



C A L I F O R N I A   D E P A R T M E N T   O F

# Mental Health

1600 9th Street, Sacramento, CA 95814  
(916) 654-2309

August 7, 2008

DMH INFORMATION NOTICE NO.: 08-23

**TO:** LOCAL MENTAL HEALTH DIRECTORS  
LOCAL MENTAL HEALTH PROGRAM CHIEFS  
LOCAL MENTAL HEALTH ADMINISTRATORS  
COUNTY ADMINISTRATIVE OFFICERS  
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

**SUBJECT:** PREVENTION AND EARLY INTERVENTION PROJECTS –  
CHANGE IN DESIGNATION OF “ALTERNATE PROGRAMS,”  
CLARIFICATION OF “UNDERSERVED CULTURAL  
POPULATIONS” AS A PRIORITY POPULATION, AND  
MODIFICATION OF TIMELINE FOR TRANSFERRING A CSS  
PROGRAM TO PEI

**REFERENCE** IMPLEMENTATION OF THE MHSA, WELFARE AND  
INSTITUTIONS CODE (WIC) SECTION 5848

This Department of Mental Health (DMH) Information Notice provides an update and clarification to Counties<sup>1</sup> about policies related to the Prevention and Early Intervention (PEI) Proposed Three-Year Program and Expenditure Plan Guidelines (Proposed Guidelines) released on September 25, 2007. Each revision to the PEI Proposed Guidelines described in this Information Notice offers more options to Counties. Specifically, this Information Notice addresses the following three topics:

1. Alternate Programs and PEI Resource Materials
2. PEI Priority Population: Underserved Cultural Populations
3. Transfer of a Community Services Supports (CSS)-funded activity to PEI Funding

DMH is currently developing regulations regarding the PEI Guidelines and is providing initial guidance to Counties as they continue Community Program Planning and the development of the PEI component of their Three-Year Program and Expenditure Plans. To the extent

---

<sup>1</sup> “County” means the County Mental Health Department, two or more County Mental Health Departments acting jointly, and/or city-operated programs receiving funds per WIC Sections 5701.5 (California Code of Regulations, Section 3200.090).

that there are differences between this Information Notice and prior DMH publications, the instructions in this Information Notice will prevail. DMH has revised the PEI Proposed Guidelines to reflect these changes. The revised PEI Proposed Guidelines (dated July 10, 2008) are available at

[http://www.dmh.ca.gov/Prop\\_63/MHSA/Prevention\\_and\\_Early\\_Intervention/PEI\\_Component\\_Guidelines.asp](http://www.dmh.ca.gov/Prop_63/MHSA/Prevention_and_Early_Intervention/PEI_Component_Guidelines.asp).

### **Alternate Programs and PEI Resource Materials**

Counties are no longer required to identify programs that were not included in the PEI Resource Materials released in September 2007 as “alternate programs.” Therefore, counties are no longer required to conduct and report on an outcome evaluation for each “alternate program.” However, Counties should continue to use the logic model for any PEI program selected during the planning process for a PEI Project as described in the above referenced guidelines. As always, Counties should make best efforts to select programs or interventions that protect and ensure the well being and safety of participants.

Counties are not required to choose PEI programs listed in the PEI Resource Materials. Thus, the PEI Resource Materials posted on the DMH website can be used as a technical assistance document to help Counties and stakeholders in their research to identify programs and interventions appropriate for use in their PEI Plans. This document will be updated as new information is available and as resources allow.

Below is a summary of revisions made to the PEI Proposed Guidelines to implement this change:

- Part I: Purpose, Background and Definitions
  - Exception for Individuals Experiencing At Risk Mental State (ARMS) or First Onset of a Serious Psychiatric Illness with Psychotic Features (page 9) has been revised by removing the reference to the PEI Resource Materials and to describe the “transformational intervention” for ARMS and first onset of a serious psychiatric illness with psychotic features.
  
- Part III: PEI Projects
  - County Selection of Programs (pages 16 – 17) has been revised to describe the PEI Resource Materials as a technical assistance document to assist Counties and stakeholders. The PEI Resource Materials along with other training and technical assistance resources are available on DMH’s website at the link below:  
[http://www.dmh.ca.gov/Prop\\_63/MHSA/Prevention\\_and\\_Early\\_Intervention/Resource\\_Materials.asp](http://www.dmh.ca.gov/Prop_63/MHSA/Prevention_and_Early_Intervention/Resource_Materials.asp)
  - Making a Difference (page 17) has been revised to describe the purpose of the PEI Resource Materials as a technical assistance document.

- PART V: Accountability and Evaluation (page 21)
  - The “note” citing the PEI Resource Materials has been deleted from this section.
  - Section F: Conduct a Local Outcome Evaluation of One PEI Project (pages 26 - 27). The last paragraph in this section that references the PEI Resource Materials has been removed.
- In the Instructions for Preparing the PEI Project Summary (Form No. 3), Enclosure 3, page 10, the section on alternate programs has been removed and Form No. 3 has been modified to remove references to alternate programs.

### **PEI Priority Population: Underserved Cultural Populations**

In the PEI Guidelines, “Underserved Cultural Populations” is listed as a potential Priority Population (page 5). However, this option was omitted from the list of allowable Priority Populations on Form No. 3. This inconsistency has been corrected; the revised version of Form No. 3 includes the option to select “Underserved Cultural Populations” as one of the Priority Populations for a PEI Project (without needing to select an additional PEI Priority Population).

The PEI Guidelines defines Underserved Cultural Populations as “those who are unlikely to seek help from any traditional mental health service whether because of stigma, lack of knowledge, or other barriers (such as members of ethnically/racially diverse populations; members of gay, lesbian, bisexual, transgender communities, etc.) and would benefit from Prevention and Early Intervention programs and interventions.” DMH recommends that all PEI Projects address the needs of the underserved racial/ethnic and cultural populations.

### **Transfer of a CSS-funded Activity to PEI Funding**

The PEI Proposed Guidelines (page 10) describe a process by which Counties may transfer an approved CSS-funded activity to PEI if the activity meets the PEI requirements and is approved by OAC. The PEI Proposed Guidelines are now revised (page 10) to allow more flexibility in the transfer date:

“Plan amendments for such a transfer will be considered only if the county intends to make the transfer to PEI funding effective *upon PEI component approval* or at the start of the fiscal year following approval of the PEI component.”

To request this transfer, the Counties should clearly identify the program(s) to be eliminated from CSS and transferred to PEI. Counties should follow the PEI Proposed Guidelines when describing the activity as a PEI Project (or program within a PEI Project) in their PEI Plan. Once the transfer is approved, then the Counties should inform DMH as to the intended use of the already approved CSS funding that is no longer required due to the transfer of the activity to PEI. Please refer to DMH Information Notice No.: 08-10 (released

on April 4, 2008) for instructions on how to describe the proposed change(s) to the CSS Component and how to complete the required exhibits.

Counties should maintain sufficient accounting records to clearly delineate that expenditures are not double counted in both CSS and PEI components on the Annual MHSA Revenue and Expenditure Report. DMH may audit each County's MHSA Revenue and Expenditure Report to verify that expenditures are not counted as both CSS and PEI Component expenditures.

DMH is committed to the Counties' success and supports the use of programs and interventions that are appropriate for PEI participants, particularly participants from underserved communities, and that achieve PEI outcomes for individuals and systems. If you have questions about this Information Notice, please contact Bertha MacDonald at (916) 651-0693 or [Bertha.MacDonald@dmh.ca.gov](mailto:Bertha.MacDonald@dmh.ca.gov).

Sincerely,

Original signed by

STEPHEN W. MAYBERG, Ph.D.

Director

cc: California Mental Health Directors Association  
California Mental Health Planning Council  
MHS Oversight and Accountability Commission  
Elaine Bush, Chief Deputy Director  
Denise Arend, Deputy Director, Community Services Division  
Carol Hood, Assistant Deputy Director, Community Program Development  
Michael Borunda, Assistant Deputy Director, Community Program Support  
Barbara Marquez, Prevention and Early Intervention Section  
Bertha MacDonald, Prevention and Early Intervention Section  
Rachel Guerrero, Chief, Office of Multicultural Services