Mental Health Services Act (MHSA)
Community Services & Supports (CSS)

What is MHSA?
In 2004 California passed Proposition 63, known as the Mental Health Services Act. It imposes a tax on California’s millionaires and the money is used to provide Mental Health Services. The Department of Mental Health, along with the Oversight Accountability Commission and the California Mental Health Directors Association, provide guidance for the Counties for the MHSA requirements. Three components of MHSA focus on direct clinical services (Prevention and Early Intervention, Community Services and Supports, and Innovative Programs), and three focus on infrastructure (Workforce Education and Training, Capital Facilities, and Information Technology).

What is the purpose of the Community Services & Supports (CSS) component?
To provide services and supports for children and youth who have been diagnosed with or may have serious emotional disorders, and adults and older adults who have been diagnosed with or may have serious and persistent mental illness.

What are allowable expenditures for the Community Services & Supports component?
This component allows funds to be used for mental health services, personnel, operating expenditures, and program management. Services must address all age groups. Programs funded by MHSA must be voluntary in nature. Services provided in jails and juvenile hall must be for the purpose of facilitating discharge. The majority of funds under CSS must be for Full Service Partnerships.

What are the service categories under CSS?
There are three types of services:

- **Full Service Partnerships (FSP)** - The foundation of FSPs is doing “whatever it takes” to help individuals on their path to recovery and wellness. There is a low staff to client ratio, a 24/7 crisis availability, and a team approach that is a partnership between mental health staff and clients. FSPs assist with housing, employment and education, in addition to providing mental health services.

- **General System Development** - Funds to help improve programs and services to address mental illness or emotional disturbance, including reducing ethnic disparities, mental health treatment, rehabilitation services including supportive housing and supportive employment, and personal service coordination/case management.

- **Outreach and Engagement** - This funding is established to reach underserved populations, including outreach to persons with brief or crisis oriented contact, and as an approach to reduce ethnic disparities.

What are the Essential Elements of MHSA?
- **Community Collaboration**: The goal of community collaboration is to bring members of the community together in an atmosphere of support to systematically solve existing and emerging problems that could not easily be solved by one group alone.
• **Cultural Competence:**
  Cultural competence includes language competence and view cultural and language competent programs and services as methods for elimination of racial and ethnic mental health disparities. There is a clear focus on improved quality and effectiveness of services. Service providers understand and utilize the strengths of culture in service delivery. Culturally competent programs and services are viewed as a way to enhance the ability of the whole system to incorporate the languages and cultures of its clients into the services that provide the most effective outcomes and create cost effective programs.

• **Client/family driven mental health system**-
  Adult clients and families of children and youth identify their needs and preferences which lead to the services and supports that will be most effective for them. Adult services are client-centered and child and youth services are family driven; with providers working in full partnership with the clients and families they serve to develop individualized, comprehensive service plans.

• **Wellness focus, which includes the concepts of recovery and resilience**-
  Recovery refers to the process in which people who are diagnosed with a mental illness are able to live, work, learn, and participate fully in their communities. For some individuals, recovery means recovering certain aspects of their lives and the ability to live a fulfilling and productive life despite a disability. For others, recovery implies the reduction or elimination of symptoms. Focusing on recovery in service planning encourages and supports hope.

  Resilience refers to the personal qualities of optimism and hope, and the personal traits of good problem solving skills that lead individuals to live, work and learn with a sense of mastery and competence. Research has shown that resilience is fostered by positive experiences in childhood at home, in school and in the community, mental health treatments, which teach good problem solving skills, optimism, and hope can build and enhance resilience in children.

• **Integrated service**- This means that services are “seamless” to clients and that clients do not have to negotiate multiple agencies and funding sources to get critical needs met and to move towards recovery and develop resiliency.