



Evaluation of Early Intervention Program Clusters

MHSOAC Interpretation

WELLNESS • RECOVERY • RESILIENCE

PEI Evaluation Efforts

- Prevention and Early Intervention (PEI) programs were in start-up phase in 2009, as PEI Guidelines were released by the Department of Mental Health in October 2008
- MHSOAC identified need to evaluate the PEI component, but also considered appropriate time to do so given MHSA component roll-out timeline and implementation status
- In 2012, MHSOAC entered into contract with UCLA to complete an evaluation of the PEI component, to focus on clusters of early intervention programs that were likely far enough along with implementation to be evaluated

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Three EI Clusters

- Three “clusters” of early intervention programs were chosen to focus on:
 - *Cluster 1*: Children and youth displaying emotional disturbance as a result of trauma.
 - *Cluster 2*: Youth, transition-age youth, and younger adults with prodromal symptoms or experiencing first onset of psychosis.
 - *Cluster 3*: Older adults experiencing early onset of depression symptoms.

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Evaluation Goal

- To assess the statewide/overall impact of the three clusters of EI programs on MHS outcomes:
 - Reduce the duration of untreated mental illness
 - Prevent mental illness from becoming severe and disabling
 - Improve timely access to services for underserved populations
 - Reduce stigma and discrimination
 - Reduce seven negative outcomes associated with untreated mental illness (i.e., prolonged suffering, suicide, incarcerations, homelessness, unemployment, school failure/dropout, removal of children from their homes)

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Did we achieve this goal?

- Partially...
 - Overall, findings were positive and showed that programs within each cluster did promote positive outcomes
 - However, challenges with data limit our ability to draw meaningful conclusions, especially regarding:
 - ◆ the clusters overall/statewide impact (versus individual programs/counties)
 - ◆ all MHSAs goals for PEI
- We can conclude that some of the EI programs appear to be having a positive impact on a few of the MHSAs goals

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Issues to Consider and Related Recommendations

- MHSOAC is committed to using evaluation to provide oversight of MHSAs
- MHSOAC tasked with using evaluation to tell statewide story of impact of MHSAs, and improve quality of system
- Results of this evaluation demonstrate issues that may limit MHSOAC from fully achieving these tasks

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Issues that Limit Ability to Draw Statewide Conclusions

- Data not directly being collected on all outcomes (e.g., reduce stigma and discrimination; improve timely access to services; race/ethnicity)
- Comparable programs may not have comparable defined target outcomes
- Outcomes not always measured in same way / at the same time (i.e., pre and post)

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Recommendations to Strengthen PEI Evaluation

- Make PEI Evaluation goals explicit; clarify State expectations for evaluation and reduce ambiguity; give counties advanced notice of expectations
 - Achieved via Proposed PEI Regulations
- Standardize or provide recommendations for quality measurements of MHSa-defined outcomes
 - Achieved via Proposed PEI Regulations and Training and Technical Assistance to be provided to counties
- Develop a standardized and automated reporting mechanism for routine submission of PEI data
 - Standardized reporting mechanism achieved through Proposed PEI Regulations; automated system may come in the future
- Support counties throughout the evaluation process by providing training and technical assistance to help strengthen PEI evaluation
- Identify challenges that impede county ability to conduct quality and meaningful evaluations and find ways to overcome those challenges (e.g., limited resources devoted to evaluation)

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Other Potential Issue that may Need Further Exploration

- Some counties may not use clinical criteria to determine diagnoses, which may create challenges regarding their ability to place individuals into appropriate services (i.e., into PEI vs. CSS services)
- Recommendation: Strengthen county ability to identify client needs and place them into appropriate services
 - Ensure that counties are using adequate methods
 - Provide support for counties to develop these methods

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Comments or Questions?

- Thank you!

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