



**Status Update on Current Evaluation
Deliverables and Future Contracts
Approved by MHSOAC on
November 17, 2011**

March 23, 2012

1

Issue

- ▶ The Commission will be provided an update on the status of current evaluation deliverables that UCLA/EMT and CSUS are currently working on.
- ▶ The status of the evaluation priorities for use of the \$875 K the Commission approved at the November 17th, 2011 meeting.

2

Summary

Current Deliverables – UCLA/EMT

- ▶ The Commission has current contracts, known as Phase 2 and 3 Evaluation to provide deliverables regarding statewide impact of the MHSAs.

Analysis of Expenditures of all MHSAs components

- ▶ (Phase 2) summary of expenditures from FY 2006/07 through 2009/10 including a cost analysis regarding FSP indicator variables to be provided by 11/30/12.

3

Summary

(Cont.)

County Profiles for Priority Indicator Reports

(Phase 2)

- ▶ State level draft report for stakeholder input, on priority indicators for most recent one year period to be provided by 6/30/12.
- ▶ Final state level report including stakeholder input, on the same priority indicators for same reporting period as above, draft to be provided by 9/30/12.
- ▶ First of two county-level reports on priority indicators for most recent year period to be provided by 9/30/12.
- ▶ Second county-level and state-level report on priority indicators for most recent one year period to be provided by 3/31/13.

4

Summary

(Cont.)

FSP Cost/Cost Offset

(Phase 3)

- ▶ Draft report for stakeholder input, on per person FSP costs and cost/offset analysis on impact of outcomes achieved, in comparison to expenditures for FSP to be provided by 6/30/12.
- ▶ Final report that includes stakeholder input to be provided by 9/30/12.

5

Summary

(Cont.)

California State University Sacramento Deliverables

- ▶ Provide user supports to the Data Collection and Reporting (DCR) System that collects individual outcomes on FSPs

To date the following deliverables have been completed by CSUS:

1. CSUS produced a revised Data Dictionary for the DCR System (October 2011).
2. Data Quality Reports were provided to each county based on data reported to the DCR since inception. Information was provided at the county, program and provider level to assist counties in identifying inconsistent or aberrant data points (January 2012).
3. A DCR User Manual was released that provides detailed instructions on how to use the DCR system, including how to correct and extract data. Previously, no manual existed for users (February 2012).

6

Summary

(Cont.)

4. Partner-Level Data Templates were released to allow counties to view a summary of a client's historical data in the DCR (February 2012).

The Following are upcoming deliverables to be provided by CSUS:

- ▶ Detailed technical instructions on how to produce two types of reports, referred to as "Application Notes" will be provided. This will allow counties to download data so they can create their own reports (April 2012).
- ▶ Regional trainings will be provided on use of the overall DCR system, including basic statistical analysis, interpretation and presentation of FSP data (May 2012).
- ▶ A digital video of the above-listed trainings will be provided (June 2012).

7

Summary

(Cont.)

Status of Priorities for Use of \$875 K

On November 17, 2011 the Commission adopted the Evaluation Committee recommendations of the priority proposals to expend the \$875,000 in FY 2011/12 funds for evaluation as set forth below:

- ▶ **Proposal G:** Summarize County Reports on Impact on Mental Health Disparities. Approximate Cost \$100,00 to \$400,000.
- ▶ **Proposal C:** Assess Impact of PEI for Individuals with Serious Mental Illness and their Families. Approximate Cost \$200,000 to \$300,000.
- ▶ **Proposal H:** Statewide Support for County Data Collection and Reporting (DCR) System Data Validation and Use of Reports. Approximate Cost \$200,000 to \$500,000.

8

Summary

(Cont.)

Reducing Disparity Evaluation

The purpose of this evaluation effort is to:

- ▶ Measure the impact of the Mental Health Services Act (MHSA), as well as state and local policies and practices on the disparities in access to, quality of and outcomes of the public mental health system by age, gender, race, ethnicity and primary language.
- ▶ Additional analyses may be included of disparities by sexual orientation and gender identity, country of origin, cultural heritage, relationship status (i.e. widowed, divorce), and other relevant variables if the data is available.

9

Summary

(Cont.)

Early Intervention Evaluation

- ▶ Purpose of this effort is to conduct an initial evaluation of similar MHSA early intervention programs.
- ▶ Evaluation will provide information to policy makers and the public to further their understanding about the use and impact of PEI funds for early intervention for individuals with and at risk of serious mental illness and their families.
- ▶ Evaluation will provide information for consumers, their families, and service providers, including identifying effective practices to improve intervention services.

10

Summary

(Cont.)

Data Quality Interagency Agreement

Based on the Commission's priority to dedicate funding to data quality to assist with evaluation efforts, the existing interagency agreement with CSUS will be expanded to add:

- ▶ Statewide webinars,
- ▶ Additional regional trainings on how to analyze FSP outcomes,
- ▶ Increased data quality reports, and
- ▶ A statewide plan to correct data in an effort to ensure the quality of data at the state level.

11

Next Steps

- ▶ At the May 2012 Commission meeting, Commissioners will be presented with recommendations for two contract awards to be executed before 6/30/12 to encumber funds. (**Reducing Disparities in Access and Early Intervention Evaluation**)
- ▶ The Commission's approval of the proposed amendment to the CSUS interagency agreement will be requested at the May 2012 meeting. (**Data Quality Improvement**)

12