



Funding Stream Fact Sheet: Prevention and Early Intervention (PEI)

Source of PEI Funds: In November 2004, California voters passed Proposition 63, the Mental Health Services Act (MHSA), which enacted a 1% tax on personal income in excess of \$1 million. The tax revenue is collected annually and deposited into the State Mental Health Services Fund. Much of the fund is provided to county mental health programs which then fund programs and services consistent with their local plans.

How Much PEI Funding is Available: Statewide, MHSA generates over \$1 billion in additional revenues for mental health services annually. Twenty percent of the total (about \$200 million annually) is for Prevention and Early Intervention (PEI).

Intended Use of PEI Funds: Twenty percent of the money generated by Prop 63 goes to PEI programs to “prevent mental illnesses from becoming severe and disabling” and to improve timely access for people who are underserved by the mental health system. PEI programs aim to reduce negative outcomes that may result from untreated mental illness: suicide, incarcerations, school failure or dropout, unemployment, prolonged suffering, homelessness, and removal of children from their homes. Services may be delivered by county mental health staff, other public agencies, or community-based organizations (CBOs).

Target Population:

Individuals at risk of, or who are experiencing, mental health problems, including but not limited to people in the following categories:

- Those with risk or onset of a mental illness who are unlikely to seek help because of stigma, lack of knowledge, cultural influences, or other barriers
- Children and youth in families where parents have a serious health problem or mental illness, abuse substances, experience domestic violence, or abuse or neglect their children
- Individuals who have been exposed to traumatic events or conditions, including violence, prolonged or complicated grief and loss, and excessive isolation
- Children or youth at risk of school failure or involvement in the juvenile justice system due to a mental illness or to risk of a mental illness as manifest by emotional and behavioral problems
- Individuals of all ages with early onset of a mental illness

Types of services funded include:

Direct services to individuals at risk of a mental illness (prevention) and with early onset of a mental illness (early intervention). Services also include a range of approaches designed to increase access to a range of services to address mental health issues as early as possible in their manifestation.

Examples include:

- Outreach to people who may have the early signs of mental illness
- Activities that reduce stigma and discrimination associated with being diagnosed with a mental illness or seeking mental health services
- Prevention activities for children and youth who either have, or have been living with parents who have mental illness
- Prevention or early intervention activities for parents and their infants and/or pre-school children when anyone in the family has risk or presence of a mental illness

- Basic needs, such as housing, income supports, transportation, or respite care for families dealing with mental illness
- Peer support from other parents and family members coping with mental illness, including self-help and support groups
- Parent and family education about mental health disorders and treatment services
- Parenting education and support for those at risk of, or who have, mental illness
- Efforts to help parents become effective advocates for their children who are at risk of or have mental illness
- Activities that enhance networks and informal supports and resources for families at risk of or facing mental illness
- Mentoring for children and youth who are at risk of or experiencing a mental illness

Examples of How FRCs/FSOs Use PEI Funds:

- Promotores: trained on mental health engagement and resources, provide health education and support, and address consumer barriers to accessing services, such as culture, stigma, language, and mistrust
- Outreach, education, support, and early intervention to families dealing with mental illness
- Parent Education (Such as: Safe Care Parenting and Parenting Wisely)
- Grief workshops for people experiencing traumatic loss
- Parent groups: “Soup Social”, Parent Café – promoting 5 Protective Factors for people with risk factors for mental illness
- Resource and referral support
- Case management for families (based on specific eligibility for service)

Considerations for FRC/FSOs wanting to access/use PEI Funds:

Benefits	Potential Challenges
<ul style="list-style-type: none"> • Focus on children, youth, families • Focus on parent education and family support • Emphasis on strength-based needs analyses, programming, and evaluation • Statute requires culturally competent community partnerships • Funding is flexible 	<ul style="list-style-type: none"> • Data collection / reporting requirements • Competition for funding • Creating programs/services that target the “priority” populations rather than the community at large • Distinction between PEI and Community Services and Supports may limit service delivery/programmatic options for FRCs/FSOs

How PEI Funding is Allocated: Each county’s mental health programs has a three-year plan, as well as annual updates for MHSA programs and expenditures. Plans and annual updates are adopted by the County Board of Supervisors and then submitted to the Mental Health Services Oversight and Accountability Commission (MHSOAC). County Mental Health and/or Behavioral Health Programs then execute their plans either through county service-delivery channels and/or contracts with community-based organizations (CBOs).

Stakeholder Participation: The state Welfare and Institutions Code gives detailed instructions for counties to follow regarding conducting an inclusive and meaningful stakeholder process for developing local plans for implementing MHSA PEI services. Read more about county planning and stakeholder process requirements here: mhsaac.ca.gov/docs/FY14-17_3YrProgExpendPlan_Instructions.pdf

Oversight and Accountability: The Mental Health Services Oversight and Accountability Commission (MHSOAC) is responsible for overseeing the implementation of MHSA, including review and approval of county Innovation plans after they are completed and submitted. The MHSOAC receives all county 3-year plans, annual updates, and annual reports. Individual County Mental Health or Behavioral Health

offices that contract with FRCs/FSOs for PEI services will monitor and provide oversight for those contracts.

How Can My Program Access PEI Funding?

- Read your county’s 3-year plan to understand local funding priorities
- Identify programs/services/activities your organization provides that align with funding priorities
- Apply for the funds step-by-step

Find out more about the use of this funding stream in your county:

Talk to your county’s mental health director to learn more about local planning and funding allocations. Find the contact information for your county mental health director here:

mhsoac.ca.gov/docs/MHDirectors_100113.pdf

Find your county MHSAs coordinator here: mhsoac.ca.gov/docs/MHSA_Coordinators_2013.pdf

Find Your County’s 3-Year Plan, Summaries, and Annual Updates here:

mhsoac.ca.gov/Counties/PEI/Prevention-and-Early-Intervention.aspx.

Find state and local contacts, more about the commission and its members, and other FAQs:

mhsoac.ca.gov/About_MHSOAC/MHSOAC_FAQs.aspx