Marin County Behavioral Health and Recovery Service
Mental Health Services Act – Innovation (INN)

Planning Meeting 11.27.17

MHSA INNOVATION

What is Innovation?

*An "Innovative Project" means "a project that the County designs and implements for a **defined time period** and **evaluates** to develop a **new best practice** in mental health services and supports"*

"The introduction of a new concept, idea, service, process, or product aimed at improving treatment, diagnosis, education, outreach, prevention and research, and with the long term goals of improving quality, safety, outcomes, efficiency, and cost"

- Addresses a hard to solve problem
- Novel, creative or ingenious mental health practices/approaches
- Contributes to learning by "trying out" a new approach that can inform future practice
- Does not have to focus on providing services

Core MHSA Principles:

- Community Collaboration: Expands collaboration and connections
- Cultural Competence: Reduce disparities in access & outcomes for underserved populations
- Client Driven: Client involvement in planning, implementing, staffing, evaluation & more
- Family Driven: Family involvement in planning, implementing, staffing, evaluation & more
- Wellness, Recovery and Resiliency: Promotes recovery and wellness
- Integrated Service Experience: Access to full range of services for clients and families

INN must do one of the following:

- Introduce a new, never been done before, mental health practice or approach
- Make a change to an existing mental health practice or approach, including adapting to a new setting or population
- Introduce a practice that has been successful in a non-mental health setting

INN must also do one of the following:

- Increase access for an underserved group
- Increase the quality of services to achieve better outcomes
- Promote inter-agency collaboration
- Increase access to services

MHSA Target Populations

- Increase quality of care for those in County Specialty Mental Health services (MediCal/uninsured)
- Increase access to care for Medi-Cal recipients, uninsured residents, and underserved populations (race, ethnicity, LGBTQ, etc).

Examples of areas INN can address:

- Administrative/governance/organizational practices, processes of procedures
- Advocacy
- Education and training for service providers, including non-traditional practitioners
- Outreach, capacity building and community development
- Planning
- Policy and system development
- Prevention and early intervention
- Public education efforts
- Research
- Service and/or treatment intervention

Other things to note:

- If a practice has been successful in mental health elsewhere, it cannot be funded under INN unless it is changed in a way that contributes to the learning process
- Addressing an unmet need is not sufficient for funding as INN
- INN projects are time limited (up to 5 years)
- Not all IN projects will be successful
- If an INN project is successful it can be continued under other funding
- Leveraging partnerships is encouraged

MARIN INNOVATION PLANNING

- Past Innovation Planning and MHSA Three Year Planning has resulted in prioritizing **Older Adults (60+)** for the next INN Plan. The Plan can serve other ages, as long as it includes a focus on Older Adults.
- Approximately $700,000 of INN funds must be spent by June 30, 2020. Additional funds are available if needed.
- The Plan must be submitted by July 1, 2018. To meet this timeline:

11.27.17	INN Planning Meeting
Early Dec	Online input opportunity
12.13.17	INN Planning Meeting
January	BHRS and the MHSA Advisory Committee will finalize the focus of the INN Plan
Feb/Mar	Draft the INN Plan
April	30 Day Public Comment Period
May	Public Hearing Integrate Public Input Board of Supervisors review/approval
June	Submit INN Plan to the State
Summer/Fall	State Approval of INN Plan
Fall/Winter	Start Implementation of INN Plan