Mental Health Block Grant 10% Set-Aside: Information Session

May 24, 2016
Purpose: Introduce a new TA opportunity, the *MHBG Set-Aside Cross-State Virtual Learning Forum*

Agenda:

- **Set-aside efforts to date:** Highlighting state activity & momentum
- **Learning Forum:**
  - Overview of format, audience, & parameters
  - Feedback and discussion
- **Update on SAMHSA TA resources on first episode psychosis:** Currently available resources and new materials/activities under development
State Activity under the MHBG Set-Aside Since FY 2014

- Funding has been used by states in a variety of ways:
  - to expand *existing* Coordinated Specialty Care (CSC) Clinics
  - to support one or more *new* clinics or teams
  - to develop CSC infrastructure (planning activities, strategic hires, trainings, stakeholder engagement, etc.)
  - To implement services other than full CSC programs (e.g., EBPs such as supported employment, CBTp, etc.) that reflect the principles and/or components of CSCs

- SAMHSA is monitoring the progress of states, and has observed states moving forward from planning into implementation and operation. There has been a **significant degree of momentum** on a national level in a relatively short time frame.
State Activities with the MHBG Set Aside

In the original MHBG application for FY 16/17:

• 44 states planned to use funds for a CSC model FEP program:
  – 40 states reported installing, implementing, and/or sustaining CSC model programs.
  – 4 additional states reported exploring implementation of a CSC model FEP program.

• 7 states and territories planned to use funds to expand individual Evidence-Based Practices for treating first episode illness

• Information is currently being compiled on the use of the set-aside based on state updates following the increase to 10%
State Allocations of the MHBG 10% Set Aside for FY 2016/2017

- Over $500,000 (29 states, and PR)
- $250,000 to $500,000 (9 states)
- $100,000 to $250,000 (8 states, and D.C.)
- Less than $100,000 (4 states, & all territories except PR)
Introducing the *MHBG Set-Aside Cross-State Virtual Learning Forum*.

**Purpose:** To provide state officials and their first episode psychosis (FEP) programs with an opportunity to share and discuss with other states/programs issues of import related to FEP program planning, implementation, operation, and monitoring.
MHBG Set-Aside Cross-State Virtual Learning Forum Structure

- Interactive 90 minute calls/webinars to be held every other month
- Sessions will feature representatives from states (either state officials or set-aside-funded FEP Program representatives) who volunteer to present on a given topic area
- States & their FEP Program staff are encouraged to suggest topics of interest for these sessions

Note: CMHS SPOs will be on these sessions, but it will not be their role to issue SAMHSA policy determinations via this forum
Discussion of the Forum...

• Feedback on the proposed learning forum?
• Some initial areas of interest/need shared by states with their SPO’s include: data collection instruments and strategies; identifying referral sources; outreach/engagement; and financing & sustainability issues
• Other Topics of Interest?
How Can I Recommend a Topic Area or Volunteer to Present?

• We are glad that you asked!
  – Please e-mail your input to pat.shea@nasmhpd.org and ted.lutterman@nri-inc.org
  – As a general reminder, states are always encouraged to share their areas of interest and concern with their CMHS MHBG State Project Officers
Reminder of SAMHSA Technical Assistance Resources to Support Set-Aside Efforts

- Since the set-aside began, SAMHSA/CMHS has supported (and continues to support) numerous activities to facilitate MHBG set aside efforts, including:
  - National webinars on various key elements of the set-aside
  - Onsite and virtual technical assistance for states implementing first episode programming
  - Development of informational resource materials to support planning, implementation, operation, monitoring, and quality improvement efforts for first episode initiatives
  - Efforts to assess the impact of first episode programming
Available CMHS-Sponsored Informational Products on Programming for First Episode Psychosis

- **Reference Guide:** Inventory and Environmental Scan of Evidence-Based Practices for Treating Persons in Early Stages of Serious Mental Disorders
- **Information Guide:** Steps and Decision Points in Starting an Early Psychosis Program
- **Self-Guided Web-Based Tutorial:** Early Intervention Psychosis: A Primer
- **Fact Sheet:** Building upon Existing Programs and Services to Meet the Needs of Persons with FEP
- **Issue Brief:** Supported Education for Persons Experiencing a FEP
- **Manual:** Peer Involvement & Leadership in Early Psychosis Programs
- **Fact Sheet:** Implementation of Coordinated Specialty Services for First Episode Psychosis in Rural and Frontier Communities

Currently available at: [http://www.nasmhpd.org/content/information-providers](http://www.nasmhpd.org/content/information-providers)
SAMHSA Informational Materials on First Episode Psychosis Currently Under Development

Topic Areas Include:

• Addressing first episode psychosis in college settings
• Service titration considerations
• Optimizing medication management
• Information for families to “demystify" psychosis and explain coordinated specialty care (CSC) programming
• Considerations associated with programs for different age groups
• Making the business case for CSC programming
• Outcome measures used in CSC programs
• A summary of state activity under the 2016/17 set-aside
• Case studies on strategies to finance CSC activity
Snapshot of State Plans Using the 10% Set-Aside

Your State

State Contact: [From First Edition Snapshot]

Update for 10% Set-Aside: [Synthesized from 16/17 MHBG Plan]

Original Use for 5% Set-Aside: [From First Edition Snapshot]

FINANCING: [From First Edition Snapshot or 16/17 MHBG Plan]

<table>
<thead>
<tr>
<th>Total SMHA Expenditures (State FY 2014)</th>
<th>10% Set Aside</th>
<th>Additional State Funds for Early Intervention Programs</th>
<th>State Budget for Early Intervention Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>[From NRI]</td>
<td>[From SAMHSA]</td>
<td>[From First Edition Snapshot or 16/17 MHBG Plan]</td>
<td>[From First Edition Snapshot or 16/17 MHBG Plan]</td>
</tr>
</tbody>
</table>

USE OF MENTAL HEALTH BLOCK GRANT SET-ASIDE FUNDS:

<table>
<thead>
<tr>
<th>State Level of Implementation</th>
<th>Target Population</th>
<th>Original Use of MHBG Set-Aside Funds</th>
<th>New Uses of 10% Set-Aside Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Synthesized from First Edition Snapshot or 16/17 MHBG Plan]</td>
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<td>[From First Edition Snapshot]</td>
<td>[Synthesized from 16/17 MHBG Plan]</td>
</tr>
</tbody>
</table>

DATA REPORTING: [NEW – FROM 16/17 MHBG PLAN IF POSSIBLE]

<table>
<thead>
<tr>
<th>Identification</th>
<th>Intake</th>
<th>Enrollment</th>
<th>Improved Symptoms</th>
<th>Functioning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suicidality</td>
<td>☐ Yes</td>
<td>☐ No</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
</tr>
<tr>
<td></td>
<td>☐ Yes</td>
<td>☐ No</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
</tr>
<tr>
<td>Physical Health</td>
<td>☐ Yes</td>
<td>☐ No</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
</tr>
</tbody>
</table>

How frequently is this data reported to the SMHA by FEP providers? ________________

The FEP provider submits this information at the ☐ individual level or ☐ aggregated at the provider level.
## Challenges:

Challenges Foreseen by the State

[From 16/17 MHBG Plan]

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### Early Intervention Programs:

[Synthesized from First Edition Snapshot or 16/17 MHBG Plan]

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Type</th>
<th>Level of Implementation</th>
<th>Provider</th>
<th>Address</th>
<th>City</th>
<th>ZIP</th>
<th>Set-Aside Funds</th>
<th>SMHA Funds</th>
</tr>
</thead>
</table>

This table will capture the locations at which you provide services. It will have as many rows as your state has FEP treatment locations.
Examples of Webinar Training Topics
Sponsored by SAMHSA/CMHS

- Overview of the components of Coordinated Specialty Care (CSC) for persons experiencing a first episode psychosis (FEP) [including a webinar specifically for state planning councils]
- Supported education & employment services for persons with FEP
- Meaningful family involvement in CSC programming
- Lessons learned from various states on implementing FEP services
- Practical approaches to measuring fidelity in first episode programs
- Considerations for prescribers working with persons experiencing FEP
- Strategies for funding CSC initiatives
- Using cognitive behavioral therapy for psychosis (CBTp) for FEP
- Cost Effectiveness of CSC

Archived webinars available at: www.nasmhpd.org/webinars
Additional Webinars on First Episode Psychosis are Currently under Development

• Topic areas include:
  – Providing first episode services in rural/frontier settings
  – Promoting peer involvement and leadership in all aspects of FEP programming
  – Screening for and addressing suicidality in first episode programs
  – Fostering cultural competency in first episode care
Reminder...

- Under the SAMHSA State TA Project, states can also request both off-site (e.g., telephonic and web-based) TA, as well as in-person training and consultation.
- Average of 10 consulting days per event (including prep & follow-up), plus consultant travel.
- Submit requests into the on-line SAMHSA TA Tracker, a password-protected system. All of the MH Directors/Commissioners are authorized to use this system, and Commissioners can give authorization to other SMHA staff, as well.
- Log-in for the Tracker is: [http://tatracker.treatment.org/login.aspx](http://tatracker.treatment.org/login.aspx) If a state has forgotten its password or has other questions about accessing the Tracker system, then the Commissioner or authorized user can send an e-mail to: tatracker@treatment.org
Questions