

MHSA Outcomes Workgroup Post-Event Summary



Meeting 2

Meeting Information

Virtual Meeting 2: Thursday, November 14, 2:00 – 3:30 pm PCT

Attendees

Workgroup Members:

Ivy Clark
Dan Foley
Juliana Fuerbringer
Tarra Fuchsknotts
Tamara Hamai
Lucianne Latu
John McMahon
Jean Perry
Melissa Platte
Laura Shih
Lanajean Vecchione
Chandrika Zager
Jonathan (in Jordan Anderson's place)

Workgroup Facilitators:

Koray Caglayan
Tania Dutta
Doris Estremera
Brooke Shearon

Overview

On November 14, 2024, the American Institutes for Research (AIR) convened the second meeting of the Mental Health Services Act (MHSA) Outcomes Workgroup on direct treatment programs funded under MHSA's Community Services and Supports component. This document summarizes the input that was collected from workgroup members during the meeting. Input from members throughout the three-meeting series will be synthesized along with feedback from MHSA staff.

Welcome and Introductions

Presenter: Doris Estremera

Doris Estremera welcomed all workgroup members and presented a few announcements. She noted that we recorded the session, all materials can be found on the website under the Announcements tab, and that members can request a stipend via email. She reviewed the meeting guidelines and encouraged active participation, use of the chat for feedback, and open-minded contributions.

Reflections from Meeting 1

Presenter: Brooke Shearon

After reviewing the agenda for Meeting 2, Brooke Shearon emphasized the value of participant feedback from the first meeting, which shaped three key takeaways:

1. It is important to shift from deficit-based, crisis-founded indicators towards more holistic, person-centered measures of wellness.
2. There is a need to develop more nuanced, continuum-based definitions and data collection methods that incorporate both preventative and responsive care.
3. Tracking progress over time and being specific about timeframes in the definition can provide a clearer picture of long-term improvement and the impact of support.

Brooke highlighted that these insights inform(ed) the ongoing revision of the indicator definitions. Juliana Fuerbringer inquired about the timeline for process and definition revisions, and Brooke clarified that the process is iterative and participant feedback remains central. Tania Dutta added that AIR revised the definitions from Meeting 1 based on feedback to better address individual progress and evolving goals. Doris noted the integration of feedback will take some time, but the Workgroup team plans to share recommendations in a possible fourth meeting. Lanajean Vecchione then asked how best we can track progress over time. Tania thought this related to the conversation from the first meeting about how goals can change over time, and she reiterated that AIR revised the definitions based on meeting 1 feedback and will continue to do so.

Facilitated Discussion on Outcome Metrics for Direct Treatment Programs

Facilitators: Tania Dutta

Discussion Question 1

Does the following definition of “connection” meaningfully contribute to the overall framework for evaluating system impact? Is it accurate, relevant, and useful to you?

Proposed Indicator	Proposed Definition
Connection	The strength and quality of clients’ social connections and support networks, including engagement in community activities, sense of connectedness, and feelings of belonging, reflecting how the program fosters meaningful relationships and social inclusion for individuals served by the program.

Tania read the definition and asked for members’ thoughts and opinions on whether the definition captures the concept. During the conversation, Doris reiterated that we are focusing on the ideal scenario now, but we will likely have some reality checks as we work to structure data collection processes.

Workgroup members’ responses focused on the critical role that social connections, community, and support systems play in promoting individual well-being and recovery. Members discussed the importance of:

- **Hope and community.** Participants expressed the significance of hope in recovery and well-being, with some pointing out how an individual’s sense of belonging within a community can help mitigate feelings of isolation. Hope was described as a crucial component that allows individuals to move forward, even if the pathway isn’t always clear or linear. It was noted that people might feel disconnected or like they do not have something to look forward to, underscoring the importance of incorporating hope into interventions.
- **The quality of connections.** Several members focused on the importance of the depth and quality of connections, not just the number of social interactions. Superficial relationships were considered less supportive than deeper, more consistent ones. One participant reflected on their own experience, noting that while they had many connections, the meaningful, supportive relationships came from a few close individuals who could provide ongoing, substantive support.
- **Cultural identity and community.** Several members spoke about how cultural identity plays a crucial role in forming connections. Cultural programs that recognize and support a person’s heritage and background were viewed as protective factors that foster belonging and connectedness. This led to the suggestion that community activities should take cultural nuances into account to be inclusive and effective in building stronger ties among members. This also led to a nuanced discussion about whether the word “family” should be used to describe core supportive relationships or if broader terms like “community” or “social bonds” should be used. Some participants felt that “family” might not always be an inclusive or accurate term of everyone.
- **Trauma-informed approaches.** Several participants discussed the challenges individuals with trauma histories can face when trying to form connections. A trauma-informed approach was suggested to help address these challenges by recognizing the unique difficulties people may face in building relationships due to past experiences. Participants thought this could include using trauma-sensitive language and ensuring that support systems are designed to facilitate healing rather than inadvertently causing harm.

- **Challenges in measuring social connections.** Participants acknowledged the complexity of measuring the quality and impact of social connections. Members noted that while some people may have strong support networks, the definition and measurement of “community” can vary significantly. This makes it difficult to assess the effectiveness of interventions meant to foster these connections, suggesting the need for more nuanced tools and frameworks in evaluating social support.

Discussion Question 2

Does the following definition of “housing” meaningfully contribute to the overall framework for evaluating system impact? Is it accurate, relevant, and useful to you?

Proposed Indicator	Proposed Definition
Housing	The stability and quality of clients’ housing experiences, including access to secure and stable housing. This indicator reflects how the program supports individuals served by the program in reducing risk of experiencing homelessness and housing insecurity.

Tania read the definition and asked for members’ thoughts and opinions on whether the definition captures the concept.

Workgroup members’ responses focused on systemic barriers to housing, the importance of housing quality, and the connections between housing and other life factors. Many participants also shared personal experiences with their housing. Members specifically discussed the importance of:

- **Housing stability and accessibility.** Participants emphasized the critical importance of secure, stable housing for individuals’ well-being and the challenges posed by the lack of affordable housing and resources. Many participants shared personal stories about their concerns about accessing suitable housing, even with assistance like Section 8 vouchers. Participants expressed concerns about the limited availability of affordable units and the disproportionate cost of housing in certain regions. For those on the verge of homelessness, such as those in overcrowded situations or couch surfing, the existing systems often fail to adequately address their needs.
- **Systemic barriers and inadequacies.** Participants repeatedly addressed the deep-rooted systemic barriers that prevent individuals from accessing housing support. These barriers include the complicated eligibility processes for housing assistance, as people often have to prove extreme vulnerability or meet high-risk criteria that can often make them ineligible. Participants also noted that shelters and housing providers often prioritize profit over the well-being of individuals, which contributes to a lack of real support. Participants thought the difficulty of navigating bureaucratic systems and the inadequacies of shelter programs fail to equip people with long-term solutions.
- **Homelessness versus houselessness.** Participants urged for a broader definition of homelessness that includes individuals experiencing “houselessness”. While some individuals may technically have a roof over their heads, they are living in overcrowded, unstable, or unsafe conditions. Participants pointed out that this type of living arrangement – such as sharing cramped spaces or moving from place to place – can have severe negative effects on mental and physical well-being. Participants thought that expanding

the definition would allow for more comprehensive support for people in these situations who are often overlooked by current systems.

Discussion Question 3

Does the following definition of “criminal justice” meaningfully contribute to the overall framework for evaluating system impact? Is it accurate, relevant, and useful to you?

Proposed Indicator	Proposed Definition
Criminal Justice	Clients’ experiences with the criminal justice system, including encounters such as arrests, incarcerations, and legal challenges, reflecting the program’s effectiveness in reducing justice system involvement for individuals served by the program.

Tania read the definition and asked for members’ thoughts and opinions on whether the definition captures the concept.

Workgroup members highlighted several critical issues, emphasizing the complex ways in which interactions with law enforcement, system biases, and fear of the criminal justice system affect individuals. Members specifically discussed the importance of:

- **Law enforcement and criminal justice system interactions.** Participants emphasized the importance of recognizing how interactions with law enforcement, even prior to arrests, significantly impact individuals. Participants raised concerns about how individuals, particularly those with mental health or addiction concerns, are often treated as guilty before proven innocent, and the negative effects of these interactions on mental health. Members highlighted the complexity of navigating the system, with some suggesting that even individuals who did not engage in criminal activity can face undue harassment or criminalization simply due to their social status or behavior in public spaces.
- **Stigma and systemic bias.** Members focused on the systemic biases people face within both the criminal justice and broader social systems, especially for those with physical and mental disabilities. Participants thought that individuals with mental health challenges are more likely to be victims of crime, yet they often face stigmatization within the criminal justice system. This directly impacts whether they can receive housing, even if they are not involved in any criminal activity. The systemic bias not only exacerbates their existing struggles but also creates additional barriers to rebuilding their lives. Participants thought that restorative justice measures, such as expungement programs, could offer a path forward by helping individuals remove or lessen the impact of their criminal records.
- **Fear and mistrust of law enforcement.** Participants highlighted the recurrent fear and mistrust that those in marginalized communities can have for law enforcement. Participants thought that this mistrust can deter individuals from seeking help when needed and may exacerbate their isolation. Participants also expressed concern over the negative mental health impacts of constant worry about police encounters, particularly for those living on the streets or in precarious housing situations.

Data Collection, Outcome Metrics, and Analysis + Facilitated Discussion

Presenters/Facilitators: Koray Caglayan and Tania Dutta

Koray Caglayan outlined the current data collection process and its related challenges, specifically for evaluation program outcomes. He noted that AIR first confirms with program staff a list of unduplicated clients that have an open episode during the fiscal year of interest via an Excel list. He highlighted that the list contains client-specific information on demographic information, healthcare utilization (HCU), and program-specific outcomes (POs). Koray explained that the spreadsheets are populated with data from EHR systems and program staff, and AIR then uses the populated lists to generate evaluation reports for the fiscal year.

Name	ID	Referral Date and Source	Admission and Discharge Date	Age	Primary Language	Race	Ethnicity	Sex	Sexual Orientation	HCU	PO1	PO2
Client A												
Client B												
Client C												

Koray highlighted several expected future challenges with the current approach:

- 1) First, the data is mostly collected at a single point in time, and this does not capture the ongoing nature of client experiences and program participation. Given the discussion from meeting one about the importance of capturing data over time to reflect the full impact of programming, this is something he thought would need to be addressed.
- 2) Second, Koray mentioned the difficulty capturing the nuanced aspects of client outcomes through the current process, particularly related to measuring outcomes like volunteer work (a suggestion from the first meeting), which is not traditionally tracked in the same way as employment. Koray explained that the data collection process relies heavily on using electronic health records (EHR), which does not capture all the necessary information that the Workgroup members emphasized was important in the first.
- 3) Lastly, because of these challenges, he thought that primary data collection methods, such as directly asking clients about their experiences and outcomes, were necessary but presented a challenge in terms of staff time and workload. Koray also noted that the current healthcare utilization indicators, such as emergency department visits and inpatient hospitalizations, might not fully reflect the program’s impact on clients and could be reimaged.

He acknowledged that the data collection process can be improved, and he invited feedback from the group to explore ways to refine the process, including strategies for better capturing the nuances of client outcomes, integrating more diverse types of data, and balancing the need for comprehensive data with the concern of overloading program staff.

Koray transitioned to Tania to begin the facilitated discussion. Tania read the question below and asked for members’ thoughts and opinions on what challenges clients might face in sharing their input via primary data collection.

Discussion Questions 4 and 5

What challenges might clients face in sharing their feedback through strategies like a client-experience survey? What data collection approaches should be used to assess impact of the direct treatment programs in changing client outcomes? How can the data collection approaches capture nuances in client outcomes?

Workgroup members highlighted the need for more integrated, accurate, and culturally sensitive data collection systems that prioritize trust and empower clients in their own care processes. Members specifically discussed the importance of:

- **Data sharing across systems and a continuum of care.** Participants discussed the challenges posed by siloed health systems, where different departments or agencies may use incompatible systems, preventing a seamless view of a client’s care. Members suggested the importance of having mechanisms to trigger automatic reporting and allow for the collection of data across these systems to better track client progress. Participants thought that this would help address gaps in care, particularly for clients who receive services from multiple providers.
- **Trust and cultural sensitivity in data collection.** Trust was a recurring discussion point, with participants highlighting the importance of establishing strong relationships between clients and service providers. Participants discussed how clients often feel hesitant to share personal information, especially if they have to repeatedly recount their story to different people. Building trust over time through consistent and trauma-informed interactions is crucial. Members also emphasized the need for culturally sensitive data collection practices, such as using preferred language rather than primary language, to respect clients’ cultural and personal identities. Clients specifically thought that the word “sex” should be adjusted to “gender”.
- **The client experience and empowerment in data use.** Participants stressed the importance of empowering clients to have more control over the data collected about them. Participants suggested creating systems where clients can easily access and review their information, ensuring that their input is considered. They noted that data often originates from organizations rather than the clients, leading to discrepancies in what is reported versus the clients’ actual experience. They emphasized that clients do not need to repeat sensitive information if already noted because doing so can cause feelings of frustration and disempowerment.
- **Ongoing data collection process improvement.** Some participants reflected on the challenges of the current data collection process, including the limitations of existing surveys and methods and that qualitative research would also be important. Additionally, participants emphasized the need for regular updates to definitions and data collection standards that evolve in response to changing client needs and feedback.

Wrap-Up and Next Steps

At the end of the session, Tania thanked members for providing their valuable insights and participation. Tania asked workgroup members to continue reviewing the indicators. She added that the workgroup team will send out notes from this meeting and an agenda for the next meeting, which will be held on **December 12** from **2:00-3:30 pm PCT**.