



2014 WORK PLAN ACCOMPLISHMENTS

The Mental Health Services Act (MHSA) is based on the belief that the mental health system can and must be transformed. This is already happening in mental health as well as in other areas of the health care system. The implementation of the Federal Affordable Care Act presents rich opportunities to transform the entire health care system through integration. The reorganization of state administration of mental health and substance abuse, the continued realignment of these services at the county level, and the strengthening of stakeholder participation in planning and of statewide evaluation, oversight, and accountability through AB 1467 are a few additional examples of large-scale opportunities for improving mental health services to Californians. The Mental Health Services Oversight and Accountability Commission (MHSOAC) built the following work plan with consideration of these opportunities. The MHSOAC will pursue the following priorities as it exercises its statutory oversight role in this changing health care environment. These priorities are not listed in order of importance.

| | <u>Completed</u> | <u>Ongoing</u> | <u>In Progress</u> |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| Priority 1: Ensure evaluation regarding the effectiveness of services being provided and achievement of the outcome measures | | | |
| a. Continue implementation of the MHSOAC Evaluation Master Plan: | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1. Revisit and use the Evaluation Master Plan prioritization process | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Continue University of California, Los Angeles (UCLA) contract for priority indicators | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Transition the UCLA priority indicators work from UCLA to MHSOAC | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Complete University of California, Davis (UCD) contract for reducing disparities in access to care | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Continue UCLA contract for PEI | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Continue Resource Development Associates (RDA) contract for the community program planning | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Continue California Institute for Mental Health (CiMH) contract to evaluate INN evaluations | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Continue Mental Health Data Alliance (MHDA) contract for Client and Services Information (CSI) data collection and reporting strengthening and support | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Complete information technology (IT) strengthening of the Data Collection Reporting (DCR), which is owned by DHCS | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Refine the measurements of existing indicators and develop a process for adding other indicators for Community Services and Support (CSS) as well as PEI, INN, Capital Facilities and Technological Needs (CF/TN) and Workforce Education and Training (WET) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

| | <u>Completed</u> | <u>Ongoing</u> | <u>In Progress</u> |
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| 11. Continue contract to determine effectiveness of methods for engaging and serving Transitional Age Youth (TAY) clients | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Continue contract to develop a system to track outcomes for persons in less intensive services than Full Service Partnership (FSP) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13. Continue to develop PEI evaluation framework with a focus on integration with the treatment continuum | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 14. Develop an ongoing method to describe and catalogue PEI programs and determine the status of county efforts to evaluate one PEI project | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15. Determine use of \$500,000 investment in data | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Explore the Commission's future need for accessing PEI/INN data | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 17. Issue a contract to determine the effectiveness of selected programs for older adults | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 18. Issue a contract to determine the scope of use and effectiveness of evidence based practices for children and their families | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 19. Issue a contract for a useful and meaningful classification of FSP programs | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b. Identify core data elements needed to track then define those elements | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Continue an active role with California Mental Health Planning Council (CMHPC) for evaluation tasks requiring coordinated effort | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Continue to collaborate with DHCS on performance outcomes for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Monitor evaluation contract deliverables | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Update the policy paper: Accountability through Evaluative Efforts Focusing on Oversight, Accountability and Evaluation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Review Annual Updates, Three-Year Program and Expenditure Plans, and Annual Revenue and Expenditure Reports for potential implications for evaluation purposes | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| h. Communicate lessons learned and best practices from evaluations to improve programs and policy as part of quality improvement feedback | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Priority 2: Exercise an active leadership role in policy development

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| a. Develop and consult on regulations and policies | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1. Draft and adopt Prevention and Early Intervention (PEI) and Innovation (INN) program and expenditure regulations | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Consult with the Department of Health Care Services (DHCS) on all other MHSA regulations | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Develop policy recommendations that emerge from community forums and evaluation findings. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Review Annual Updates and three-year program and expenditure plans for possible policy implications | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

* Work completed in 2014 and to be repeated in 2015

Completed Ongoing In Progress

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| b. Endorse and promote strategies that transform the mental health system, including systems and services integration | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Monitor ACA implementation for the incorporation of integrated care and development of an integrated accountability system | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Maximize behavioral health care in the ACA | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Monitor activities in the Legislature for opportunities to support, oppose, or advise | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Network and participate in state and federal mental health activities, such as the White House National Conversation on Mental Health, State Legislative Mental Health Caucus, the federal mental health roundtable | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| g. Seek to have peer certification move forward | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Priority 3: Exercise financial oversight over the community mental health system to ensure compliance with statutes and regulations

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| a. Produce semiannual financial reports of community mental health system (January and May) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1. Monitor volatility of the Mental Health Services Act Fund | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Review and report on the MHSA state administration fund and how entities are expending these funds | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Monitor and analyze county fiscal reports (e.g., Annual Revenue and Expenditure Report and the Annual Update), which include MHSA, Medi-Cal Federal Financial Participation (FFP), 1991 Realignment, and Behavioral Subaccount funds spent on MHSA programs | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Monitor statewide PEI expenditures | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Monitor funding and use of local prudent reserves. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Monitor DHCS implementation of reversion policies and practices | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b. Work with the Department of Finance and the MHSOAC fiscal consultant on projections of the fund condition | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Review fiscal data and analyses for policy implications | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Review the California Department of Public Health's (CDPH) California Reducing Disparities Project strategic plan and proposed implementation | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| e. Monitor the status of California Mental Health Services Authority (CalMHSA) expenditures | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Review DHCS supports of training and technical assistance through CiMH | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Priority 4: Ensure that the perspective and participation of diverse community members reflective of California populations and others suffering from severe mental illness and their family members is a significant factor in all of the Commission's decisions and recommendations

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| a. Continue quarterly Community Forums and provide the Commission an annual summary and report of potential | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
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| | <u>Completed</u> | <u>Ongoing</u> | <u>In Progress</u> |
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| policy, compliance, communication, and technical assistance implications | | | |
| 1. Encourage stakeholder contractors, community agencies and counties to facilitate attendance at the forums | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Diversify the methods by which the MHSOAC receives input from people with lived experience of mental illness | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1. Expand and diversify participation in MHSOAC committees, stakeholder contracts, and MHSOAC meetings to the fullest extent | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Expand methods by which people with lived experience can provide input (in person, online, written, and other) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Explore livestreaming Commission and Committee meetings | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Schedule semi-annual reports from contractors to the Commission on the status of stakeholder contract efforts and results | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Continue to conduct an organizational self-assessment of MHSOAC according to Culturally and Linguistically Appropriate Services (CLAS) standards and act on recommendations | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| e. Create work group to review methods to engage individuals who have not fully benefitted from MHSA services or reached recovery | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Priority 5: Ensure collecting and tracking of data and information

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|--|--------------------------|-------------------------------------|-------------------------------------|
| a. Review Annual Updates, Annual Revenue and Expenditure Reports, and three-year program and expenditure plans and cull critical information | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Develop data-driven tracking system | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| a. Develop consistent definitions, timeframes, and data elements for fiscal, program, and evaluation reporting | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c. Continue to work with DHCS, California Mental Health Directors Association (CMHDA), Office of Statewide Health Planning and Development (OSHPD), CDPH to ensure access to adequate data | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Priority 6: Facilitate relevant and effective training and technical assistance

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| a. Develop implementation plan for the Technical Assistance and Training (T/TA) policy paper adopted by the MHSOAC | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Examine options to use evaluation results to demonstrate to taxpayers and counties the successes and challenges of mental health programs, such as creating an evaluation clearinghouse | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c. Participate on training and technical assistance advisory committee if convened by DHCS and CiMH | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Collaborate annually with DHCS on training and technical assistance contract priorities, including reducing training silos | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

* Work completed in 2014 and to be repeated in 2015

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| e. Monitor CiMH for T/TA and Crisis Intervention Team (CIT) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| f. Review Annual Updates and three-year program and expenditure plans for direct T/TA assistance opportunities and trends for statewide TA priorities | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| g. Provide TA as needed for development of county plans | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| h. Support T/TA to disseminate successful Innovation programs developed by counties through the Innovation Component | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| i. Oversee appropriate T/TA for items raised during the process to draft PEI/INN regulations | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Priority 7: Provide oversight of statewide projects and processes

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| a. Award and monitor triage personnel grants | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Increase oversight role of statewide PEI projects (Suicide Prevention, Stigma Reduction, Student Mental Health Initiative) and evaluation results | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1. Report evaluation results to MHSOAC staff for analysis for potential presentation by CalMHSa to the MHSOAC | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Continue to provide oversight of the Reducing Disparities Statewide Strategic Plan and projects to ensure consistency with the MHSa and contract deliverables | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Ensure the Issue Resolution Process is finalized, communicated, and implemented | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Priority 8: Increase efforts to communicate statewide impact of the MHSa

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| a. Look for opportunities to collaborate on statewide mental health press opportunities | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Increase traffic and utilization of Proposition 63 website | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c. Update and broadly disseminate evaluation deliverable fact sheets | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Redesign MHSOAC website | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| e. Communicate status of reducing mental health disparities | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Produce short video to be used on the MHSOAC website spotlighting the work of the Commission | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| g. Continue to find new opportunities and events to highlight Proposition 63 outcomes | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| h. Draft and disseminate additional population-specific fact sheets | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Priority 9: Continue efforts to develop strategies that overcome the stigma and discrimination associate with mental illness

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| a. Continue co-hosting Free Your Mind radio show | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Continue outreach to college and high school campuses in collaboration with Art With Impact | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Produce a short video to be used at Community Forums and/or the Proposition 63 website to showcase examples of CSS, PEI, INN, and WET programs | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| d. Produce and air PEI documentary | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Continue Crossings TV | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

* Work completed in 2014 and to be repeated in 2015

Completed **Ongoing** **In Progress**

- f. Explore other News and Review opportunities
- g. Test Art With Impact in movie theaters
- h. Continue social media efforts through a phone application and Twitter

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| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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