COUNTY OF LOS ANGELES-DEPARTMENT OF MENTAL HEALTH

SYSTEM LEADERSHIP TEAM (SLT) MEETING
Wednesday, June 18, 2014 from 9:30 AM to 12:30 PM
St. Anne's Auditorium, 155 N. Occidental Blvd., Los Angeles, CA 90026

REASONS FOR MEETING

- 1. Provide an overview of the MHSA Innovations guidelines.
- 2. Develop and discuss ideas for MHSA Innovations projects.
- 3. Discuss next steps.

MEETING NOTES

Overview – MHSA	FEEDBACK
Innovations	
Guidelines	1. Question: How many innovative programs were funded during the last round? What is the average dollar amount?
	a. Response: The first category is the Integrated Mobile Health Team that focused on the homeless population. The second model is the Integrated Clinic Model where we put the physical health into a mental health clinic and then vice versa to examine the extent to which these models worked. The third category was the Integrated Service Management model for 5 different under-represented ethnic population serving 14 ethnic populations were served. The fourth model is the peer run model.
	b. Response: All used an integrated service model; substance abuse, mental health, and physical health. We targeted different populations, but each had a different design within those particular categories.
	2. Comment: There is not an average amount because funding depends on how much money is needed for the projects. Some projects are as little as \$300,000 and others are millions of dollars. Response: We do not have an actual amount that you have to limit yourself to. We do have a total amount, which is about \$19 million that we are able to use per year for the next 3 years. Within that time we will develop priorities and then look at the merits of the project itself to figure out how much it costs. There is still a back and forth around scaling it up or down as we move forward.
	3. Question: Is that \$19 million per year or total to be used throughout the 3 year period? Response: It is \$19 million per year, for three years, for all of the Innovations projects. It is sizeable to make an impact on the learning question. For the Innovations part it's hopefully going to be enough to get some kind of information on the new practice.
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- 4. Question: Will these be accepted after today?
 - a. Response: Yes, we will give you a deadline at the end of today.
 - b. **Response:** We will take a look at how we decided on how much money should go to each project as a starting point and then get back to you.
- 5. **Question:** If we propose a project that involved other department staff, would we need to know the cost or the recommendation on staffing for that kind of project?

<u>Response</u>: What you turn in will not need all of the details of the budget. Why do that if it does not cross the first threshold? Or it may be recombined with other proposed projects. When we go into the 'next step' section of today I will give more detailed information around what is expected.

6. **Question:** How locked in are we on these 8 projects being proposed by the department? **Response:** I will discuss that right now.

Developing Ideas for Innovations Projects

FEEDBACK

1. <u>Comment</u>: Most of us can make an argument for how a proposed project fits the requirements on page 1 of your template. But the really critical point is that it is not something that we are already doing here and we want to expand. Anything that is ongoing does not count. It must be new.

<u>Response</u>: Unless you are doing something in one system and you want to bring it into the mental health system for which it is new. You can transfer it over. But if it is something already done within the mental health system. It is already effective. That would not qualify for an innovation.

- 2. <u>Comment</u>: It does not even exist in the mental health system for our population. I know one gentleman says there is one program he thinks is really good but it is for really wealthy people and does not meet our criteria. <u>Response</u>: That is the kind of conversation you need to have about your potential project.
- 3. <u>Comment</u>: Andrea Gordon with Probation had to leave but she wanted to make a comment on diversion. Instead of judges diverting people to jails they should be diverted to these programs with mental health.
 - a. Response: So she was interested in that potentially being an innovation project?
 - b. Response: Yes.
- 4. **Question:** If there are 2 models currently in existence in separate places and you want to combine them to do something unique as a combined model, will that fit?
 - a. Response: Is there a population or topic that you are looking at?

- b. <u>Response</u>: I am looking at outreach to underrepresented ethnic populations, monolingual, with health and mental health.
- c. <u>Response</u>: Ok outreach for monolingual speakers in a non-English language. Go ahead and write up those key words, put your name and when you get together I will go to your table and actually hear the details of what you mean and we can work through that.
- 5. <u>Question</u>: I am looking at the types of information needed, like demographic information on age, gender, etc. I do not think that it is fair to expect a group of volunteers to come up with an RFP proposal. We can write out our notes. We can give you the gist and where we wanted to go with this. We can tell you how it relates to the Innovation project template. But then to go down to that level of detail you are asking me to write a paper.
 - a. <u>Response</u>: We do not need all of that detail by the 27th. But ultimately we are going to need that information so that it qualifies as an Innovation project. What we really need to be clear about is that they have to be new. They have to meet one of the focal populations as well as one or more of the primary purposes.
 - b. **Response:** Yes. When we did it last time we had many meetings and had the resources of DMH to provide that data.
 - c. <u>Response</u>: I am glad you are asking the question about demographics because you said, "If you want this we can do this." I do not think we need a demographic analysis. What we need is a little bit more information on the target population. Are we looking at older adults? 6-16 year olds? That is really helpful. Really, we do not need much more than that.
- 6. <u>Comment</u>: We have a template that we are expanding on, the older adults model, and we are going to make it more inclusive. I have offered to do a basic write up based on this template and distribute it to members of our group for review.

Response: Perfect. Thank you so much. If others can also do the same—wonderful.

7. Comment: The example that we got which was a wonderful example in my opinion, had a professional focus and the implications around the outcome measurements and the research that would be done. I would like to go on record as saying that peer run models of innovation--those learning questions need to be both new and different from the kinds proposed in the traditional professional proposals. They must be measured differently. Need to redefine who is a peer. We need to look at measures of non traditional programs, particularly for peer programs. I think that is true for UREP and other things. The outcomes piece often gets farmed out to some University, who do their academic thing. I do not think that is a fair measurement of the innovations plan because that's the whole point, is that it's new and different.