

California Reducing Disparities Project

Evolution Annual Update 2021-2022



Department of
Behavioral Health

Introduction

The California Reducing Disparities Project Evolutions (CRDP-Evolutions) is an Innovation (INN) effort by Fresno County and three of its community-based providers to transition Community Defined Evidence Practice (CDEP)s from currently state funded CRDP Phase II programs to Mental Health Services Act (MHSA) program. This is the first annual update for this Innovation Plan which is working with three different CDEP providers in Fresno County.

The goal of the project is to work with each of the three CDEPs in this plan, along with the stakeholders (community supporters, participants, past participants, etc.), to help identify which of the six MHSA Prevention and Early Intervention (PEI) strategies the program best fits. Then with community input, identify any adaptations to the existing program that will also help the program better align with outcome requirements of the chosen PEI category. This community driven adaption will then help transition the CDEP into PEI funded program to meet the needs of specific underserved or inappropriately served communities.

These projects are to be conducted in phases, which include start up, planning of adaption, implementation, and finally, assessing the effort. Due to the nature of the phases of the program the initial annual report will not have significant data or activities to report.

Background

The CRDP Evolutions were approved by the California Mental Health Services Oversight and Accountability Commission (MHSOAC) in April of 2021. Upon approval of the program by the MHSOAC, the Department established three-year service agreements for the following programs:

- *Hmong Helping Hands*, coordinated by The Fresno Center, is working with older adults from Fresno County's Hmong community to provide services in a culturally appropriate manner, including in the language of the community members.
- *Sweet Potato Project II*, coordinated by West Fresno Family Resource Center, targets local African American Youth, using agriculture and entrepreneurship.

- *Atención Plena and Placticas*, coordinated by Integral Community Solutions Institute (ICSI), is an intervention and approach being provided by targeting local Latino youth.

The INN plan with details of the need, the specific CDEP utilized by each of the providers, and the overall project design can be viewed by accessing this link to the approved INN Plan ([Here](#)).

The funding for the 35 statewide CRDPs was to come to a conclusion at the end of 2021. This had been a key factor in having the plan approved and to develop service agreements with the three providers, to ensure the programs did not cease once the State funding ended and until agreements could be established. However, at the end of the legislative calendar, the state approved additional state funding for the CRDPs for an additional five years. While this was a positive outcome for all 35 CRDPs, it did create some challenges for the three which were now receiving funding through a County Innovation Plan. As the goal with the Innovation plan was to take the existing service and program and identify and then implement one implementation, it meant that the programs needed to maintain the status quo, for effective assessment.

Project Activities

Changes, additions, redesign, or expansion that providers may have sought to do with their extended state funding had to be done separate from the County INN funding. It was critical to understand what could be adapted to an existing program which had allowed it to become a CDEP, and to see what could be done to help it align with a PEI strategy outcome, without having a negative impact on what had made the program a CDEP.

As such, the Department did meet with the three-project organization and requested that they run two cohorts of their programs, if possible. One with the funding from the state, which they would need to seek guidance from the State on and could possibly have more options. A second (or parallel) cohort, which would be funded under the INN plan, would need to adhere to the parameters of the plan, including its learning goals, phases, funding and reporting guidelines required by the plan and Innovation regulations.

The contracting process, which consists of several steps, can be time-consuming at times. In this case the Department needed to take all three individual agreements to the Board of Supervisors for final approval at the same time. Not doing so would impact the timelines of those programs and not align with the INN three-year plan. The project is working with three different community-based organizations, who each are serving a different population, with different activities and interventions. That coordination of three distinctly different programs had delayed the process, and the agreement for all three were not completed and finalized until January 18, 2022 (but was made retro-active to November 2021).

Once the agreements were in place the Department was still working to contract with the approved third-party evaluator identified in the plan. Challenges with contracting requirements and negotiations have delayed the execution of that evaluation agreement. The evaluator will be providing some technical assistance with the three organizations to ensure that they are able to collect the necessary data to measure the progress or impact of their programs.

During the late Spring and into the Summer, the providers began to meet with the evaluator to discuss the programs, the role of the evaluator, and the overall project expectations. This process also allows the evaluator to support the projects with understanding measures or data they will need to collect to understand both how to measure community involvement and their project's adaption.

Each of three programs have been working to continue their services to the community, while also ensuring that the MHSA INN funded project is developed, tracked and budgeted in a manner that is sperate from the additional funding they were approved to receive from California Department of Public Health.

In the late Spring, DBH, the three programs, and the evaluator began to have discussions on development of a training on MHSA's PEI components, some of the regulations, and outcome requirements. A virtual training session was conducted by DBH on April 8, 2022, for the three programs and evaluator. The Department provided a training for the evaluator and staff from all three CDEPs (PowerPoint attached in the *appendix*). The training provided information on PEI,

each of the six PEI strategies, what each strategy encompasses, what the PEI regulations require for data, reporting and how they need to measure the activities based on the different PEI strategies.

A MHSA PEI training was developed for the community. This was intended to be less regulatory focused and more on the components of PEI so to assist stakeholders in identifying which PEI component and goals they felt their program would align best with.

One community stakeholder meeting had close to 60 individuals in attendance at one of the project's locations called the *Hmong Village*. The Hmong Village, which is part of the Hmong Helping Hands (HHH), is a small farm/garden that has been created for various activities. The space allows for group discussions, meetings, and some of the program's activities related to gardening and outdoor movement.

HHH hosted an in-person community information session on June 28, 2022. DBH staff attended the event more as technical assistance and support. The conversation was led by The Fresno Center staff who explained the overview of the program and some of the goals. A discussion was then held with participants and community members. The



Figure 1 Gathering of older Hmong Adults for a discussion with DBH on the project

discussion was around the activities or interventions the program would use and which activities the members thought had the greatest benefit so the program could then examine how it would measure the benefits or impacts of those efforts.

That same week, on June 30, 2022, the Sweet Potato Project hosted a community event. The event at the West Fresno Family Resource Center had close to 50 community members in

attendance. The stakeholders ranged from youth who were currently in the program, some parents/caretakers, and some past program alumni. The discussion included a brief discussion lead by DBH on things the project was seeking to learn and how the participants could think about what their program does for them. Then based on that experience and reflection to consider how they would like to classify their program as a PEI program. The session concluded with the youth participating in a few mental health teams building exercises.



Figure 2 Stakeholders at the West Fresno Family Resource Center Discussing the Project and PEI

A statewide training webinar had been scheduled for July 25, 2022 (in the next fiscal year 2022-2023), to feature the Sweet Potato Program. The California Alliance for Children and Families and the Catalyst Center plan to host an in-person and virtual event to showcase the program and the youth voice in this program. The event will feature short statements from the County, members of the state legislature, California Department of Public Health, and a panel discussion lead by three youth members (including some program alumni). The focal point of the event will be to highlight innovative ways to serve youth, led by youth voices (a panel of program youth speaking about their experience, benefit, and how to engage other youth).

ICSI has been working to develop their first community session. ICSI is working to develop the discussion, that will allow the focus to be on their program's use of the two interventions, but the interventions themselves are not the program. The ICSI team continues to consult with DBH as they work to develop their community session. Some of the planning includes how to allow for youth to participate, to be inclusive of rural communities, and promotion.

Next Steps

DBH will continue to provide technical assistance, along with the evaluator to the CDEPs, in gathering community input and support a community process for selection of a PEI strategy and what adaptations they decide to implement for the project. In next three months, the organizations plan to complete the planning and community input stage. This will then allow the programs to identify their adaptation (either in design or in delivery) and to begin a new round of services utilizing the adaptation. Focus will be on both the adaptation and development of systems and/or process to allow for accurate data and demographic data collections required by INN regulations, which will then be carried over to meet PEI regulation data and outcome reporting.

In the coming months it will be vital that the contract with the project evaluator is finalized to ensure the vendor is compensated and can be an active participant in discussions, technical support and data collection and analysis.

Providers will work with their participants and stakeholders to try and identify which of the six PEI components they feel their program would best align with, and to then identify and implement one adaptation that will allow for it to measure the program in accordance with the outcome requirements of that PEI component. Two programs each had one forum to begin the exploration of the PEI options, which Fresno County attended and provided basic PEI overview. There are plans by the programs to continue to have those discussions with the stakeholders to help finalize a decision.

Budget

The CRDP Evolution was approved for a total of \$2,400,000 over three years. The total of the agreements for the three CRDPs/CDEPs is \$2,190,963. The budget for year one of the program and the expenditures are provided in a table below.

- Fresno Center/Hmong Helping Hands is \$795,000 for three years.
- ICSI/Atención Plena Y Placticas- \$713,889 for three years.
- West Fresno Family Resource Center/Sweet Potato Project II-\$713,889.

A total of \$200,000 has been allocated for evaluation and related technical assistance.

Less than \$10,000 was allocated for the Department's administration and operations costs for the three years, as the Department focused on investing the funding into the programs/services.

Below is a table demonstrating the budget for each of the three projects in the first year and what had been spent. Some of the programs were wrapping up their current original funded projects and thus had not started to use the MHSA INN funds yet. Some had begun to focus on ramp up and planning, so they expended funds in the fiscal year that just ended. As for the evaluation agreement, it has not been completed.

	TFC	ICSI	WFFRC	Total
FY 21/22 Max (Year 1)	\$148,219.00	\$160,822.00	\$139,874.00	\$448,915.00
Spent	\$120,889.79	\$153,156.01	\$68,395.05	\$342,440.85
% Spent	82%	94%	49%	76%

The evaluator's contract was not executed in the last FY and thus no expenditures to report. The Department is working on the agreement for the contractor and the annual budget for that project will be contingent of workload throughout the project. Below is a projected evaluation budget.

Evaluation	Year One	Year Two	Year Three
Annual Budget	\$65,000	\$90,000	\$45,000

The planned budgets for the coming FY (2022-2023) are presented in the table below.

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Annual Update Fiscal Year 2021-2022
Innovation Plan: California Reducing Disparities Evolution

	TFC	ICSI	WFFRC	Total
FY 22/23 Max (Year 2)	\$320,172	\$276,612	\$268,642	\$865,426

Appendix

- Media coverage on statewide training featuring the Sweet Potato Project
<https://abc30.com/sweet-potato-project-teens-farming-fresno-county-farm-potatoes/12059138/>
- <https://catalyst-center.teachable.com/p/sweet-potato-project>
- CDEP PEI Training PowerPoint (attached)

Prevention & Early Intervention 101

An overview



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PEI Basics

- **Overview**
 - It is one of five MHSA components.
 - PEI has specific set of regulations.
 - 51% or more of PEI has to be used for children and youth.
 - PEI regs came into affect after implementation of CRDPs.



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Aspects of PEI

Six PEI Components/Strategies

- Prevention
- Early Intervention
- Suicide Prevention
- Stigma & Discrimination Reduction
- Outreach for Recognition of Early Onset of Serious Mental Illness.
- Access and Linkage
- ****Improve Timely Access**

Six Priority Populations

- Underserved Cultural Populations
- Individuals Experiencing Onset of Serious Psychiatric Illness
- Children/Youth of Stress Families
- Trauma Exposed
- Children/Youth At Risk For School Failure
- Children/Youth at Risk of Experiencing Juvenile Justice Involvement.



Goal of PEI: Reducing Negative Outcomes and Measuring Prevention

- Suicide
- Incarceration
- School Failure/Drop-Out
- Unemployment
- Homelessness
- Removal of Child From Home
- Prolonged Suffering
- Reducing Negative Outcomes
- Rendering Services to Underserved Populations
- Access And Linkages
- Improving Timely Access
- Outcomes and Measures
- Demographics



We must report on...

- Which negative outcomes were reduced
- How we provided services to groups that are normally underserved
- What types of access and linkage did we provide
- Did people receive services in a timely way
- Other outcomes and measurements of success (community defined or evidence based)
- Demographics of the people we served



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Program/Service Category

- Prevention
- Early Intervention
 - Short term, clinical services for people with serious mental health issues
 - Meant to decrease the impact of a new mental health problem
 - Can include services to parents, families, and care givers
- Outreach For Increasing Recognition Of Early Signs Of Mental Illness



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Program Service Category

- **Access And Linkage**
 - Connects people with a serious mental illness to the right care and services for them
- **Stigma And Discrimination Reduction**
 - Work to decrease stigma and discrimination toward mental health problems in a certain community
 - This can include self-stigma
- **Suicide Prevention**
 - Programs that aim to reduce the number of suicides by
 - Teaching people signs and symptoms of suicide
 - Building community
 - Helping people with suicidal thoughts get help



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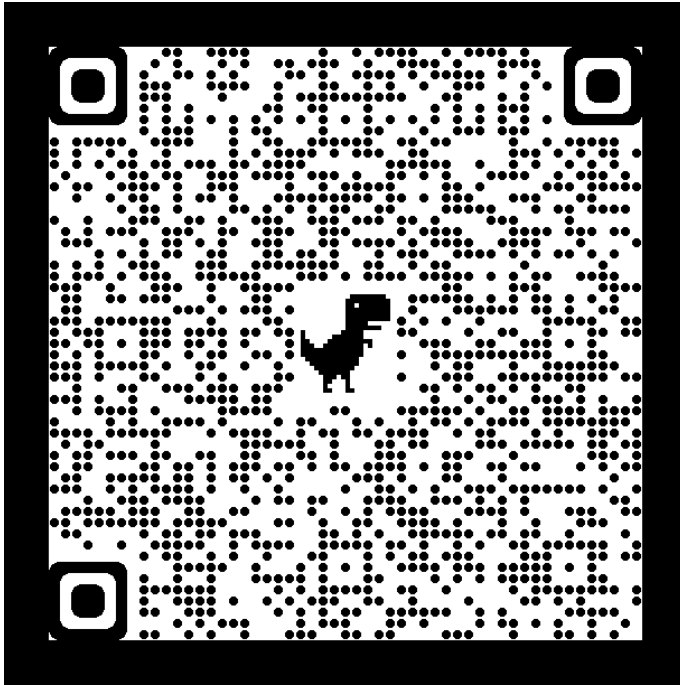
Program Services Category

- **Improving Timely Access***
 - **Programs that help people from underserved groups access the care quickly**
 - **Might use cultural brokers or other community members with knowledge of the system**



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Additional Information on MHSA



www.fresnoMHSA.com



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