

INFORMATION

TAB SECTION: 4

 X ACTION REQUIRED

DATE OF MEETING: 1/23/14

PREPARED BY: Hoffman

DATE MATERIAL PREPARED: 1/16/14

AGENDA ITEM: Review and Approve County Triage Grant Proposals (Action)

- ENCLOSURES:**
- Application Reviewer Guide from RFA (Appendix 4.1)
 - Triage Score Sheet from Request for Application (RFA) (Appendix 4)
 - Triage Award Recommendations for Fiscal Years 2013/14 through 2015/17

OTHER MATERIAL RELATED TO ITEM: Handouts related to this item will be available at the meeting.

Issue:

As a result of Senate Bill (SB) 82, known as the Investment in Mental Health Wellness Act of 2013, the Mental Health Services Oversight and Accountability Commission (MHSOAC or Commission) was given responsibility for establishing a competitive grant process that supports local mental health departments hiring at least 600 mental health crisis triage personnel statewide. The Act provides \$32 million in annual MHSA funds for the triage personnel grants and requires the Commission to report to the fiscal and policy committees of the Legislature by March 1, 2014 on the status of the grant process.

The Commission has completed its review and scoring of 47 grant applications for mental health triage personnel and will take action at the January 23, 2014, meeting to award funding to those that were successful in the competitive grant process.

Background:

With MHSA funding, the Investment in Mental Health Wellness Act of 2013 is intended to increase California's capacity for client assistance and services in crisis intervention including the availability of crisis triage personnel, crisis stabilization, crisis residential treatment, rehabilitative mental health services, and mobile crisis support teams. Under the terms of the Mental Health Wellness Act of 2013, there will be two competitive grant opportunities.

One grant process is being administered by the California Health Facilities Financing Authority (CHFFA) to fund mobile crisis support teams, crisis stabilization and crisis residential programs. As previously described, the other grant process is administered by the Commission to provide funding for counties, counties acting jointly and city mental health departments, to hire at least 600 crisis triage personnel statewide. Increasing access to effective outpatient and crisis services with the funds available in these two grant processes provides an opportunity to: (1) reduce costs associated with expensive inpatient and emergency room care; (2) reduce the time spent by law

enforcement in emergency rooms and on other mental health crisis interventions; and (3) better meet the needs of individuals experiencing a mental health crisis in the least restrictive manner possible.

The outcomes expected from expanded crisis services are consistent with specific objectives cited in SB 82 as follows:

- Improving the client experience, achieving recovery and wellness, and reducing costs
- Adding triage personnel at various points of access, such as at designated community-based service points, homeless shelters, jails and clinics
- Reducing unnecessary hospitalizations and inpatient days
- Reducing recidivism and mitigating unnecessary expenditures of law enforcement

Commission Process for Grant Applications:

To better understand all of the factors that might impact triage personnel and mental health crisis response systems in general, the Commission gathered a group of Subject Matter Experts to advise Commission staff on the realities of providing recovery-focused, crisis response services. These experts met twice with Commission staff in September 2013 to review grant criteria and offer comments and suggestions. The group included persons representing counties, community-based non-profit providers, hospitals, law enforcement, peer-run service organizations, shelters, education, diverse racial, ethnic and cultural community providers, youth and veterans. The group provided an invaluable contribution to the development of a vision for mental health triage personnel focused on improved life outcomes for the persons served and improved system outcomes for mental health and its community partners.

Based on the vision developed, on September 26, 2013, the Commission approved criteria for an RFA for mental health triage personnel. The Commission issued that RFA on October 1, 2013. As indicated in the RFA, total funding available (\$32 million) was divided between the five established regions identified by the California Mental Health Directors Association (CMHDA) – Southern, Los Angeles, Central, Bay Area and Superior. California counties and two identified city entities had until January 3, 2014, to submit grant applications.

By January 3, 2014, a total of 47 grant applications were submitted to the Commission. What follows is a description of the Commission’s process to review and score the grant applications received.

Screening

Each application was screened by Commission staff to ensure it met all technical and administrative requirements identified in the RFA, i.e., page limits, font size and narrative requirements.

Review and Scoring

Commission staff (9) were identified and assigned to three review teams, each with three staff. Applications were organized by region, Southern, Los Angeles, Central, Bay Area and Superior. Each team reviewed applications within a specific region, Southern plus Los Angeles, Central and Superior. Bay Area applications were split between two teams. This assignment process resulted in each application being reviewed and scored by three individual staff members.

Staff members scored each application consistent with the requirements contained in the RFA utilizing the enclosed Score Sheet (Appendix 4 in the RFA). Each reviewer numerically scored applications based on the information provided in the grant proposal. As noted in the RFA, 1000 points were available and only applications receiving 800 points or more would be considered for funding. Reviewers utilized the enclosed Application Reviewer Guide (Appendix 4.1 in the RFA) to score information provided in various components of the application as warranting either a very low, low, medium, high or very high score.

Reviewers judged components of the application on the basis of completeness, responsiveness, and clarity of presentation. Reviewers considered whether program descriptions and other information provided in the application:

- Were fully developed and comprehensive;
- Had weaknesses, defects or deficiencies;
- Were lacking information, lacking depth or lacking significant facts and/or details;
- Demonstrated that the applicant understood the objectives of the Mental Health Wellness Act; and,
- Illustrated the applicant’s ability to deliver services that promote the objectives identified in the Mental Health Wellness Act.

When all team members had reviewed and scored each application assigned, they met, discussed the applications and calculated the average of their scores for each application. Based on the average score for each application, they were ranked in order from highest to lowest. Teams then compared funding available by region to the total funding requested by counties that had received passing scores. Summary sheets for each region were developed that indicated how many high scoring applications could be funded within available funding for that region.

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Following this process all three teams came together to review the scoring results statewide. Summary sheets were prepared to identify the county applications in three categories: (1) highest scoring counties with funding requests within available funding

for that region; (2) counties whose scores were 800 or more but could not be funded within available funding for that region; and (3) counties whose scores were below 800 points.

This summary information will be presented at today's Commission meeting with the Commission taking action to approve grant funding for the counties identified as having the highest scores. Grants will be approved for a grant cycle that covers four fiscal years. Grants funds will be allocated annually for FY 13-14 (5 months), and FYs 14-15, 15-16 and 16-17.

Staff Recommendations for Triage Awards

The enclosed "Triage Award Recommendations" chart provides a list of the counties by region that submitted proposals, each county's score, funding requested, and based on the scores, staff's recommendation on awarding the grant. Due to the limited funding and the competitive nature of the grants, not all counties that applied for a Triage grant can be awarded a grant. There were counties that did not achieve the required 800 minimum points and there were also counties that did meet the minimum point requirement but could not be funded because of lack of funds.

Staff recommends the Commission approve the awards as listed on the enclosed Staff Triage Award Recommendations.