

**APPENDIX A1**

**Previous Research Efforts Around MHSA**

Organization(s)	Year	Research Questions	Variables Analyzed	Method	Who Participated	Article Title*
California Department of Mental Health	2007	How have state level planning processes in early phases of CSS implementation gone?	Vision, values, goals; planning process, county plans, impact & concerns, lessons learned	survey, interviews	233 surveyed, interviews: 27 stakeholders, 7 DMH staff, 8 consumers, family, and cultural competence experts, 7 county representatives	Mental Health Service Act Implementation Study: Phase 1
California Department of Mental Health	2007	How have local level planning and early implementation of CSS gone?	Planning, general implementation, FSPs & system development efforts, special program areas	review of county plans and subsequent documents, interviews	interviews in 7 counties: county staff and stakeholders	Mental Health Service Act Implementation Study: Phase 2
UC Berkeley, Petris Center & California Institute for Mental Health	2007	What were the structural and social conditions in county mental health departments before MHSA (fiscal year 03/04)?	Budget/expenditures, staffing patterns, organizational structure, experience with innovative service model, information technology, relationships with mental health boards	Survey	County Mental Health Directors and staff from 44 counties	California on the Eve of Mental Health Reform
California Department of Mental Health	2008	What have been the successes & challenges of implementation at the local level?	status, successes, challenges	site visits (observation, interviews), surveys	surveys from 7 counties: consumers and family member employees, MHSA and other mental health staff	Mental Health Service Act Implementation Study: Community Services & Support Successes and Challenges
UC Berkeley, Petris Center	2008	What is the effect of consumer-provided services on recovery culture and conditions for recovery?	Effect of consumer-operated programs & consumer staff employment on culture of recovery and conditions of hope, empowerment, and connection	Focus groups	Consumers: 12 groups with five per group	MHSA & System Transformation Toward Recovery: Voices of Consumers

\*See full cite in Appendix

UC Berkeley, Petris Center & School of Welfare	2008	What are common themes and innovative approaches taken by counties in plans to use MHSA funds?	Consistencies and inconsistencies between counties in planning; innovations in approaches to recovery-oriented services, involvement of consumers and family in service planning and delivery, and establishing community partnerships	Content analysis of county 3-year plans	12 counties	Transformation of the California Mental Health System: Stakeholder-Driven Planning as a Transformational Activity
UC Davis	2008	What are the principles of community engagement for underserved groups? What were lessons learned from the process? What input did community leaders and members supply?	Needs, priorities, community assets & views of underserved groups on the Prevention and Early Intervention component of MHSA	Key informant interviews, focus groups	Community leaders, liasons, and members of underserved groups	Building Partnerships: Key Considerations When Engaging Underserved Communities Under the MHSA
UC Berkeley, Petris Center & Cleveland State University	2009	What are the conditions that foster recovery orientation?	Effects of age, education, organizational culture, leadership style, and size of budget on recovery orientation	Interviews with a range of positions at county mental health department and affiliates	12 counties, 307 interviews	What Predicts Recovery Orientation in County Departments of Mental Health? A Pilot Study
University of Southern California, Los Angeles County Department of Mental Health	2009	What are the determinants of how LAC DMH develops and implements MHSA clinical policy over time?	fiscal, clinical, political, historical determinants	Analyze historical documents, semi-structured interviews, focus groups	executive management, district chiefs, staff, union representatives, client and family advocates, and California Mental Health Directors Association	A Mixed Methods Approach to Assessing How System Change Impacts Clinics and Consumers in Public Mental Health

\*See full cite in Appendix

UC Los Angeles, University of Southern California, Los Angeles County Department of Mental Health	2009	How and why do providers' beliefs, attitudes, and practices change over time? Do FSP providers differ in their recovery orientation and competencies relative to non-FSP providers? Does MHSA clinic funding affect recovery competencies/orientation for providers not in FSPs?	Consistency of implemented practices with principles of recovery; attitudes towards illness, beliefs about the impact of illness, chronicity, client understanding and control of illness, causes of illness, impact of treatment; clinic culture, structure, climate, work attitudes	Ethnographic observation, semi-structured provider interviews, observation of clinician-client visits, provider self-administered surveys, administrative data from LAC DMH	3 MHSA Clinics, 2 Non-MHSA Clinics; 50 providers interviewed 6 times every 6 months, surveys n=377 3 rounds every 12 months	A Mixed Methods Approach to Assessing How System Change Impacts Clinics and Consumers in Public Mental Health
UC Los Angeles, University of Southern California, Los Angeles County Department of Mental Health	2009	How and why do clients' experiences of care change? How effective are FSPs relative to usual care in MHSA-funded clinics? Does MHSA funding result in worse outcomes for usual-care clients in MHSA-funded clinics?	Matched by: high service utilization, homelessness, jail, diagnosis, age, gender, ethnicity; comprehensive measure of functioning, perceptions of consistency of practices with recovery principles, attitudes toward illness, living situation, work functioning, quality of life, acculturation, and ethnic identity	Ethnographic observation, semi-structured client interviews, client self-administered surveys, administrative data from LAC DMH	50 clients interviewed 6 times every 6 months, surveys n=616 every 6 months over 3 years	A Mixed Methods Approach to Assessing How System Change Impacts Clinics and Consumers in Public Mental Health
California Mental Health Directors Association	2010	How is the MHSA getting the results the voters intended and changing lives and communities despite tough fiscal times?	Reducing homelessness, reducing incarceration, reducing school failure, reducing the removal of children from their homes, reducing hospitalization, cost savings from FSPs, suicide prevention activities, workforce, education, and training, increasing cultural competency, reducing disparities, improving access and appropriateness of services to veterans	description of FSP statistics	county FSP programs	The Mental Health Services Act: Changing Lives Investing in Communities

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National Alliance for the Mentally Ill	2010	How has MHSAs impacted access to and quality of services by county? What are the characteristics of counties with better and worse access and quality?	Impact of MHSAs on access to and quality of public mental health services in your area	Survey	87 respondents, 36 counties	NAMI CA Survey Results: Impact of the MHSAs through April, 2010
UC Berkeley, Petris Center	2010	How much and where did counties budget for recovery-oriented programs?	Budget allocations for recovery-oriented programs targeted to different age groups	Analysis of county CSS program and expenditure plans and annual updates	40 counties	What Does It Take? California County Funding Requests for Recovery-Oriented Full Service Part
UC Berkeley, Petris Center	2010	Do consumers in FSPs have higher satisfaction with services and better outcomes than consumers receiving usual care?	Perception of outcomes of services, perception of functioning, perception of social connectedness, perception of quality and appropriateness of services, perception of participation in treatment and planning, perception of access, satisfaction with public mental health services, self-reports of arrests, age, gender, race/ethnicity, psychiatric diagnosis	Analysis of 3 years of Consumer Perception Survey data matched to DCR & CSI databases	43 counties, FSP clients	A Comparison of Satisfaction, Services Characteristics and Outcomes in the Full Service Partnership Programs Relative to Usual Care
UC Berkeley, Petris Center	2010	Did FSP consumers make positive changes in their housing situation? How did this differ by gender & psychiatric diagnosis?	Independent living, homeless, shelter, supervised residential, medical hospital, psychiatric hospital, licensed residential, long-term care, and jail; gender, psychiatric diagnosis	Analysis of DCR data & CSI	43 counties, FSP clients	An Analysis of Transitions Across and Stays Within Residency Settings for Full Service Partnership Clients

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UC Berkeley, Petris Center	2010	What proportion of FSP consumers are living independently? How does this differ by demographics and psychiatric diagnosis?	Independent living, age, ethnicity, gender, and psychiatric diagnosis	Analysis of DCR data & CSI	43 counties, FSP clients	The Impact of the Full Service Partnership Programs on Independent Living: A Markov Analysis of Residential Transitions
UC Berkeley, Petris Center	2010	How does FSP participation impact the need for emergency interventions and involuntary hospitalizations? What conditions influence the likelihood of needing these services?	Emergency room services, crisis stabilization, other emergency services, involuntary admission to psychiatric facility, length of tenure in FSP program, psychiatric diagnosis, residential status, conservatorship	Analysis of Short-Doyle/Medi-Cal files & DCR data	43 counties, FSP clients	The Impact of the Mental Health Services Act on Emergency Interventions and Involuntary Hospitalizations
UC Berkeley, Petris Center	2010	What factors influence the choice of employment as a recovery goal and employment status of consumers in FSPs?	Recovery goals and employment status compared by age, gender, educational background and current involvement in education, psychiatric diagnosis, residential status, financial support, legal system involvement, substance abuse status, emergency interventions, months in FSP program	Analysis of DCR data & CSI	43 counties, FSP clients	The Employment of Consumers with Serious Mental Illness
UC Berkeley, Petris Center	2010	What factors influence the choice of education as a recovery goal and the likelihood of entering an educational program?	Recovery goals and enrollment in educational program compared by age, gender, educational background, psychiatric diagnosis, residential status, financial support, legal system involvement, substance abuse status, emergency interventions, months in FSP program	Analysis of DCR data & CSI	43 counties, FSP clients	An Analysis of Characteristics Associated with Choosing Education as a Recovery Goal and Beginning an Educational Program in Full Service Partnerships

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