



MHSA Prioritization Session - Steering Committee Voting Results

MHSA Steering Committee members rated each recommendation proposed using the following scale:

1-Not a Priority, 2-Low Priority, 3-Somewhat Priority, 4-Moderate Priority, 5-High Priority, 6- Essential Priority.

The results are weighted votes across recommendations receiving a vote of 4, 5 or 6. If additional MHSA funding becomes available, these priorities help inform any new programs, strategies or expansions.

Community Services & Supports (CSS)

Service Category	Priority Recommendations	Weighted Priority Votes
Wellness Services for Migrant Populations	Mobile mental health and wellness services to expand access to Coastside behavioral health clients and families	91
Outreach Collaboratives	Expansion of culturally responsive resources and outreach strategies to effectively link high-risk, isolated and emerging cultural and ethnic groups to needed services	83
Outreach & Engagement	Coordinated outreach to Chinese community to increase access to behavioral health services	75
Pre-Crisis Outreach & Response	Bilingual, bicultural family/peer support workers to respond and connect with families in the community	74
Homeless Mental Health	Drop-in center in East Palo Alto that targets homeless adults with behavioral health challenges	
Supported Services for Client Recovery	Expansion of supported education and employment programs based on recovery-oriented, evidence-based practices	
Peer and Family Support	Peer support and follow up care for individuals pre and post discharge from psychiatric hospitalization	
Peer and Family Support	Peer-run warm-line for over-the-phone, non-crisis, support for families and individuals with mental health challenges	70
Transition Age Youth (TAY) FSP	Emergency housing that is designed for and specializes in the needs of TAY with serious mental health challenges	69
Adult and Older Adult FSP	Expansion of supportive housing services for adults and older adults with serious mental health challenges	
Children and Youth (C/Y) FSP	Expansion of residential treatment services for C/Y with serious emotional and behavioral problem	67
Criminal Justice Involvement	Assertive case management to follow up and provide recovery oriented support to criminal justice involved clients in their communities	66
Child Welfare Involvement	Specialized, intensive case management for caregivers with mental health challenges with children who are high risk for abuse and neglect	63
Older Adult System of Care	Expansion of bilingual peer support workers to help with transportation, system and service navigation and support to isolated monolingual seniors	62
Co-occurring Integration	Countywide co-occurring coordination entity	51
Intellectually Disabled Dual Diagnosis	Specialty case management services for intellectually disabled clients with psychiatric service needs	39

MHSA Prioritization Session - Steering Committee Voting Results

MHSA - Prevention & Early Intervention (PEI)

Service Category	Priority Recommendations	Weighted Priority Votes
Prevention of Early Psychosis	1. After-care services for early psychosis treatment alumni that includes booster sessions and reengagement, maintenance and family navigator support	74
Crisis Response	2. Expansion of school and community crisis response services (e.g. mobile crisis response team, 24/7 response, etc.)	54
Primary Care Integration	3. Expansion of service for timely triaging of high volume referrals, crisis response and warm hand off support for clients	48
Community Engagement and Empowerment	4. Empower and build the capacity of community leaders to meaningfully engage in decision making boards, commissions, and committees, and advocate for themselves and their communities	40

PEI component requires that at least 51% of funds go to programs serving individuals ages 0-25, including school-based strategies. This service category was not included in the prioritization session. It was proposed that a taskforce of subject matter experts be brought together for two follow up meeting between July and September to prioritize programs and services with as specific emphasis on school-based, evidence-based services, to meet the 51% PEI funding requirement. The taskforce will present their recommendation to the Mental Health and Substance Abuse Commission during in the Fall of 2017 for voting and opening of a 30-day public comment. If you are interested in participating in this taskforce, please email your interest to mhsa@smcgov.org