

## Draft Outline of Statewide Evaluation Framework

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### I. Overview

This section will present an overview of how prevention and early intervention (PEI) services fit within the overall scope of the Mental Health Services Act (MHSA), the role of evaluation within the MHSA and the rationale behind the development of the statewide evaluation framework. We will present our vision of the statewide evaluation framework, the purpose of the framework and an overview of the strengths and limitations of the proposed approach. We take a public health, population-based approach, so that the framework can support the state's responsibility to provide oversight to ensure the goals of system transformation and mental health equity are achieved.

- We have taken a public-health, population-based approach to the design of the evaluation frameworks. We have thought about an approach that would assess the key outcomes identified by the MHSA at a program level, but don't see how that could be done analytically. We are open to suggestions from the MHSOAC on this issue.

### II. Methods

This section will describe the methods used to develop the concepts in the framework and to identify the data sources and measures with which to populate the framework. This section will also present an overview of the analysis plan. We conducted key informant interviews and used interview results to develop and refine a logic model of how PEI funding was intended to improve outcomes. We assess impact by looking at the relationships among need, availability and access, changes in outcomes over time, and comparisons between California and the nation, California and other regions of the country, and comparisons among counties.

### III. Logic Model

This section will describe the components of the logic model developed for the statewide evaluation framework and how it relates to the MHSOAC logic model. The logic model identifies, at the conceptual level, areas of measurement within the framework and provides a way to look at the links between structure, process and outcome.

- The logic model includes the Community Planning Process as one of the areas to be measured. Feedback from county stakeholders however suggested that this be removed because this process was completed, and evaluating it retrospectively will not change ongoing PEI implementation and evaluation efforts. Given this feedback, are there other reasons to include an evaluation of the community planning process in the evaluation frameworks?
- Neither the logic model nor the evaluation frameworks explicitly includes measurement of the key “values” articulated in both the MHSa and in subsequent documents and reports on PEI. These include values such as inclusiveness and community collaboration, patient and family-centeredness and cultural competency. While we agree that these values are critical in terms of their potential to impact the “process” or quality of PEI services, at this time, there are no generally accepted definitions or measures of these aspects of PEI services. Where possible, we include related measures such as the quality of the services and the availability of linguistically appropriate services. Are there other ways that these values could be operationally defined and included?

#### IV. Evaluation Frameworks

This section describes how each outcome identified in the logic model has been developed into an evaluation framework and elaborated in terms of its logical antecedents. For example, we identify those programs and processes that are logically antecedent to the goal of decreasing suicide. The frameworks show the components for each outcome which should be measured. Some of these components are “aspirational” because data sources or measures do not currently exist to measure these components. Other components can be measured either with current data sources or with new, relatively simple, data development efforts.

- We do not include client outcomes in the framework, but rather assess individual-level outcomes using population survey data and vital statistics. We do however include information on program structure and processes; this information is essential for understanding how well PEI efforts are meeting the needs of underserved populations. We plan on including a recommendation for “special studies” to evaluate the effectiveness of promising and innovative programs. Are there other ways in which you see including client outcomes in the evaluation frameworks?

- There are no good measures of “prolonged suffering”. As a result we have combined “prolonged suffering” with the concepts of emotional well-being and resiliency. We recognize however the importance of this concept to many stakeholders, and would like to engage in a discussion of what a measure of prolonged suffering might look like, and whether it could be included in ongoing, population-based surveys. It would also be possible to create a separate evaluation framework for prolonged suffering, recognizing that measures of this concept would be aspirational. Given this, should we create a separate framework for prolonged suffering, or continue to include it in the resiliency and emotional well-being framework? What would measures of prolonged suffering look like? Are there data sources for measuring prolonged suffering that we may have missed?
- Do the frameworks capture the range of programs and processes that are related to each key outcome?
- We propose that one way to address whether PEI funding is leading to increased mental health equity is by analyzing the “fit” between services and needs by population group, and whether outcome disparities are decreasing over time. However concern has been raised that mental health clients and their family members, and stakeholders from diverse under-served communities might not see how their priorities are reflected in the evaluation frameworks. Do you have suggestions regarding how to make the frameworks more relevant for consumers and stakeholders?

#### V. Data Sources and Measure Specifications

This section provides an overview of existing data sources and preliminary specifications of measures for key concepts in the framework. It points the interested reader to an appendix which contains a detailed description of 39 potential data sources, information (when available on the reliability and validity of each data source, and relevant items included in the data sources. Some data sources are specific to a given outcome (e.g. the Point in time homelessness survey), whereas others contain information that is more broadly useful (e.g. the California Health Interview Survey). This section also points the interested reader to an additional appendix that contains measure specifications. We recommend that prior to being adopted, these measures be piloted to identify needed sample size to detect meaningful differences between groups and over time. A key issue

is the reliability and validity of specific measures, including standardization and quality of program-level measures.

#### VI. Analytic Approach

This section discusses our analytic approach to monitoring delivery of programmatic activities, evaluating their penetration, and estimating their overall impact on the population. We consider analytic issues for assessing penetration and impact for the general population, and for specific populations of interest (e.g., those with mental health needs, historically underserved populations). We then discuss the challenges of estimating causality/impact, the importance of other contextual factors, and the use of difference-in-difference micro-economic modeling to estimate the impact of MHSA funding apart from other secular trends that may influence outcomes.

#### VII. Conclusions and Recommendations for Statewide PEI Evaluation

The final section of the report will discuss next steps needed to implement the statewide evaluation framework, including recommendations for additional data development. Program-level data on structure and process outcomes is essential, and will need to be collected in a standardized fashion and ongoing population level data will be very important for ongoing monitoring and evaluation efforts.