

MENTAL HEALTH SERVICES ACT INNOVATIVE PROJECT IDEA SUBMISSION FORM

Name:

Date:

Email:

Phone:

MHSA Innovation (INN) funds provide opportunities to learn something new that has the potential to transform the mental health system. An INN project is defined as one that contributes to learning and one that tries out new approaches that can inform current and future practices. The County of Santa Clara Behavioral Health Services Department (BHSD) invites the community to submit new project ideas for the County's next round of INN projects.

We invite you to submit ideas between **November 10 and December 17, 2021**.

1. Which of the following goal(s) does your idea address, specifically? (Required)

- Increase access to mental health services to underserved groups as defined in [Title 9 CA Code of Regulations, Section 3200.300](#)
- Increase quality of mental health services, including measurable outcomes
- Promote interagency and community collaboration related to mental health services or supports or outcomes
- Increase access to mental health services

2. Innovation projects contribute to learning. Which of the following MHSA-defined Innovation categories does the project address? (Required)

- The project introduces a **new mental health practice or approach** that is new to the mental health system, including but not limited to prevention and early intervention.
- The project makes a change to an existing practice or approach, including but not limited to application to a different population.
- The project introduces a **new application** to the mental health system of a promising community-driven practice or approach that has been successful in a non-mental health context.

3. Please select the area that your innovative idea will address:

- Co-Occurring (Mental Health/Substance Use Treatment) Integrated Practices
- Workforce Engagement
- Use of Technology to Improve Access
- Use of Technology to Improve Bed Capacity
- Care Coordination: Managing Transitions/Aftercare Treatment



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4. Describe the Innovation Project: *What is its purpose? What activities does it involve? How is this project innovative? What is the learning goal? Please include data, if available.*

5. What is the need that this project addresses? *Can be needs of individuals, families, groups, providers or systems. How does it address a gap or need? Please include data, if available.*

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6. Who does the project serve? *Priority demographics, numbers of consumers, providers, community members*

7. What new approach, method or adaptation do you want to test? *What are the potential positive changes for individuals, families, systems, etc. under this new program? What should be measured to evaluate the effectiveness of the approach?*

8. Is there any research to support this project idea, or examples of it working in a non-mental health setting? *If so, please explain, include websites, reports, citations, etc., as space allows.*

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Additional Information (Optional)

What is your age?

- 0-15 years
- 16-25 years
- 26-59 years
- 60+ years

What group do you represent?

- Consumer of mental health services
- Family member of consumer
- Law Enforcement
- School Personnel

What is your ethnicity?

- Latino/Hispanic
 - Caribbean
 - Central American
 - Mexican/Mexican American/Chicano
 - Puerto Rican
 - South American
 - Other: _____
 - Decline to State
- More than One Ethnicity
- Decline to State

What is your gender?

- Male
- Female
- Other

- Faith Community
- Community Agency
- Community Member
- County Staff
- Other: _____

Non-Hispanic/Latino

- African
- Asian Indian/South Asian
- Cambodian
- Chinese
- Eastern European
- European
- Filipino
- Japanese
- Korean
- Middle Eastern
- Vietnamese
- Other: _____
- Decline to State

Submit your form no later than December 17, 2021 by email: MHSA@hhs.sccgov.org. If you have any questions, please contact Juan Miguel Muñoz-Morris at (408) 890-9168.