

Psychiatric Advance Directives (PADs) MHA Innovation (INN) Project

Public Hearing
May 26, 2021



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PADs Background

PADs are currently available in 27 states. A PAD allows a person in a mental health crisis to retain their decision-making capacity by choosing supporters to help advocate for their choices. Consumers who have executed PADs express and endorse feelings of self-determination, autonomy, and empowerment and have less negative coercive treatment experiences.

Key Elements



Identified Challenges

Barriers with implementation

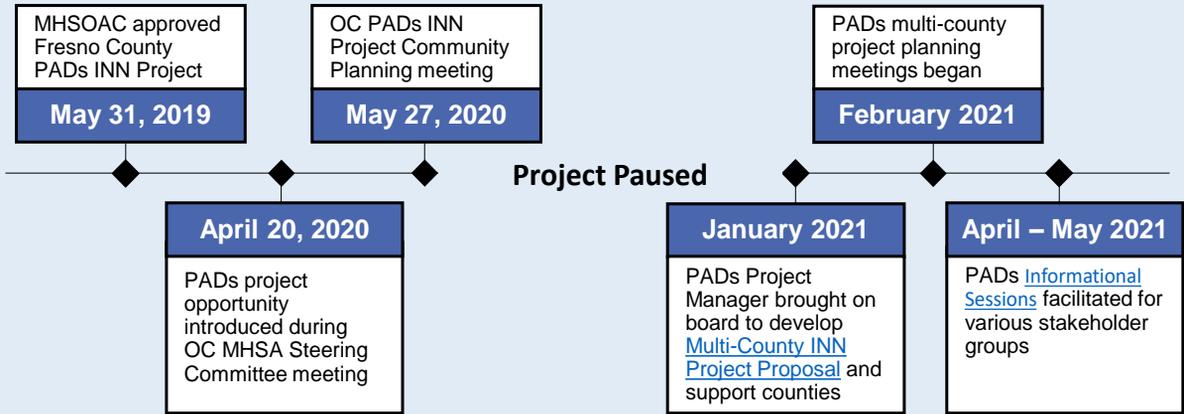
Lack of standardized process

Lack of knowledge, awareness

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PADs INN Project Timeline

The Mental Health Services Oversight and Accountability Commission (MHSOAC) approved Fresno County’s PADs INN Project in May 2019. Upon approval, the MHSOAC provided the opportunity for interested counties to join this project to support a statewide effort.



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Which counties are interested?

There are currently five counties interested in participating in the PADs Multi-county INN Project:



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What will the counties do on this project?

➔ Increase Awareness

- ☀️ Develop standardized PADs training, drawing on the expertise of peers, consumers, lawyers, clinicians, etc.
- ☀️ Provide standardized PADs training to communities and stakeholders by Peers, trained by PADs Consultant (Laurie Hallmark).

➔ Foster Acceptance

- ☀️ Standardize a statewide PADs template with input from peers, consumers, lawyers, clinicians, etc.
- ☀️ Standardize a PADs training "tool-kit" to be replicated from county to county.
- ☀️ Help consumers create individualized PADs with peer support and guidance.

➔ Improve Adoption

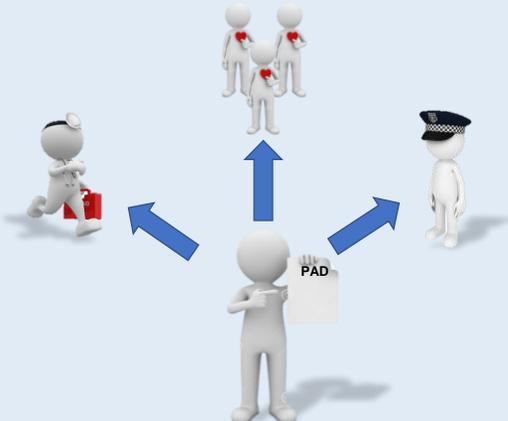
- ☀️ Utilize a Learning Management System for access to PADs training and materials.
- ☀️ Create a fully functioning cloud-based PADs Platform for ease of use by consumers, law enforcement and hospitals for in the moment use.
- ☀️ Explore fidelity and legal structure to enforce individual choice and acceptance of standardized PADs in CA.

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What makes this project transformative?

Paper-based PAD

Consumer must have most current PAD available to share with each provider and law enforcement (LE) during a crisis
OR
 Consumer must have shared PAD with each provider prior to the crisis with no recent changes to the document



VS

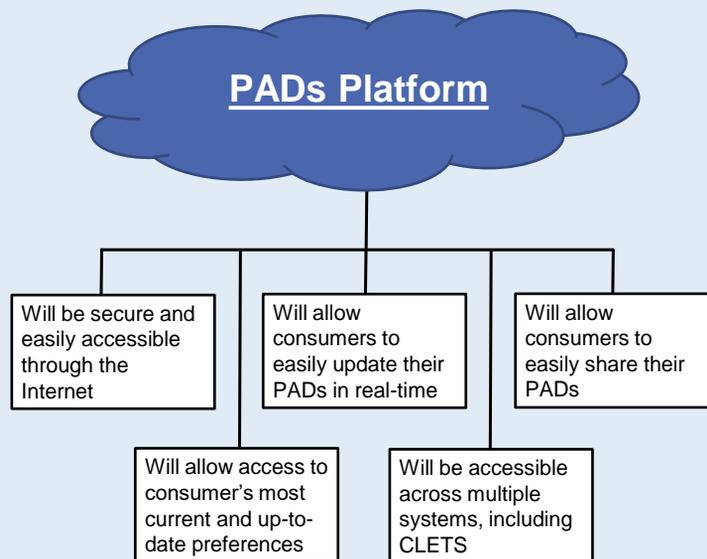
Cloud-based PADs Platform

Consumer can create and update sections of PAD in real-time
AND
 Consumer can share PAD and/or allow permission for providers and LE to access the most current version of the document any time via the Platform



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How is a cloud-based platform better than paper?



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Does a fully functional PADs Platform already exist?

Features & Functionality	oscER (NAMI San Diego; mobile app)	Mental Health Crisis Plan (SAMHSA; mobile app)	Chorus (OC proposed)	???? (proposed alternative)
Ability to create, update and store an individualized PAD		✓	✓	✓
Ability to upload existing PAD		✓	✓	✓
Ability for person to share PAD with providers (e.g., PDF, QR code)		✓	✓	✓
Direct access to call crisis resources within the app	✓	✓	✓	✓
Direct access to call a broad range of behavioral health and community support services	✓	✓	✓	✓
Access to in-app training and educational information	✓	✓	✓	✓
Interoperability for exchange of health information allowing providers to directly access PADs (i.e., hospitals, CLETS)			✓	✓
Direct access to online or digital support systems (i.e., CalHope, OC Navigator)			✓	✓
Interactive platform, using Artificial Intelligence			✓	✓
Ability to create an enhanced personal profile for multi-purpose use (i.e., OC Navigator)			✓	✓
Community involvement in development (i.e., design, user interface, features and functionality)			✓	✓
Total Cost	Unknown	\$14.2M; 5yrs	\$8M; 4yrs	Unknown; 4yrs

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What are our options?

Creating a PADs platform is a required element of the multi-county INN proposal. Currently no existing platform meets all the requirements, therefore one will have to be built.

Chorus

- ✦ Aligns with OC CARES (formerly Integrated Services Vision) goal to coordinate system of care
- ✦ Supports OC Navigator efforts and guarantees interoperability
- ✦ Promotes care coordination
- ✦ In the final stages of PHI/PII vetting

Alternative

- Participating counties will identify an alternative platform, 65.9% of which will be funded by OC
- OC will need to budget for aligning new platform with OC Navigator and EHR to make it interoperable
- Any identified platform will need to go through full security vetting by HCA IT which can take 6 months or longer
- Costs for an alternative proposed platform unknown, but not to exceed \$8M

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What is OC's proposed budget?



OC Personnel: \$933,542

- 2.50 FTE Peer Specialists
- 0.50 FTE Project Manager
- 0.05 FTE INN Manager
- 18% indirect



Local Operating: \$79,296

- Office equipment & supplies
- Print materials
- Translations (8 languages)
- Smartphone Plans for Peers



Consultants: \$11,845,470

- \$1,545,470 Collaborative:**
- PAD Trainer
 - PAD Tool Kit
 - Evaluation
 - Marketing
 - Multi-county Project Manager
 - 9% Administrative

- \$10.3M OC Consultants:**
- **\$8M** Staff for Technology build
 - Includes costs for client and provider input
 - **\$2.3M** User Interface Evaluation



Other: \$30,640

- Travel

Total Proposed 4-year Budget: \$12,888,948

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Project Support



“NAMI CA supports the use of a standardized PADs system approach. Information sharing for those experiencing behavioral health crisis can save lives, provide meaningful information, and surround the individual with the support they need. This is a step in the right direction towards coordinated care for those living with a behavioral health challenge and their families.”

~ Jessica Cruz, MPA/HS, CEO

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Public Comments

The OC PADs proposal was posted for 30-day public comment on April 23rd through May 23rd.

A total of two public comments were received.* Of these:

One was in favor of using a portion of the funds to support the PADs component of the project but did not support any funding for the technology component.

One acknowledged the importance of PADs but was not in favor of supporting PADs as an Innovation project and suggested a statewide public/private partnership as more suited for this effort.

*Please see attachments to read public comments in full

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*Thank
you*

