



Legislation Details (With Text)

File #: 2020-1317
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File created: 12/17/2020 **In control:** Health Services
On agenda: 2/23/2021 **Final action:**
Title: Mental Health Services Act Innovation Projects
Sponsors: Health Services
Indexes:
Attachments: 1. Summary Report, 2. Attachment 1 - Collaborative Care Enhanced Recovery Project, 3. Attachment 2 - Instructions Not Included, 4. Attachment 3 - New Parent Talk-Link-Confirm, 5. Attachment 4 - Nuestra Cultura Cura Social Innovation Lab

Date	Ver.	Action By	Action	Result
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To: Board of Supervisors of Sonoma County
Department or Agency Name(s): Department of Health Services
Staff Name and Phone Number: Bill Carter, 565-5157
Vote Requirement: Majority
Supervisory District(s): Countywide

Title:
Mental Health Services Act Innovation Projects

Recommended Action:

Approve the following Mental Health Services Act Innovation project proposals as required by the Mental Health Services Oversight and Accountability Commission: 1) Collaborative Care Enhanced Recovery Project; 2) Instructions Not Included; 3) New Parent Talk-Link-Confirm; and 4) Nuestra Cultura Cura Social Innovation Lab.

Executive Summary:

In November 2004, California voters approved Proposition 63, the Mental Health Services Act (MHSA). The Act imposes a one percent income tax on personal income in excess of \$1 million. Much of the funding is provided to counties to fund mental health programs consistent with their local plans. The Act states that five percent of the total funding for each county shall be utilized for Innovative programs.

Innovative programs are defined as novel, creative, and/or ingenious mental health practices or approaches that are expected to contribute to learning, which are developed within communities through a process that is inclusive and representative of unserved and underserved individuals. The Innovation component allows counties the opportunity to try out new approaches that can inform current and future mental health practices. Innovation projects are subject to one-time funding with time limitations to assess and evaluate their efficacy.

Prior to spending Innovation funds, a county must obtain approval from the Mental Health Services Oversight and Accountability Commission (MHSOAC). The MHSOAC requires that counties must conduct a 30-day local review process as well as holding a public hearing by the local mental health board. Counties must present and

submit documentation that their county Board of Supervisors has also approved the projects and the associating expenditures of Innovation component funds. This item requests approval of the following Mental Health Services Act Innovation project proposals: 1) Collaborative Care Enhanced Recovery Project; 2) Instructions Not Included; 3) New Parent Talk-Link-Confirm; and 4) Nuestra Cultura Cura Social Innovation Lab.

Discussion:

The Mental Health Services Act’s Innovation component provides the opportunity to develop and test new, unproven mental health models with the potential to become tomorrow’s best practices. The primary purpose of Innovation projects is to achieve one or more of the following:

- Increase access to mental health services to underserved groups
- Increase the quality of mental health services, including measurable outcomes
- Promote interagency and community collaboration related to mental health services or supports or outcomes
- Increase access to mental health services, including but not limited to, services provided through permanent supportive housing

Innovation projects may address issues faced by children, transition-age youth, adults, older adults, families (self-defined), neighborhoods, tribal and other communities, counties, multiple counties, or regions. The project may initiate, support and expand collaboration and linkages, especially connections between systems, organizations and other practitioners not traditionally defined as a part of mental health care. The project may influence individuals across all life stages and all age groups, including multi-generational practices/approaches.

The Department of Health Services Behavioral Health Division’s last Innovation program was the Mobile Support Team (MST) with Innovation funding ending in June 2018. During fiscal years 2018-2019 and 2019-2020, the Behavioral Health Division did not have an active Innovation program and the Innovation funds remained unspent. If counties do not commit Innovation funds to an approved project within three years of receiving the funds from the State, the funds can revert back to the State (9 CCR § 3900-3910.015). The approval of the proposals below by the MHSOAC will ensure the funds are not reverted to the State. The Behavioral Health Division initiated the Community Program Planning Process to develop new Innovation projects in 2019 for 2020 and 2021 implementation. One of the paths of this process was Community Solicitation and Application for Innovation Projects. The Behavioral Health Division worked with diverse stakeholders from the MHSA Steering Committee to develop a process that successfully solicited Innovation project applications from the community. A total of sixteen Innovation applications were received, reviewed and scored and the top five scoring applications were selected. One of the finalists, the Early Psychosis Learning Health Care Network project, was approved by the MHSOAC in June 2020. The remaining four finalists are listed below and the proposals are provided as attachments.

1. Collaborative Care Enhanced Recovery Project (CCERP) (\$998,558) - The Human Services Department’s Adult and Aging Division will work with Santa Rosa Community Health to augment an established short-term intervention, the Collaborative Care Model, with longer-term, in-home case management, resulting in positive and more equitable impacts on mental health, physical health, and quality of life for older adults with depression.
2. Instructions Not Included (INI) (\$689,860) - Early Learning Institute (ELI) will implement the first program in Sonoma County to target new fathers in a mental health focused home visiting intervention as well as develop a standardized screening tool for male postpartum depression.
3. New Parent Talk-Link-Confirm (TLC) (\$394,586) - First 5 Sonoma County will employ a gatekeeper

training model similar to QPR (Question, Persuade, Refer) to intervene early with new parent mental health issues, the unaddressed progression of more serious depression and/or suicide, the exposure of infant Adverse Childhood Experiences (ACEs) resulting from parental depression and the associated disruption of optimal infant/toddler brain development.

4. Nuestra Cultura Cura Social Innovation Lab (\$736,584) - On the Move will collaborate with Humanidad Therapy and Education Services, Latino Service Providers, Raizes Collective, and North Bay Organizing Project to build a deeper understanding of the root causes of the unique mental health challenges faced by the Latinx community of Sonoma County, as well as prototype experimental, culturally-relevant interventions based on art, wellness, spirituality, and social connections that will reduce stigma around mental health among Latinos and increase cultural protective factors that lead to improved mental health.

The four Innovation proposals have undergone a 30-day local review process as well as a public hearing during the December 15, 2020 Sonoma County Mental Health Board meeting. This item recommends Board approval of the four project proposals. A summary and analysis of substantive recommendations from this process has been included in the final proposals.

Each Innovation project includes specific learning goals and an evaluation plan that is based on measuring the learning goals with the aim of contributing to the expansion of effective practices in the mental health system. The learning goals clearly outline what project wants to learn or better understand and how the learning goals relate to the key elements/approaches that are innovative, changed or adapted in the project.

All of the projects have defined the evaluation approach that will be used to determine whether the goal or objective was met. This includes details about how the goal(s) will be measured and data collection methods. The projects also include a distribute plan to communicate the results, newly demonstrated successful practices, and lessons learned from the project.

Prior Board Actions:

On June 9, 2020, the Board adopted the Mental Health Services Act Three-Year Integrated Program and Expenditure Plan for 2020-2023 and Annual Program Report for 2018-2019, which included summaries of the four Innovation proposals detailed in this item.

FISCAL SUMMARY

Expenditures	FY 20-21 Adopted	FY 21-22 Projected	FY 22-23 Projected
Budgeted Expenses	0	1,087,608	949,917
Additional Appropriation Requested			
Total Expenditures	0	1,087,608	949,917
Funding Sources			
General Fund/WA GF			
State/Federal		1,087,608	949,917
Fees/Other			
Use of Fund Balance			
Contingencies			
Total Sources	0	1,087,608	949,917

Narrative Explanation of Fiscal Impacts:

A total of \$2,037,525 in MHSAs Innovation funds will be used to fund the four Innovation projects for the next two years. The duration of the projects is three years, and a total of \$2,705,481 MHSAs Innovation funds will be spent over the three years. The MHSAs Innovation funds can only be used for Mental Health Services Oversight and Accountability Commission (MHSOAC) approved Innovation Projects. If the BOS approves this item, then the Innovation proposals will be sent to the MHSOAC for approval. DHS Behavioral Health Division has \$822,000 in MHSAs Innovation dollars that are subject to reversion to the state on June 30, 2021. In order to protect these funds and avoid reversion, the project requires Board approval that will allow the Department to submit the projects to the MHSOAC. MHSOAC approval of the projects, on or prior to June 30, 2021, preserves the funds for Sonoma County.

In addition to the DHS MHSAs Innovation funds, other funds are going to be provided for the projects from three of the organizations. Total contribution over the next two years include: Human Services Department is contributing \$115,328 in HSD Realignment. First 5 is contributing \$55,334 from Proposition 10 funds. Early Learning Institute is contributing \$200,000 from Chiat Foundation grant and \$70,000 from a pledge donation from Morton & Basset.

Staffing Impacts:			
Position Title (Payroll Classification)	Monthly Salary Range (A-I Step)	Additions (Number)	Deletions (Number)

Narrative Explanation of Staffing Impacts (If Required):

N/A

Attachments:

- Attachment 1 - Collaborative Care Enhanced Recovery Project
- Attachment 2 - Instructions Not Included
- Attachment 3 - New Parent Talk-Link-Confirm
- Attachment 4 - Nuestra Cultura Cura Social Innovation Lab

Related Items "On File" with the Clerk of the Board:

None