



*"A George Hills Company Administered JPA"*

## California Mental Health Services Authority Implementation Ad Hoc Committee

**Please Note:** In order to facilitate timely communication and seamless review process, MHSOAC requests that we use the standard terms familiar to staff and Commissioners: (1) work plan instead of strategic plan (concerned that the three published Statewide PEI Strategic Plans would be confused with CaIMHSA implementation plan); (2) program instead of component for the phased implementation of the three Strategic Plans.

### **TIMELINE**

- August 19: Ad hoc workgroup convenes with Stakeholder participation
- August 31: last date for submission of stakeholder input;
- September 3: Ad hoc workgroup convenes with Stakeholder participation to review CaIMHSA staff summary, and categorization of stakeholder input, summary report published
- September 10: Board meeting: review summary report findings and implementation timeline (see #2 below)
- September meetings of Ad hoc committee established to review:
  - Outlines for RFP, RFQ, RFA, scope of work,
  - Procedures for establishing review panels and review criteria
  - Drafts of proposed Work Plan
- October 7: Board agenda and draft Work Plan posted for 30-day public comment
- October 14: Board meeting: draft Work Plan reviewed
  - Ad hoc committee workgroup activities presented

- October 18: Ad hoc workgroup convenes with Stakeholder participation to review CalMHSA work plan
- November 1: Ad hoc workgroup convenes with Stakeholder participation to review CalMHSA work plan
- November 4: Board agenda and implementation plan input posted
- November 12: Board meeting in Napa, Ca:
  - **FINAL WORK PLAN** presented for approval
  - Overarching implementation approach that describes key implementation phases and tools to be used (i.e., RFP/RFO/RFA/Non-competitive).
  - Analogous to a CSS or PEI plan approval with sequence and segments described that are implemented subsequent to plan approval
- November 15: MHSOAC submission for staff analysis; DMH submission for review
- **January 27**: MHSOAC meeting reviews for approval

**Work Plan** implemented in three phases

- January **28**: **Phase One** (Suicide Prevention): release program plan for suicide prevention RFP/RFO/RFA due **45** days
  - **April 21-22**: Review Panel convenes, recommends top tier proposals.
  - **April 25-27**: **Staff and consultants analysis of top tier proposals.**
  - **April 29**: Board agenda posted.
  - **May 6**: Staff recommends selections for Board approval.
  - **June 6**: contract negotiations concluded and contract finalized; implementation begins
- **February 14**: **Phase Two** (Stigma and Discrimination Reduction): release program plan for stigma RFP/RFO/RFA due **45** days
  - **April 18-20 (tentative)**: Review Panel convenes, recommends top tier proposals.
  - **May 9-11 (tentative)**: **Staff and consultants analyze top tier proposals.**
  - **June 2**: Board agenda posted.
  - **June 9**: Staff recommends selections for Board approval.

- **July 7:** contract negotiations concluded and contract finalized; implementation begins.
- **February 28: Phase Three (Student Mental Health):** release program plan for student mental health initiative RFA due **45** days
  - **May 25-27 (tentative):** Review Panel convenes and evaluates applications.
  - **May 30-31 (tentative):** Staff and consultants analyze applications.
  - **June 2:** Board agenda posted.
  - **June 9:** Staff recommends applications for Board approval.
  - **July 7:** contract negotiations concluded and contract finalized; implementation begins.

### **Work Plan** Implementation

- key structural features:
  - Statewide with regional/local relevance
  - Regional/local with statewide relevance
  - Funding proportionality across the three strategic plans
- Implementation tools by program plan:
  - RFP/RFQ/RFA/Non-competitive:
  - Scope of work
  - Scoring rubric
  - Review panel composition

### Evaluation

- Implementation overall by program plan
  - Specify that participation in statewide evaluation required of all proposals.
- By component of implementation phases (i.e., for SP statewide media campaign concurrent with one or more regional county collaboratives)
- Statewide evaluation RFP/RFQ/RFA:
  - Projected for **June** 2011
  - Date TBD: Review Panel convenes; recommends selection
  - Date TBD: Board Agenda posted
  - Date TBD: Selection for Board approval
  - Date TBD: Contract negotiations concluded and contract finalized; implementation begins

## Overview of the Review and Selection Process

### For the Statewide Strategic Initiatives

#### (Suicide Prevention, Stigma and Discrimination, Student Mental Health)

#### REVIEW PROCESS

##### 1. Selection of Proposal Reviewers - (See Subject Matter Expert Recruitment Process Description)

###### Recruitment Process

A Subject Matter Expert (SME) Application Package was developed that included an Application Cover Letter, SME Application Form, Conflict of Interest Form, as well a request for a resume and brief bio. Information requested in the SME Application Form included: Expertise in the area of Suicide Prevention, Stigma and Discrimination, and Student Mental Health; SME Applicant Demographics; Geographic Expertise; Professional & Lived Experience. Criteria for the Professional and Lived Experience category was developed utilizing target population information from the individual Initiatives. The SME Application Package has been widely disseminated by CalMHSA to parties who have expressed an interest or have registered with CalMHSA for information regarding the Statewide Prevention and Early Intervention Initiatives, as well as to other networks.

We have a pool of 45 SMEs that applied to participate in the review process. Subsequently, an excel matrix was developed that mirrored the information requested in the SME Application Form in order to track compatibility of prospective SMEs to the individual Initiatives. Utilizing the matrix, review panelists will be selected to assist in the evaluation of the three Strategic Initiatives.

George Hills Company will collect the following information from selected SMEs:

- a. Non-Conflict of Interest Form – Each subject matter expert will submit a document certifying that they do not have any conflicts of interests with any potential proposer for the three initiatives. For those who indicated a potential conflict they are not allowed to review the proposals for any program where the conflict might influence the scoring and ranking of that proposers application. (See the non-conflict of interest document included in this packet.)
- b. Confidentiality Forms – All potential reviewers must sign a statement which documents their willingness to adhere to the confidentiality guidelines and principles related to the review process. (See the confidential agreement included in this packet.)
- c. Income Tax Documents - George Hills Company (GHC) will issue stipends to subject matter experts for participation on the review panels. GHC will collect the W9 forms and issue appropriate 1099. GHC will also file the appropriate income documentation with the IRS.

- d. Compensation – Reviewers will be paid 95.00 for each proposal read, scored, and reviewed in addition to travel costs.

## **2. Assignment of Proposals to Reviewers**

- a. Area of Expertise – Each review panel is comprised of at minimum three subject matter experts and additional experts representing a variety of target populations or stakeholder groups. Generally the panels include stakeholders representing life span populations, ethnic and cultural communities, geographic representation including rural and small county representatives, consumers and family members, county employees, and past county directors. In order to assure a robust comprehensive review of each proposal, the size and composition of the panels are planned to include the possibility of attrition of reviewers for each proposal. In response, each review panel has a minimum of 7 reviewers and a maximum of 10. ( See the Confidential Suicide Preview Review Panel Matrix for details)
- b. Number of Proposals – Each reviewer will read a minimum of 4 and a maximum of 10 proposals. This is based upon their expertise and availability.

## **3. Reviewer Orientation**

### Training Preparation

Reviewers receive a 2-3 hour webinar orientation prior to receiving the proposals. Proposals will be sent to each reviewer the day after the orientation. In preparation for the webinar, SMEs receive a copy of their Conflict of Interest Form to reconfirm that no conflicts of interest have developed since accepted as a Reviewer. Reviewers also receive and are required to sign a Confidentiality Statement regarding the proposal review and selection process. Materials are sent to each Reviewer in preparation for the webinar orientation that includes information that will allow them to better understand and prepare for the review process.

### **Training Topics**

The following topics and training materials have been compiled for review during the orientation and are included in the orientation packet:

#### Confidentiality

- Confidentiality Statement

#### MHSA Background

- Suicide Prevention Strategic Plan
- Executive Summary and Suicide Prevention Sections of CalMHSA Statewide Prevention & Early Intervention Implementation Work Plan
- Suicide Prevention RFP
- Suicide Prevention RFP Proposers' Conference Questions & CalMHSA Answers

#### Proposal Review Tools

- Prevention & Early Intervention & Spectrum of Prevention Description
- Sample Logic Models
- Reviewer Scoring Sheet

- “How to Separate the Good, Bad, and the Ugly – Twelve Principles for Review”
4. Upon receipt, George Hills Company will prescreen all proposals to assess if proposers have met the minimum mandatory requirements prior to being submitted for review. The results of the prescreening will not be disclosed to the review panels before they have completed the review process. However those proposers that are eliminated for failure to meet minimum mandatory requirements will be informed and have an opportunity to appeal.
  5. Delivery of Proposal Packets – Once proposals have been prescreened and the confidentiality statement received, the proposals for each program will be mailed to each reviewer along with the score sheets and their instructions.
  6. Review Panels
    - a. Review Dates
      - Suicide Prevention:  
Orientation Webinars: 3/22 @ 8am, 3/22 @ 5pm, and 3/28 @ 5pm  
Review Panel Dates: 4/21 & 4/22
  
      - Stigma & Discrimination Reduction:  
Orientation Webinar: 4/19 @ 5pm  
Review Panel Dates: 5/18 – 5/20
  
      - Student Mental Health:  
Orientation Webinar: 4/25 @ 5pm  
Review Panel Dates: 5/25 – 5/27
    - b. Scoring tool - The Proposal Narrative is the only section that will be reviewed and scored by the Subject Matter Expert (SME) Review Panel for the purposes of identifying a successful proposal. The scoring tool is a public document therefore reviewers will be required to include a Quality Rating and comment for each question. Reviewers will complete their Initial Quality Rating for each question of the Ratings Form prior to the Review Panel Meeting and must provide a statement in the Comments Section justifying their rating. The Comments Section will also be utilized to document questions and concerns related to each section of the proposal. During the Review Panel Meeting, Reviewers will be asked to enter their final individual scores after the facilitated discussion of each proposal. Any change in the initial Quality Rating must include a justification for the change under the Final Rating Sections of the Form.
    - c. Scores for all Review Panel members for each proposal will be tabulated using a Master Ratings Form in order to identify cumulative scores and rank each proposal. Scoring is on a scale of 0-5 for each question with "0" as the least number of points (Not Acceptable) and "5" as the most number of points (Excellent/Exceptional). Final Point Score will be the points allotted for the question or section multiplied by the Quality Rating. For example Section A Question 1 has a point value of 4. If Question 1 received a

Quality Rating of 5, then the Final Point Score would be 20. If Question 1 received a Quality Rating of 2, then the Final Point Score would be 8. The maximum Point Score for a proposal when all the sections are added up is 500. (See the Master Scoring Tool document for an explanation of each Quality Rating.) Experts developed the weight for each quality rating based upon the overall level of importance of each section of the RFP in its ability to influence the overall quality and effectiveness of the proposed project and its implementation.

**DESCRIPTION OF WEIGHTS**

SECTION A. PROPOSER'S QUALIFICATIONS & FIT FOR SUICIDE PREVENTION RFP (20% Maximum Point Weight)

SECTION B. PROGRAM DESIGN (45% Maximum Point Weight)

SECTION C. STAFFING PLAN (10% Maximum Point Weight)

SECTION D. QUALITY MANAGEMENT & DATA COLLECTION (5% Maximum Point Weight)

SECTION E. LEVERAGING & ORGANIZATIONAL SUPPORT (5% Maximum Point Weight)

SECTION F: BUDGET PACKAGE & FINANCIAL INFORMATION (15% Maximum Point Weight)

d. Review Panel Process

- i. Confidentiality reminder – Reviewers will be reminded of the confidentiality agreement signed before they received their proposals.
- ii. Introduction of the proposal – staff will provide a brief overview of each proposal which includes the name of the proposal, the proposer, the identified target populations, and requested funding amount.
- iii. During the first round of scoring for each question, each reviewer will be asked to state their initial rating and rationale for each question within the scoring tool for the proposal being reviewed.
- iv. The scattering of initial reviewer scores will determine the depth of discussion for the question under consideration. When there is variability in scores reviewers will be asked to share their concerns and/or questions as it relates to the proposal being reviewed. Once the discussion has concluded reviewers will be asked to finalize their score for that question. If there is a change in the score, reviewers will be required to provide a written rationale for the change in the original score.
- v. Each of the reviewer scores will be tallied using the master scoring tool and appropriate weight / multiplier. The average score calculated based upon the number of reviewers will be noted for each question. By the end of the proposal review the overall score for that proposal will be tallied and documented. Each proposal will be handled in the same manner. At the end of the review of all the proposals for that program, the proposals will be rank ordered based upon their

final scores. Reviewers will be shown the results and asked if the rank order is reflective of their overall rating of all the proposals reviewed for that program.

## **SELECTION PROCESS**

1. Once the reviewer rankings have been validated, CiMH staff will develop a summary sheet that includes all the comments and ratings for each proposal.
2. CiMH staff will then develop a program summary which will reflect the overall ratings for each proposal in that program.
3. GHC and CiMH will analyze the top tier (2-3) proposers' response to the initial intent of the Statewide Strategic Plan and RFP, then recommend for funding a slate of proposals.
4. GHC will use its discretion in determining the number of proposals to be recommended to the Board for funding, as well as the maximum amount to be awarded. When developing the recommended slate of proposals funding amounts will be based on RFP guidelines and available funding for each program.
5. GHC staff will submit to the CalMHSA Board of Directors a summary of the slate of proposals with a recommendation for approval; with the understanding that the highest ranked proposal will be funded first. In the event a contract cannot be entered into with the highest ranked proposer, the proposal with the next highest score will be funded, and so on until a contract has been initiated.
6. For background and information purposes, the review panel summary sheet for each of the recommended proposals and recommended funding levels will be presented to the CalMHSA Board of Directors.
7. The CalMHSA Board of Directors will then take action to approve the slate of proposals as presented by staff. If the recommendation by staff is not approved, staff may be asked to clarify any questions, concerns, or re-evaluate the rankings.
8. Once a slate has been approved GHC will initiate contract proceedings. Contracts are expected to be fully executed within 30 days of board approval.
9. Upon successful contract execution all other proposers will be notified of CalMHSA selection.



## ADDENDUM

### Subject Matter Expert Recruitment Process Description

#### I. SUBJECT MATTER EXPERT RECRUITMENT

##### **Recruitment Description**

The California Institute for Mental Health (CiMH), on behalf of California Mental Health Services Authority (CalMHSA), has recruited a diverse pool of subject matter experts (SME) who will be involved in providing consultation in the development of the request for proposals, participation on future advisory committees, and evaluation of proposal submissions for each of the Initiatives (Suicide Prevention, Stigma & Discrimination, Student Mental Health) under the Statewide Prevention and Early Intervention (PEI) Implementation Work Plan. Representatives among the SMEs include those with lived experience with mental illness, their family members and/or caregivers, those who work in the field of mental health, as well as ancillary fields/sectors with cross over into mental health. Cultural competence is critical as funds are intended to serve California's diverse geographies and populations. As such representatives were sought from underserved ethnic, racial, and cultural groups, southern, central and northern California including urban, suburban and rural areas.

##### **Recruitment Process**

A SME Application Package was developed that included an Application Cover Letter, SME Application Form, Conflict of Interest Form, as well a request for a resume and brief bio. Information requested in the SME Application Form included: PEI Initiatives Expertise; SME Applicant Demographics; Geographic Expertise; Professional & Lived Experience. Criteria for the Professional and Lived Experience category was developed utilizing target population information from the individual Initiatives. The SME Application Package has been widely disseminated by CalMHSA to parties who have expressed an interest or have registered with CalMHSA for information regarding the Statewide Prevention and Early Intervention Initiatives, as well as to other networks.

An excel matrix was developed that mirrored the information requested in the SME Application Form in order to track compatibility of prospective SMEs to the individual Initiatives. Utilizing the matrix, a group of individuals was selected to assist in the evaluation of the Suicide Prevention Initiative. This group has been further broken down and assigned to review proposals under the five Programs of the Initiative (Suicide Prevention Network, Regional & Local Suicide Prevention Capacity Building, Social Marketing Suicide Prevention Campaign, Suicide Prevention Training & Workforce Enhancement, Suicide Prevention Evaluation & Accountability) based on their expertise. Because some SMEs may have expertise in multiple areas, it is likely that an SME will review more than one Program within the Suicide Prevention Initiative.

Each Review Panel will include a combination of people with work experience, lived experience and target population advocates. A Suicide Prevention Matrix is included with this package for approval by CalMHSA and includes qualifications of recommended reviewers for each Suicide Prevention Initiative Program. Reviewers approved by CalMHSA will then be contacted to confirm their continued interest, seek updates to conflict of interest status, and availability to participate in evaluation of the Suicide Prevention Initiative Programs. The finalized Suicide Prevention Matrix may be posted after the contracts have been awarded.

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**ATTORNEY MEMORANDUM**

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**TO:** CalMHSA BOARD  
**FROM:** DOUG ALLISTON, COUNSEL  
**SUBJECT:** THE BROWN ACT, CalMHSA AND CMHDA  
**DATE:** 4/12/2011  
**CC:** JOHN CHAQUICA, ED WALKER

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ISSUE AND BACKGROUND

The Brown Act generally prohibits a quorum of CalMHSA's Board from hearing, discussing, deliberating on or taking action on CalMHSA business outside of CalMHSA's open public meetings. All or most members of CalMHSA's Board also attend CMHDA meetings, which are not open to the public. Given the overlapping membership, the issue is how CalMHSA Board members can avoid Brown Act violations while attending CMHDA meetings.

SUGGESTED POLICY

To avoid inadvertent violations of the Brown Act, CalMHSA Board members should avoid group discussions of CalMHSA business during CMHDA gatherings where a quorum of CalMHSA members potentially might be present. Examples of CalMHSA business would be the Statewide PEI projects, technical assistance projects undertaken by CalMHSA, and potential future endeavors by CalMHSA. A good rule to remember is that if an item of business might be the subject of deliberation or a vote at a future CalMHSA Board meeting, it should not be discussed in a group at a CMHDA meeting.

DISCUSSIONS THAT DO NOT VIOLATE THE BROWN ACT

Each county has a much broader MHS program, the operation of which is not within CalMHSA's jurisdiction. And there are many non-MHS programs operated by counties as well. Discussion of these county mental health programs at CMHDA does not implicate the Brown Act. Also, since the Brown Act applies to gatherings of a majority of the Board, occasional one-on-one conversations are not a problem if not part of a serial meeting. A serial meeting is a series of meetings intended to build a consensus among a majority of the Board.

Group discussion of any interaction between CalMHSA and CMHDA can properly occur at open CalMHSA meetings.