

Mental Health Services Act (Proposition 63): Collaborative Opportunity to Address Mental Health

The Mental Health Services Act (MHSA) (Welfare and Institutions Code 5850-5883), resulting from the passage of Proposition 63 in 2004, was designed to expand and transform California's county mental health service system. The MHSA is funded by an additional one percent tax on individuals whose taxable income is in excess of \$1 million. Dollars generated for use in fiscal year 2007-2008 will significantly target the implementation of the Prevention and Intervention portion of MHSA with continued annual attention to children of school age (Deichert, 2007). MHSA Prevention and Intervention dollars present an immediate opportunity for collaboration among school districts, county offices of education and county departments of mental health.

This advisory presents information on the incidence of mental health problems among children, the MHSA, and the opportunities available to school districts and county offices of education to impact the delivery of mental health services in their communities.

Mental health and learning

Mental health is a critical component of every individual's health and well-being. Sadly, ten percent of our nation's children live with mental health problems that impair their functioning, and only one in five of these children receives appropriate mental health services (Burns et al., 1995). Those who do receive appropriate services are most often recognized and treated through services available in schools.

In California, approximately 640,000 of the state's 6.3 million youth attending school experience mental health problems that interfere with their regular functioning. Of those with problems, only 40 percent will receive mental health services (Burns et al., 1995).

School-based mental health encompasses a continuum from promoting positive mental health and social and emotional learning to early intervention and treatment to recognizing and address children's mental disorders. Mental health promotion and early intervention are key to keeping children in school, improving education outcomes, and preventing more serious disorders and costs later in life.

Immediate opportunity to connect to MHSA resources

The requirements of MHSA are intended to initiate significant changes in California's overall mental health system. Each county department of mental health is the fiscal hub and key focus for the initiation of program change.

In order to receive funding to initiate change, each county department of mental health has developed its own three-year plan, consistent with the requirements outlined in the MHSA. Of particular importance to school districts is the MHSA legislated focus on school failure and dropout prevention which are named as two of the negative outcomes of untreated mental illness.

With the collaborative help of stakeholders, county departments of mental health will determine resource allocation. School district and county board of education representation will result in expanded services and prevention opportunities for students in local educational agencies. MHSA is not a flow-through device to fund schools or school personnel. Instead, MHSA is designed to provide young people with significantly better access to mental health services and prevention strategies that will improve community health and academic success. District and county concerns can be addressed by taking advantage of this opportunity for collaboration.

Additionally, in May 2007, in response to the tragedy at Virginia Tech, the Mental Health Services Oversight and Accountability Commission identified K-12 prevention strategies as an important approach to achieving positive mental health outcomes before they reach crisis levels on postsecondary campuses (Mental Health Services Oversight and Accountability Commission Memorandum, 2007). Three key components of the proposed K-12 MHSA Prevention Program are violence and bullying prevention, suicide prevention and mental health education. These additional efforts will be supported with \$6.5 million annually for four years.

Regional opportunity for collaboration

Beginning in October, Education Development Center, Inc. (EDC) under a contract with the California Department of Education will facilitate a series of regional skill enhancement meetings designed to fine tune the collaborative process and facilitate clear communication about mental health prevention and intervention. The following chart indicates when county departments of mental health will be meeting with school district representatives. A designated school

district/county office representative is urged to contact the county director of mental health to learn of meeting details for California County Superintendents Educational Services Association (CCSESA) regions whose meeting plans were not finalized at the time of this writing. For further information about the meetings, please contact the meeting facilitator Dr. Beverly Bradley, Associate Project Director, at bbradley@edc.org or (619) 795-2025.

Building collaboration for mental health services in California schools

CCSESA Region	Date	Location
1 North Coast	TBD	Sonoma County Office of Education 5340 Skylane Blvd., Santa Rosa 95403 or Mendocino County Office of Education 2240 Old River Rd., Ukiah 95482-7074
2 North-eastern	Oct 30, 2007 9:00 a.m.–12:30 p.m.	Tehama County Office of Education 1135 Lincoln Street, Red Bluff 96080
3 Capital Service Region	Dec 6, 2007 9:00 a.m.–12:30 p.m.	TBD
4 Bay	Nov 15, 2007 9:00 a.m.–12:30 p.m.	The Garden Center 605 Parkside Way, San Mateo 94403
5 South Bay	Dec 13, 2007 9:00 a.m.–12:30 p.m.	Monterey County Office of Education 901 Blanco Circle, Salinas 93901
6 Delta Sierra	Dec 14, 2007 9:00 a.m.–12:30 p.m.	Stanislaus County Office of Education 1100 H St, Modesto 95354
7 Central Valley	Nov 16, 2007 9:00 a.m.–12:30 p.m.	Merced County Office of Education 632 W. 13th St., Merced 95341
8 Costa Del Sur	Jan 11, 2008 9:00 a.m.–12:30 p.m.	Kern County Office of Education 1300 17th Street, Bakersfield 93301
9 Southern	Nov 13, 2007 9:00 a.m.–12:30 p.m.	USC Orange County Center 2300 Michelson Drive, Irvine 92612
10 RIMS	Jan 16, 2008 9:00 a.m.–12:30 p.m.	West End Education Service Center San Bernardino County Office of Education SS 8265 Aspen Ave., Rancho Cucamonga 91730
11A Los Angeles (except LAUSD)	TBD	TBD
11B LAUSD	TBD	TBD

County-based opportunity

In addition to the skill enhancing facilitated regional meetings listed above, each county department of mental health will collaboratively develop prevention and intervention plans that are county specific to address children's mental health needs. To explore and establish procedures and protocol to bring resources to students, local education agency boards are urged to:

1. Designate representation at the Mental Health Services Act county planning group.
2. Contact the director of the county department of mental health as soon as possible to learn of meeting details.

Benefits of engagement

The school district/county office of education designee can take advantage of an important opportunity to establish purposeful and systematic collaboration with county mental health department. By securing a place at the collaborative table each designee will:

- Establish and address common goals such as preventing school failure, preventing school drop out, reducing school suspensions and expulsions for behavior problems, developing methods of early identification of and intervention for mental health needs and preventing the progression of mental illness that requires special education services.
- Facilitate the flow of services to meet the needs of children through joint agreements and policies.
- Create a more responsive network of communication and support to meet changing school/community mental health needs.
- Provide an opportunity to systematically address prevention as well as intervention in the lives of children.
- Encourage a more strategic use of existing resources.
- Pave the way for future resource opportunities through relationship-building and knowledge of community-based resources.

Questions to consider

Whether preparing for participation in MHSA collaborative opportunities or working to better promote children's mental health within the district or county office of education, the governance team might consider the following questions:

Setting direction

- What is the link between mental health and academic achievement?

- What is the expectation of this community with respect to health promotion?
- Has the board established goals making student health a priority in the district/county office of education?
- What mental health related services are being provided by the district and county office of education? Are these sufficient to meet the demand for services?
- Has a community-wide needs assessment been conducted recently to identify unmet mental health needs? Do the results suggest new ways that the district/county office can assist in promoting mental health among students?

Establishing an effective structure for the district/county

- Are policies in place to provide direction to the superintendent regarding the provision of support services for students?
- What changes, if any, need to be made in the district's/county's policies to better address collaboration with county agencies and community-based organizations on mental health services?
- Does the budget allocate resources to provide counseling or other related support services for students?
- Does the budget allocate resources to enable staff to engage in collaboration with local agencies on children's services?

Providing support

- Does the board provide adequate support to the superintendent and district staff to implement district programs and policies pertaining to mental health?

Holding the system accountable

- Does the board regularly receive reports on the effectiveness of support services provided by the district/county office?
- Does the community have a system in place to regularly evaluate the effectiveness of mental health programs?
- Do district staff and/or board representatives participating in community wide collaboration report back to the board on the activities or progress of the collaboration?

Acting as community leaders

- Is the board and/or staff currently collaborating with city or county agencies and community-based organizations on issues related to student health or other areas of common interest?
- Have plans been made to hold stakeholder meetings and county/district-wide forums related to mental health?

- Are school board and/or staff representatives participating in MHSA county-wide stakeholder meetings to ensure children's/district's/county needs and perspectives are articulated?

Resources:

Burns, B.J., Costello, E.J., Angold, A., Tweed D., Stangl, D., Farmer, E. M.Z., & Erkanli, A. (1995) DataWatch: Children's mental health service use across service sectors. *Health Affair*, 14(3), 147-159.

California Department of Mental Health. www.dmh.ca.gov

Carnegie Council on Adolescent Development. (1989) *Turning Points: Preparing American Youth for the 21st Century*, report of the Task Force on Education of Young Adolescents Washington, DC: Author (p. 61).

City, County, Schools (CCS) Partnership, www.ccspartnership.org

CSBA, www.csba.org CSBA Policy Services Department offers related sample policies to its subscribers, such as BP 1020 Youth Services, BP 1400 Relations Between Other Governmental Agencies and the Schools, BP 5141.52 Suicide Prevention, BP/AR 5141.6 Student Health and Social Services and BP/AR 6142 Guidance/Counseling Services.

Deichert, K. California Department of Mental Health, External Affairs, Office of the Director. Interview September 5, 2007.

Governor's Budget 2007-2008. Mental Health Services Act (Proposition 63). www.ebudget.ca.gov/BudgetSummary/HHS/26641987.html

Mental Health Services Oversight and Accountability Commission, Memorandum May 18, 2007. www.dmh.ca.gov/MHSOAC/docs/OversightAcctCommittee/MHSAStudentMentalHealthInitiative5_24.pdf

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