

FINAL
Mental Health Services Act
Prevention and Early Intervention

Placer County's Executive Summary of the
Mental Health Services Oversight and
Accountability Commission Funding Criteria



I. Background

In November of 2004, California voters approved proposition 63, the Mental Health Services Act, to provide funds to transform the way public mental health services are provided. The goal of the Mental Health Services Act is to create programs that help severely mentally ill persons experience a quality of life that enables them to live, work, learn, and participate fully in their community. MHSA funds will be distributed to counties through six (6) funding plans.

The summary outlined in this document was created by Placer County to help give the community a brief overview of the MHSA Prevention and Early Intervention planning process currently happening at the State level. The following summary gives a brief overview of the criteria being established by a State commission called the Mental Health Services Oversight and Accountability Commission (MHSOAC). To read the full MHSOAC Prevention and Early Intervention Funding Criteria document, please go to the State MHSA website at: <http://www.dmh.cahwnet.gov/mhsa>

About the Campaign for Community Wellness

The Campaign for Community Wellness is a Placer County-based effort to coordinate and leverage key initiatives of the Mental Health Services Act (MHSA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) programs and funding. The goals of the Campaign are to transform the mental health system in Placer County using innovative, collaborative, culturally competent and consumer-guided approaches with the end result being to reduce stigma and embrace recovery. Key components of the Campaign are to engage consumers in the planning process and reaching underserved segments of the



community with programs including: transition-age youth (18 years and above), Latino and Native Americans.

Funding Sources

Initially the Campaign will integrate the overlapping goals of the Mental Health Services Act (MHSA) funding of \$2.4 million per year and Substance Abuse and Mental Health Services Administration (SAMHSA) funding of \$1.2 million per year. Future phases will align the goals of other funding sources and activities.

Leadership

The Campaign is led by a steering committee comprised of consumers, family members, private providers, community members, coalitions, community based organizations, faith-based groups, Native American and Latino advocates. Placer County System of Care staff serves in a non-voting, support role to this Committee.

II. Prevention and Early Intervention Vision Statement

At the State level (MHSOAC) the following vision statement for the Prevention and Early Intervention MHSA program was created: All Californians share responsibility for promoting strong mental health and resiliency among individuals in their many diverse communities and for supporting individuals in accessing mental health services without fear of disapproval or discrimination.

Prevention and early intervention approaches are tools for empowerment and social justice that emphasize holistic and integrated approaches to mental health.

III. Guiding Principles for Prevention and Early Intervention Programs

- Transformational Strategies and Actions
- Leveraging resources
- Reducing of Disparities
- Reducing Stigma
- Reducing Discrimination
- Recognizing early signs
- Integrating and coordinating systems (linking with non-traditional mental health players)



- Focusing on outcomes and effectiveness
- Applying optimal points of investment (those points of intervention that have the highest probability to divert negative outcomes, and/or generate cost savings)
- Having user-friendly plans
- Using non-traditional mental health settings
 - Community settings with demonstrated track records of serving ethnically diverse and traditionally underserved populations such as:
 - Schools, early childhood settings, primary health care systems;
- Being distinct from Community Services and Supports
 - Showing nexus of early intervention and treatment

IV. Draft Funding Information

A. Areas of Funding:

- Prevention of the development of serious emotional disorders and mental illness. Focuses interventions and programs on individuals across the life span prior to the onset of a serious emotional or behavioral disorder or mental illness.

B. Key strategic focus areas (5) based on community mental health needs:

- Disparities in Access to Mental Health Services
- Psycho-Social Impact of Trauma
- At-Risk Children, Youth and Young Adults
- Stigma and Discrimination
- Suicide Risk

C. Target Populations:

- Priority Age
 - All age groups
 - Minimum of 51% dedicated to those between 0 and 25 years of age.
- Underserved cultural populations
- Individuals experiencing the onset of serious psychiatric illness
- Children/Youth
 - In Stressed Families,
 - At Risk of School Failure or,
 - At Risk of Juvenile Justice Involvement



- Trauma exposed (includes: grief, loss and isolation)

D. Partners:

Partnerships and collaborations are encouraged with community-based organizations such as:

- Schools
- Primary Care
- Faith-based
- Healers
- Early childhood education
- Organizations who have established, or show capacity to establish, relationships with at-risk populations

E. Priority Long-Term Outcomes are to Reduce:

- School failure.
- Homelessness
- Prolonged suffering
- Unemployment
- Incarceration
- Remove of children from homes
- Suicide

F. Short-term Goals, Evaluation Methods, Accountability Reporting

- Plan must provide short-term goals with accountability measures
- 5-8% of County PEI funds to be spent on PEI evaluation
 - Out of MHSA Administrative Budget (not PEI)

G. Statewide Support

These Statewide funds are in addition to the basic PEI funds to help supplement in key areas.

- Suicide prevention - \$14M
- Stigma Discrimination and Reduction - \$20M
- Project training, technical assistance and capacity building -\$12M
- Ethnically and Culturally Specific Programs and Interventions - \$15M

H. County Planning Process

- The process that will be used will replicate the logic model used for the first MHSA component, the Community Services and Supports Program. Key components of the planning process will include outreach to consumers, families and identified priority populations. The Placer County



process is expected to take several months and involve a wide range of stakeholder input opportunities. The Steering Committee will help design the process around the following structure:

- Identify priority community needs, populations, strategies and outcomes for the prevention and early intervention programs;
- Ensure that the new prevention and intervention program does not duplicate the efforts in the Community Services and Supports program.

V. State Prevention & Early Intervention Planning Timeline

Task	Date
Draft of local plan guidelines to general stakeholders (State level)	June 2007
Stakeholder review of draft guidelines (2 workshops) (State level)	June 2007
Release information notice – planning funding to Counties	July 2007
Release information notice– Final State PEI guidelines and funding released to Counties	August 2007
County plan submission and review	November 2007 – Ongoing
County plan approval/contract amendment	January - Ongoing

VI. Contact Information

For more information about the Campaign for Community Wellness included related documents to MHSA, please go to:
www.campaignforcommunitywellness.org

For further questions, please contact Michele Zavoras at 530-889-7244.

We welcome your comments and input.