

Mental Health Oversight and Accountability Commission (MHSOAC)
Previously Approved Principles/Strategies Regarding Evaluations
Summary for Evaluation Committee
6/27/2012

The MHSOAC has approved a number of documents in the last few years that provide guidance regarding Commission principles regarding evaluation priorities and strategies for its evaluation approach. The essential elements of MHSOAC evaluation from these documents are summarized below.

WHAT SHOULD THE MHSOAC EVALUATE?

Ensure that the MHSOAC evaluation accurately depicts the extent to which the objectives/outcomes of the MHSOAC have been accomplished (*2009&2010 Evaluation Committee Charters, Accountability Paper--10/18/10, Measurement and Outcomes Technical Resource Group (MOTRG)--5/08*)

HOW WILL THE MHSOAC USE THE EVALUATION FINDINGS?

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. (*2010 Evaluation Committee Charter*)

The MHSOAC is committed to an approach of continuous evaluation, learning from and building upon evaluations that have been completed. The approach will be focused on quality improvement. (*Accountability Paper 10/18/10*)

MHSOAC components should be integrated and evaluated together since all components impact one another and transformation needs to occur across all levels. (*MOTRG 5/08*)

HOW SHOULD THE MHSOAC APPROACH EVALUTION?

Use methods and measurements that are consistent with the provisions of the MHSOAC and are meaningful and relevant to consumers, family members and others. (*MOTRG 5/08*)

The MHSOAC will continue to collaborate with its mental health system partners and stakeholders through the Evaluation Committee to establish future evaluation priorities. (*Accountability Paper 10/18/10*)

The MHSOAC has a statutory mandate to evaluate how MHSOAC funding has been used, what outcomes have resulted from those investments and how to improve the services and programs to maximize positive outcomes for all populations, including reducing disparities in access to services, quality of care and outcomes. Evaluation efforts must identify status, trends and gaps. The effectiveness and impact of the community planning process must be examined. Information developed will be analyzed and reported in the context of larger economic,

demographic and other critical issues outside of the public community mental health system that may affect and be affected by the results, such as health care reform. Because the reliability of data is critical to generating confidence in the results of the evaluations conducted, an analysis of the quality and timeliness of data used will be addressed. As in all aspects of the implementation of the MHSAs, the MHSOAC values effective input from diverse individuals with lived experience and their families and other stakeholder in ensuring oversight and accountability. (*Accountability Paper 11/8/10*)

WHAT ARE CRITICAL MHSOAC ELEMENTS OF MHSAs EVALUATIONS?

The MHSOAC evaluation should include the following characteristics. (*MOTRG Paper--5/2008*)

- Exhibits integrity and professionalism
- Is valid and reliable, uses accepted social science research methodologies
- Includes and is responsible to the interests and values of stakeholder, communities and society
- Demonstrates cultural competence; uses appropriate strategies and skills to work with diverse groups
- Contributes to the development of knowledge and competence, including improving effectiveness and efficiency of programs and systems
- Identifies both what is working well and what is not
- Includes a carefully designed and functional system for collecting, organizing, maintaining, analyzing and utilizing meaningful information
- Produces timely, consistent, relevant data reports and disseminates them widely
- Is methodologically sound and impervious to vested interests.
- To the degree possible, utilizes existing information to minimize the burden of data collection on service providers.

MHSOAC principles for evaluation:

- Methodologically sound
- Consistent with MHSAs objectives and meaningful to consumers and families
- Culturally competent
- Produces timely and consistent data reports
- Contributes to development of knowledge and competence
- Prioritizes use of existing information. (*Accountability Paper 10/18/10*)

The MHSOAC anticipates building upon each progressive evaluation phase. The process for considering future evaluations has begun. The MHSOAC will continue to collaborate with its mental health system partners through the Evaluation Committee to establish future evaluation priorities. (*Accountability Paper 10/18/10*)

Ensure that the evaluation is governed by using methods and measures that are consistent with the provisions of the MHSAs and are meaningful and relevant to stakeholders (*2009, 2010 Evaluation Committee Charter*)

Overall Approach (7/21/20 and 9/23/2010 from Outlines for Scopes of Work for Requests for Evaluation Proposals.)

1. All data analyses should be in context of
 - a. County characteristics (e.g. demographics, funding, etc.)
 - b. Mental health system characteristics—who is served and what services are provided
 - c. Economic changes since inception of MHSA—overall economy and public mental health funding
2. All data used in analyses should be reviewed for data quality and timeliness
3. Recommendations for and estimated costs of improvements should be made
4. Data should be analyzed to determine differential impact by age, gender and race/ethnicity
5. MHSA values need to be embedded throughout evaluation
6. Confidentiality needs to be ensured in handling of data
7. Evaluation should have a continuous quality improvement focus.

The selected evaluator must be ready and able to work with MHSA stakeholders, consumers, family members and service providers to create an evaluation that is guided and informed by those who are most closely touched by the mental health system. The evaluator shall:

1. Establish and maintain stakeholder engagement in the evaluation that is representative of a wide scope of expertise including
 - a. An advisory group of clients and family members and representatives of culturally diverse un-served, underserved and inappropriately served groups of all ages and
 - b. A process for input from researchers, data analysts and programmers who are responsible for local data evaluation efforts
2. Maintain ongoing interaction with MHSOAC staff and Evaluation Committee.
3. Disseminate findings from evaluation to the broad and varied groups interested in the MHSA.

WHAT ARE MINIMUM AND DESIRED QUALIFICATIONS OF MHSOAC EVALUATORS?

Provider Qualifications (7/21/10 and 9/23/2010, Outlines for Requests for Evaluation Proposals)

- 1) Required (These minimums must be met.)
 - a) Expertise in program evaluation
 - b) Expertise in working with public mental health
 - c) Evidence of capability to manage a project of similar duration and funding
 - d) Expertise in advanced data management and data analysis
 - e) Capacity to set up and work with stakeholder advisory group

- f) Expertise regarding disparities in access and cultural competence in mental health systems
 - g) California tax payer ID number
 - h) Added other expertise specific to specific project. E.g. participatory research
- 2) Preferred
- a) Demonstrated experience with MHSA
 - b) Expertise regarding age-specific mental health practices
 - c) Expertise in client and family resilience and recovery
 - d) Experience accessing public datasets, including an understanding and ability to enter into Memoranda of Understanding (MOUs) for access to public data and full (Health Insurance Portability and Accountability Act (HIPAA) compliance.
 - e) Flexible, responsive, positive and cordial working style.
 - f) More than minimum level of expertise on required qualifications.