

California Mental Health Services Authority (CalMHSA)

Mental Health Services Oversight and Accountability Commission
March 23, 2012

Presented by:
Wayne Clark, Phd., CalMHSA President



Presentation Objectives

1. Summary of Status of Implementation Work Plan to Date
 - Overview
 - Suicide Prevention, Stigma and Discrimination Reduction, Student Mental Health
 - Statewide PEI Evaluation
2. First Amendment to the CalMHSA Implementation Work Plan



Overview

- 25 Contracts Executed
 - More Than 5600 Deliverables
- 9 New Members Since July—8 Counties, 1, City. Four members in process and assigned, additional 4 in process (total of 8)
- CalMatrix--a Database/Contract Monitoring System Implemented
- Advisory Committee Formed—October 2011

Overview Cont.

- Suicide Prevention, Stigma and Discrimination Reduction and Student Mental Health Key Activities and contacts
 - Posted on Website: www.calmhsa.org
- Through Competitive Process – RAND was selected as the organization to perform the PEI Statewide Project (s) Evaluation. (Contract has been Executed)
- Program Partners are Collaborating via the Statewide Coordination Workgroup

Finance Summary

Implementation Plan Budget (from January 27, 2011 MHSOAC approved Work Plan)
\$129,399,879
Program Funds Received March 12, 2012
\$136,748,130
Program Funds Receivable as of February 29, 2012
\$425,695
Total Program Funds Assigned
\$137,173,825
Program Dollars Expended Through December 31, 2011
\$2,252,678
Planning Dollars Expended Through December 31, 2011
\$3,082,904

Highlights October – December 2011

Suicide Prevention– includes the following programs:

- Suicide Prevention Network Program (SPNP)– partnerships established
- Regional Local Suicide Prevention Capacity Building Program – building capacity statewide
- Social Marketing – county level assessments completed
- Training Workforce Enhancement Program - pending

Highlights October – December 2011

Stigma & Discrimination Reduction– includes the following programs:

- Strategies for a Supportive Environment Programs – SDR benchmark survey evaluated for cultural appropriateness
- Values, Practices & Policies Program - partnering with media for positive mental health messaging
- Promising Practices Program – development of a Promising Practices questionnaire for initial program analysis
- Advancing Policy to Eliminate Discrimination Program – development of draft fact sheets for workshop on SDR and youth

Highlights October – December 2011

Student Mental Health– includes the following:

- California Community Colleges (CCC) – RFP's in draft
- California State University (CSU) – prepared system-wide on-line student survey
- University of California (UC) – established partnership with SPNP
- California Department of Education (CDE) – TETRIS content refined and workshops scheduled
- California County Superintendents Educational Services Association (CCSESA) – started developing 11 regional plans across state

PEI Statewide Project(s) Evaluation

CalMHSA invests up to \$10 million to implement a complex multi-phase evaluation of all programs individual and collective impact to capitalize on the unique statewide investment in Student Mental Health, Suicide Prevention and Stigma and Discrimination Reduction.

CalMHSA has contracted with RAND to conduct the evaluation.

- Audrey Burnam – Project Leader (Admin and Design)
- Sandy Berry – Co-Project Leader (Data Acquisition)
- Rajeev Ramchand – Suicide Prevention
- Becky Collins – Stigma and Discrimination
- Bradley Stein – School Based Mental Health
- Patricia Ebener – Technical Assistance
- Mary Vaiana – Communications and Dissemination

PEI Statewide Evaluation Purpose

To evaluate to what extent and how the strategies of PEI Statewide Projects are effective in:

- Preventing Suicides
- Improving Student Mental Health
- Reducing Mental Health Stigma and Discrimination

Key objectives of PEI Statewide Evaluation:

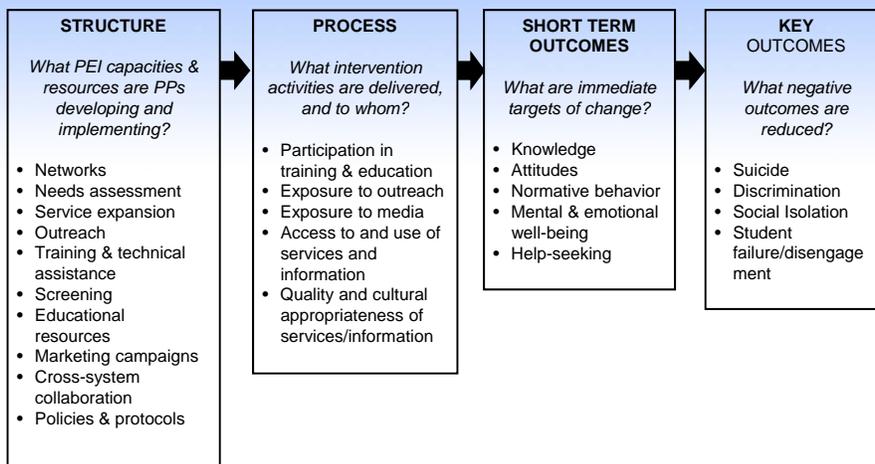
- Establish baselines and community indicators
- Conduct thorough program evaluations
- Identify innovative programs for replication
- Promote continuous quality improvement efforts

Components of Statewide Evaluation

- Goal-based, process-based, and outcomes-based evaluations
- Conducted at three levels:
 - Individual programs
 - Each of three initiatives
 - Overall CalMHSA effort statewide
- Coordination and leveraging across PEI initiatives and programs
- Work with Program Partners on their own evaluation and quality improvement activities



Evaluation Logic Framework: Structure-Process- Outcomes



Preliminary Work-in-Progress: Evaluation Design Approach

- Organizational Level
 - Descriptive studies of capacities developed by each program
- Population Level
 - Assess intervention processes (what is delivered to whom)
 - Strategically evaluate impact of some interventions on short-term outcomes in targeted populations
- Broader Statewide Monitoring
 - Track broader, long-term population trends

PEI Statewide Evaluation

Statewide Evaluation Expert (SEE) Team:

- CalMHSA has recruited experts to support and guide PEI Statewide Projects Evaluation efforts
- SEE members have expertise in evaluation and represent a variety of perspectives including those of consumers, family members and caregivers
- SEE members will liaison with CalMHSA program partners, as needed, to ensure support and success in evaluation

Next Steps

- SEE meeting to discuss work-in-progress and provide advice to RAND on Statewide Evaluation Strategic Plan (SESP) – March 16, 2012
- Collaborate with CalMHSA staff to develop plan for program partner technical assistance – March 2012
- Draft SESP to be available for review – April 2012
- Final SESP to be adopted – June, 2012

First Amendment to the CalMHSA Implementation Work Plan

- Subsequent to MHSOAC approval, 13 new counties and cities joined CalMHSA (beyond those included in the original work plan)
- New participation has resulted in an additional \$8.1million of Statewide projects fund assigned
- Amendment seeks to use newly assigned funds to expeditiously address the following:
 - Expand the scope of regional projects to include additional geographic areas and underserved populations, and,
 - Strengthen racial, ethnic and cultural competency within existing projects

First Amendment to the CalMHSA Implementation Work Plan, *cont.*'

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 - Strengthen racial, ethnic and cultural competency within existing projects

First Amendment to the CalMHSA Implementation Work Plan, *cont.*'

Primary Principles for Funding Allocations

- Implement PEI projects in an expeditious manner.
- Strengthen local and regional capacity by ensuring new CalMHSA participants are included in funded activities.
- Maintain overall consistency in the proportion of funds allocated to Suicide Prevention (25%); Stigma and Discrimination Reduction (37.5%); and Student Mental Health (37.5%).
- Consider the unique characteristics of communities participating in CalMHSA, including local factors such as capacity, population, and setting (rural, suburban, urban).

First Amendment to the CalMHSA Implementation Work Plan, *cont.*'

Suicide Prevention (SP): Increase by approximately \$1.9M (25%) of \$7.7M

- *Regional Local Capacity Building Programs:* As new communities participate in CalMHSA, many regional SP providers are being asked to serve additional counties and/or cities.
- Augment regional programs to serve an expanded geographic and/or racial/ethnic/cultural and underserved population.

First Amendment to the CalMHSA Implementation Work Plan, *cont.*'

Student Mental Health Initiative (SMHI): Increase by approximately \$2.9M (37.5%) of \$7.7M

- *Higher Education: California Community Colleges (CCC):* Augment the CCC contract in order to serve a larger student population than other higher education systems and to serve an expanded geographic and/or racial/ethnic/cultural and underserved population.
- SMHI Higher Education funds were allocated equally to each system. The CCC serves a student population that is six to eleven times that of the California State University and University of California systems.

First Amendment to the CalMHSA Implementation Work Plan, *cont.*'

Stigma and Discrimination Reduction (SDR): This amendment will set aside approximately \$2.9M

- 37.5% of Work Plan Amendment #2 (planned for Fall 2012).
- Eight out of 10 SDR projects are in the initial stages of implementation; the other 2 projects to be implemented in the near future. It is recommended that program enhancements be delayed until the Second Amendment of the Work Plan, so that they can be informed by implementation data.

First Amendment to the CalMHSA Implementation Work Plan, *cont.*'

PEI Evaluation Framework Deliverable Added

- This amendment includes a \$300,000 deliverable as part of PEI statewide projects evaluation contract
- RAND works in collaboration with CalMHSA and the Mental Health Oversight and Accountability Commission
- PEI statewide evaluation framework will be developed that overlaps with the three CalMHSA statewide PEI project evaluations but differs in that it will include the full range of California's PEI programs
- Framework to be used prospectively to evaluate the impact of the programs over time and prioritize the outcomes specified in the Mental Health Services Act
- Framework to be presented to and for MHSOAC approval

First Amendment to the CalMHSA Implementation Work Plan, cont.'

Development of a comprehensive statewide evaluation framework consists of the following steps:

- Identify a consolidated list of overall goals across PEI Programs and conceptualize each goal in terms of potential measures of structure, process and outcomes.
- Identify the data sources that are either available or could be available to populate the potential measures. Will investigate PEI evaluation frameworks that counties may have developed.
- Develop a conceptual PEI statewide evaluation framework and analytical approach that logically links programs and program strategies with outcome measures.
- Identifies ways to link PEI evaluation to overall MHSA evaluation.



First Amendment to the CalMHSA Implementation Work Plan, cont.'

Clarification of Funding Allocations: This amendment includes a chart clarifying the funding allocations. The chart below consists of the original budget submitted in the CalMHSA Implementation Work Plan, the First Amendment additional funding allocations and total funding.

STATE DEPARTMENT OF MENTAL HEALTH FUNDING ALLOCATION GUIDELINES

Funding	5% Phase I Planning	Phase II				100% Total
		70.5% Program/Direct	Contingency Reserve	7.5% Evaluation'	7.5% Admin'	
Work Plan Budget	\$6,610,520	\$96,028,332	\$12,939,968	\$10,215,780	\$10,215,780	\$196,210,400
First Amendment (additional funding)	\$409,125	\$1,769,085.50	\$777,394.50	\$813,732.50	\$813,732.50	\$8,183,100
Total	\$7,219,645	\$101,797,417.50	\$13,717,362.50	\$11,029,512.50	10,829,512.50	\$144,989,500.00

1. Contingency Reserve is calculated on 10% of Phase II funding request of \$129,399,881. It is the intent of CalMHSA and its members to maximize the delivery of services. This reserve will be utilized for delivery of services.

2. The maximum allocation permitted by DMH for Indirect Administration services is 15%. Included in this 15% is the requirement to provide evaluation of programs. This allocation has been estimated and will be refined as facts develop.



First Amendment to the CalMHSA Implementation Work Plan, *cont.*

- Draft Plan was posted for 30 days and comments were incorporated into plan
- CalMHSA seeks MHSOAC approval of First Amendment to the Implementation Work Plan.

Contact Information

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Thank you