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Statewide Prevention and Early Intervention Implementation (PEI) Work Plan from California Mental Health Services Authority (CalMHSA) Approved by California Mental Health Services Oversight and Accountability Commission (MHSOAC)

SACRAMENTO, CA (February 2, 2011) – The California Mental Health Services Authority (CalMHSA), the relatively new joint powers authority (JPA) of California counties focused on the efficient delivery of California mental health projects and programs, announced today that the California Mental Health Services Oversight and Accountability Commission (MHSOAC) approved CalMHSA’s Statewide Prevention and Early Intervention (PEI) Implementation Work Plan (Plan). The Plan describes how CalMHSA will implement nearly \$130 million in Mental Health Service Act Funds to prevent suicides, reduce stigma and discrimination, and improve student mental health.

Approval of CalMHSA’s Plan by MHSOAC marks another milestone for the growing JPA which was formed in July 2009 by a small core of counties seeing greater efficiency in acting jointly and pooling expenditures for specified statewide and regional projects. (CalMHSA now has 31 of California’s 58 counties as members.) The Plan outlines the recommended actions selected from MHSOAC’s three Strategic Plans, and is built on a three-year foundation of extensive statewide stakeholder input, and solicits focused strategies to educate the public, health care providers, educators, families and individuals about understanding suicide risk factors, and the many barriers to help seeking and the acceptance of support of persons with mental illness. Statewide initiatives include local and regional strategies, tailored to California’s cultural, geographic diversity, and programs that will have impact across the age spectrum.

Prevention efforts contained in CalMHSA’s recently approved Plan are capable of results similar to public health efforts that reduced tobacco use and prevented the spread of HIV infection. “The Plan to prevent suicides, reduce stigma and discrimination, and improve student mental health will have a significant impact on the mental health of California residents now and for generations to come,” says CalMHSA Board Vice President Wayne Clark, PhD. “Like the tobacco prevention campaign, the effect of CalMHSA’s programs could be a 30–50% reduction in health consequences over the next 10–20 years.”

With MHSOAC’s approval of the CalMHSA’s Plan, Requests for Proposal (RFPs) will be released over the first quarter of 2011, containing detailed scopes of work and budget information for each designated program. Three expert review panels comprised of subject matter experts will rank the bidders best equipped to carry out the collective vision of the Mental Health Services Act, the Department of Mental Health, MHSOAC, the stakeholders and CalMHSA. During program implementation, a rigorous program

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specific and statewide evaluation will be initiated to ensure programs fulfill the MHSAs' goals and objectives. Each program will comply with data requests for the statewide evaluation of all CalMHSA-administered programs. Program specific and statewide evaluation will advance understanding of effective methods to provide desired outcomes.

“The unique role of CalMHSA is to do things faster, better, and smarter”, says Vice President Clark. CalMHSA Board President, Allan Rawland, ACSW, MSW notes, “CalMHSA’s commitment to its basic tenets stated in our Vision/Mission Statements and supporting values will continually support our collaboration with our members, DMH, MHSOAC, and stakeholders to deliver our members mental health services funds outlined under Proposition 63 more efficiently and with greater outreach.”

About CalMHSA

The California Mental Health Services Authority (CalMHSA) is joint powers authority (JPA) of California counties and is focused on the efficient delivery of California Mental Health Projects. Member counties jointly develop, fund, and implement mental health services, projects, and educational programs at the state, regional, and local levels. Central to CalMHSA's vision is the promotion of systems and services arising from community mental health initiatives while respecting the California MHSAs values: community collaboration and cultural competence; client-driven mental health system for children, transition age youth, adults and older adults; family-driven system of care for children and youth; wellness focus, including recovery and resilience, and integrated mental health system service experiences and interactions. Counties interested in joining CalMHSA should contact John E. Chaquica CPA, MBA, ARM, CalMHSA Executive Director, President, George Hills Company, Inc. at 3043 Gold Canal Drive, Suite 200, Rancho Cordova, CA 95670-6394. He can also be reached via phone at 916.859.4824, and by email at john.chaquica@georgehills.com. For more information go to <http://www.calmhssa.org>.

About CDMH

The California Department of Mental Health (CDMH), entrusted with leadership of the California mental health system, ensures through partnerships the availability and accessibility of effective, efficient, culturally competent services. This is accomplished by advocacy, education, innovation, outreach, understanding, oversight, monitoring, quality improvement, and the provision of direct services. CDMH employs more than 12,000 employees in eight locations throughout the state, including its headquarters in Sacramento, five hospital facilities, and two acute care facilities within the Department of Corrections and Rehabilitation. As a state public agency, CDMH has worked hard to transform and improve the state's mental health systems of care by working with the mental health constituency to develop a system of partnerships and coordinated interagency efforts. For more information go to <http://www.dmh.ca.gov>.

About MHSOAC

With the passage of Proposition 63 in November 2004, the Mental Health Services Oversight and Accountability Commission was established to oversee specific parts of the Mental Health Services Act including Prevention and Early Intervention Programs, Innovative Programs, Human Resources, Education and Training Programs and sections of the Adult and Older Adult System of Care Act and Children's Mental Health Services Act. The Commission has primary responsibility for Prevention and Early Intervention and Innovative Programs including issuing Guidelines and approving county plans for those two program areas. For more information on MHSOAC go to <http://www.dmh.ca.gov/MHSOAC>.