

CMHSBG Priority Recommendations from MHPC to OMHSAS

Representatives from each Mental Health Planning Council (MHPC) Committee (Children's, Adult, and Older Adult) met 5 times from March to May 2021 to review the current Community Mental Health Services Block Grant (CMHSBG) Priorities, proposed new priorities by OMHSAS, and to make suggestions from the MHPC on which priorities the Council recommends the Office of Mental Health and Substance Abuse Services (OMHSAS) includes in the upcoming two year application that the state will submit in August 2021. The group discussed both priority areas and the most effective reporting measures (indicators).

- 1. Suicide Prevention:** Current priority with additional indicator recommended
 - a. Maintain in state call answer rate
 - b. Add Crisis Text Line Data

- 2. Older Adult:** Current priority with new indicators recommended
 - a. Increase OA response rate to the Mental Health Statistical Improvement Program (MHSIP) Survey and maintain satisfaction levels of Older Adult receiving services.
 - b. Infuse Older adult population in other priority areas such as housing, crisis, and peer

- 3. Youth and Family Involvement:** Current priority and indicator with recommendations to data collection recommended
 - a. Youth/Family advisory roles, be more prescriptive for data collected

- 4. Peer Run Crisis Respite Services:** New priority
 - a. 30/90 day hospitalizations following discharge
 - b. Self-reported diversion (client states would have gone to hospital if not for the availability of PRCR)
 - c. Track number served in PRCR

- 5. Supportive Housing:** Current priority with new indicators recommended
 - a. Track waitlist numbers, work to reduce.
 - b. Track reduction in Homelessness using PATH data.
 - c. Continue tracking numbers served using Human Service Plan data

- 6. Peer Service Expansion:** Modification of current priority with new indicators
 - a. Create Family Peer Certification that applies across the lifespan
 - b. Workforce Training
 - i. Year 1: Finalize the curriculum and platform for family peer training
 - ii. Year 2: Implement training/certification for family peer

- 7. Crisis Services:** New priority
 - a. 30/90 day hospitalizations following discharge
 - b. Track number of clients served in Crisis Services

- 8. Diversity, Equity, and Inclusion:** New Priority

- a. Workforce Representation-increase diversity in the mental health workforce
 - i. Increase representation among Certified Peer Specialists (CPS)
 - ii. Survey individuals served regarding access to providers from their racial, ethnic, and/or linguistic group.
- b. Reducing Psychiatric Resident Treatment Facility (PRTF) racial disparities (children's services)
- c. Student Assistance Program or similar data to monitor the rates of suicidal ideation and behavior by racial groups and address reported disparities

9. First Episode Psychosis: New Priority

- a. Reduce Duration of Untreated Psychosis. Measure community-based referrals vs. hospital/ER referrals to FEP Programs
- b. Increase number served in PA FEP programs.
- c. Increase family participation in FEP (consider Family Peer training)