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AGENDA ITEM: First Read: Review and Discuss Draft Proposed Prevention and Early Intervention (PEI) Regulations

ENCLOSURES: Draft Proposed PEI Regulations

OTHER MATERIAL RELATED TO ITEM: “Summary: PEI Concept for Regulations Discussion”; “Suggestions from PEI Regulations Workgroup and Services Committee that were Incorporated into Draft PEI Regulations”; Suggestions from PEI Regulations Workgroup and Services Committee that were Not Incorporated into Draft PEI Regulations”; and PowerPoint Presentation handout will be available at the meeting.

Issue:

The Mental Health Services Oversight and Accountability Commission (MHSOAC) will review and comment during the first read of the draft proposed Prevention and Early Intervention (PEI) regulations.

Background:

On June 26, 2013 Governor Brown signed into law Assembly Bill (AB) 82, which went into effect immediately. AB 82 mandated that the MHSOAC adopt regulations for PEI and Innovation (INN) programs and expenditures. Pursuant to the Administrative Procedure Act (APA), the Office of Administrative Law (OAL), and the Mental Health Services Act (MHSA) requirements, the process of adopting regulations requires a thorough stakeholder process to ensure the perspective and participation of diverse community members reflective of California populations, consumers and families are a significant factor in the drafting of these regulations.

The first step in this public process was the creation of a PEI and INN Regulations Work Group (Work Group) comprised of three members from each of the five MHSOAC Committees: Client and Family Leadership Committee, Cultural and Linguistic Competence Committee, Evaluation Committee, Financial Oversight Committee, and MHSOAC Services Committee. The purpose of the Work Group was: (1) to assist in developing overall principles for the drafting of the regulations; (2) to assist in determining what parts of the PEI and INN statute needed to be defined, specified, or implemented in regulations and provide suggestions for definitions and specifications; and (3) provide input on the draft proposed PEI and INN regulations. The Workgroup had two all-day meetings, first on August 12, 2013 to assist in the first two purposes and then on September 20, 2013 to review and provide input on the draft regulations. Both meetings were open to the public.

PREPARED BY: Yeroshek

Additionally, on October 11, 2013, the MHSOAC Services Committee met to review and provide input on the draft PEI and INN regulations. This meeting was also open to the public.

The drafts presented to Commissioners are the product of the Work Group and Committee's efforts.

In drafting the regulations, Work Group and committee members have adhered to the following principles:

1. Regulations must be consistent with the APA that limits regulations to implementing, interpreting, or making specific the law enforced or administered by that state agency.
2. Regulations are directly based on the MHSA.
3. Regulations are outcomes-focused.
4. Regulations are flexible: support county/community priorities and wisdom.

Below is the framework for the PEI regulations discussion which is based on specific provisions of the MHSA:

1. Overall Purpose of MHSA PEI
 - The MHSA-specified purpose for PEI programs is to prevent mental illnesses from becoming severe and disabling (W&I Code §5840(a)). Use of PEI funds for general or community wellness is not consistent with the MHSA requirements for PEI.
2. Each County's Overall PEI Program Must Include All of the Following
 - Emphasize improving timely access to services for underserved populations (W&I Code §5840(a)).
 - Outreach to Potential Responders: Conduct outreach to families, employers, primary care health care providers, and others to recognize early signs of potentially severe and disabling mental illnesses (W&I Code §5840(b)(1)).
 - Create access and linkage to medically necessary care provided by county mental health programs (W&I Code §5840(b)(2)).
 - Early Intervention: Time-limited services for individuals with early onset of serious mental illness to promote mental health outcomes, including recovery, wellness, and resilience, and to assist people in quickly regaining productive lives (W&I Code §5840(c)).
 - Reduce stigma and discrimination associated with being diagnosed or seeking mental health services by delivering PEI services in ways that promote access and acceptance for the diverse people of California who can benefit from them (W&I Code §5840(b)(3) and (4)). For example, combating stigma and discrimination

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is essential for successful outreach to potential responders and to link people with serious mental illness to treatment. For another example, it's often useful and appropriate for counties to incorporate "wellness" language and practices into their PEI programs; concepts of wellness are more acceptable and relevant to many people than terminology about mental illness and mental disorders.

3. Each County's Overall PEI Effort May Also Include the Following:

- Stigma and Discrimination Reduction: A program to reduce stigma and discrimination associated with either being diagnosed with a mental illness or seeking mental health services (W&I Code §5840(b)(3) and (4)).
- Prevention: A program to prevent the occurrence, severity, and consequences of serious mental illness for individuals with identified risk factors or for members of a group with demonstrated greater than average vulnerability to mental illness (MHSA Uncodified Section 3(c); W&I Code §5840(a) and (c)).

4. Each County Collects and Reports Consistent Program and Participant Data for All PEI Programs.