Palo Alto University Evaluation Team

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EVALUATION REPORT
FOR THE
MENTAL HEALTH SERVICES ACT (MHSA)
COMMUNITY PROGRAM PLANNING PROCESS

Informing the FY2021-23 MHSA 3-Year Plan

Prepared by:
Palo Alto University
February 2020
Community Program Planning Process to inform the 2021-2023 3-year plan

3 Sources of Data

- Santa Clara County Consumer Survey (Dec 2019 – Jan 2020)
- Stakeholder Leadership Committee Listening Sessions (Oct 15, 2019)
- 2020 MHSA Forum (Jan 21, 2020)
Survey Respondents (as of 1/28/20): 253

166 excluded due to incomplete responses or failing to identify as a consumer/family member

Final Sample: 87 Consumers & Family Members
Overview of Survey Areas

- Service Utilization and Access
- Culture and Diversity Considerations
- Inclusion of Important Others in Care
- Satisfaction with Care
- Quality of Care
  - Provider Relationships
  - Front Desk Staff
  - Consumer Recovery Service Orientation
  - Referrals
  - Coordinated Care
Consumer Survey

Strong Satisfaction with Behavioral Health Services
Areas of Strength

Positive experiences with mental health providers

Providers’ abilities to include families in consumers’ recovery plans
Recommendations: Potential Areas for Growth

Increase Access to Care

- Inform consumers of the easiest method for accessing care
- Improve coordination between services
- Providers’ discussion of referrals with consumers

Explore consumers’ strong desire for additional & more varied MH interventions / services

- Increase quantity & variety of treatment options
MHSA Forum & Stakeholder Leadership Committee (SLC) Listening Sessions
Children & Family System

Strengths in the quality of care

Examples
- Funding priorities
- Flexible & accessible child/family services
- Service of refugees and children <6 yrs old
- Additional future psychiatric beds
- Student Internship Program (youth recruitment)
- Bill Willson program evaluation work
- Milpitas grassroots work on homelessness
- Mental health stability and rent stability work
Suggested strategies to prevent children & families from “falling through the cracks”

**INNOVATIVE OUTREACH – clients, homeless, & workforce**
- Innovative methods (e.g., social media, movie clips, mental health specialists in schools)
- Decrease access barriers (e.g., stigma, wait times, low awareness about services, unmet daily living needs)
- Reach those at-risk for homelessness
- Engage workforce in high school, college, post-grad school

**EXPAND SCHOOL & HOUSING SERVICES**
- Expand school-related services & staffing (e.g., beyond-school hours; increase staffing in & collaboration w/ schools; improve coordination between school linked services & PEI).
- Reach children/families at risk for homelessness through schools.

**LINKAGES / CONTINUITY OF CARE**
- Increase accessibility by addressing gaps in service linkage points between county systems (improved triage screening, detection, referrals, school collaborations)

**CULTURAL RESPONSIVENESS**
- Ensure culturally-responsive access and intervention (e.g., the working poor, homeless RV families, Latinx, immigrants, refugees, language needs)
Transitional Age Youth

A maturing system of care that needs specific attention to the needs of TAY.
## TAY System: Example Areas of Strength

<table>
<thead>
<tr>
<th>Suicide prevention programming</th>
<th>Trauma-informed care</th>
<th>Inclusivity of the community</th>
<th>Consideration of the multi-dimensionality of TAY needs</th>
<th>Gatekeeper trainings</th>
</tr>
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<td>Full Service Partnership (FSP) programs</td>
<td>Efforts to integrate trauma-informed services</td>
<td>Flex Funds</td>
<td>Communicating through routine newsletters</td>
<td>Mobile Crisis Hotline</td>
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<td>Institute for Local Government</td>
<td>Culturally-responsive services across the lifespan</td>
<td>Easily accessible self-referral process for services</td>
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Overall Recommendations for the TAY system

**Budget/ Data Structures**

- Improve data systems for program evaluation
- Continue to ensure budget transparency / RFPs for TAY programming
## Overall Recommendations for the TAY system

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Overall Recommendations for the TAY system

- Trauma-informed care across the TAY system
- Integration of family members into youth care
- Train “service connectors”
- TAY-specific housing & emergency shelters
- Increased lengths of rapid TAY housing
- Assessment tools tailored to TAY
- Gaps in daily living services: Life-skill and vocational services
- Greater financial assistance (e.g. universal basic income)
- Needs of youth outside of school system

Budget/ Data Structures

Improve data systems for program evaluation
Continue to ensure budget transparency / RFPs for TAY programming
## Overall Recommendations for the TAY system

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<td>Further develop services tailored to TAY-specific needs.</td>
<td>Definitional clarity around who TAY are, &amp; what their specific services look like.</td>
<td>Increase workforce recruitment, education, and training from TAY communities and for TAY-specific issues</td>
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Adults & Older Adults (AOA)

A strong system with needs for greater attention to culture/diversity, access, collaboration, & intervention options.
Overall Recommendations for the AOA system

Interventions Options

Increase the diversity of intervention options
## Overall Recommendations for the AOA system

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**Culture & Diversity:** Many vulnerable populations identified. Specific outreach, staffing, and programming needed.
Overall Summary

Culture and Diversity

- Increase Access: Outreach and Awareness of services, even among stakeholders
- Points of Connection and Collaboration
- Recruitment/retention amid economic challenges - diversity, TAY transitions, burnout
- Intervention options
- TAY-specific services and definitions
- Homeless system needs more resources, and is complicated
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