

INFORMATION

TAB SECTION: 4

 X ACTION REQUIRED

DATE OF MEETING: 5/28/09

PREPARED BY: Grass, Whitcomb

DATE MATERIAL PREPARED: 5/18/09

AGENDA ITEM: Prevention and Early Intervention (PEI) State-Administered Projects – County Assignments of funding to State

ENCLOSURES:

- DMH Information Notice 08-25, September 2008
- PEI Statewide Project Assignment (May 8, 2009)
- Letter to Shasta County, December 8, 2008
- Mental Health Services Act Prevention and Early Intervention: County and State Level Policy Direction, January 26, 2007

OTHER MATERIAL RELATED TO ITEM:

ISSUE:

Implementation of three Prevention and Early Intervention (PEI) Statewide Projects* is in jeopardy due to several factors, including the method and level of funding and the current State fiscal crisis. DMH Information Notice 08-25, issued on September 11, 2008 (enclosed) provides instructions to counties that may want to assign PEI funds to DMH to implement the following statewide projects and indicates that assignment is voluntary:

- Student Mental Health Initiative
- Suicide Prevention
- Stigma and Discrimination Reduction

The total amount dedicated to these three Statewide Projects is \$160 Million over four years. DMH received authorization to design and implement these projects from the MHSOAC in May 2008 and received expenditure authority in the State Budget for FY 2008-09.

DMH Information Notice 08-25 also describes the procedure for assigning funds and requests that counties complete an Assignment Agreement by November 14, 2008. As of May 1, 2009, only 17 counties have assigned funds from FY 2008-09 through FY 2011-12 to the PEI Statewide Projects for a total of \$45,465,000. For FY 2008-09, the current total is \$11,808,000 (see enclosed PEI Statewide Assignments, May 8, 2008). It is unclear why counties are not making these assignments. The Mental Health Services Committee needs more time to explore this issue and work with all stakeholders to determine the best course forward.

* A fourth Statewide Project, Reducing Ethnic Disparities, may also be in jeopardy. Currently, DMH has received expenditure authority to use MHSOAC administrative funds to develop a strategic plan and other activities in preparation for launching this project. However, no actual funds for this project have been approved for expenditure yet. Since this project would also be statewide in nature, it might also be subject to county assignments.

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ISSUE (Cont'd)

In October 2008, the Shasta County Board of Supervisors wrote a letter to the MHSOAC expressing concerns regarding the assignment of MHSA funds to fund Statewide Projects. MHSOAC responded in a letter dated December 8, 2008 (enclosed) indicating that Shasta County has the right to express these concerns and to propose a local plan to implement these services.

This issue needs to be resolved quickly because three counties whose plans are being recommended for approval (Shasta, Nevada and San Joaquin) have requested to use the money to develop and implement local PEI plans instead of assigning the funds back to the State.

BACKGROUND:

The development of the PEI component began when the MHSOAC formed a PEI Committee in early 2006, chaired by Commissioners Hayashi and Prettyman. This committee included people with diverse perspectives, experiences, and expertise in prevention and early intervention. The MHSOAC adopted the policy recommendations from this committee in October 2006.

Then, DMH, CMHDA and CMHPC met over several months to formulate joint recommendations for PEI. This group developed the concept of the statewide PEI programs. The group's formulation of statewide programs was included in the enclosed document, "Mental Health Services Act Prevention and Early Intervention: County and State Level Policy Direction." This document was adopted by the MHSOAC on January 26, 2007. The document established amounts, totaling \$244 million, to be set aside for each project. The consensus was that statewide projects could provide a valuable infrastructure, implement prevention and early intervention on a larger scale, focus learning and best practices, provide statewide prevention and early intervention for underserved populations, and offer valuable support for county and other local efforts.

In May 2008, the MHSOAC approved DMH to design and implement three Statewide PEI projects. DMH also received expenditure authority in the State Budget for FY 2008-09. These three projects, described below, were developed through robust stakeholder processes and were supported by the CMHDA and other state-level organizations.

1. Suicide Prevention (\$10 Million/year for 4 years = \$40 Million)

Description:

This Statewide Project will support and coordinate with Counties, in launching the implementation of the *California Strategic Plan on Suicide Prevention (Strategic Plan)* which was approved by the Governor's Office on June 30, 2008. The Strategic Plan contains four strategic directions and over thirty recommended actions, at both the state and local levels, to prevent suicide in California. To view the *California Strategic Plan on Suicide Prevention*, please navigate to the

'Announcements' section at: http://www.dmh.ca.gov/Prop_63/MHSA/Prevention_and_Early_Intervention/default.asp

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BACKGROUND (Cont'd)

Stakeholder Process:

The DMH, in collaboration with the MHSOAC, convened a Suicide Prevention Strategic Advisory Committee that met over a 12-month period to develop recommendations. This committee included representatives from the counties, MHSOAC and other stakeholders, including law enforcement, education, health, social services, and community organizations. These recommendations represent overwhelming consensus among all stakeholders.

Status:

This initiative is ready to be implemented and is waiting for funding

2. Student Mental Health Initiative (SMHI) (\$15 Million/year for 4 years = \$60 Million)

Description:

The SMHI will provide an opportunity for California schools and higher education campuses to strengthen student mental health programs. The SMHI provides public Local Education Agencies (K-12) and Public Institutions of Higher Education (University of California System, California State Universities, and California Community Colleges) the opportunity to apply for funds to develop, expand and integrate campus-based mental health services and supports. This Initiative provides an opportunity for education entities to address mental health service gaps, improve services, promote mental health and facilitate access to support services at the earliest possible signs of mental health problems and concerns.

Stakeholder Process:

The unfortunate events that occurred at Virginia Tech in 2007 spurred the MHSOAC to convene an advisory committee to develop the SMHI from existing funds reserved for PEI statewide activities. Members of this committee included representatives from K-12 Education, community colleges, California State Universities and the University of California. The committee met over three months and the stakeholder process involved clients, students, parents, and representatives from over forty-five organizations.

Status:

K-12 and higher education programs are ready to be implemented and are waiting for funding

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BACKGROUND (Cont'd)

3. Stigma and Discrimination Reduction (\$15 Million/year for 4 years = \$60 Million)

Description:

The MHSOAC convened a Stigma and Discrimination Advisory Committee that produced a report in June 2007 recommending statewide “Consumer Empowerment and Personal Contact” and “External Influence” strategies, e.g. public awareness campaigns, and development of a comprehensive strategic plan to address stigma and discrimination. For further information, please view the June 2007 MHSOAC Stigma and Discrimination Advisory Committee report online at: <http://www.dmh.ca.gov/MHSOAC/docs/StigmaAndDiscriminationReport07Jun12.pdf>

Stakeholder Process:

In collaboration with the MHSOAC, DMH reconvened the Stigma and Discrimination Advisory Committee to develop a strategic plan and make recommendations on strategic directions, action plans, and next steps that can be considered for the Statewide Project. This strategic planning effort began in September 2008 and was recently completed in April 2009. The original Stigma and Discrimination Advisory Committee that developed the MHSOAC report was augmented to ensure that the development of the Strategic Plan would ensure perspectives from many backgrounds, including clients, family members, counties, children’s advocates, older adult advocates, members of the media, law enforcement, education, and racial/ethnic communities.

Status:

- Six advisory committee meetings and two public hearings and one statewide conference call have taken place. The latter meetings were held on March 17, 2009 in Emeryville and March 19, 2009 in Ontario.
- May 2009 – The Client & Family Leadership Committee will review and comment on draft strategic plan
- June 2009 – DMH will present strategic plan to MHSOAC for approval

Mental Health Services Committee Activities

The oversight of the PEI Statewide Projects was referred to the Mental Health Services Committee. Initial review of this issue took place on April 8, 2009 and subsequent discussion by a subcommittee was held on May 5, 2009. The subcommittee had a conference call to better understand the issue and to brainstorm possible solutions. The subcommittee discussed many options and did not achieve consensus; however, they agreed that this issue requires further discussion in the Mental Health Services Committee with stakeholders before a final recommendation can be made to the full Commission.

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Mental Health Services Committee Activities (Cont'd)

The current economic climate contributes to this dilemma and the Mental Health Services Committee will need further time after the May Revise to work with counties and all stakeholders to determine the best approach to try to make these projects work; or else to determine what is the best process going forward.

Partners and Stakeholders

On April 1, 2009, MHSOAC staff advised the stakeholder organizations that attended the Community Partners meeting that this issue was referred to the Mental Health Services Committee. In addition, MHSOAC staff have been working closely with CMHDA staff and DMH staff to ensure that all stakeholders are involved.

At the May 13, 2009 CMHDA Governing Board meeting, CMHDA indicated that they remain committed to supporting the statewide PEI initiatives. Most entities appear to strongly support the concept of Statewide Projects and believe they are integral to the implementation of prevention and early intervention activities in California. The consensus is that additional time is needed to work with all stakeholders to determine the best way to ensure the ongoing operation of these projects.

Proposed Motion:

The Commission defers the decision to approve PEI Statewide Project funds for local PEI plans for three months so that the Commission may obtain input from stakeholders and counties on this issue.