

AGENDA ITEMS: Evaluation Committee

- **Recommendations for the Expenditure of \$875,000 in FY 2011/12 Funds for Evaluation**

- ENCLOSURES:**
- Proposal C: Assess Impact of PEI for Individuals with Serious Mental Illness and their Families
 - Proposal E: Design MHSOAC PEI Evaluation Strategy
 - Proposal F: Regional Learning Collaboratives, Initially for County DCR Data Validation and Use
 - Proposal G: Summarize County Reports on Impact on Mental Health Disparities
 - Proposal H: Statewide Support for County Data Collection and Reporting System (DCR) Data Validation and Use of Reports

OTHER MATERIAL RELATED TO ITEMS: A handout of the PowerPoint presentation will be available at the meeting.

ISSUE:

The continued implementation of an accountability framework is an important priority identified in the 2011 Mental Health Services Oversight and Accountability Commission (MHSOAC) Work Plan. The development of evaluation priorities is a critical part of the framework so the Commission can further its work implementing statewide evaluations of the Mental Health Services Act (MHSA). At the November 17th MHSOAC meeting the Commission will consider recommendations provided by the Evaluation Committee regarding priorities for use of \$875,000 evaluation funding for Fiscal Year 2011/12.

The enclosed proposals for Commission consideration reflect concepts recommended by the Evaluation Committee and the MHSOAC staff as priorities based on available resources.

PROPOSALS:

In February 2011, the Legislature appropriated additional continuous funding for FY 2011/12 to be available for evaluation efforts to enable the MHSOAC to continue its oversight and accountability responsibility. The Evaluation Committee and MHSOAC staff conducted an extensive process, which included collecting a total of thirty ideas, creating a framework for prioritizing evaluation ideas based on U.S. Government Accountability Office and Centers for Disease Control and Prevention standards, convening subject matter experts to apply the framework to all ideas, narrowing the options from thirty to eight options, and developing the eight into more complete proposals that the Evaluation Committee considered at its October 26, 2011 meeting.

The Evaluation Committee recommends the following proposals as priorities for use of the \$875,000 evaluation funding for Fiscal Year 2011/12. The full proposals are enclosed for your review and are summarized below.

PROPOSALS, continued

- Proposal C: Assess Impact of PEI for Individuals with Serious Mental Illness and their Families

This proposal will evaluate the impact of a subset of early intervention programs focused on individuals with serious early manifestation of mental illness/emotional disturbance and their families.

Approximate Cost: \$200,000 to \$300,000

- Proposal E: Design MHSOAC PEI Evaluation Strategy

While some counties are evaluating their PEI programs and all counties (except very small counties) are performing an outcome evaluation of one PEI program, no evaluation requirements or systems are in place regionally or statewide to measure the impact of PEI. This study would explore, design, and propose options for a sustainable PEI evaluation system and framework, including data collection strategies, in order to provide meaningful information about the effectiveness and impact of PEI programs.

Proposal E was identified as an evaluation priority for a portion of the \$875,000 available evaluation funding for FY 2011/12. During the Evaluation Committee process to identify evaluation priorities several members of the Committee suggested that the MHSOAC collaborate with the California Mental Health Services Authority (CalMHSA) on a joint PEI evaluation strategy since CalMHSA is already tasked with evaluating some portions of PEI.

CalMHSA has proposed including as part of its contract with its evaluation contractor, RAND Corporation, the creation of a statewide evaluation framework for PEI that includes all MHSOAC specified negative outcomes as a result of serious mental illness (suicide, incarcerations, school failure or dropout, unemployment, prolonged suffering, homelessness, and removal of children from their homes), populations across the lifespan, and both prevention and early intervention areas of focus. This framework would also include the three areas (stigma reduction, suicide prevention, and student mental health) that are the focus of the CalMHSA statewide projects. The MHSOAC (staff and/or Evaluation Committee members) would be closely involved with the development of the framework and the framework would need to be approved by the Commission.

Approximate Cost: None to the MHSOAC

PROPOSALS, continued

- Proposal F: Regional Learning Collaboratives, Initially for County DCR Data Validation and Use

This proposal would create resources in the five California Mental Health Directors Association (CMHDA) statewide regions to support counties in fixing/cleaning Full Service Partnership (FSP) data identified as inaccurate and to improve and expand uses of FSP reports. The development of on-going strategies for data accuracy is critical for quality improvement purposes and to assist in analysis and interpretation of data. The regional structure to be established is proposed to be the foundation for regional learning collaboratives for a variety of opportunities and challenges to be encountered with the continued implementation of the MHSA.

To fully fund this proposal which is estimated at up to \$1.5 million would require more than the current resources available for evaluation. It is not feasible to fund this proposal as well as the other proposals. Fortunately, some of the goals of this proposal may be accomplished by Proposal H (described below) which is recommended to be funded.

Approximate Cost: No MHSOAC funding recommended at this time

- Proposal G: Summarize County Reports on Impact on Mental Health Disparities

This proposal would provide information regarding statewide, regional, and county impact on mental health disparities. The evaluation may include effectiveness, cost, and relevant consumer related variables consistent with the Institute of Medicine's six aims. Recommendations for future evaluations regarding mental health disparities, including consideration of integration of data collection with other Behavioral Health or Public Health databases would be provided by the evaluator.

Approximate Cost: \$100,000 to \$400,000

- Proposal H: Statewide Support for County Data Collection and Reporting (DCR) System Data Validation and Use of Reports

This proposal provides resources to support efforts to improve accuracy and use of the DCR System to further the work of the MHSOAC in its statewide evaluation of the MHSA. This would build upon the current work being done by California State University Sacramento regarding the DCR System to strengthen the use of the DCR which will result in more accurate and reliable data. This will assist counties in developing standardized reports to effectively use information for local and statewide quality improvement of community mental health services.

The DCR System collects baseline and key event information over time including changes regarding clients across all age groups. It is essential that overall client outcomes be accurately reported to ensure valid evaluations so the Commission can continue to provide oversight through evaluations.

Approximate Cost: \$200,000 to \$500,000

Additional Recommendation:

An additional recommendation of the Evaluation Committee is a call for a master plan for a complete evaluation of all components as a unified effort. The Committee believes that this needs to be done as a collaborative effort with a selected group of stakeholders. There is no price-tag on this, but please note that this could be a primary effort of the MHSOAC Research Scientist IV, other staff, or possibly a consultant.

Proposed Motions

(1) *The Commission adopts 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 C: Assess Impact of PEI for Individuals with Serious Mental Illness and their Families*
- *Proposal G: Summarize County Reports on Impact on Mental Health Disparities*
- *Proposal H: Statewide Support for County Data Collection and Reporting (DCR) System Data Validation and Use of Reports*

(2) *The Commission approves the CalMHSA proposal to:*

- *Incorporate into CalMHSA's evaluation contract with RAND Corporation, the creation of a statewide evaluation framework for PEI that includes all MHSA specified negative outcomes as a result of serious mental illness (suicide, incarcerations, school failure or dropout, unemployment, prolonged suffering, homelessness, and removal of children from their homes) populations across the lifespan, and areas of focus, both prevention and early intervention. The framework would also include the three areas (stigma reduction, suicide prevention, and student mental health) that are the focus of the CalMHSA statewide projects.*
- *Have MHSOAC (staff and/or Evaluation Committee members) closely involved with the development of the framework; and*
- *Have the framework be approved by the Commission*