

Prop 63 Mental Health Services Oversight and Accountability Commission (MHSOAC) Evaluation Fact Sheet ¹

EVALUATION OF LOCAL MHSA COMMUNITY PROGRAM PLANNING (CPP) PROCESSES

Background: In order to provide community-based mental health services that are client-centered, family-focused, and in line with the unique needs of diverse local communities, the Mental Health Services Act (MHSA) relies upon high levels of local community involvement and planning by a wide array of stakeholders. Ongoing stakeholder participation in the process of planning for mental health services at the local county level is mandated. Each county must engage in a Community Program Planning (CPP) process to ensure continuous engagement with the community and improve the likelihood that all community members and stakeholder groups have an opportunity to contribute to MHSA efforts and provide feedback on an ongoing basis.

Primary Purpose: Using a participatory research approach, this project evaluated the impact and effectiveness of CPP processes used by counties throughout the state to make plans for how to spend fiscal year (FY) 2012/13 MHSA funds. The evaluators aimed to describe local planning processes and identify specific activities that could be seen as promising CPP practices. The ultimate goal was to identify CPP practices that could be used by counties to achieve MHSA goals.

Evaluation Team: Resource Development Associates, Inc. (RDA) served as the lead evaluators. Peers Envisioning and Engaging in Recovery Services (PEERS) and California Association of Mental Health Peer Run Organizations (CAMHPRO) (collectively forming the “Client Stakeholder Project” or CSP) collaborated with RDA to develop the methodology, collect data, and analyze patterns and trends in the data.

Methodology: Using a participatory approach by collaborating with clients and other stakeholders, RDA developed a research design that used a mixed-methods approach. The approach included collection of information from county staff via a web-based survey and key informant interviews, as well as stakeholders via a survey and focus groups. Currently available descriptions of local CPP processes (via Annual Updates) were also reviewed.

Instrument by Participant Type and Response Rate

Instrument/Method	Participant Type	Response Rate
Web-Based Data Request	County Staff	88% (52 out of 59)
Document Review	County Annual Updates	83% (49 out of 59 reviewed)
Key Informant Interview	County MHSA Coordinators	92% (54 out of 59)
Focus Group	Stakeholders	80% (47 out of 59)
Stakeholder Survey (paper and electronic)	Stakeholders	1,549 individual stakeholders

Analysis: Using the collected qualitative and quantitative data, RDA first conducted a descriptive evaluation followed by an outcomes evaluation (described below).

Descriptive Evaluation – Identified the specific processes used by counties during the planning process and organized the data into domains (i.e., input, outreach, participant input, training, and evaluation).

Outcomes Evaluation – Analyzed associations between CPP processes and outcomes using multiple linear regression analyses. Due to the quality and quantity of the data, CPP processes were limited to four broad categories: (1) outreach activities, (2) incentives, (3) stakeholder training, and (4) input activities. Furthermore,

¹ This series of fact sheets provides brief summaries of MHSOAC evaluations of Prop 63 and California’s public, community-based mental health system. The MHSOAC is charged with providing oversight and accountability per the Mental Health Services Act (also known as Prop 63).

outcomes were limited to nine constructs: (1) meeting effectiveness, (2) recovery orientation, (3) participant safety, (4) participant training, (5) perception of contribution, (6) respect of participant opinions and culture, (7) participant satisfaction, (8) participant wellness, and (9) trust in the public mental health system.

Major Findings: The following findings were statistically significant, and are organized by CPP process category (as outlined above):

- **Outreach Activities.** Using social media to reach stakeholders was associated with stakeholders feeling as though they contributed more, feeling safer to participate, having more trust in the public mental health system, and having an increased sense of wellness as a result of participating in the CPP process.
- **Incentives.** Providing stipends/other financial incentives to encourage stakeholder participation was associated with stakeholders feeling more satisfied and that the process was more recovery oriented, as well as a perception of increased sense of wellness as a result of CPP participation.
- **Stakeholder Training.** Providing support for external trainings was associated with stakeholders feeling that CPP meetings were more effective.
- **Input Activities.** Conducting strategy roundtables or other strategizing sessions was associated with stakeholders feeling as if their opinions and culture were less respected.

Promising Principles: Promising CPP principles were identified via two methods: a review of the literature for effective planning practices used in areas outside the mental health field (see Deliverable 4, *Report of Other Public Community Planning Processes*), and an evaluation of local CPP processes used across the state (see Deliverable 5, *Summary Report of Results from Data Analysis/Evaluation*, for results of this evaluation). A full description of each promising principle, along with how each promising principle was identified, can be found in Deliverable 6, *Final Report of Promising CPP Process Practices*.

Promising CPP Principles Identified via Literature Review

Focus on strengths and aspirations
Be strategic
Develop partnerships
Build capacity
Be inclusive
Share responsibility and accountability
Plan for the long haul

Promising CPP Principles Identified via Evaluation

Use MHSAs principles as a foundation to develop and conduct all CPP activities
Leverage existing resources
Plan and prepare for each CPP activity in advance
Be transparent
Make the purpose, expectations, and impacts of stakeholder participation explicit
Train stakeholders to meaningfully participate in CPP activities
Use multiple methods of outreach
Dedicate efforts to increase accessibility

Next Steps: This project resulted in broad principles that may be potentially useful in promoting effective planning and services that lead to positive outcomes. Additional work is needed to more concretely define these principles and how they could and should be implemented by counties. Additional evaluation is needed to identify specific planning practices that may encourage or bring about specific goals, including those that are identified in the MHSAs.

One major limitation identified via the current work was the scarcity of consistent data from all counties focused on local CPP processes and potential outcomes of those processes. This issue limits the conclusions that can be drawn from the results described herein and highlights the need to support routine data collection on local planning processes.

Link to All Documents Referenced in this Fact Sheet:

http://www.mhsoac.ca.gov/Evaluations/Community_Program_Planning.aspx