from the effective date of this section.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code; Sections 2 and 3 of Mental Health Services Act.