



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

(1) DEPARTMENT Behavioral Health	(2) MEETING DATE 1/23/2018	(3) CONTACT/PHONE Cindy Collins 805-788-2932	
(4) SUBJECT Request to 1) receive and approve the Mental Health Services Act (MHSA) Annual Update and Three-Year Plan for FY 2017-18 through FY 2019-20 (Clerk's File); 2) approve a resolution amending the Position Allocation List (PAL) for Fund Center (FC) 166- Behavioral Health to add 1.00 Full Time Equivalent (FTE) Drug and Alcohol Specialist I-IV; and 3) authorize a corresponding budget adjustment for Fund Center (FC) 166 - Behavioral Health in the amount of \$282,438 for MHSA programs, by 4/5 vote. All Districts.			
(5) RECOMMENDED ACTION It is recommended that the Board: <ol style="list-style-type: none"> 1. Receive and approve the Mental Health Services Act (MHSA) Annual Update and Three-Year Plan for FY 2017-18 through FY 2019-20; and 2. Approve a resolution amending the Position Allocation List (PAL) for Fund Center (FC) 166 - Behavioral Health to add 1.00 FTE Drug and Alcohol Specialist I-IV; and 3. Authorize a corresponding budget adjustment for FC 166 - Behavioral Health in the amount of \$282,438 for MHSA programs, by 4/5 vote. 			
(6) FUNDING SOURCE(S) Mental Health Services Act, 2011 Realignment, Medi-Cal	(7) CURRENT YEAR FINANCIAL IMPACT \$17,248,803	(8) ANNUAL FINANCIAL IMPACT \$17,248,803	(9) BUDGETED? Yes
(10) AGENDA PLACEMENT <input checked="" type="checkbox"/> Consent <input type="checkbox"/> Presentation <input type="checkbox"/> Hearing (Time Est. _____) <input type="checkbox"/> Board Business (Time Est. _____)			
(11) EXECUTED DOCUMENTS <input type="checkbox"/> Resolutions <input type="checkbox"/> Contracts <input type="checkbox"/> Ordinances <input checked="" type="checkbox"/> N/A			
(12) OUTLINE AGREEMENT REQUISITION NUMBER (OAR) N/A		(13) BUDGET ADJUSTMENT REQUIRED? BAR ID Number: 1718079 <input checked="" type="checkbox"/> 4/5th's Vote Required <input type="checkbox"/> N/A	
(14) LOCATION MAP N/A	(15) BUSINESS IMPACT STATEMENT? No	(16) AGENDA ITEM HISTORY <input checked="" type="checkbox"/> N/A Date _____	
(17) ADMINISTRATIVE OFFICE REVIEW Morgan Torell			
(18) SUPERVISOR DISTRICT(S) All Districts			



COUNTY OF SAN LUIS OBISPO

TO: Board of Supervisors

FROM: Jeff Hamm, Health Agency Director
Anne Robin, L.M.F.T. Behavioral Health Administrator
Tami Douglas-Schatz, Human Resources Director

DATE: 1/23/2018

SUBJECT: Request to 1) receive and approve the Mental Health Services Act (MHSA) Annual Update and Three-Year Plan for FY 2017-18 through FY 2019-20 (Clerk's File); 2) approve a resolution amending the Position Allocation List (PAL) for Fund Center (FC) 166- Behavioral Health to add 1.00 Full Time Equivalent (FTE) Drug and Alcohol Specialist I-IV; and 3) authorize a corresponding budget adjustment for Fund Center (FC) 166 – Behavioral Health in the amount of \$282,438 for MHSA programs, by 4/5 vote. All Districts.

RECOMMENDATION

It is recommended that the Board:

1. Receive and approve the Mental Health Services Act (MHSA) Annual Update and Three-Year Plan for FY 2017-18 through FY 2019-20; and
2. Approve a resolution amending the Position Allocation List (PAL) for Fund Center (FC) 166 – Behavioral Health to add 1.00 FTE Drug and Alcohol Specialist I-IV; and
3. Authorize a corresponding budget adjustment for FC 166 – Behavioral Health in the amount of \$282,438 for MHSA programs, by 4/5 vote.

DISCUSSION

The Mental Health Services Act (MHSA) was enacted into law on January 1, 2005, following the passage of Proposition 63 in November 2004 which added a 1% tax on adjusted annual income over \$1,000,000. The Act provides funding for counties to help people and families who have mental health needs. Funds were established within components which would address the continuum of care necessary to transform the public mental health system. MHSA funds are divided into five distinct components: Community Services and Supports (CSS), Prevention and Early Intervention (PEI), Innovation (INN), Workforce Education and Training (WET), and Capital Facilities and Technology Needs (CFTN).

The [County of San Luis Obispo's FY 2017-18 Annual Update and Three-Year Program and Expenditure Plan \(FY 2017-18 through FY 2019-20\)](#) outlines the programs being administered, provides budget detail, and prior years (FY 2015-16 and FY 2016-17) results in each component of Mental Health Services Act work plans. All county three year program and expenditure plans, along with annual updates, must be adopted by the County Board of Supervisors and then submitted to the Mental Health Oversight and Accountability Commission (MHSOAC) within 30 days of adoption (Welfare and Institutions Code 5847 (a)).

The San Luis Obispo County Annual Update and Three Year Plan was posted by Behavioral Health for public review and comment for 30 days, from October 17 through November 15, 2017. 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 Behavioral Health 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 30-day public review period concluded with a public hearing on November 15, 2017 as part of the monthly Behavioral Health Board Meeting. The Behavioral Health Board unanimously approved the Plan update and recommended approval to the Board of Supervisors

As required by Welfare and Institutions Code (WIC) 5848 (a) of the MHSA, the local MHSA Community stakeholder group is responsible for guiding the planning process, analyzing community input, and selecting projects in accordance with community priorities. Details of the stakeholder planning process can be found in the [Update](#) (pages 11-17). Stakeholders, staff, and providers discussed specific needs that could be met in the coming fiscal year. County staff presented several key recommendations to the stakeholder advisory group for approval and budget preparation. For FY 2017-18, stakeholders have approved the following changes to the CSS and PEI work plans:

1. Creation of a Suicide Prevention Coordinator within the Prevention and Early Intervention (PEI) work plan through the addition of a 1.00 FTE Drug & Alcohol Specialist in Fund Center 166- Behavioral Health. The Suicide Prevention Coordinator will provide suicide prevention training, policy development, and coordination of public awareness campaigns. The recent mandate for all California school districts to adopt suicide prevention training and policies ([A.B. 2246](#)) has increased the need for countywide coordination of this prevention service. The Coordinator will also chair the local Suicide Prevention Council which is made up of local community based-organizations, providers, survivors, and family members and which provides ongoing training and support of public awareness.
2. Creation of a new therapist/social worker position within the Community Services and Supports (CSS) work plan to support the San Luis Obispo Police Department's (SLOPD) "Community Action Team (CAT)" which focuses on outreach and engagement for homeless and other vulnerable populations within the city. This position would be employed by a local organization/contractor through a Request for Proposal process. The request is seeking a local organization to provide a clinical intern or clinician to be embedded with the SLOPD team to offer in-field support and consultation when handling cases involving citizens with behavioral health needs. The position will offer police an immediate support in order to engage individuals in need of screening, assessment, or treatment. The position will work in partnership with other local CAT programs when possible, as well as support Crisis Intervention Training in the SLOPD.
3. Establishment of a research grant (PEI) to examine the Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) community's experience in the public mental health system and make

recommendations for improved access and linkage to services. This funding has been made available to a researcher and team in an agreement with California Polytechnic State University (Cal Poly).

4. Approval of moving \$120,000 from CSS unencumbered funding into the Workforce Education and Training (WET) component in order to maintain current programming, which includes ELearning, Cultural Competency training, co-occurring and crisis intervention training. The WET funds will be fully expended by FY 2018-19, but MHSA regulations allow for CSS funds to be used to maintain WET programming. There is no impact to current CSS programs as a result of this transfer.
5. An expansion of adult Full Service Partnership (FSP) services to include psychiatry and medication management within programs at Transitions Mental Health Association (TMHA). TMHA (as approved in the FY 2017-18 contract) have added capacity for psychiatry and medication management on site to support the adult FSP which includes the Homeless Outreach and Assisted Outpatient Treatment full service partnership programs.
6. Maintenance of the Crisis Response Team (CSS) position which had been supported with SB 82 Crisis Expansion grant funds. This position enhances contracted mobile crisis services by focusing on the two emergency departments in the City of San Luis Obispo by providing additional resources to hospitals to provide crisis evaluation in the emergency rooms. Grant funding for this position ended in FY 2016-17.
7. Approval to move up to \$4,000,000 into the County's CSS Prudent Reserve over a three year period from FY 2016-17 through FY 2018-19. Per WIC 5892 (b) of the MHSA regulations, up to 20% of the average amount of allocated County funds for the previous five years can be utilized for CFTN, WET, or moved into a Prudent Reserve. The Prudent Reserve has been established to ensure continued services during years in which revenues for the Mental Health Services Fund are below recent averages.
8. Creation of an Accounting Technician to support the MHSA fiscal team within Behavioral Health. This position was already added to Behavioral Health's Position Allocation List as a budget augmentation request in the FY 2017-18 budget.

Behavioral Health is including a budget adjustment request with the Annual Update in the amount of \$282,438 to add appropriation for the following; Suicide Prevention Coordinator; a new therapist/social worker for the SLO Police Community Action Team program; PEI grant to examine the LGBTQ community's experience in the community mental health system; and an increase to the adult FSP contract with Transitions Mental Health Association due to changes in program components. The FY 2017-18 adopted budget did not include the above changes due to the timing of the MHSA stakeholder process. Stakeholders gave final approval for the remaining programs in September, 2017.

Community Services and Supports (CSS) Component

The State requires that each county's CSS plan focus on children and families, transitional aged youth (TAY), adults, and older adults who have the most severe and persistent mental illnesses or serious emotional disturbances. This includes those who are at risk of homelessness, jail, or other institutionalization because of their mental illness. The County's plan also provides help to racial and cultural communities, including veterans, who have difficulty getting the help they need for themselves or their families when they have a serious mental health issue. The majority of MHSA funds are used for the CSS component, which is directed towards FSP. FSP provides comprehensive,

intensive, community-based mental health services to individuals who typically have not responded well to traditional outpatient mental health and psychiatric rehabilitation services, or may not have used these services to avoid incurring high costs related to acute hospitalization or long term care.

In FY 2016-17 the County's CSS plan expanded Full Service Partnerships to include participants in Assisted Outpatient Treatment, as well as an expansion of outreach services within the homeless-focused FSP. The CSS plan included a new service enhancement program at "Martha's Place" to better engage families seeking services at the children's assessment center. Stakeholders reviewed these new programs, as well as the progress of FSP programs which have been in operation for several years.

Prevention and Early Intervention Component

The PEI programs remain popular and well-integrated across the county. PEI programs reach nearly every rural community and target many underserved populations. In FY 2016-17 stakeholders supported an In-Home Parent Educator position (provided by CAPSLO) to support parents of youth in mental health services. The stakeholders also supported a Perinatal Mood and Anxiety Disorder (PMAD) project which helps parents and physicians improve access to post-partum treatment. The PEI programs, originally evaluated in FY 2013-14, were evaluated again in FY 2016-17, with a [report included as an attachment to this year's Annual Update](#).

Innovation Component

The Innovation component of MHSA is the most unique. Innovation projects must be novel, new, and creative, and not duplicated in another community. Four new projects began in July, 2016 and are currently in their testing stage. A new round of Innovation planning began and new projects will be presented to the Board in early 2018.

Workforce Education and Training Component

As Workforce Education and Training funding is no longer being distributed to the County, and all programs have been implemented, current work plans will now be maintained using CSS funds. In FY 2017-18, the County will continue to fund the mental health Peer Advisory and Advocacy Team, and offer internships, cultural competence activities, Crisis Intervention Training, and electronic learning projects. Interns have typically generated enough Medi-Cal and Realignment 2011 revenues to offset any costs associated with the position.

The Capital Facility and Technological Needs Component

The Capital Facility and Technological Needs (CFTN) project included a comprehensive integrated behavioral health system that is intended to modernize and transform clinical and administrative information systems through a Behavioral Health Electronic Health Record (BHEHR) System. This allows 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 development phase of the Electronic Health Record project concluded, and MHSA funds are used in support a portion of its on-going maintenance moving forward.

OTHER AGENCY INVOLVEMENT/IMPACT

The MHSA programs are a result of community collaboration and reviewed by mental health stakeholders through the MHSA planning process and by the local community planning team. Human Resources has reviewed and

prepared the resolution and the County Counsel has reviewed it as to form and legal effect.

FINANCIAL CONSIDERATIONS

The FY 2017-18 Behavioral Health adopted budget includes appropriations in the amount of \$16,966,365 for MHSA programs. A budget increase in the amount of \$282,438 is being requested with the Annual Update for FC 166 – Behavioral Health. The increase is due to: 1) the addition of a 1.00 FTE Drug and Alcohol Specialist I-IV for five months to act as the Suicide Prevention Coordinator in the Prevention and Early Intervention component in the amount of \$34,902; 2) establishment of a research grant in the amount of \$25,000 to examine the LGBTQ community's experience in the community mental health system, and 3) the creation of a contract in the amount of \$57,500 to provide a therapist/social worker position to support the San Luis Obispo Police Department's "Community Action Team"; and 4) an increase to Transition Mental Health Association's FY 2017-18 contract in the amount of \$165,036, due to changes in adult FSP services to homeless population to provide psychiatry and medication management as outlined under the Discussion section above. If approved, the new adopted budget for MHSA programs will increase to \$17,248,803. Approval of the report does not affect the level of General Fund Support (GFS) required by the Health Agency.

The stakeholders have approved an increase to programs as outlined in the discussion section. The Annual Update includes these approved program increases as well as possible growth estimates for the use of MHSA funding presented to the stakeholders. Any projected growth not realized in FY 2017-18 can be carried forward to FY 2018-19.

MHSA programs are outlined in the Annual Update are to be funded by:

- Medi-Cal and 2011 Realignment \$3,620,506
- Federal and State Grants: \$1,185,606
- Insurance and Private Pay Payments: \$3,600
- Mental Health Services Act Trust funds: \$12,439,091
- **Total Revenue: \$17,248,803**

MHSA Budget Estimates by Component	FY 2017-18
Community Services and Supports	13,320,588
Prevention and Early Intervention	2,660,028
Innovation	635,834
Workforce, Education and Training	131,771
Capital Facilities/Technological Needs	500,582
Total FY 2017-18 MHSA Budget Estimates	\$17,248,803

The recommended PAL change for the Suicide Prevention Coordinator estimated costs are below and are based on the current job class salary listing and assigned duties. MHSa fully offsets associated increased costs related to the position:

FY 2017-18 Estimated Expense for Remaining 5 months						
Action	Classification	FTE	Salary	Benefits	Total	Step Estimate
Add	Drug and Alcohol Specialist II	1.00	\$22,204	\$12,698	\$34,902	Step 1 for 5 months
	Net Change FY 17-18	1.00	\$22,204	\$12,698	\$34,902	
FY 2018-19 Estimated Annual Expense						
Action	Classification	FTE	Salary	Benefits	Total	Step Estimate
Add	Drug and Alcohol Specialist II	1.00	\$55,730	\$31,417	\$87,147	Step 1 for 1 month; step 2 for 11 months
	Net Change FY 18-19	1.00	\$55,730	\$31,417	\$87,147	
Estimated Annual Expense at Maximum Step (Step 5 of 5)						
Action	Classification	FTE	Salary	Benefits	Total	Step Estimate
Add	Drug and Alcohol Specialist II	1.00	\$64,771	\$34,907	\$99,678	Step 5 of 5 for 12 months
	Net Change at Max. Step	1.00	\$64,771	\$34,907	\$99,678	

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 that MHSa funded programs have had on our community can be found, in further detail, within the pages of the annual update. This Annual Update's highlights include:

Community Services and Supports (CSS):

Full Service Partnership (FSP) - Of the 140 clients served in FY 2015-16:

- Homelessness of clients reduced by 53%
- Emergency room visits and days in hospitalization reduced by 50%
- Jail days of clients reduced by 82%
- Psychiatric Health Facility (PHF) days reduced by 48%
- For Transitional Aged Youth (TAY), specifically (n = 27), there was a 44% reduction in homelessness and 63% reduction in emergency room visits and hospitalization.

FSP Homeless Outreach Team - Of the 130 chronically homeless individuals engaged in FY 2015-16, 41% were screened to participate in behavioral health services. Twenty-five (25) individuals were opened to Mental Health for medication and case management, and entered intensive FSP therapeutic services at TMHA. Those individuals yielded the following results: □

- Homelessness of clients reduced by 35%
- Emergency room visits reduced by 70%
- PHF days reduced by 70%
- Jail days of clients reduced by 85%

Mental Health Evaluation Team

- In FY 2015-16, the Mental Health Evaluation Team (formerly known as Mobile Crisis), provided by Sierra Mental Wellness, Inc., served 1,243 individuals. Twenty-three percent (23%; 292/1,243) received a Behavioral Health service within 30 days of their contact with Mobile Crisis.
- In FY 2016-17 1,488 individuals were served. Fifty-three percent (53%; 790/1,488) received a Behavioral Health service within 30 days of their contact with Mobile Crisis.

Innovation (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. Four new projects commenced in FY 2016-17. A few preliminary results include:

- “Not for Ourselves Alone” - Trauma Informed Care for County Employees
 - Participants (n=46) demonstrated a 24% decrease in stigma
- Transition and Relapse Prevention Project
 - 100% of the (n=20) participants saw a reduction in relapse and recidivism as compared to non-participants from the previous year
- Late Life Empowerment and Affirmation Program
 - Participants (n=13) demonstrated an 80% reduction in feelings of isolation and anxiety
- COLEGA
 - Participants (n=35) showed a 38% increase in resiliency and outlook on life

ATTACHMENTS

1. Annual Update Clerk's Filed Coversheet
2. Resolution to Amend the PAL