

## Mental Health Services Act (MHSA) | General Standards.

Sacramento County is committed to upholding the MHSA's six general standards, which are:

1. **Community Collaboration**
2. **Cultural Competence**
3. **Client Driven**
4. **Family Driven**
5. **Wellness, Recovery and Resilience Focused**
6. **Integrated Experience for Clients and their Families**

### 9 CCR § 3320

#### § 3320. General Standards.

(a) The County shall adopt the following standards in planning, implementing, and evaluating the programs and/or services provided with Mental Health Services Act (MHSA) funds. The planning, implementation and evaluation process includes, but is not limited to, the Community Program Planning Process; development of the Three-Year Program and Expenditure Plans and updates; and the manner in which the County delivers services and evaluates service delivery.

- (1) **Community Collaboration**, as defined in Section 3200.060.
- (2) **Cultural Competence**, as defined in Section 3200.100.
- (3) **Client Driven**, as defined in Section 3200.050.
- (4) **Family Driven**, as defined in Section 3200.120.
- (5) **Wellness, Recovery, and Resilience Focused**, as defined in WIC 5813.5(d).
- (6) **Integrated Service Experiences for clients and their families**, as defined in Section 3200.190.

**Community Collaboration** means a process by which clients and/or families receiving services, other community members, agencies, organizations, and businesses work together to share information and resources in order to fulfill a shared vision and goals.

Notes: Cal. Code Regs. Tit. 9, § 3200.060 Note: Authority cited: Section 5898, Welfare and Institutions Code. Reference: Sections 5830(a)(3) and 5866, Welfare and Institutions Code.

**Cultural Competence** means incorporating and working to achieve each of the goals listed below into all aspects of policy-making, program design, administration and service delivery. Each system and program is assessed for the strengths and weaknesses of its proficiency to achieve these goals. The infrastructure of a service, program or system is transformed, and new protocol and procedure are developed, as necessary to achieve these goals.

- (1) Equal access to services of equal quality is provided, without disparities among racial/ethnic, cultural, and linguistic populations or communities.
- (2) Treatment interventions and outreach services effectively engage and retain individuals of diverse racial/ethnic, cultural, and linguistic populations.
- (3) Disparities in services are identified and measured, strategies and programs are developed and implemented, and adjustments are made to existing programs to eliminate these disparities.
- (4) An understanding of the diverse belief systems concerning mental illness, health, healing and wellness that exist among different racial/ethnic, cultural, and linguistic groups is incorporated into policy, program planning, and service delivery.
- (5) An understanding of the impact historical bias, racism, and other forms of discrimination have upon each racial/ethnic, cultural, and linguistic population or community is incorporated into policy, program planning, and service delivery.

- (6) An understanding of the impact bias, racism, and other forms of discrimination have on the mental health of each individual served is incorporated into service delivery.
- (7) Services and supports utilize the strengths and forms of healing that are unique to an individual's racial/ethnic, cultural, and linguistic population or community.
- (8) Staff, contractors, and other individuals who deliver services are trained to understand and effectively address the needs and values of the particular racial/ethnic, cultural, and/or linguistic population or community that they serve.
- (9) Strategies are developed and implemented to promote equal opportunities for administrators, service providers, and others involved in service delivery who share the diverse racial/ethnic, cultural, and linguistic characteristics of individuals with serious mental illness/emotional disturbance in the community.

Note: Authority cited: Section 5898, Welfare and Institutions Code. Reference: Sections 5813.5(d)(3), 5868(b), 5878.1(a), Welfare and Institutions Code; and Sections 2(e) and 3(c), MHSA.

**Client Driven** means that the client has the primary decision-making role in identifying his/her needs, preferences and strengths and a shared decision-making role in determining the services and supports that are most effective and helpful for him/her. Client driven programs/services use clients' input as the main factor for planning, policies, procedures, service delivery, evaluation and the definition and determination of outcomes.

Note: Authority cited: Section 5898, Welfare and Institutions Code. Reference: Sections 5813.5(d)(2) and (3), 5830(a)(2) and 5866, Welfare and Institutions Code; and Section 2(e), MHSA.

**Family Driven** means that families of children and youth with serious emotional disturbance have a primary decision-making role in the care of their own children, including the identification of needs, preferences and strengths, and a shared decision-making role in determining the services and supports that would be most effective and helpful for their children. Family driven programs/services use the input of families as the main factor for planning, policies, procedures, service delivery, evaluation and the definition and determination of outcomes.

Note: Cal. Code Regs. Tit. 9, § 3200.120 Note: Authority cited: Section 5898, Welfare and Institutions Code. Reference: Section 5822(h), 5840(b)(1), 5868(b)(2) and 5878.1, Welfare and Institutions Code.

**Wellness, Recovery, and Resilience Focused:** Planning for services shall be consistent with the philosophy, principles, and practices of the Recovery Vision for mental health consumers: (1) To promote concepts key to the recovery for individuals who have mental illness: hope, personal empowerment, respect, social connections, self-responsibility, and self-determination. (2) To promote consumer-operated services as a way to support recovery. (3) To reflect the cultural, ethnic, and racial diversity of mental health consumers. (4) To plan for each consumer's individual needs.

Note: Reference: Section 5813.5(d), Welfare and Institutions Code.

**Integrated Service Experience** means the client, and when appropriate the client's family, accesses a full range of services provided by multiple agencies, programs and funding sources in a comprehensive and coordinated manner.

Note: Cal. Code Regs. Tit. 9, § 3200.190 Note: Authority cited: Section 5898, Welfare and Institutions Code. Reference: Sections 5878.1(a), 5802, 5806(b), 5813.5(d) (4) and Section 2(e), MHSA, Welfare and Institutions Code.”

To learn more about the Mental Health Services Act (MHSA), please visit:

- [Mental Health Services Act in California Welfare and Institutions Code \(WIC\)](#) (as of January 2020)
- [MHSA in California Code of Regulations \(CCR\)](#)