Establishing Priorities for Work Group Recommendations

Please rate your recommendations, using the following criteria:

- (1) What is the recommendation?
- (2) Which populations does the recommendation concern?
- (3) Which MHSA essential elements (1-Consumer/family driven, 2-individualized services, 3-wellness and recovery, 4-cultural competence) are supported by the recommendation?
- (4) Is it powerful: will it have significant impact, meet an important, unmet need?
- (5) Is it affordable, considering other funding sources, potential funding reductions? (Include at least one low or no-cost recommendation)
- (6) Is it feasible? Consider capacity, resources, ease of implementation

In Column (7), list recommendations in priority order

(1) Recommendation	(2) Population	(3) MHSA Essential elements	(4) Power (Low, med, high)	(5) Cost, other funding (Low, med, high)	(6) Feasibility (Low, medium, high)	(7)Overall priority (1-10)
 Training for mental health staff & providers including mobile crisis: Best practices – child and geriatric Customer service/cultural competency/sensitivity to consumer needs 	C A OA					
 2. Training for Consumers Advocacy How to find one's purpose and passion Engagement with others, the community 	C A OA FSP					
 3. Outreach and Information about community based & county mental health services and access to services Schools Families with children County staff Consumers/community Resource guide/provider and service matrix 	C TAY A OA					

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(1) Recommendation	(2) Population	(3) MHSA Essential elements	(4) Power (Low, med, high)	(5) Cost, other funding (Low, med, high)	(6) Feasibility (Low, medium, high)	(7)Overall priority (1-10)
Website, e-mail, current networks						
4. Increase staffing	С					
 Mobile crisis – for in-home, in-school response 	OA					
TAY FSP – psychiatrist	TAY					
 OA FSP-increase Clinician (LCSW), by .5 position; add dedicated RN 	FSP					
5. Peer support and mentoring – multiple settings	TAY					
	OA					
	A					
	C					
6. Coordination/Seamless System	FSP					
 Internal – between Mobile Crisis and TAY, 	TAY					
outpatient and FSP (Impact model)	A					
Medical and mental health- to allow flow to	C					
different levels of service	OA					
With community partners such as hospitals, law enforcement						
Clear referral process						
7. In-home/in-school services	С					
	OA					
8. Structured out-patient follow-up (i.e. Day Break)	A					
	TAY					
9. Increase education, training, employment, voluntary	A					
opportunities for consumers	TAY					

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