

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

(1) DEPARTMENT Behavioral Health	(2) MEETING DATE 7/23/2013	(3) CONTACT/PHONE Frank Warren 788-2055	
(4) SUBJECT Request to approve 1) the Mental Health Services Act (MHSA) Annual Update for Fiscal Year 2013-14; 2) a resolution amending the Position Allocation List to add a 1.0 FTE Mental Health Program Supervisor to Fund Center 166 - Behavioral Health; and 3) a corresponding budget adjustment in the amount of \$128,229 from the MHSA trust to Fund Center 166.			
(5) RECOMMENDED ACTION It is recommended that the Board: 1) Approve the Mental Health Services Act Annual Update for Fiscal Year 2013-14; and 2) Approve a resolution amending the position allocation list to add a 1.0 FTE Mental Health Program Supervisor to Fund Center 166 - Behavioral Health; and 3) Approve a corresponding budget adjustment in the amount of \$128,229 from the MHSA trust to Fund Center 166 (4/5ths vote).			
(6) FUNDING SOURCE(S) Mental Health Services Act	(7) CURRENT YEAR FINANCIAL IMPACT \$128,229.00	(8) ANNUAL FINANCIAL IMPACT \$128,229.00	(9) BUDGETED? No
(10) AGENDA PLACEMENT { } Consent { } Presentation { } Hearing (Time Est. ___) { X } Board Business (Time Est. <u>15 min.</u>)			
(11) EXECUTED DOCUMENTS { X } Resolutions { } Contracts { } Ordinances { } N/A			
(12) OUTLINE AGREEMENT REQUISITION NUMBER (OAR) N/A		(13) BUDGET ADJUSTMENT REQUIRED? BAR ID Number: 1314003 { 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: <u>07/17/2012</u>	
(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., MFT, Behavioral Health Administrator

DATE: 7/23/2013

SUBJECT: Request to approve 1) the Mental Health Services Act (MHSA) Annual Update for Fiscal Year 2013-14; 2) a resolution amending the position allocation list to add a 1.0 FTE Mental Health Program Supervisor to Fund Center 166 - Behavioral Health; and 3) a corresponding budget adjustment in the amount of \$128,229 from the MHSA trust to Fund Center 166.

RECOMMENDATION

It is recommended that the Board:

- 4) Approve the Mental Health Services Act Annual Update for Fiscal Year 2013-14; and
- 5) Approve a resolution amending the position allocation list to add a 1.0 FTE Mental Health Program Supervisor to Fund Center 166 - Behavioral Health; and
- 6) Approve a corresponding budget adjustment in the amount of \$128,229 from the MHSA trust to Fund Center 166 (4/5ths vote).

DISCUSSION

The Mental Health Services Act (MHSA) was enacted into law January 1, 2005, following 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 Fiscal Year (FY) 2013-14 MHSA Annual Update details the programs being administered, their operating budget, and results of past implementation. California Assembly Bill (A.B.) 100, passed in 2011, significantly amended the MHSA to streamline the approval process of programs developed. Among other changes, A.B. 100 deleted the requirement that the three-year plan and updates be approved by the Department of Mental Health after review and comment by the Mental Health Oversight and Accountability Commission (MHOAC). Additionally, A.B. 1467 (passed in June 2012), amended the Act again to state the three-year program and expenditure plan and annual updates must be adopted by the County Board of Supervisors and then submitted to the MHSOAC within 30 days of adoption (Welfare and Institutions Code 5847 (a)).

As required by Welfare and Institutions Code 5848 (a) of the MHSA, 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 9-13). In preparation for projected additional MHSA funding in FY 2012-13, stakeholders, staff and providers discussed specific needs which could be met in the coming fiscal year. County staff presented several key recommendations to the Advisory group for approval and budget preparation. In addition to current CSS programs, the stakeholders approved the following for implementation in FY 2013-14:

- **Infrastructure improvements:** Addition of a Mental Health Program Supervisor to oversee County Prevention and Outreach programs (pending Board approval). In the past few years, as Innovation and CSS programs have expanded, the County has seen the need increase for staff development, supervision, and program monitoring in order to best serve the growing scope of MHSA services. From FY 2010-11 to FY 2013-14 MHSA staff size has increased by 7.5 FTE. Currently 23 FTE and more than ten distinct programs are split between a Division Manager and a Program Supervisor. The new Program Supervisor will have 6 FTE as direct reports, alleviating the amount between the Division Manager and current Program Supervisor. Attachment 3 details the span of control before the addition of the Program Supervisor and after the addition.
- **Veterans Services Therapist (.50 FTE):** A .50 FTE Mental Health Therapist will be co-located in the County Veterans Services Office. This will create a culturally competent environment for existing and returning veterans to engage in mental health services. This position was included in the Adopted Budget for FY 2013-14.
- **Additional Support for the Wellness Center:** The additional MHSA funding will allow a community rehabilitation program to reconfigure as a Wellness and Recovery center. The San Luis Obispo Wellness Center, Hope House, will provide person-centered, recovery based services designed for life enrichment, personal development, peer support, community resources, recovery education, and social skill enhancement for adults with mental illness who would otherwise remain withdrawn and isolated, or otherwise disconnected from their community. This item was included in the Adopted Budget for FY 2013-14.
- **Prudent Reserve:** Stakeholders approved moving \$736,000 of CSS component funding into the CSS Prudent Reserve account to be used in future years. They also approved moving \$67,608 of PEI component funding into the PEI Prudent Reserve account, which otherwise would have reverted back to the State at the end of FY 2012-13. Additionally, \$35,000 of the PEI funds in Prudent Reserve will be used in FY 2013-14 to fund a training called *Mental Health First Aid*.

As WET funding is no longer being distributed to the County, and all programs have been implemented, work plans will continue to decrease over the next couple of years. The balance of the funds is projected to be expended by FY 2014-15. This will not result in a reduction of permanent staff as WET funds temporary interns and staff trainings. Additionally, the interns have typically generated enough Medi-Cal and Early Periodic Screening, Diagnosis and Treatment (EPSDT) revenues to offset any costs associated with the position.

The PEI Three-Year Expenditure Plan came to an end at the close of the FY 2011-12. Not only did the County conduct an in-depth evaluation of PEI Project 2: School Based Student Wellness, as required by the OAC, but the County conducts ongoing evaluation of all PEI projects. The results of this evaluation are included in this Annual Update. The County presented the results of the evaluation to the stakeholders, and stakeholders recommended the County maintain the original PEI work plans with normal allocated funded levels in FY 2013-2014. County staff, providers, and stakeholders have met to determine the appropriate service level reductions for future years 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. All projects have been launched, and the County is beginning formal evaluation of the projects in July 2013.

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 project is scheduled to be completed during FY 2013-14.

The San Luis Obispo County Annual Update for FY 2013-14 was posted by the Behavioral Health Department for Public Review and Comment for 30 days, June 17 through July 17, 2013. 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 July 18, 2013.

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.

FINANCIAL CONSIDERATIONS

The FY 2013-14 Behavioral Health Adopted Budget includes appropriations in the amount of \$12,941,701 allocated for the MHSA programs. The MHSA programs are funded by:

- Medi-Cal/Early Periodic Screening, Diagnosis and Treatment (EPSDT): \$2,024,080
- Federal Grants: \$161,867
- Interfund Transfers: \$173,519
- Insurance Payments: \$28,227
- Mental Health Services Act Trust funds: \$10,554,008

Behavioral Health received a greater allocation of MHSA revenues in FY 2012-13 than expected and is proposing to use the additional funding towards a new Mental Health Program Supervisor under the CSS component. The additional position will cost approximately \$128,229 in salary, benefits and supplies and will be funded with MHSA Trust funds. If the position is approved, the appropriations for MHSA programs will increase to \$13,069,930.

See tables below for a summary of expenses by component and program:

Community Services and Supports (CSS): The FY 2013-14 CSS budget was \$8,367,125. With the proposed budget augmentation request in the amount of \$128,229, the new FY 2013-14 budget will be \$8,495,354. Additionally, the MHSA Stakeholder Committee approved the transfer of \$736,000 in CSS revenue to the Prudent Reserve account.

Community Services and Supports	Proposed FY 13/14 Budget
Full Service Partnership	
Youth Full Service Partnership (FSP)	\$ 852,215
TAY FSP	635,499
Adult FSP	2,393,813
Older Adult FSP	315,656
Subtotal FSP	\$ 4,197,183
General System Development	
Wellness and Recovery	\$ 1,388,182
Latino Services	619,228
Crisis Enhancement & Aftercare	833,919
Community Schools	436,574
Forensic Mental Health	673,249
Subtotal GSD	\$ 3,951,152
Outreach and Engagement	\$ 5,000
Administration	\$ 342,019
Total FY 13/14 CSS Budget	\$ 8,495,354

Prevention and Early Intervention (PEI): The FY 2013-14 budget for PEI consists of \$2 million in MHSA revenue and the balance funded by non-MHSA revenue. In FY 2012-13, the MHSA Stakeholders approved moving \$67,608 in PEI Statewide Training, Technical Assistance and Capacity Building (TTACB) funding into the Prudent Reserve account, which otherwise would have reverted back to the State at the end of FY 2012-13. A portion of the PEI TTACB funds (\$35,000) in Prudent Reserve will be used in FY 2013-14 to fund a training in Mental Health First Aid.

Prevention and Early Intervention Programs	FY 13/14 Budget
Mental Health Awareness & Stigma Reduction	\$ 162,006
School-Based Wellness	778,174
Family, Education, Training and Support	99,000
Early Care and Support for Underserved	410,220
Integrated Community Wellness	400,564
Administration	221,077
Total FY 13/14 PEI Budget	\$ 2,071,041

Workforce, Education, and Training (WET): The FY 2013-14 budget for WET is \$314,560 with \$255,466 from MHSA revenue and the remaining \$59,114 from non-MHSA revenue. The County is projecting that the initial WET allocation will be expended by FY 2014-15.

Workforce, Education and Training Programs	FY 13/14 Budget
Peer Advisory Team	\$ 25,000
E-Learning	16,000
Crisis Intervention Training	7,250
Cultural Competence	10,700
Co-Occurring Training	25,544
CA Association of Social Rehabilitation Agencies	9,600
Internship Program	87,340
Stipends and Scholarships	58,000
Administration	75,126
Total FY 13/14 WET Budget	\$ 314,560

Innovation: The FY 2013-14 budget for Innovation is fully funded by MHSA revenue. Many of the Innovation programs will be ending during this fiscal year. The Community Planning Process will begin for the next round of Innovation programs this September and will end around December 2013.

Innovation Projects	FY 13/14 Budget
System Empowerment	\$ 82,057
Atascadero Student Wellness	116,247
Older Adult Family Facilitation	23,125
Nonviolent Communication	108,593
Wellness Arts	78,850
Service Enhancements	144,151
Operation Coastal Care	110,313
Play Therapy	73,968
Administration	138,913
Total FY 13/14 Innovation Budget	\$ 876,217

Capital Facilities and Technological Needs (CFTN): In FY 2013-14, a transfer will be needed from the CSS component in the amount of \$885,764 to fund the completion of the Behavioral Health Electronic Health Record. The completion date has also been moved from June 30, 2013 to January 2014. The CFTN Budget for FY 2013-14 is \$1,139,236. Future on-going maintenance costs for the system, such as updates, annual renewals, training, and technical support will be shared with other divisions within Behavioral Health.

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 clients reduced 25%
- Emergency room and psychiatric hospitalizations of clients reduced 45%
- Jail days of clients reduced 65%

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.

WET:

- 94% of educational forum participants surveyed report an increased awareness of mental health stigma and the tools necessary to reduce it.

PEI:

- 98% of stigma reduction presentation participants surveyed agreed that they have an increased awareness of wellness and recovery tools related to mental health
- 78% of children 0-5 participating in the Positive Development Program had a notable decrease in their impulsive behavior scores.
- 96% of the approximately 300 students participating in the Middle School Comprehensive Program showed improvement in grades, attendance, or disciplinary referrals.
- 99% of parents participating in parenting classes indicated reduced behavioral problems in their children as a result of increased parenting skills.
- 83% of Transitional Aged Youth program participants demonstrate self-sufficiency 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. All projects have been implemented, and evaluation of the programs from a contracted Evaluation is schedule to take place from July 2013 – December 2014.

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 project will be completed during FY 2013-14.

The passage of the MHSA 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 MHSA addresses 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. Attachment -1 PAL Resolution CC 166
2. Mental Health Services Act Annual Update FY 2013-14
3. Organizational charts