



HEALTH AND HUMAN SERVICES AGENCY BEHAVIORAL HEALTH & RECOVERY SERVICES



POLICY AND PROCEDURE

Service Area: Mendocino County Behavioral Health and Recovery Services

Subject: Mental Health Services Act Innovation

Subject Matter
Expert:

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POLICY:

Mendocino County Health and Human Services Agency (HHSA) Behavioral Health and Recovery Services (BHRS) will support programs funded through the Mental Health Services Act (MHSA), also known as Proposition 63, which will be conducted in accordance with the California Department of Health Care Services guidelines and regulations for Mental Health Services Act Programs, Mental Health Services Oversight and Accountability Commission (MHSOAC), as well as all State and County guidelines that pertain to MHSA programs. Innovation (INN) Programs will meet Innovation Plan criteria and will be outlined in the Mendocino County MHSA Three-Year Program and Expenditure Plan (and Annual Plan Updates). Innovation programs are designed to prevent mental illnesses from becoming severe and disabling. Innovation funding for programs must be identified in the Three-Year Program and Expenditure Plan, and the plan must be developed with MHSA Stakeholder involvement through the Community Program Planning (CPP) Process.

Definitions

Community Program Planning (CPP) Process: The CPP Process is a process defined by California Codes of Regulations toward the development and review of MHSA

programs. Community Planning Process utilizes community collaboration through clients, client family members, agencies, organizations, and other community members who work together to share information and resources in order to fulfill a shared vision and goals. The process is utilized to identify community issues related to mental illness resulting from lack of community services and supports, to identify issues related to implementation of Mental Health Services Act programs, to analyze the mental health needs in the community, and to identify and re-evaluate priorities and strategies to meet mental health needs. MHSA providers are expected to participate in the MHSA Community Program Planning processes.

Stakeholder: Stakeholders are defined by the Department of Health Care Services (DHCS) and the Mental Health Services Oversight and Accountability Commission (MHSOAC) as individuals or entities with an interest in mental health services in the State of California including but not limited to: individuals with serious mental illness, clients of MHSA programs, providers of mental health or related services, family members, educators, representatives of law enforcement, and other agencies or other community members that interact with individuals with mental illness (primary care providers, social service agencies, substance use treatment services, etc.), that have an interest in the mental health issues, consumers or their families, or an interest in Mental Health Services Act programs.

Client: For the purposes of this policy the terms client, consumer, participant, beneficiary, person with serious mental illness, and person with lived experience can be used interchangeably. A client is an individual of any age who is or has received mental health services to represent the individual that is receiving services through an MHSA program.

Innovative Project/Program: Projects or programs that Mendocino County MHSA designs and implements for a defined period of time to test and evaluate new practices in mental health services and supports.

PROCEDURE:

1. **Innovation Project Development:** The Mendocino County MHSA oversight team will facilitate stakeholder Community Program Planning (CPP) activities to gather stakeholder input on topics to be considered or under consideration for Mendocino County Innovation Projects. Refer to Policy III.C-10a. Mental Health Services Act Community Program Planning for full CPP processes.
 - a. Innovation programs or projects will be included in the Mental Health Services Act Three-Year Program and Expenditure Plan and Annual Plan Updates.

- b. Innovation programs or project budgets will be consistent with the Revenue and Expenditure Report.

2. Project General Requirements:

- a. Innovation projects must do one of the following:
 - i. Introduce a mental health practice or approach that is new to the overall mental health system, or
 - ii. Make a change from an existing practice in the field of mental health, including but not limited to the application of a different population, or
 - iii. Apply to the mental health system a promising community driven approach that has been successful in non-mental health contexts.
- b. The primary purpose of Innovation projects shall be to:
 - i. Increase access to mental health services to underserved groups as divined in California Code of Regulations Title 9 Section 3200.300.
 - ii. Increase quality of mental health services, including measurable outcomes.
 - iii. Promote interagency and community collaboration related to mental health services, supports, or outcomes.
 - iv. Increase access to mental health services.
- c. Innovative programs will not qualify if they are based on a mental health practice that has already demonstrated effectiveness, unless the project demonstrates that it includes a unique characteristics of the community in which it will be tested.
- d. Innovative projects may assess any aspect of mental health practices, including but not limited to: administrative, organizational, advocacy, training, outreach, capacity building, education efforts, research, services, intervention, prevention, and treatment.
- e. Innovation projects will be time limited. Innovation projects are pilot projects that shall have an end date that is not more than five years from the start date of the project. Time frames will be determined by the complexity of the project.

3. Innovation Projects will be presented before the MHSOAC: Innovation

Projects must receive approval by MHSOAC before funds can be expended.

- a. The innovative project plan must be presented for approval to MHSOAC. The Innovation Plan must include:
 - i. The name of the project.
 - ii. The selected primary purpose of the project.
 - iii. Whether and how the project introduces a new or change to existing mental health practices.

- iv. A description of stakeholder involvement in all phases of the project decision making.
 - v. If applicable, a description of the population to be served including demographic information and the number of clients expected to be served annually.
 - vi. A plan for how to evaluate the effectiveness of the project including, intended outcomes, methods for evaluation, and how the project will determine the effectiveness of the new or changed mental health practice.
 - vii. A plan for how the county will sustain the project, if successful, beyond the innovation pilot project.
 - viii. A plan, if applicable, of how the project will address continuity of services for those receiving services from the innovative pilot after the innovation project period ends.
 - ix. The total length of the innovative project, with description of key milestones and how the time period will allow sufficient time for development, implementation, evaluation, decision making and communication of the results of the project.
 - x. The Expenditure plan including all sources of funding for the project and estimated expenditures for personnel expenditures, operating expenditures, non-recurring expenditures, training and consultant contracts, and other expenditures for each year of the project.
- b. Significant changes to the innovation project must be approved by the MHSOAC through the Innovative Project Change Request Process. Changes include primary purpose, basic practice or approach, changes to expenditures, or changes to time frames. Time frames that need to be adjusted need to be presented to the MHSOAC within 30 days of the county decision.
 - c. Projects that need to be terminated will include meaningful stakeholder involvement in the decision to terminate. The MHSOAC will be notified within 30 days of the decision, with the reason for the decision. Termination may occur without stakeholder involvement due to unforeseen legal, ethical, or risk related concerns.

4. Innovation Project Reports and Data collection:

- a. Annual Revenue and Expenditure Report (ARER): The MHSOAC ARER will include the total dollar amount of Innovative Project funds expended during the reporting period on each innovative project. The ARER will also include other funding expended on the project including Medi-Cal Federal Financial Participation, 1991 Realignment, Behavioral Health Subaccount, or other funding. The ARER shall be submitted to

Department of Health Care Services annually, and shall be posted to the County Website within 30 days of submission to the state.

- b. Annual Innovative Project Report: An annual Innovative Project report is due to the Oversight and Accountability commission by December 31st following the end of the fiscal year the report covers. The report shall not include personally identifiable information. The report shall include:
- i. Name of the Project.
 - ii. Whether and what changes were made to the project during the reporting period and reasons for the changes.
 - iii. Available evaluation data, including outcomes of the project and information about which elements of the project are contributing to outcomes.
 - iv. Program information collected during the reporting period, including when applicable:
 1. Number of participants served.
 2. Age of participants served (0-15, 16-25, 26-59, 60+, Decline to State).
 3. Race (American Indian/Alaskan Native, Asian, Black/African American, Native Hawaiian/Pacific Islander, White, Other, More Than One Race, Decline to State).
 4. Ethnicity (Hispanic/Latino, Non-Hispanic/Latino, More Than One Ethnicity, Decline to State).
 - a. Hispanic/Latino sub categories (Caribbean, Central American, Mexican/Mexican American/Chicano, Puerto Rican, South American, Other, Decline to State).
 - b. Non-Hispanic/Non-Latino sub categories (African, Asian Indian/South Asian, Cambodian, Chinese, Eastern European, European, Filipino, Japanese, Korean, Middle Eastern, Vietnamese, Other, Decline to State).
 5. Primary Language used.
 6. Sexual Orientation (Gay/Lesbian, Heterosexual, Bisexual, Questioning, Queer, Another Sexual Orientation, Decline to State).
 7. Disability, defined as physical, mental impairment, or medical condition lasting at least six (6) months that also substantially limits a major life activity and is not the result of a severe mental illness (Seeing, Hearing/understanding speech, Other, Physical, Chronic Health Condition, Mental Domain but not mental illness, Other, No Disability, Decline to State).

8. Gender Assigned at Birth (Male, Female, Decline to State).
 9. Current Gender Identity (Male, Female, Transgender, Genderqueer, Questioning, Another Gender Identity, Decline to State).
 10. Any other project relevant data.
- c. Final Innovative Project Report: Upon completion of an Innovative Project, Mendocino County will submit a final report within six (6) months of completion of the project. The report shall include:
- i. Name of the project.
 - ii. Brief summary of the priority issue or aspect of the mental health system being tested.
 - iii. Description of changes to the project over the course of the project.
 - iv. Program information collected during the reporting period.
 - v. Evaluation results including a description of the evaluation methodologies, outcomes of the innovative project, any variation in outcomes based on demographics of participants if applicable, assessments of which elements of the project were successful, explanation of how the evaluation was culturally competent, and explanation of how stakeholders contributed to the evaluation.
 - vi. Whether and how the county will continue the project, including the source of ongoing funding and contributing factors to the decision.
 - vii. Whether the innovative project achieved it's intended outcome, and a summary of what was learned through the project.
 - viii. Description of how the county disseminated the results of the project to stakeholders.
 - ix. Any additional relevant data that would contribute to the learning of other counties.

- 5. Innovation Projects will be evaluated for sustainability:** Innovative Projects shall have a plan about how to sustain the project if successful.
- 6. Innovation Project Service continuity:** Innovative Projects shall have a plan about how to provide continuity of services for individuals that receive services from the innovative pilot (where applicable) at the end of the pilot period.
- 7. Innovation Project Evaluation and Result Reports:** Innovative projects shall be evaluated for feasibility and success of the project. Outcomes shall be selected by the project that are relevant to the improvement being tested and the primary purpose of the innovation purpose. The evaluation shall assess the impact of the tested project compared to established practices in the field of mental health. The evaluation shall use qualitative and/or quantitative evaluation methods to determine successful practices. The evaluation and analysis shall be

culturally competent and include meaningful involvement by diverse community stakeholders.

REFERENCES:

CCR, Title 9, Chapter 14, Sections 3200.300, 3320(a), 3580.020(a)(6), 3905, 3910, 3910.010, 3925, 3930

Welfare and Institution Code Sections 3580, 5830, 5845 (d)(6), 5846, 3510, 5847, 5848, 5892, 5898

ATTACHMENTS:

None.