



Subcommittee on Innovation Teleconference Meeting Summary

Date: Wednesday, April 28, 2021 | Time: 9:00 a.m. – 11:00 a.m.

MHSOAC

1325 J Street, Suite 1700

Sacramento, CA 95814

Committee Members:	Staff:	Other Attendees:
John Boyd, Chair Itai Danovitch, Vice Chair	Toby Ewing Filomena Yeroshek Sharmil Shah	Alfredo Aguirre Hilary Carson Kyle Doran Elia Gallardo Tracy Lacey Emily McKelvey Andrea Wagner

Welcome and Introductions

Commissioner John Boyd, Committee Chair, called the teleconference meeting to order at approximately 9:00 a.m. and welcomed everyone. He reviewed the meeting protocols.

Agenda Item 1: Update on the Innovation Systems Analysis Project

Presenter:

- Kyle Doran, Director, Social Finance

Chair Boyd stated the Commission has partnered with Social Finance to support Innovation and continuous improvement throughout county behavioral health departments in California. The project will allow the Commission to identify and pursue a variety of strategic opportunities to better inform the development, implementation, and assessment of county Innovation plans and to align Commission resources to advance strategic priorities.

Chair Boyd stated the project goals will be accomplished in three phases. Phase I is to identify barriers and highlight successful strategies, which was the focus of the October Subcommittee meeting. He asked the representatives from Social Finance to present an update on the project and to discuss Phase II, which includes potential tools, resources, and processes that could support improved outcomes through Innovation.

Kyle Doran, Director, Social Finance, provided an overview, with a slide presentation, of the project background and objectives and the Mental Health Services Act (MHSA) Coordinator Survey. He stated potential tools, resources, and recommendations that the Commission could leverage to improve the Innovation ecosystem have been grouped into three categories: improve access to resources and knowledge, optimize plan development and review process, and expand and deepen technical assistance.

Emily McKelvey, Associate Director, Social Finance, continued the slide presentation and discussed the findings from the 13-question MHSA Coordinator Survey and how those findings are informing the path forward. She stated MHSA Coordinators are the primary users of many of the potential tools and resources designed to help develop Innovation plans and implement projects. She noted that, although survey data is good, it is not always the best tool for capturing nuanced and detailed qualitative feedback so feedback was gathered from survey respondents in smaller focus groups. That input will be shared in later updates.

Mr. Doran continued the slide presentation and highlighted Innovation case studies and asked Tracy Lacey to provide an update of Solano County's Innovation Project. He noted that a draft example of Solano County's case study is included in the meeting materials.

Tracy Lacey, Senior Mental Health Services Manager-MHSA Coordinator, Solano County Department of Health and Social Services Behavioral Health Division, provided an overview of Solano County's Interdisciplinary Collaboration and Cultural Transformation Model (ICCTM) project. She discussed the learnings that might be helpful for others as an example of what is included within the case study. She stated a core component of this project was the creation of 13 community-driven Quality Improvement (QI) Action Plans that were focused on workforce development, training, and the enhancement of community outreach and awareness efforts.

Mr. Doran continued the slide presentation and discussed next steps of the MHSOAC Innovation Systems Analysis Project.

Discussion

Chair Boyd asked for Subcommittee input on the broader approach presented during the update prior to hearing the second part of the presentation.

Vice Chair Danovitch stated perennial challenges with Innovation plans have been how to evaluate and disseminate learnings. A large part of that is creating evaluation plans that are both feasible and meaningful to the Innovation plan. He asked to what extent county MHSA Coordinators highlighted the methodological challenges around evaluation as one of the things they struggle with, and how to use the application process to support the types of evaluations that will produce the essential learnings.

Mr. Doran stated this is an area that many counties, particularly smaller counties, do not feel they have the resources to engage with. The plan is to include enhanced technical assistance on evaluation as well as a resource guide that aggregates information on evaluation and can point counties to others who have done similar types of evaluations in the past.

Public Comment

Hilary Carson, MHSA Innovations Program Administrator, Ventura County Behavioral Health, stated Ventura County has an evaluation team but, due to tight timelines, they do not have time to access them. Also, contracted evaluators cannot be contacted prior to plan approval. The county is left to determine learning goals for each Innovation plan without help from those subject matter experts. Once the evaluation team is on board, it is much easier for the county because evaluators have access to better tools for measurement.

Executive Director Ewing asked if the tight timelines are more about the period leading up to the reversion deadlines or about the approval process including local planning, local posting requirements, the Board of Supervisors, and the Commission. He stated taking pressure off of the process may be a way that the Commission can help strengthen the development, community engagement, and evaluation pieces that can lead to more multi-county learning through the Innovation component.

Hilary Carson stated Commission staff has helped by allowing counties to be scheduled with their Boards of Supervisors rather than requiring that component to be completed, which shaved at least eight weeks off of the approval process. The speaker stated it is difficult to get agreement on ideas during the community planning process. The community must be on board prior to moving forward with an idea. Also, counties often learn about funding that is left at the end of the fiscal year. By that time, it is late to begin the planning process.

Executive Director Ewing suggested that counties plan in advance rather than waiting until funds accumulate. He suggested pre-planning or pre-spending anticipated funding, even though that funding varies. This will allow more time to work on projects. He asked if it would help mitigate the time pressure on counties for the Commission to create greater clarity about the fuller array of Innovation funds that are available rather than only about the funding that will soon expire.

Hilary Carson stated it would be helpful to counties. The speaker stated an accountant put together a waterfall chart in the past that showed available funding for the following two years. The speaker stated it is also helpful to have approximate figures to present during the community planning process.

Executive Director Ewing asked if it would be helpful for the Commission to consider granting a blanket approval to spend a percentage of funds on planning as a way to strengthen the process.

Hilary Carson stated it would be helpful. The speaker stated it would also help to have some of the evaluation expertise alongside counties during the community planning process and idea development phase. This would help move ideas forward that are based on the needs assessment and will help counties have more robust evaluations. It would also help counties end up with ideas that can be taken from the community planning process and still adapted to what the need is. This is the other disconnect.

Alfredo Aguirre, Director, Behavioral Health Services, San Diego County, stated an example of dedicating resources for planning is the San Diego County Human-Centered Design Project, which will be a case study with this project.

Sharmil Shah, Psy.D., Chief of Program Operations, stated evaluation is a good reason to request planning funds. She encouraged counties to reach out to staff to discuss how planning dollars can support the work.

Dr. Shah stated the state controller office website has all county allocations. Counties can average their funding on this website to better forecast funds for pre-planning.

Presentation, continued

Mr. Doran continued the slide presentation and discussed the potential for using a rubric to assess Innovation plans, initial feedback gathered to date on what the rubric should look like, and next steps. He stated his team will begin to focus on aggregating project findings into an Innovation Action Plan to be shared at a future Subcommittee meeting. He asked for input on key elements to include, how the rubric can be operationalized, and the pros and cons of approaches to the rubric.

Discussion

Vice Chair Danovitch stated reasons the Commission has not been comfortable with approving Innovation projects are whether a project is truly innovative and generalizable and the feasibility and evaluation of the plan. Both of these concerns tie into whether the learnings will be shareable to other counties. He suggested getting feedback from other counties with similar generalizability issues that can learn from the findings of the county doing the Innovation.

Vice Chair Danovitch agreed with the suggestion given during public comment regarding the feasibility and evaluation plan that it would be valuable to have subject matter experts weigh in during the technical assistance process or other mechanism to help validate the evaluation plan.

Vice Chair Danovitch stated a rubric to assess Innovation plans would be invaluable. Having a shared working model whether it is a recommended or required guide would be helpful. He asked about rubrics or models that already exist.

Executive Director Ewing asked if it would be productive to try to get long-term funding to provide framing and facilitation support around the issues that are not unique to counties and where, over time, the Commission can develop expertise such as for the evaluation piece. This would allow the Commission to support more on the front-end development of Innovations without necessarily making decisions about where counties choose to invest.

Public Comment

Hilary Carson stated Executive Director Ewing's comments sounded great. They stated the Full-Service Partnership county project has been beneficial for the county in making larger systems changes. The speaker stated it is difficult to get methods of successful Innovation projects out for other counties to replicate or build off of. The rubric or linking to a template would help counties communicate their ideas to the Commission.

Vice Chair Danovitch asked about other rubrics or frameworks that would be useful.

Executive Director Ewing stated he was not familiar with rubrics in this space. Expertise in subject matter areas would also be needed for the financial, community planning, and

evaluation components. Part of the conversation is recognizing that the Commission staff is trying to develop a level of expertise but is not there yet. It would be wonderful to identify other rubrics and to understand the investment required to do the level of analysis and staffing needed, given the range of topics.

Executive Director Ewing stated rubrics can constrain the perspective that people bring. It is important for the rubric not to become mechanical. He stated the concern that a rubric, for all of its strengths, might also incentivize the counties not to be edgy in their innovations. He stated the need to keep this in mind.

Vice Chair Danovitch agreed and suggested separating a rubric that addresses the purpose or innovativeness of an innovation and the rigor of the work plan to implement and evaluate it. There is a need to standardize and make more vigorous the work plan and evaluation because that is the way to know it can be successful.

Vice Chair Danovitch stated the largest concern is the perception that there is not much to show for past Innovation projects. An effective rubric or framework would help strengthen and make more rigorous what is done once an Innovation project is implemented and would help counties demonstrate the innovativeness of it. There are good working models to review such as the federal funding agencies that drive individuals with innovative ideas to form partnerships, to fill in the methodologic expertise that they require to do innovative work, and to produce an answer that is generalizable and meaningful and worthy of sharing. Those partnerships cause collaborative projects that end up hopefully being more successful in making good their initial objectives. He stated California has the educational resources to support these projects meeting their potential.

Public Comment

Andrea Wagner, Program Manager, Lived Experience, Advocacy, and Diversity (LEAD) Program, California Association of Mental Health Peer-Run Organizations (CAMHPRO), agreed with Hilary Carter's comment about bringing smaller projects forward, even though they are more difficult for counties. It is important to make the process easier to stay true to community input.

Andrea Wagner agreed with Emily McKelvey's comment about how the rubric will partner with the initial framework in the plan. The important piece in the rubric for the consumer perspective is that the process holds true to the initial community input process and that individuals are being served.

Vice Chair Danovitch stated the Commission has a Research and Evaluation Committee made up of individuals with lived experience and subject matter experts in evaluation. He suggested presenting the rubric to the Committee for feedback early in the development process to leverage the expertise consolidated there. He stated it may be a good way to align the overlapping processes in that Committee with this Subcommittee.

Tracy Lacey asked if counties or representatives from counties will be involved in developing the rubric as part of community engagement. Solano County is currently involved in two large multi-county Innovation projects – the Early Psychosis Learning Health Care Network and the ICCTM project. The speaker cautioned that this can be complicated in and of itself. For example, all counties contracted at different times for the

Early Psychosis project so all processes are different. There is another layer of complication that comes in when including multiple counties, including when working with an academic institution to help with evaluation. It can take longer to do the contracting and it causes delays.

Tracy Lacey stated, although sharing learnings and telling the story about what counties have done with Innovation funds have been challenges in the past, the case study project currently underway is a great way to do this. A quick, three- to four-page case study about Innovation plans and projects will help counties share with each other. The speaker stated, when counties were unable to duplicate a successful Innovation project done in another county, they may not pay attention to the Innovation project. Flexibility to apply Innovation funds to different populations and case studies that are quick, easy reads with lessons learned and good strategies is moving in the right direction.

Elia Gallardo, Director of Governmental Affairs, County Behavioral Health Directors Association (CBHDA), asked how the rubric ultimately will interact with the multi-stage approval process that is also being discussed and potentially developed. How they interact with one another will be an important consideration as both things are being developed.

Elia Gallardo stated the CBHDA is interested in the Commission taking a larger role in ensuring that the learnings from Innovation projects are spread, such as highlighting case studies. The speaker suggested engaging in a similar conversation like this one where it is focused on the learnings and how those learnings can be spread. The speaker suggested that the Commission look at historic evaluations and reports that have been produced through the Innovation projects and potentially lifting up collaboratives that facilitate some of those learnings to ensure that those learnings spread in other places.

Hilary Carson suggested including how the learnings can be applied to other counties in the case studies, perhaps at the bottom of each study. Including what is successful, the tools used, and the population targeted provides a blueprint for counties to duplicate with other populations, etc. It provides a stepping stone for how to build on what another county has already done, which is a missing link.

Chair Boyd asked about the timeline to finalize the revised model and to implement or pilot some of the proposed standard work associated with Innovation approvals and development.

Mr. Doran stated the Social Finance team will be developing and making recommendations over the summer.

Dr. Shah stated the importance of including the public and the Commission as a whole in all this work. Recommendations provided by Social Finance will be presented at a Commission meeting for discussion and approval. Next steps for implementation will then be considered.

Executive Director Ewing recognized, in collaboration with the counties and many community organizations, that a fundamental shift has been seen in the Innovation space for the MHS. There was a time when counties could only bring uniquely-designed Innovations for approval. This was not practical and it caused counties not to apply for

Innovation funding. This fundamental shift in the opportunities and possibilities has created a different set of expectations and frustrations.

Executive Director Ewing stated there are things that can be done relatively quickly, such as identifying recommendations, but implementation and the level of change being sought will take time. Commission practices will need to be changed, more staff and more legislative support may be required, and counties may have to change their practices in terms of fiscal reporting.

Adjourn

There being no further business, the meeting was adjourned at approximately 11:00 a.m.