CRDP Phase 2

Community Forum

Redding, CA

December 10, 2014

Agenda

1:00 – 1:15 ***Welcome, Introductions & Housekeeping***
Marina Augusto, MS Counseling, Staff Services Manager
Office of Health Equity, California Department of Public Health

1:15 – 1:50 ***California Reducing Disparities Project (CRDP) Phase 2 Design***
Aimee Sisson, MD, MPH, Public Health Medical Officer
Office of Health Equity, California Department of Public Health
Q & A

1:50 – 5:00 ***Discussion of CRDP Phase 2***
Andrew Chang, Lead Solicitation Consultant

1:50 – 2:35	Pilot Projects Q & A
2:35 – 2:45	Break
2:45 – 3:30	Technical Assistance Providers Q & A
3:30 – 4:15	Statewide Evaluation Team Q & A
4:15 – 4:45	Local Education, Outreach, and Awareness Q & A
4:45 – 5:00	Closing Comments and Questions Feedback from Stakeholders

Community Forum Guidelines

- The intent of this forum is to share our ideas and obtain feedback from key stakeholders prior to the release of the solicitations. The written solicitations will document the final specifications and requirements for each solicitation
- Allow presenters to finish presentations. There will be time at the end of each presentation for questions and comments
- Listen actively. Respect others when they are talking
- Be solution oriented in your speech – provide constructive criticism
- Do not be afraid to respectfully challenge one another by asking questions, but refrain from personal attacks – focus on ideas
- At the end of each section we will have a question and comment portion. We will unmute the conference line at this point. To avoid confusion, please create a queue by posting the word “Comment” in the Q&A WebEx box, which will be time-stamped. We will call up each individual in order based on that queue
- If you are not speaking, please keep your line muted so to avoid background noise
- If you have any technical problems during the Forum, please email Dawn Munoz at dawn.munoz@cdph.ca.gov or call (916) 893-9946

What is the CRDP?

What CRDP Is

- One-time demonstration of limited number of promising practices within targeted communities
- Opportunity to develop and implement new methods to gather data
- Exhibition of new community participatory program evaluation methods to prove effectiveness
- Effort to achieve system changes through concerted efforts

What CRDP Is Not

- Comprehensive program to address all the mental health needs of targeted communities
- Statewide program that impacts populations beyond African American, Asian American/Pacific Islander, Latino, Native American and LGBTQ communities
- Continuous funding source for promising practices
- Funding source for new programs

CALIFORNIA REDUCING DISPARITIES PROJECT PHASE 2 OVERVIEW

CDPH Office of Health Equity

December 2014

Aimee Sisson, MD, MPH

CDPH
PublicHealth

CRDP PHASES

- Phase 1: Develop strategic plan to reduce mental health disparities in 5 populations
  - Fund 5 Strategic Planning Workgroups to engage communities, develop Population reports
  - Fund development of Strategic Plan
- Phase 2: Implement strategic plan
  - Focus on validating promising practices / community-defined evidence* programs)

*Set of practices that communities have used and determined to yield positive results as determined by community consensus over time, that may or may not have been measured empirically but have reached a level of acceptance by the community (Community Defined Evidence Project Working Group, 2007)

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PHASE 2 BASIS

- CRDP Draft Strategic Plan
- Key Informant Interviews
  - Internal
  - External
- CRDP Brain Trust
- Public Vetting

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PHASE 2 VISION

We envision a California in which all individuals, regardless of race, ethnicity, sexual orientation, or gender identity, receive quality mental health prevention and treatment services delivered in a culturally and linguistically competent manner.

- Anticipated near-term (5-10y) outcomes:
  - Numerous CDE programs funded in Phase 2 found to be effective
  - Validated CDE programs funded by county mental health departments throughout California using MHSA funds
  - Relationship between underserved communities and county mental health departments is healing
  - Underserved communities advocate for individual and collective needs locally and statewide

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GUIDING PRINCIPLES

- Do business differently
- Build community capacity
- Fairness
- System change

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PROGRAM COMPONENTS

- Pilot Projects (approx. 60% of funds)
- Evaluation (25%)
- Technical Assistance & Training (10%)
- Infrastructure (5%)
- Administration

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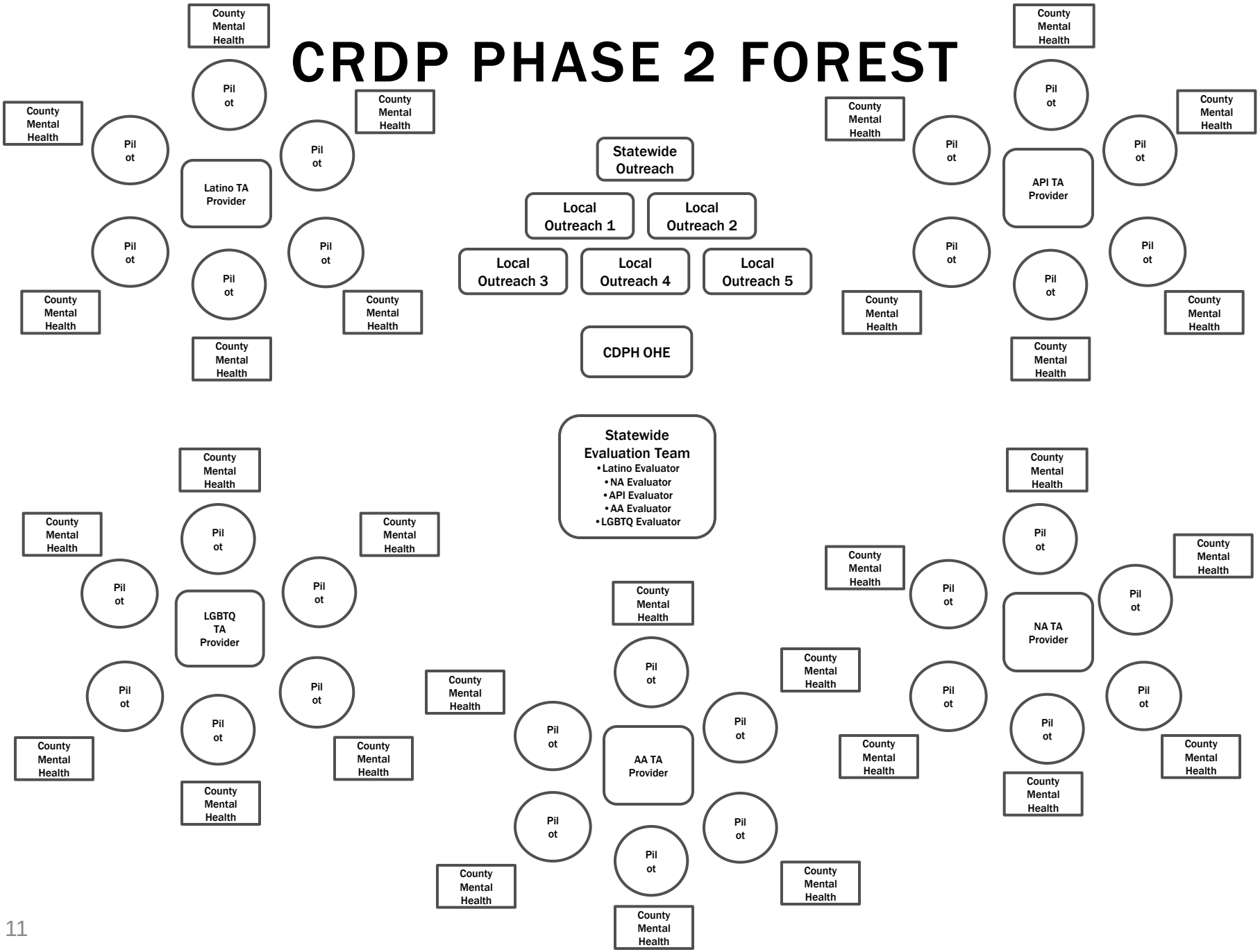
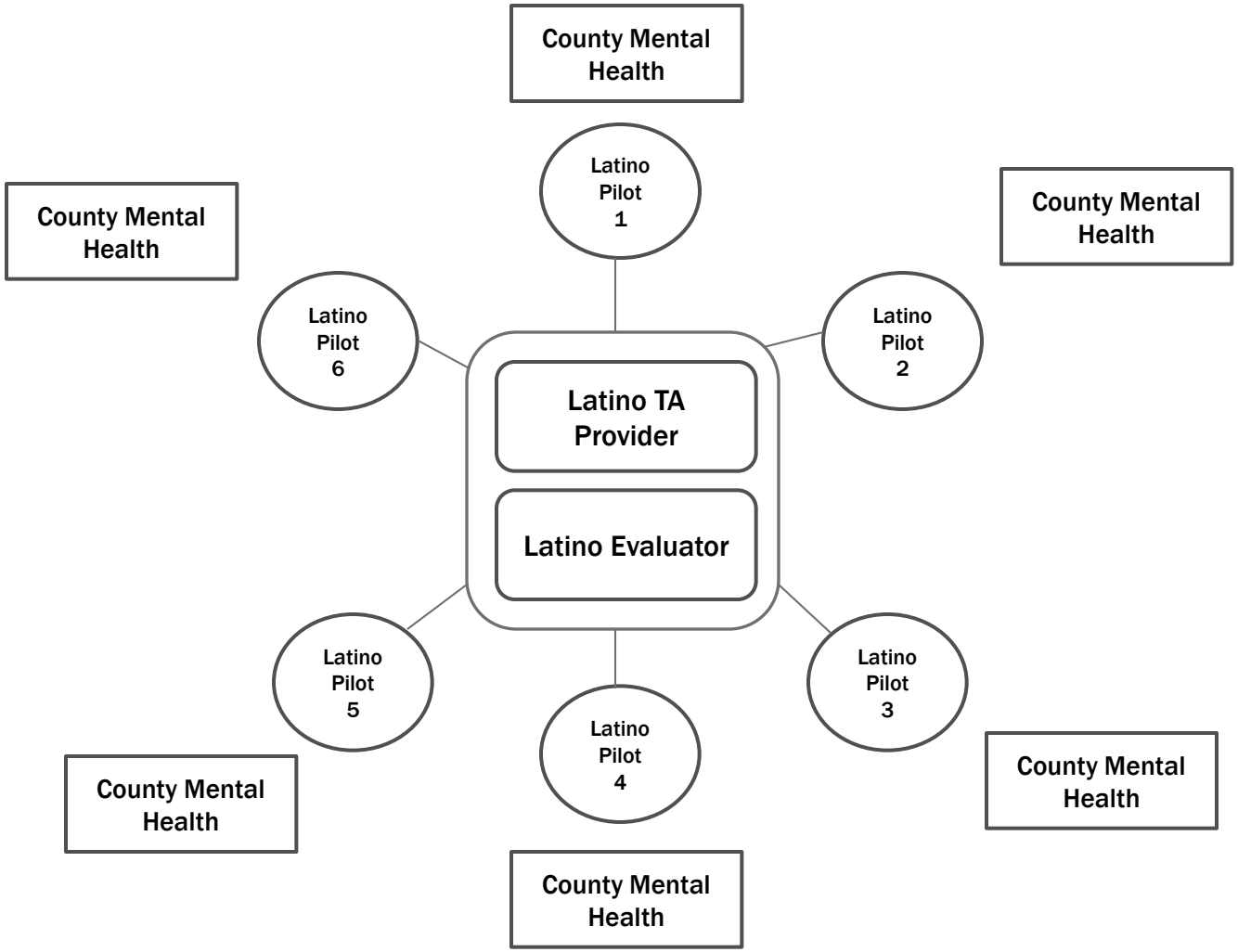
CRDP PHASE 2 FOREST



POPULATION APPROACH



- One network for each of 5 populations
- Pilot sites (5-7/pop'n) geographically spread across California

PILOT PROJECTS

- Validate promising practices /community-defined evidence programs
- 2 pilot types
  - Capacity Building
    - 3 per population (15 total)
    - Average $25,000 x 6 months
    - Continue to implementation if successful
  - Implementation
    - 5-7 per population (35 total)
    - Average $200,000 per year x 4 years
- Eligibility: Non-profit or government entity (including tribal government) with experience working directly with target population

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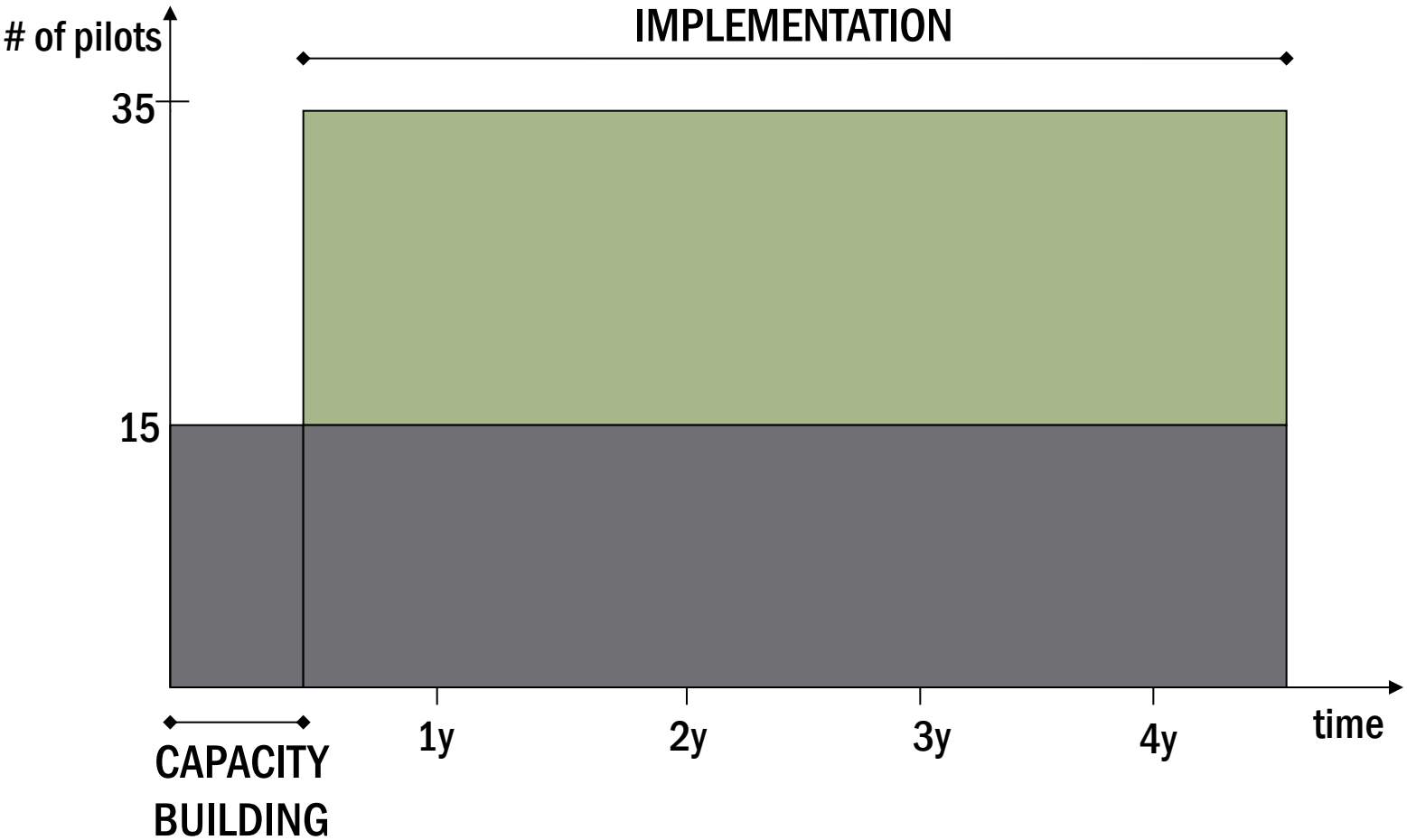
PILOT PROJECTS



EVALUATION

- Multilevel Approach
  - Pilot site
    - Each pilot site, preferably by independent contractor
  - Population
    - Common measures/methods across all pilot sites targeting same population
  - Statewide
    - Common measures across all pilot sites
    - Evaluate all Phase 2 components
- Community participatory
- Mixed methods

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TECHNICAL ASSISTANCE

	Provider	Capacity Building	Implementation
Administrative	Population-Specific TA Provider • One for each population • Culturally competent	Support smaller organizations to "apply" for implementation funding	• Support in contract & program management, budgeting, HR, sustainability planning, networking • Broker with CDPH, county mental health
Evaluation	Population-Specific Evaluator • Culturally competent • Part of Statewide Evaluation team	Support smaller organizations to articulate theory of change / logic model, begin evaluation planning	Support in evaluation planning and design, evaluation implementation, seeking evidence-based status

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INFRASTRUCTURE

- Address policy and system change
- Create CRDP Advisory Committee
  - Advise CDPH staff on mental health disparities and project direction
- Education, outreach, and awareness
  - Multicultural, with additional population involvement beyond 5 targets
  - Increase involvement by community members in policy, planning, and programming
    - Statewide (1)
    - Local (5)

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ADMINISTRATION

- ~60 contracts/grant agreements to be developed
- Staff to oversee contracts
- Staff for evaluation design, implementation, and oversight
- Funded by annual MHSA state administrative dollars (not part of $60M)

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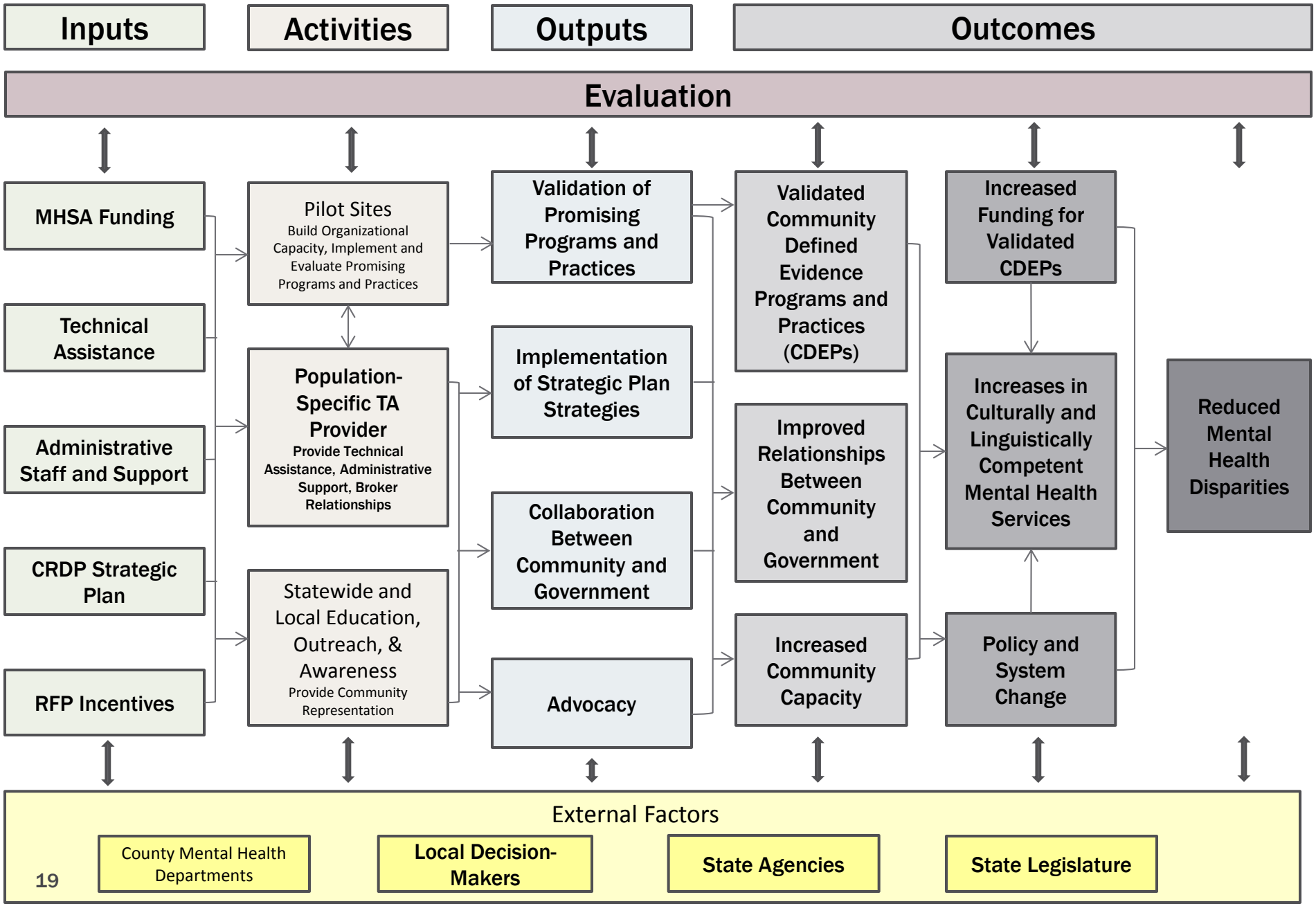
California Reducing Disparities Project, Phase 2



SOLICITATION APPROACH

- Multiple solicitations, rolled out in stages
- Stage 1
  - Statewide evaluation team (1)
  - Population-specific technical assistance provider (5)
- Stage 2
  - Capacity building pilot sites (15)
- Stage 3
  - Implementation pilot sites (15 + 20 = 35)
- Stage 4
  - Statewide education, outreach, and awareness (1)
  - Local education, outreach, and awareness (5)

PUBLIC INPUT

- Information gathering
  - Subject matter expert interviews (~40)
  - Brain Trust
  - Community forums
  - Online survey of potential pilot sites (through Dec 15)
- Draft solicitation review
  - Opportunity to comment on solicitation and requirements *prior* to formal release of bid
- Requirements protest
  - Allow bidders an opportunity to provide feedback *during* the procurement process

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CONTACT US

- Contact CRDP@cdph.ca.gov with questions or comments
- CRDP Phase 2 Webpage http://tinyurl.com/cdphcrdp
- Survey of Potential Pilot Projects https://www.surveymonkey.com/s/CDLNXYX

Questions from the Stakeholders

CRDP Phase 2 Overview

Q1: "Can you provide some general guidelines as to what the procurement process will involve for each of these roles? What can and can not be done in terms of procurement?"

Questions from the Stakeholders

CRDP Phase 2 Overview

Q2: "When will the RFPs be made available? Will they be sent to select organizations or will they be accessible by website?"

Questions from the Stakeholders

CRDP Phase 2 Overview

Q3: "Why don't we include youth in this project? They are incredibly marginalized when it comes to the subject of mental health, no matter race or sexual origin."

CRDP Phase 2 Overview

Additional Discussion

Pilot Projects

Overview:

- Seven Pilot Projects for each of the five population groups
  - Of these, three will begin in the Capacity Building phase
  - The remaining four will begin the Implementation phase
- Each population group will have a separate solicitation document and process to account for the different needs of each population

Qualifications:

- Must be a non-profit or government organization (including tribal)
- Must have an existing community-defined evidence program or practice (CDEP) that has the willingness and potential for evaluation
- Must exhibit strong ties to the specific community it provides service to

Questions from the Stakeholders

Pilot Projects

Q4: "How will Pilot Projects be defined? How broad of a vision does that definition embrace?"

Questions from the Stakeholders

Pilot Projects

Q5: "What qualifies an agency for Pilot Project consideration? How are Pilot Projects selected differently between the Capacity Building and Implementation phases? Are you evaluating a project's size or its experience when determining if it is best fit for either of those phases?"

Questions from the Stakeholders

Pilot Projects

Q6: "If a project chooses to apply for an implementation grant, would that allow them to request funding for additional mental health positions in order to increase capacity to do outreach, engagement, and service provision?"

Questions from the Stakeholders

Pilot Projects

Q7: "Will there be criteria that help to define 'smaller organization'?"

Questions from the Stakeholders

Pilot Projects

Q8: "I understand that the average projected grant is $200,000 per project; would an organization applying for substantially more than that amount be viewed negatively by those who are evaluating RFPs?"

Questions from the Stakeholders

Pilot Projects

Q9: "Are we confident the funding will be there for at least a five-year span?"

Pilot Projects

Additional Discussion

10 Minute Break

Technical Assistance Providers

Overview

- Population based – one Technical Assistance (TA) Provider for each of the five target populations
- Provide Pilot Projects with both Capacity Building and Implementation technical assistance
- Expected to provide an extensive array of technical assistance services for Pilot Projects on subjects including community engagement and organizational development to ensure project success and assist in long-term sustainability
- Does not provide evaluation technical assistance
- Each population group will have a separate solicitation document and process to account for the different needs of each population

Qualifications:

- Demonstrated high-level of cultural and linguistic competence
- Deep understanding of the communities that they propose to serve and documented trustful relationship
- History and experience providing broad array of excellent technical assistance for organizations with similar needs

Questions from the Stakeholders

Technical Assistance

Q10: "Who qualifies for technical assistance and what is the criteria for qualifying for such service? What types of technical assistance will be available and how does an agency access technical assistance?"

Technical Assistance Providers

Additional Discussion

Statewide Evaluation Team

Overview:

- Provide end-to-end evaluation of California Reducing Disparities Project
- Provide evaluation technical assistance to Pilot Projects
- We believe that the successful proposer will provide a team of evaluators that demonstrate an array of skills and expertise. Moreover, each population group lead must demonstrate cultural and linguistic competency to account for the different needs of each population
- Will coordinate core data collection across Pilot Project sites
- Will convene a symposium at the close of the project to formally document and share CRDP Phase 2 evidence and results

Qualifications:

- Demonstrated high-level cultural and linguistic competence in each population
- Expertise in developing and implementing mixed methods and community-defined evidence evaluations
- Demonstrated experience providing evaluation technical assistance to target population groups

Questions from the Stakeholders

Statewide Evaluation Team

Q11: "Who makes up the evaluation team and how will the evaluation team carry out evaluations? What will be the focus of the evaluation team? When will the evaluation process begin and how will the evaluation team determine the results?"

Questions from the Stakeholders

Statewide Evaluation Team

Q12: "Given the difficulty of finding, or the lack thereof, Native American specific data, are there any ideas or plans around forming a Native-specific data center or finding some other way of combining data sets statewide?"

Statewide Evaluation Team

Additional Discussion

Education, Outreach, and Awareness Overview

Overview

- One statewide education, outreach, and awareness contractor
- Five local education, outreach, and awareness contractors
- Multicultural: convene interests of all unserved, underserved, and inappropriately served populations
- Focus on creating system change and developing working relationships with all critical stakeholder groups through education and outreach

Qualifications

- Demonstrated high-level cultural and linguistic competence in each target population group AND other unserved, underserved, and inappropriately served populations
- Demonstrated experience in coalition building and management across different population groups
- Demonstrated experience in developing and maintaining community education, outreach and awareness campaigns

Questions from the Stakeholders

Education, Outreach, & Awareness

Q13: "In Northern California there seem to be no organizations empowering African Americans to live mentally healthier. Is that true or are there organizations so small we simply cannot find them?"

Questions from the Stakeholders

Education, Outreach, & Awareness

Q14: "What can be done to address culturally hostile environments in schools and social service institutions for Native American and LGBTQ children in rural areas? These environments can lead to depression, suicidal thoughts, and other mental health issues if left unaddressed."

Questions from the Stakeholders

Education, Outreach, & Awareness

Q15: "What about the criminalization of Native American traditions, such as Puberty Ceremonies that have shown positive effect on mental health outcomes? How can treatments such as these be made accessible and acceptable?"

Education, Outreach, and Awareness

Discussion

Closing Comments or Questions

Additional Discussion

For More Information

- Visit CRDP's website for resources, updates, and frequently asked questions: http://tinyurl.com/cdphcrdp

- For questions, comments, or concerns, please contact CRDP staff through email: CRDP@cdph.ca.gov