



MHSA Three-Year Plan FY 20/21 to FY 22/23

MHSA Steering Committee Prioritization Results

In an effort to offset the anticipated lack of new funding, due to COVID-19 pandemic and upcoming recession, a strategic approach to addressing the input collected during the CPP process was proposed to the MHSA Steering Committee on April 29, 2020. Twenty two strategies that were prioritized by stakeholders were organized under five MHSA Strategic Initiatives with the intent to reallocate existing MHSA staff resources to engage stakeholders in planning to develop an adaptive strategy direction for these initiatives. This can be accomplished within the current budget and will give us valuable information we need to make informed decisions about funding and next steps once revenue increases. Following the MHSA Steering Committee, members were asked via an online survey to both a) rank the 5 Strategic Initiatives and b) rate the 22 strategies. The results of this vote are summarized below listed in order of priority:

MHSA Initiative	Strategy Recommendation <small>Green = Prevention and Early Intervention strategy</small>	Priority - Weighted Avg
Rank 1: Housing Continuum	Mental health workers providing on the field, mobile mental health assessments and treatment for homeless individuals and linkages to housing.	1.73
	Trained/certified peers providing housing navigation, support services (e.g. independent living skills, accessing housing subsidies) to clients and training on the issue of homelessness to service providers (primary care physicians, mental health staff, police/first responders, etc.).	2.0
	Transitional housing that is designed for and specializes in the needs of transition age youth (16-25 years) with serious mental health challenges.	2.05
	Incentives for sustainability of residential care facilities or board and care homes (subsidies, renovations, etc.).	2.27
	Drop-in center for homeless with behavioral health challenges in East Palo Alto to include comprehensive services across sectors (co-occurring substance use services, case management, linkages, etc.).	2.41

MHSA Initiative	Strategy Recommendation Green = Prevention and Early Intervention strategy	Priority - Weighted Avg
Rank 2: Crisis Diversion	Trained/certified peers providing peer and family crisis support services to assist clients transition from psychiatric emergency services, hospitalization and incarceration, into the community.	1.90
	Walk-in services for addressing immediate crisis needs in a less intensive setting than psychiatric emergency services.	1.95
	Suicide support services, education and outreach targeted to underserved communities (people of color, low income, and LGBTQ+, monolingual), including adding language capacity for crisis line(s).	2.09
	School-based, youth-led outreach, suicide education and prevention services.	2.32

MHSA Initiative	Strategy Recommendation Green = Prevention and Early Intervention strategy Purple = Workforce Education and Training strategy	Priority - Weighted Avg
Rank 3: Culturally Responsive and Trauma-Informed Systems	Trained/certified peers providing trauma-informed and culturally responsive mental health 101 training for community-based service providers (senior centers, libraries, core service agencies, etc.).	2.18
	Training for providers across service sectors (human services, probation, law enforcement, education, etc.) on the intersection of trauma and racism.	2.27
	Mental health services co-located in community settings addressing core needs of marginalized communities (core service agencies, immigration service settings, etc.)	2.45
	Educational loan forgiveness and/or financial assistance programs to support recruitment and retention of hard-to-fill positions including bilingual and culturally/ethnically diverse clinical positions.	2.82

MHSA Initiative	Strategy Recommendation <small>Green = Prevention and Early Intervention strategy</small>	Priority - Weighted Avg
Rank 4: Integrated Treatment and Recovery Supports	After-care services for clients out of residential treatment with complex needs to provide ongoing specialized case management including outpatient recovery engagement strategies (e.g. incentives to engage).	2.09
	Trained/certified peers providing system navigation and resources, psychosocial rehabilitation, wellness coaching and other wellness and recovery support services.	2.23
	Supported employment programs based on recovery-oriented, evidence-based practices	2.45
	<small>Early treatment and supports for youth and families as it relates to increased cannabis and alcohol use among youth.</small>	2.55

MHSA Initiative	Strategy Recommendation <small>Green = Prevention and Early Intervention strategy</small>	Priority - Weighted Avg
Rank 5: Community Engagement	<small>Parent and family-focused wellness and support services (domestic violence, trauma, rape, healing) to engage and link families in the northern region of the county to behavioral health services.</small>	2.18
	<small>School-based resources to provide support groups, therapy and educational workshops for families.</small>	2.23
	<small>Evidence-based youth empowerment models that work with youth to identify mental health and substance use issues to address as community leaders.</small>	2.32
	<small>Home-based early intervention services for families with young children, including case management, parent education, and parent support groups with an emphasis on wrap-around services to provide support on multiple levels and increasing collaboration between providers.</small>	2.36
	<small>Culturally-focused outreach and engagement collaboratives to provide ongoing support groups, navigation and linkages, education and outreach for marginalized communities.</small>	2.41