

**COUNTY OF SAN LUIS OBISPO BOARD OF SUPERVISORS
AGENDA ITEM TRANSMITTAL**

(1) DEPARTMENT Behavioral Health	(2) MEETING DATE 7/17/2012	(3) CONTACT/PHONE Darci Rourke 805-788-2156	
(4) SUBJECT Request to approve 1) the Mental Health Services Act Annual Update for Fiscal Year 2012-13; 2) a budget adjustment in the amount of \$759,378 from unanticipated revenue to Fund Center (FC) 166 - Behavioral Health; and 3) a related resolution amending the position allocation list to add 2.5 FTE Mental Health Therapist III/IV, and .5 FTE Nurse Practitioner to FC 166.			
(5) RECOMMENDED ACTION It is recommended that the Board approve 1) the Mental Health Services Act Annual Update for Fiscal Year 2012-13, 2) a budget adjustment in the amount of \$759,378 from unanticipated revenue to FC 166 (4/5 vote required); and 3) a related resolution amending the position allocation list to add 2.5 FTE Mental Health Therapist III/IV, and .5 FTE Mental Health Nurse Practitioner to FC to 166.			
(6) FUNDING SOURCE(S) Mental Health Services Act	(7) CURRENT YEAR FINANCIAL IMPACT \$759,378	(8) ANNUAL FINANCIAL IMPACT \$759,378	(9) BUDGETED? No
(10) AGENDA PLACEMENT { } Consent { } Presentation { } Hearing (Time Est. _____) { X } Board Business (Time Est. 6 min.)			
(11) EXECUTED DOCUMENTS { X } Resolutions { } Contracts { } Ordinances { } N/A			
(12) OUTLINE AGREEMENT REQUISITION NUMBER (OAR)		(13) BUDGET ADJUSTMENT REQUIRED? BAR ID Number: 1213004 { X } 4/5th's Vote Required { } N/A	
(14) LOCATION MAP N/A	(15) BUSINESS IMPACT STATEMENT? No	(16) AGENDA ITEM HISTORY { } N/A Date _____	
(17) ADMINISTRATIVE OFFICE REVIEW Reviewed by Leslie Brown			
(18) SUPERVISOR DISTRICT(S) - - All Districts -			

County of San Luis Obispo



TO: Board of Supervisors

FROM: Jeff Hamm, Health Agency Director
Karen Baylor, Ph.D., Behavioral Health Administrator

DATE: 7/17/2012

SUBJECT: Request to approve 1) the Mental Health Services Act Annual Update for Fiscal Year 2012-13; 2) a budget adjustment in the amount of \$759,378 from unanticipated revenue to Fund Center (FC) 166 - Behavioral Health; and 3) a related resolution amending the position allocation list to add 2.5 FTE Mental Health Therapist III/IV, and .5 FTE Nurse Practitioner to FC 166.

RECOMMENDATION

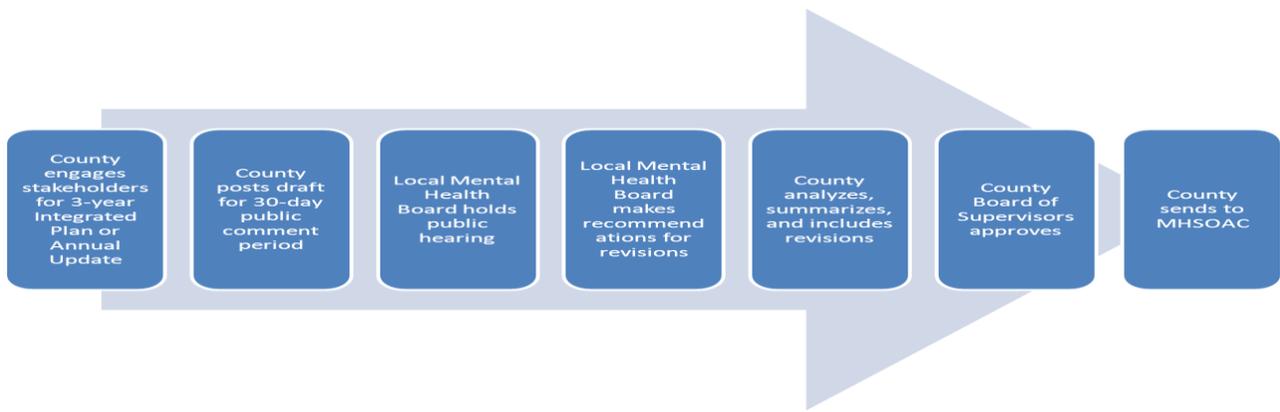
It is recommended that the Board approve 1) the Mental Health Services Act Annual Update for Fiscal Year 2012-13, 2) a budget adjustment in the amount of \$759,378 from unanticipated revenue to FC 166 (4/5 vote required); and 3) a related resolution amending the position allocation list (PAL) to add 2.5 FTE Mental Health Therapist III/IV, and .5 FTE Mental Health Nurse Practitioner to FC to 166.

DISCUSSION

The Mental Health Services Act (MHSA) was enacted into law January 1, 2005. This followed the passage of Proposition 63 in November 2004, which proposed a 1% tax on adjusted annual income over \$1,000,000. MHSA funds are divided into five distinct components: Community Services and Supports (CSS), Prevention and Early Intervention (PEI), Workforce Education and Training (WET), Capital Facilities and Technology Needs (CFTN), and Innovation (INN)

The annual update for San Luis Obispo County's MHSA programs is an overview of the work plans and projects being implemented as part of the series of service components launched with the passing of Proposition 63. Every county mental health program shall prepare and submit a three-year annual update to the MHSA program and expenditure plan, in accordance with established stakeholder engagement and planning requirements (Welfare & Institutions Code, Section 5847).

AB 1467, the health trailer bill for the 2012-13 State Budget, significantly amended the MHSA to streamline the approval process of programs developed. The statutes now require the annual plan and the future 3-Year Integrated Plan be adopted by the county board of supervisors. In light of this change, the goal of the annual update is to provide your Board, the community and stakeholders with meaningful information about the status of local programs and expenditures. This year's annual plan will look different from previous annual updates in that redundancies have been eliminated and the format has been streamlined. The flowchart below was developed by the California Mental Health Director's Association (CMHDA) on March 28, 2012 to illustrate the new Annual Update process.



The County continues to integrate Full Service Partnership (FSP) teams and program staff within clinics and develop further program collaborations. As required by the MHSA Guidelines, the local MHSA Community planning team is responsible for guiding the planning process, analyzing community input, and selecting projects in accordance with community priorities. Details of the Community Planning process can be found in the Annual Update (pages 3-5). In addition to current CSS programs, the community prioritized the following projects for implementation or expansion:

- **Homeless Full-Service Partnership (FSP):** This program will provide outreach to the most underserved, difficult-to-reach population of homeless adults and engage clients in health care, mental health treatment, and housing. The County is requesting to add a .50 FTE Mental Health Nurse Practitioner and a .50 FTE Mental Health Therapist that will work in partnership with a 1.50 FTE Outreach Worker, 1.0 FTE Housing/Case Manager, and a .50 FTE Peer Driver/Support Worker contracted through an appropriate provider. The total estimated cost for this program is \$402,750.
- **Wellness and Recovery Integration:** The County will contract with an appropriate provider who will conduct an assessment of its clinics to determine the use of wellness and recovery language, practices, and principles in its physical settings and service delivery. The contractor will provide recommendations for implementation and will support recommended infrastructure and facility environment improvements. The total estimated cost for this project is \$50,000.
- **Latino Outreach Program Expansion:** This program will expand the current Latino Outreach Program by providing an additional 1.0 FTE Mental Health Therapist to provide treatment for underserved Latinos. The total estimated cost for the expansion is \$110,814.
- **Expanded Services for 0-5 Population:** This program will expand the current assessment and treatment center (Martha's Place) for children aged 0-5 by adding an additional 1.0 FTE Mental Health Therapist to the program. The total estimated cost for the expansion is \$110,814.
- **Support of Hotline Services:** The County will provide funding to SLO Hotline to increase its capacity to serve the community, including providing support to callers who reach the County's after-business-hours phone line. This efficiency includes providing bilingual services. The total estimated cost of this expansion is \$85,000.

WET programs have been implemented. As WET funding is no longer being distributed to the County, some work plans will begin to decrease in future years.

The PEI Three-Year Expenditure Plan will come to an end at the close of the 2011-2012 fiscal year. Due to a slow start up of PEI programs from FY 2007-08 to 2008-09, the PEI component had unspent revenue that was carried forward from year to year, as allowed per applicable statutes. The carryover amount has been spent and PEI programs must now be aligned with current year revenue allocations. As a result, some of the PEI programs for FY 2012-13 will be adjusted to meet funding levels. Stakeholders met and recommended the County maintain the original PEI work plans with normal allocated funded levels in 2012-2013. County staff, providers, and stakeholders have met to determine the appropriate service level reductions in order to maintaining the integrity of the projects.

The INN component of MHSA is the most unique. Innovation projects must be novel, new, and creative, and not duplicated in another community. The Board of Supervisors approved funding for eight local Innovation projects in June 2011. Seven of the eight projects have been implemented, with the last project to launch in 2012-2013.

The CFTN project includes comprehensive integrated behavioral health system that will modernize and transform clinical

and administrative information systems through a Behavioral Health Electronic Health Record (BHEHR) System allowing for a 'secure, real-time, point-of-care, client-centric information resource for service providers' and the exchange of client information according to a standards-based model of inter-operability.

The San Luis Obispo County Annual Update for 2012-2013 was posted by the Behavioral Health Department for public review and comment for 30 days, May 21 through June 20, 2012. A Public Notice was posted in the San Luis Obispo Tribune, and sent to other local media. The draft Annual Update was also posted on the San Luis Obispo County Mental Health Services website and distributed by email to over 500 stakeholders. In addition, copies were made available at each Mental Health Services clinic and all County libraries.

The Annual Update was approved by the San Luis Obispo County Mental Health Board at a Public Hearing held on June 20, 2012.

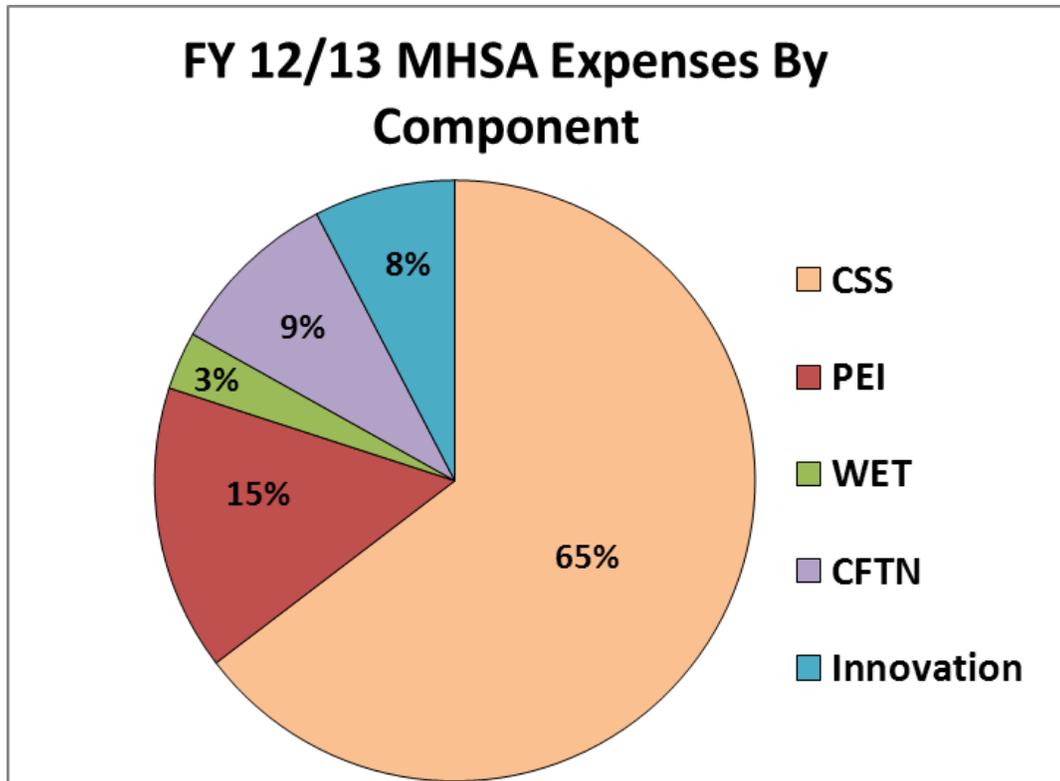
OTHER AGENCY INVOLVEMENT/IMPACT

The MHSA programs are a result of community collaboration and review by mental health stakeholders through the MHSA planning process and by the local community planning team. The Human Resources Department reviewed the appropriate classifications for the new positions and prepared the resolution amending Fund Center 166's Position Allocation.

FINANCIAL CONSIDERATIONS

The FY 2012-13 Behavioral Health Adopted Budget included appropriations in the amount of \$12,483,308 allocated for the MHSA programs. The MHSA programs are funded by:

- Medi-Cal/Early Periodic Screening, Diagnosis and Treatment (EPSDT): \$2,198,273
- Federal Grants: \$140,120
- Interfund Transfers: \$147,653
- Mental Health Services Act Trust funds: \$9,997,262



Behavioral Health is anticipating an increase in the FY 2012-13 MHSAs revenue and is proposing to use the additional funding towards new programs and program enhancements under the CSS component. The additional programs and enhancements will cost approximately \$759,378 and will be funded with MHSAs Trust funds and Medi-Cal/EPSTDT revenue. If programs are approved, the appropriations for MHSAs programs will increase to \$13,242,686. Any shortfall in MHSAs revenue will be offset by reducing or eliminating programs and/or program expenditures.

See tables below for a summary of revenue and expenses and budget augmentation request:

Community Services and Supports (CSS): The FY 2012-13 CSS budget was \$7,799,629. With the proposed changes, the new FY 2012-13 budget will be \$8,559,007. Additionally, a transfer in the amount \$1,160,809 will be completed from the CSS component to the WET and CFTN components to support the programs for the fiscal year.

MHSA Component	Adopted FY 12/13 MHSA Budget	Budget Augmentation Request	Proposed FY 12/13 MHSA Budget
CSS			
Revenue			
MHSA Fund	\$5,475,665	\$697,964	\$6,173,629
Other Revenue	2,323,964	61,414	2,385,378
Total Revenue	\$7,799,629	\$759,378	\$8,559,007
Expenses			
Labor	\$3,834,726		\$3,834,726
Add: Homeless FSP Program		108,115	108,115
Add: Latino Outreach Program		102,594	102,594
Add: Expand 0-5 Population		102,594	102,594
Operating Expenses	1,144,637		1,144,637
Add: Homeless FSP Program		20,700	20,700
Add: Latino Outreach Program		8,220	8,220
Add: Expand 0-5 Population		8,220	8,220
Contractor Services	2,820,266		2,820,266
Add: Homeless FSP Program (TMHA)		273,935	273,935
Add: Wellness & Recovery		50,000	50,000
Add: Hotline (TMHA)		85,000	85,000
Total Expenses	\$7,799,629	\$759,378	\$8,559,007

Prevention and Early Intervention (PEI): As previously noted, for FY 2012-13, some of the PEI programs have been adjusted to meet current year revenue allocations. The changes in programs have been approved by County staff, providers, and stakeholders.

MHSA Component	Adopted FY 12/13 MHSA Budget
PEI	
Revenue	
MHSA Fund	\$1,983,532
Other Revenue	50,862
Total Revenue	\$2,034,394
Expenses	
Labor	\$666,229
Operating Expenses	258,221
Contractor Services	1,109,944
Total Expenses	\$2,034,394

Workforce, Education, and Training (WET): In FY 2012-13, the WET component will receive a transfer from CSS in the amount of \$18,760. This transfer will restore funding to maintain the E-Learning system which has provide essential cultural competence, wellness and recovery training for providers and consumers throughout the County Mental Health system.

MHSA Component	Adopted FY 12/13 MHSA Budget
WET	
Revenue	
MHSA Fund	\$413,063
Other Revenue	-
Total Revenue	\$413,063
Expenses	
Labor	\$99,007
Operating Expenses	144,056
Contractor Services	170,000
Total Expenses	\$413,063

Capital Facilities and Technological Needs (CFTN): In FY 2012-13, the CFTN component will receive a transfer from CSS in the amount of \$1,142,049. This transfer is intended to be the last significant transfer for CFTN as the Electronic Health Record system is expected to be completed by June 30, 2013.

MHSA Component	Adopted FY 12/13 MHSA Budget
CFTN	
Revenue	
MHSA Fund	\$1,080,807
Other Revenue	147,653
Total Revenue	\$1,228,460
Expenses	
Labor	\$151,552
Operating Expenses	927,198
Contractor Services	149,710
Total Expenses	\$1,228,460

Innovation:

MHSA Component	Adopted FY 12/13 MHSA Budget
Innovation	
Revenue	
MHSA Fund	\$1,007,762
Other Revenue	-
Total Revenue	\$1,007,762
Expenses	
Labor	\$343,221
Operating Expenses	154,347
Contractor Services	510,194
Total Expenses	\$1,007,762

RESULTS

MHSA is dedicated to transforming the public mental health system and seeks to reduce the long-term adverse impact from untreated serious mental illness, details of the positive impact MHSA funded programs have had on our community can be found, in further detail, within the pages of the annual update. Highlights include:

CSS Full Service Partnerships:

- Homelessness of FSP clients reduced 93%
- Emergency room and psychiatric hospitalizations of FSP clients reduced 86%
- Jail days of FSP clients reduced 64%

Additionally, the County continues to work towards more thorough evaluation of CSS – including the use of logic models, evaluation plans, data collection tools, and standardized procedures for data analysis. County staffs are participating in statewide evaluation workgroups being conducted by researchers at UCLA.

WET:

- 95% of educational forum participants surveyed report an increased awareness of mental health stigma and the tools necessary to reduce it.

PEI:

- 89% of residents surveyed indicated that the SLOtheStigma media campaign positively impacted their understanding of mental illness.
- 74% of children 0-5 participating in the Positive Development Program had a notable decrease in their impulsive behavior scores.
- 80% of the approximately 400 students participating in the Middle School Comprehensive Program showed improvement in grades, attendance, or disciplinary referrals.
- 85% of parents participating in parenting classes indicated reduced behavioral problems in their children as a result of increased parenting skills.
- 70% of Transitional Aged Youth program participants obtain stability of housing upon completion of the Successful Launch program
- 100% of Older Adult clients reported an increase in overall life satisfaction, decreased loneliness, and feelings of depression.

INN projects are developed for the purposes of developing a new mental health practice, testing the model, evaluating the model, and sharing the results with the statewide mental health system. The models are currently being tested and results will be available upon completion of the testing phase.

The **CFTN** project's goal is to apply current technology to modernize and transform the delivery of service. The ultimate goal is to provide more effective and efficient service, facilitating better overall community and client outcomes.

The passage of the MHSAs provided San Luis Obispo County increased funding, personnel and other resources to support mental health programs for children, transitional age youth, adults, older adults and families. The MHSAs address a broad continuum of prevention, early intervention and service needs as well as the necessary infrastructure, technology and training elements that supports the County's public mental health system, and contributes to the desired community wide goal of a safe, healthy, and livable community.

ATTACHMENTS

1. Mental Health Services Act FY 2012-13 Annual Update
2. PAL Resolution