



Date: September 21, 2010

From: Denise Hunt, RN, MFT, Behavioral Health Director

To: MHSA Representative Stakeholders

Re: **Outline of proposed Innovation project development process**

1. MHSA requirements regarding Innovation Projects

- a. Primary focus of projects: contribute to learning, rather than provide services to address unmet need. Services are ok, they just can't be the point of the project.
 - 1) May (but not required to) add a learning strategy to an approved CSS, WET or PEI program
 - 2) Must include one or more MHSA essential elements (the more the better): community collaboration, creating integrated service experiences, promoting wellness, recovery, and resiliency, creating a consumer- and family-driven mental health system, and creating a culturally competent system of care
 - 3) No time limit on projects—can go on until learning occurs
 - 4) Once learning occurs, must be sustained by other funds
- b. Potential focus of the project (one is better than more)
 - 1) Increase access to underserved groups
 - 2) Increase the quality of services, including better outcomes
 - 3) Promote interagency collaboration
 - 4) Increase access to services
- c. Potential contributions to learning
 - 1) Introduces new mental health practices/approaches...that have never been done before
 - 2) Makes a change to an existing mental health system practice/approach, including adaptation for new setting or community
 - 3) Introduces a new application to the mental health system of a promising community-driven practice/approach or...that has been successful in a non-mental health context

2. Emerging BHRS priorities and commitments

- a. Priority learning edges: help support and accelerate our county-wide transformation
- b. Community-developed and driven proposals
- c. Open to both large and small projects (may set bottom and top funding limits)
- d. Commitment to resolution re learning (and sustainability where appropriate)

- e. If BHRS staff members have ideas
 - 1) Must develop with community partners
 - 2) Will be excluded from decision-making process

3. Funding summary

- a. Reverts June 2012: 934,706
- b. Reverts June 2013: 1,223,594
- c. Total to be allocated in this year: \$2,158,300**
- d. Sustainable funding going forward: ~ \$600,000

4. Summary timeline

Date	Step	Details
September 21, 2010	Stakeholder meeting	Focus: Priority learning edges over the next several years
Oct - Dec 2010	Potential contractor outreach workshops	Will be held in community settings before and after RFP released
	RFP released	
	Interested parties develop proposals	
Jan - Mar 2011	Interested parties submit proposals	Due date: January 31, 2011
	BHRS review team reviews proposals and decides	
	Stakeholder meeting	By March 15, 2011: Decisions and rationales announced
Apr - Jun 2011	Prepare integrated Innovation proposal package	Continue prep work with OAC representatives
	Submit Innovation package to OAC	Part of an update, not the annual update
	OAC reviews and approves package	Complete as much of the contract development process prior to July 1 as possible
July 1, 2011	Assume OAC approval	Implementation begins as soon as possible

5. For more information, please see:

- a. BHRS website: www.stanislausmhsa.com (corrected 9/22/10)
- b. OAC website: www.dmh.ca.gov/MHSOAC/default.asp (corrected 9/22/10)
- c. INN guidelines: www.dmh.ca.gov/DMHDocs/docs/notices09/09-02.pdf (added)