Proposed Prevention and Early Intervention Regulations
As Originally Published on June 6, 2014

Article 2. Definitions

Adopt Section 3200.245 as follows:

Section 3200.245. Prevention and Early Intervention.

(a) "Prevention and Early Intervention Component" means the section of the Three-Year Program and Expenditure Plan intended to prevent mental illnesses from becoming severe and disabling.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code.

Adopt Section 3200.246 as follows:

Section 3200.246. Prevention and Early Intervention Fund.

(a) "Prevention and Early Intervention funds" means the Mental Health Services funds allocated for prevention and early intervention programs pursuant to Welfare and Institutions Code Section 5892, subdivision (a)(3).

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5892, Welfare and Institutions Code.

Article 5. Reporting Requirements

Adopt Section 3510.010 as follows:

Section 3510.010. Prevention and Early Intervention Annual Revenue and Expenditure Report.

(a) As part of the Mental Health Services Act Annual Revenue and Expenditure Report the County shall report the following:
  (1) The total funding source dollar amounts expended during the reporting period on each program and strategy funded with Prevention and Early Intervention funds by the following funding sources:
    (A) Prevention and Early Intervention funds
      (i) The County shall identify each program funded with Prevention and Early Intervention funds as a Prevention Program, Early Intervention Program, Outreach for Increasing Recognition of Early Signs of Mental Illness Program/Approach, Stigma and Discrimination Reduction Program, or Suicide Prevention Program/Approach. If a program includes more than one element, the County shall estimate the percentage of funds dedicated to each element.
    (B) Medi-Cal Federal Financial Participation
    (C) 1991 Realignment

(D) Behavioral Health Subaccount
(E) Any other funding

(2) The amount of funding expended for Prevention and Early Intervention Component Administration by the following funding sources:
(A) Prevention and Early Intervention funds
(B) Medi-Cal Federal Financial Participation
(C) 1991 Realignment
(D) Behavioral Health Subaccount
(E) Any other funding

(3) The amount of funding expended for evaluation of the Prevention and Early Intervention Component by the following funding sources:
(A) Prevention and Early Intervention funds
(B) Medi-Cal Federal Financial Participation
(C) 1991 Realignment
(D) Behavioral Health Subaccount
(E) Any other funds

(4) The amount of Prevention and Early Intervention funds voluntarily assigned by the County to California Mental Health Services Authority or any other organization in which counties are acting jointly.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840, 5845, 5847, and 5899, Welfare and Institutions Code; Sections 2 and 3 of the Mental Health Services Act.

Adopt Section 3560 as follows:

Section 3560. Prevention and Early Intervention Reports.

(a) The County shall submit to the Mental Health Services Oversight and Accountability Commission the following Prevention and Early Intervention reports:
(1) The annual Prevention and Early Intervention report as specified in Section 3560.010.
(2) The Three- Year Evaluation Report as specified in Section 3560.020.

Adopt Section 3560.010 as follows:

Section 3560.010. Annual Prevention and Early Intervention Report.

(a) The requirements set forth in this section shall apply to the Annual Prevention and Early Intervention Report to be included in the Annual Update for fiscal year 2015/16 and each Annual Update and Three-Year Program and Expenditure Plan thereafter.

(b) The County shall report the following information annually as part of the Annual Update or Three-Year Program and Expenditure Plan. The report shall include the following information for the reporting period:

(1) For each Prevention program and each Early Intervention program list:

(A) Unduplicated numbers of individuals served annually

(i) If a program serves both individuals at risk of (Prevention) and individuals with early onset of (Early Intervention) a potentially serious mental illness, the County shall report numbers served separately for each category.

(ii) If a program serves families the County shall report information for each individual family member served.

(2) For each Outreach for Increasing Recognition of Early Signs of Mental Illness program or strategy within a program, the County shall provide the number of potential responders engaged differentiated by type of settings as referenced in Section 3750, subdivision (d)(3)(A).

(3) For Access and Linkage to Treatment Strategy the County shall provide:

(A) Number of individuals with serious mental illness referred to treatment, and the kind of treatment to which the individual was referred.

(B) Number of individuals who followed through on the referral and engaged in treatment, defined as the number of individuals who participated at least once in the program to which they were referred.

(C) Duration of untreated mental illness as defined in Section 3750, subdivision (g)(3)(A).

(D) How long the individual received services in the program to which the individual was referred.

(4) For Improve Timely Access to Services for Underserved Populations Strategy the County shall provide:

(A) Identify the specific underserved populations for whom the County intends to increase timely access to services.

(B) Number of referrals of members of underserved populations to a Prevention program, an Early Intervention program and/or to treatment beyond early onset including kind of care that resulted from the outreach.

(C) Number of individuals who followed through on the referral, defined as the number of individuals who participated at least once in the program to which they were referred.

(D) Interval between onset of risk indicators and initial symptoms of a mental illness as self-reported or reported by a parent/family member or as identified by medical records and if applicable, entry into treatment or services of a Prevention program or an Early Intervention program.

(E) Interval between referral and engagement in services, including treatment.

(F) How long the individual received services in the program to which the individual was referred.

(5) For the information reported under subdivisions (1) through (4) of this section, disaggregate numbers served, number of potential responders engaged, and number of referrals for treatment and other services by:

(A) The following age groups:

(i) 0-15 (children/youth);

(ii) 16-25 (transition age youth);

(iii) 26-59 (adult);

(iv) ages 60+ (older adults).

(B) Race by the following categories:

(i) American Indian or Alaska Native

(ii) Asian

(iii) Black or African American

(iv) Native Hawaiian or other Pacific Islander

(v) White

(vi) Other

(C) Ethnicity by the following categories:

(i) Hispanic or Latino as follows

(a) Caribbean

(b) Central American

(c) Mexican

(d) South American

(e) Other

(ii) Non-Hispanic or Non-Latino as follows

(a) African

(b) Cambodian

(c) Chinese

(d) Eastern European

(e) European

(f) Filipino

(g) Japanese

(h) Korean

(i) Middle Eastern

(j) Vietnamese

(k) Other

(D) Primary language spoken listed by threshold languages for the individual county

(E) Sexual orientation,

(F) Disability, if any,

(G) Veteran status,

(H) Gender identity,

(I) Any other data the County considers relevant.

(6) For Stigma and Discrimination Reduction Programs/Approaches and Suicide Prevention Programs/Approaches, the County may report available numbers of individuals reached, including demographic breakdowns. An example would be the number of individuals who received training and education or who clicked on a web site.
(7) For all programs and strategies, the County may report implementation challenges, successes, lessons learned, and relevant examples.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code; Sections 2 and 3 of MENTAL HEALTH SERVICES ACT.

Adopt Section 3560.020 as follows:

Section 3560.020. Three-Year Evaluation Report.

(a) The County shall submit the Three-Year Evaluation Report to the Mental Health Services Oversight and Accountability Commission every three years as part of the Three-Year Program and Expenditure Plan. The Three-Year Evaluation Report answers questions about the impacts of Prevention and Early Intervention component programs on individuals with risk or early onset of serious mental illness and on the mental health and related systems.
  (1) The Three-Year Evaluation Report is due to the Mental Health Services Oversight and Accountability Commission on or before December 30, 2018 as part of the Three-Year Program and Expenditure Plan for fiscal years 2017/18 through 2019/20. The Three-Year Evaluation Report shall be due no later than December 30th every three years thereafter and shall report on the evaluation(s) for the three fiscal years prior to the due date.
(b) The Three-Year Evaluation Report shall describe the evaluation of each Prevention and Early Intervention Component program and strategy, including approaches used to select outcomes and indicators, collect data, and determine results, and how often the data were collected.
(c) The Three-Year Evaluation Report shall provide results and analysis of results for all required evaluations set forth in Section 3750.
(d) The County may also include in the Three-Year Evaluation Report any additional evaluation data on selected outcomes and indicators, including evaluation results related to the impact of Prevention and Early Intervention Component programs on mental health and related systems.
(e) The County may report any other available evaluation results in the County's Annual Updates.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code; Sections 2 and 3 of Mental Health Services Act.

Article 7. Prevention and Early Intervention

Adopt Section 3700 as follows:

Section 3700. Rule of General Application.

(a) The use of Prevention and Early Intervention funds shall be governed by the provisions specified in this Article and Articles 1 through 5, unless otherwise specified.

Adopt Section 3705 as follows:

Section 3705. Prevention and Early Intervention Component General Requirements.

(a) The County shall include in its Prevention and Early Intervention Component:
  (1) At least one Early Intervention program as defined in Section 3710.
  (2) At least one Outreach for Increasing Recognition of Early Signs of Mental Illness program or strategy as defined in Section 3715.
  (3) The strategies defined in Section 3735.
(b) The County may include in its Prevention and Early Intervention Component:
  (1) One or more Prevention programs as defined in Section 3720.
  (2) One or more Stigma and Discrimination reduction programs/approached as defined in Section 3725.
  (3) One or more Suicide Prevention programs/approaches as defined in Section 3730.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3710 as follows:

Section 3710. Early Intervention Program.

(a) The County shall offer at least one Early Intervention program as defined in this section.
(b) "Early Intervention program" means treatment and other services and interventions to address and promote recovery and related functional outcomes for a mental illness early in its emergence, including the applicable negative outcomes listed in Welfare and Institutions Code Section 5840, subdivision (d) that result from untreated mental illness.
(c) Early Intervention program services shall not exceed eighteen months, unless the individual receiving the service is identified as experiencing first onset of a serious mental illness or emotional disturbance with psychotic features, in which case early intervention services shall not exceed four years.
(d) Early Intervention program services may include services to parents, caregivers, and other family members of the person with early onset of a mental illness, as applicable.
(e) Early Intervention program may include efforts to prevent relapse in an individual with early onset of a mental illness.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3715 as follows:

Section 3715. Outreach for Increasing Recognition of Early Signs of Mental Illness.

(a) The County shall offer at least one Outreach for Increasing Recognition of Early Signs of Mental Illness program or strategy, defined as an element within a program, that provides outreach to potential responders as defined in this section.

(b) "Outreach" is a process of engaging, encouraging, educating, and/or training, and learning from potential responders about ways to recognize and respond effectively to early signs of potentially severe and disabling mental illness.

(c) "Potential responders" include, but are not limited to, families, employers, primary health care providers, school personnel, community service providers, peer providers, cultural brokers, law enforcement personnel, emergency medical service providers, people who provide services to individuals who are homeless, leaders of faith-based organizations, and others in a position to identify early signs of potentially severe and disabling mental illness, provide support, and/or refer individuals who need treatment or other mental health services.

(d) Outreach for Increasing Recognition of Early Signs of Mental Illness may include reaching out to individuals with signs and symptoms of a mental illness, so they can recognize and respond to their own symptoms.

(e) Outreach for Increasing Recognition of Early Sings of Mental Illness may be a stand-alone program, a strategy within a Prevention program, a strategy within an Early Intervention program, a strategy within another program funded by Prevention and Early Intervention funds, or a combination thereof.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3720 as follows:

Section 3720. Prevention Program.

(a) The County may offer one or more Prevention Programs as defined in this section.

(b) "Prevention Program" means a set of related activities to reduce risk factors for developing a potentially serious mental illness and to build protective factors. The goal of this program is to bring about mental health including reduction of the applicable negative outcomes listed in Welfare and Institutions Code Section 5840, subdivision (d) as a result of untreated mental illness for individuals and members of groups or populations whose risk of developing a serious mental illness is significantly higher than average and, as applicable, their parents, caregivers, and other family members.

(c) "Risk factors for mental illness" means conditions or experiences that are associated with a higher than average risk of developing a potentially serious mental illness. Kinds of risk factors include, but

are not limited to, biological including family history and neurological, behavioral, social/economic, and environmental.

(1) Examples of risk factors include, but are not limited to, a serious chronic medical condition, adverse childhood experiences, experience of severe trauma, ongoing stress, exposure to drugs or toxins including in the womb, poverty, family conflict or domestic violence, experiences of racism and social inequality, prolonged isolation, having a previous mental illness, a previous suicide attempt, or having a family member with a serious mental illness.

(d) Prevention program services may include relapse prevention for individuals in recovery from a serious mental illness.

(e) Prevention programs may include universal prevention efforts as defined below if there is evidence to suggest that the universal prevention effort is likely to bring about mental health and related functional outcomes for individuals and members of groups or populations whose risk of developing a serious mental illness is significantly higher than average.

(1) Universal prevention efforts mean efforts that target a population that has not been identified on the basis of risk.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3725 as follows:

Section 3725. Stigma and Discrimination Reduction Program/Approaches.

(a) The County may offer one or more Stigma and Discrimination Reduction Programs/Approaches as defined in this section.

(b) "Stigma and Discrimination Reduction Programs/Approaches" means the County's direct activities to reduce negative feelings, attitudes, beliefs, perceptions, stereotypes and/or discrimination related to being diagnosed with a mental illness, having a mental illness, or to seeking mental health services and to increase acceptance, dignity, inclusion, and equity for individuals with mental illness, and members of their families.

(1) Examples of Stigma and Discrimination Reduction Programs/Approaches include, but are not limited to, social marketing campaigns, speakers' bureaus and other direct-contact approaches, targeted education and training, anti-stigma advocacy, web-based campaigns, efforts to combat multiple stigmas that have an impact on mental illness, and efforts to encourage self-acceptance for individuals with a mental illness.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3730 as follows:

Section 3730. Suicide Prevention Programs and Approaches.

(a) The County may offer one or more Suicide Prevention Programs/Approaches as defined in this section.

(b) Suicide Prevention Programs/Approaches means organized activities that the County undertakes to prevent suicide as a consequence of mental illness. This category of programs does not focus on or have intended outcomes for specific individuals at risk of or with serious mental illness.

  (1) Suicide prevention activities that aim to reduce suicidality for specific individuals at risk of or with early onset of a potentially serious mental illness can be a focus of a Prevention program pursuant to Section 3720 or a focus of an Early Intervention program pursuant to Section 3710.

(c) Suicide Prevention programs and approaches pursuant to this section include, but are not limited to, public and targeted information campaigns, suicide prevention networks, capacity building programs, culturally specific approaches, screening programs, suicide prevention hotlines or web-based suicide prevention resources, and training and education.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3735 as follows:

Section 3735. Prevention and Early Intervention Strategies.

(a) The County shall include all of the following strategies as part of each program listed in Sections 3710 through 3730 of Article 7:

  (1) Be designed and implemented to help create Access and Linkage to Treatment.

    (A) "Access and Linkage to Treatment" means connecting children with severe mental illness, as defined in Welfare and Institutions Code Section 5600.3, and adults and seniors with severe mental illness, as defined in Welfare and Institutions Code Section 5600.3, as early in the onset of these conditions as practicable, to medically necessary care and treatment, including but not limited to care provided by county mental health programs.

    (B) Access and Linkage to Treatment can be a stand-alone program, an element of a Prevention program or an element of an Early Intervention program, or a combination thereof.

  (2) Be designed, implemented, and promoted in ways that Improve Timely Access to Mental Health Services for Individuals and/or Families from Underserved Populations.

    (A) "Improving Timely Access to Services for Underserved Populations" means to increase the extent to which an individual or family from an underserved population as defined in Title 9 California Code of Regulations Section 3200.300 who needs mental health services because of risk or presence of a mental illness receives appropriate services as early in the onset as practicable, through program features such as accessibility, cultural and language appropriateness, transportation, family focus, hours available, and cost of services.

    (B) Programs shall provide services in convenient, accessible, acceptable, culturally appropriate settings such as primary healthcare, schools, family resource centers, community-based

organizations, places of worship, and public settings unless a mental health setting enhances access to quality services and outcomes for underserved populations.

(3) Be designed, implemented, and promoted using Strategies that are Non-Stigmatizing and Non-Discriminatory

(A) "Strategies that are Non-Stigmatizing and Non-Discriminatory" means promoting, designing, and implementing programs in ways that reduce and circumvent stigma, including self-stigma, and discrimination related to being diagnosed with a mental illness, having a mental illness or seeking mental health services, and make services accessible, welcoming, and positive.

(B) Non-Stigmatizing and Non-Discriminatory approaches include, but are not limited to, using positive messages and approaches with a focus on recovery, wellness, and resilience; use of culturally appropriate language and concepts; efforts to acknowledge and combat multiple social stigmas that affect attitudes about mental illness and/or about seeking mental health services, including but not limited to race and sexual preference; co-locating mental health services with other life resources; promoting positive attitudes and understanding of recovery among mental health providers; inclusion and welcoming of family members; and employment of peers in a range of roles.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3740 as follows:

Section 3740. Effective Methods.

(a) For each program and each strategy in Article 7, the County shall use effective methods likely to bring about intended outcomes, based on one of the following standards, or a combination of the following standards:

(1) Evidence-based practice standard: Evidence-based practice means activities for which there is scientific evidence consistently showing improved mental health outcomes for the intended population, including, but not limited to, scientific peer-reviewed research using randomized clinical trials.

(2) Promising practice standard: Promising practice means programs and activities for which there is research demonstrating effectiveness, including strong quantitative and qualitative data showing positive outcomes, but the research does not meet the standards used to establish evidence-based practices and does not have enough research or replication to support generalizable positive public health outcomes.

(3) Community and or practice-based evidence standard: Community and or practice-based evidence means a set of practices that communities have used and determined to yield positive results by community consensus over time, which may or may not have been measured

empirically. Community and or practice-defined evidence takes a number of factors into consideration, including worldview and historical and social contexts of a given population or community, which are culturally rooted.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3745 as follows:

Section 3745. Changed Program.

(a) If the County determines a need to make a substantial change to a program or strategy or target population of the program or strategy described in the County's most recent Three-Year Program and Expenditure Plan or Annual Update that was adopted by the local county board of supervisors as referenced in Welfare and Institutions Code Section 5847, the County shall comply with the requirements described in Section 3755.010 regarding a Prevention and Early Intervention Program Change Report.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Section 5840, Welfare and Institutions Code.

Adopt Section 3750 as follows:

Section 3750. Prevention and Early Intervention Program Evaluation.

(a) For each Early Intervention program the County shall evaluate the reduction of prolonged suffering as referenced in Welfare and Institutions Code Section 5840, subdivision (d) that may result from untreated mental illness by measuring reduced symptoms and/or improved recovery, including mental, emotional, and relational functioning. The County shall select, define, and measure appropriate indicators that are applicable to the program.

(b) For each Prevention program the County shall measure the reduction of prolonged suffering as referenced in Welfare and Institutions Code Section 5840, subdivision (d) that may result from untreated mental illness by measuring a reduction in risk factors and/or increased protective factors that may lead to improved mental, emotional, and relational functioning. The County shall select, define, and measure appropriate indicators that are applicable to the program

(c) For each Early Intervention and each Prevention program that the County designates as intended to reduce any of the other Mental Health Services Act negative outcomes referenced in Welfare and Institutions Code Section 5840, subdivision (d) that may result from untreated mental illness, the County shall select, define, and measure appropriate indicators that the County selects that are applicable to the program.

(d) For Outreach for Increasing Recognition of Early Signs of Mental Illness as either a stand-alone program or a strategy within another program, referenced in Section 3715 , the County shall track:

(1) The number of potential responders.

(2) The type of potential responders.
(3) The setting in which the potential responders were engaged.
(A) Settings providing opportunities to identify early signs of mental illness include, but are not limited to, family resource centers, senior centers, schools, cultural organizations, churches, faith-based organizations, primary health care, recreation centers, libraries, public transit facilities, support groups, law enforcement departments, residences, shelters, and clinics.

(e) If the County chooses to offer a Stigma and Discrimination Reduction Program/Approach referenced in Section 3725, the County shall select and use a validated method to measure one or more of the following:
(1) Changes in attitudes, knowledge, and/or behavior related to mental illness that are applicable to the specific program/approach.
(2) Changes in attitudes, knowledge, and/or behavior related to seeking mental health services.

(f) If the County chooses to offer a Suicide Prevention Program/Approach referenced in Section 3730, the County shall select and use a validated method to measure changes in attitudes, knowledge, and/or behavior regarding suicide related to mental illness that are applicable to the specific program/approach.

(g) For each strategy or program to provide Access and Linkage to Treatment the County shall track:
(1) Number of referrals to treatment, and kind of treatment to which person was referred.
(2) Number of persons who followed through on the referral and engaged in treatment, defined as the number of individuals who participated at least once in the program to which the person was referred.
(A) The County may use a methodologically sound sampling method to satisfy this requirement.
(3) Duration of untreated mental illness.
(A) Duration of untreated mental illness shall be measured by the interval from onset of symptoms of mental illness, based on available medical records or if medical records are not available, on self-report or report of a parent or family member, until initiation of treatment.
(4) How long the person received services in the program to which the person was referred.
(A) The County may use a methodologically sound sampling method to satisfy this requirement.

(h) For each strategy to Improve Timely Access to Services for Underserved Populations the County shall measure:
(1) Number of referrals of members of underserved populations to a Prevention program, an Early Intervention program, and/or treatment (beyond early onset) including the kind of care.
(2) Number of persons who followed through on the referral and engaged in treatment, defined as the number of individuals who participated at least once in the program to which the person was referred.
(A) The County may use a methodologically sound sampling method to satisfy this requirement.
(3) Timeliness of care.

(A) Timeliness of care for individuals from underserved populations with a mental illness is measured by the interval from onset of symptoms of a mental illness, based on available medical records, or if not available, on self-report or report of a parent or family member, until initiation of treatment.

(B) Timeliness of care for individuals from underserved populations with risk factors for a mental illness is measured by the duration between onset of indicators of risk of mental illness and initial receipt of services.

(4) How long the person received services in the program to which the person was referred.

(A) The County may use a methodologically sound sampling method to satisfy this requirement.

(i) The County shall design the evaluations to be culturally appropriate and shall include the perspective of diverse people with lived experience of mental illness, including their family members, as applicable.

(j) In addition, to the required evaluations listed in this section, the County may also, as relevant and applicable, define and measure the impact of programs funded by Prevention and Early Intervention funds on the mental health and related systems, including, but not limited to education, physical healthcare, law enforcement and justice, social services, homeless shelters and other services, and community supports specific to age, racial, ethnic, and cultural groups. Examples of system outcomes include, but are not limited to, increased provision of services by ethnic and cultural community organizations, hours of operation, integration of services including co-location, involvement of clients and families in key decisions, identification and response to co-occurring substance-use disorders, staff knowledge and application of recovery principles, collaboration with diverse community partners, or funds leveraged.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code; Sections 2 and 3 of Mental Health Services Act.

Adopt Section 3755 as follows:

Section 3755. Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update.

(a) The requirements set forth in this section shall apply to the Annual Update for fiscal year 2015/16 and each Annual Update and/or Three-Year Program and Expenditure Plan thereafter.

(b) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan or Annual Update shall include the following general information:

(1) A description of how the County ensured that staff and stakeholders involved in the Community Program Planning process required by Title 9 California Code of Regulations, Section 3300, were informed about and understood the purpose and requirements of the Prevention and Early Intervention Component.

(2) A description of the County's plan to involve community stakeholders meaningfully in all phases of the Prevention and Early Intervention component of the Mental Health Services Act,

including program planning and implementation, monitoring, quality improvement, evaluation, and budget allocations.

(3) A brief description, with specific examples of how each program and/or strategy funded by Prevention and Early Intervention funds will reflect and be consistent with all Mental Health Services Act General Standards set forth in Title 9 California Code of Regulations, Section 3320.

(c) For each Early Intervention program as defined in Section 3710, the County shall include a description of the program including but not limited to:

(1) Identification of the target population for the intended mental health outcomes including:

(A) Demographics including, but not limited to, age, race/ethnicity, gender, and if relevant, primary language spoken, military status, and lesbian, gay, bisexual, transgender, and/or questioning identification.

(B) The mental illness or illnesses for which there is early onset.

(C) Brief description of how each participant's early onset of a potentially serious mental illness will be determined.

(2) Identification of the type of problem(s) and need(s) for which the program will be directed and the activities to be included in the program that are intended to bring about mental health and related functional outcomes including reduction of the negative outcomes referenced in Welfare and Institutions Code Section 5840, subdivision (d) for individuals with early onset of potentially serious mental illness.

(3) The Mental Health Services Act negative outcomes as a consequence of untreated mental illness referenced in Welfare and Institutions Code Section 5840, subdivision (d) that the program is expected to affect, including the reduction of prolonged suffering as a consequence of untreated mental illness, as defined in Section 3750, subdivision (a).

(A) List the indicators that the County will use to measure reduction of prolonged suffering as referenced in Section 3750, subdivision(a).

(B) For any other specified Mental Health Services Act negative outcome as a consequence of untreated mental illness, as referenced in Section 3750, subdivision (c), list the indicators that the County will use to measure the intended reductions.

(C) Explain the evaluation methodology, including, how and when outcomes will be measured, how data will be collected and analyzed, and how the evaluation will reflect cultural competence.

(4) Specify how the Early Intervention program is likely to reduce the relevant Mental Health Services Act negative outcomes as referenced in Welfare and Institutions Code Section 5840, subdivision (d) by providing the following information:

(A) If the County used evidence-based standard or promising practice standard to determine the program's effectiveness as referenced in Section 3740, subdivisions (a)(1) and (a)(2), provide a brief description of or reference to the relevant evidence applicable to the specific intended outcome, explain how the practice's effectiveness has been demonstrated for the

intended population, and explain how the County will ensure fidelity to the evidence-based practice in implementing the program.

(B) If the County used community and/or practice-based standard to determine the program's effectiveness as referenced in Section 3740, subdivision (a)(3), describe the evidence that the approach is likely to bring about Mental Health Services Act outcomes for the intended population.

(d) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include a description of the Prevention program including but not limited to the following information:

(1) Identification of the target population for the intended mental health outcomes, including:

(A) Participants' risk of a potentially serious mental illness, either based on individual risk or membership in a group or population with greater than average risk of a serious mental illness.

(B) How the risk of a potentially serious mental illness will be defined and determined.

(2) Specify the type of problem(s) and need(s) for which the Prevention program will be directed and the activities to be included in the program that are intended to bring about mental health and related functional outcomes including reduction of the negative outcomes referenced in Welfare and Institutions Code Section 5840, subdivision (d) for individuals with higher than average risk of potentially serious mental illness.

(3) Specify any Mental Health Services Act negative outcomes as a consequence of untreated mental illness as referenced in Welfare and Institutions Code Section 5840, subdivision (d) that the program is expected to affect, including reduction of prolonged suffering, as defined in Section 3750, subdivision (b).

(A) List the indicators that the County will use to measure reduction of prolonged suffering as referenced in Section 3750, subdivision (b).

(B) If the County intends the program to reduce any other specified Mental Health Services Act negative outcome as a consequence of untreated mental illness as referenced in Section 3750, subdivision (c), list the indicators that the County will use to measure the intended reductions.

(C) Explain the evaluation methodology, including, how and when outcomes will be measured, how data will be collected and analyzed, and how the evaluation will reflect cultural competence.

(4) Specify how the Prevention program is likely to bring about reduction of relevant Mental Health Services Act negative outcomes referenced in Welfare and Institutions Code Section 5840, subdivision (d) for the intended population by providing the following information:

(A) If the County used evidence-based standard or promising practice standard to determine the program's effectiveness as referenced in Section 3740, subdivisions (a)(1) and (a)(2), provide a brief description of or reference to the relevant evidence applicable to the specific

intended outcome, explain how the practice's effectiveness has been demonstrated for the intended population, and explain how the County will ensure fidelity to the evidence-based practice in implementing the program.

(B) If the County used community and/or practice-based standard to determine the program's effectiveness as referenced in Section 3740, subdivision (a)(3), describe the evidence that the approach is likely to bring about Mental Health Services Act outcomes for the intended population.

(e) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include a description of each Outreach for Increasing Recognition of Early Signs of Mental Illness program or strategy within a program, including but not limited to:

(1) Identify the types and settings of potential responders the program intends to reach.

(A) Describe briefly the potential responder's setting, as referenced in Section 3750, subdivisions (d)(3)(A), and the opportunity the potential responders will have to identify diverse individuals with signs and symptoms of potentially serious mental illness.

(2) Specify the methods to be used to reach out and engage potential responders and the methods to be used for potential responders and public mental health service providers to learn together about how to identify and respond supportively to signs and symptoms of potentially serious mental illness.

(f) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include a description of each Stigma and Discrimination Reduction program/approach, including but not limited:

(1) Identify whom the campaign intends to influence.

(2) Specify the methods and activities to be used to change attitudes, knowledge, and/or behavior regarding being diagnosed with mental illness, having mental illness and/or seeking mental health services, consistent with requirements in Section 3750, subdivision (e), including timeframes for measurement.

(3) Specify how the proposed method is likely to bring about the selected outcomes by providing the following information:

(A) If the County used evidence-based standard or promising practice standard, to determine the program's effectiveness as referenced in Section 3740, subdivisions (a)(1) and (a)(2), explain how the practice's effectiveness has been demonstrated and explain how the County will ensure fidelity to the evidence-based practice in implementing the campaign.

(B) If the County used community and/or practice-based standard to determine the program's effectiveness as referenced in Section 3740, subdivision (a)(3), describe the evidence that the approach is likely to bring about Mental Health Services Act outcomes.

(g) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include a description of each Suicide Prevention program/approach including but not limited:

(1) Specify the methods and activities to be used to change attitudes and behavior to prevent mental illness-related suicide.
(2) Indicate how the County will measure changes in attitude, knowledge, and /or behavior related to reducing mental illness-related suicide consistent with requirements in Section 3750, subdivision (f) including timeframes for measurement.
(3) Specify how the proposed method is likely to bring about suicide prevention outcomes selected by the County by providing the following information:
(A) If the County used evidence-based standard or promising practice standard to determine the program's effectiveness as referenced in Section 3740, subdivisions (a)(1) and (a)(2), explain how the practice's effectiveness has been demonstrated and explain how the County will ensure fidelity to the evidence-based practice in implementing the campaign.
(B) If the County used community and/or practice-based standard to determine the program's effectiveness as referenced in Section 3740, subdivision (a)(3), describe the evidence that the approach is likely to bring about Mental Health Services Act outcomes.

(h) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include for all programs referenced in subdivisions (c) through (g) of this section an explanation of how the program will be implemented to help create Access and Linkage to Treatment for individuals with serious mental illness as referenced in Section 3735, subdivision (a)(1).
(1) Explain how individuals will be identified as needing assessment or treatment for a serious mental illness or serious emotional disturbance that is beyond the scope of an Early Intervention program.
(2) Explain how individuals, and, as applicable, their parents, caregivers, or other family members, will be linked to county mental health services, a primary care provider, or other mental health treatment.
(3) Explain how the program will follow up with the referral to support engagement in treatment.
(4) Indicate if the County intends to measure outcomes in addition to those required in Section 3750, subdivision (g).

(i) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include for all programs referenced in subdivisions (c) through (g) of this section an explanation of how the program will be implemented to help Improve Access to Services for Underserved Populations, as required in Section 3735, subdivision (a)(2).
(1) For each program, the County shall indicate the intended setting(s) and why the setting enhances access for specific, designated underserved populations. If the County intends to locate the program in a mental health setting, explain why this choice enhances access to quality services and outcomes for the specific underserved population.

(2) Indicate if the County intends to measure outcomes in addition to those required in Section 3750, subdivision (h) and, if so, what outcome and how will it be measured, including timeframes for measurement.

(j) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include for all programs referenced in subdivisions (c) through (g) of this section an explanation of how the program will use Strategies that are Non-Stigmatizing and Non-Discriminatory, including a description of the specific strategies to be employed and the reasons the County believes they will be successful and meet intended outcomes.

(k) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include for all programs the following information for the fiscal year after the plan is submitted.

(1) Estimated number of children, adults, and seniors to be served in each Prevention program and each Early Intervention program.

(2) The County may also include estimates of the number of individuals who will be reached by Outreach for Increasing Recognition of Early Signs of Mental Illness program or strategy within a program, Suicide Prevention programs/approached, and Stigma and Discrimination Reduction programs/approaches.

(l) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include projected expenditures for each program and strategy funded with Prevention and Early Intervention funds by fiscal year

(1) Projected expenditures shall be broken down by the following sources of funding:

(A) Estimated total mental health expenditures

(B) Prevention and Early Intervention funds

(C) Medi-Cal Federal Financial Participation

(D) 1991 Realignment

(E) Behavioral Subaccount

(F) Any other funding

(2) The County shall identify each program funded with Prevention and Early Intervention funds as a Prevention program, an Early Intervention program, Outreach for Increasing Recognition of Early Signs of Mental Illness program, Stigma and Discrimination Reduction program/approach, or Suicide Prevention program/approach and shall estimate expected expenditures for each program. If a program includes more than one element, the County shall estimate the percentage of funds dedicated to each element.

(A) The County shall estimate the amount of Prevention and Early Intervention funds for Administration of the Prevention and Early Intervention Component.

(m) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include the previous fiscal years' unexpended Prevention and Early

Intervention funds and the amount of those funds which will be used to pay for the programs listed in the Annual Update and/or Three-year Program and Expenditure Plan.

(n) The Prevention and Early Intervention Component of the Three-Year Program and Expenditure Plan and Annual Update shall include an estimate of the amount of Prevention and Early Intervention funds voluntarily assigned by the County to California Mental Health Services Authority or any other organization in which counties are acting jointly.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code.

Adopt Section 3755.010 as follows:

Section 3755.010. Prevention and Early Intervention Program Change Report.

(a) If the County determines a need to make a substantial change to a program, strategy, or target population as described in Section 3745, the County shall in the next Three-Year Program and Expenditure Plan or Annual Update, whichever is closest in time to the planned change, include the following information:
   (1) A brief summary of the program as initially set forth in the originally adopted Three-Year Program and Expenditure Plan or Annual Update.
   (2) A description of the change including the resulting changes in the intended outcomes and the planned evaluation.
   (3) Explanation for the change including, stakeholder involvement in the decision and, if any, evaluation data supporting the change.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5840 and 5847, Welfare and Institutions Code.