



**EXECUTIVE SUMMARY**

**of the**

**MENTAL HEALTH SERVICES ACT**

**Fiscal Year 2023-24 Annual Update**

**to the**

**Three-Year Program and Expenditure Plan**

**County Executive**

Ann Edwards

**Deputy County Executive**

Chevon Kothari  
Social Services



**Department of Health Services**

Timothy W. Lutz, Director

**Divisions**

Administration  
Behavioral Health  
Primary Health  
Public Health

**County of Sacramento**

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Dear Sacramento County Stakeholder,

We are pleased to share Sacramento County's Mental Health Services Act (MHSA) Fiscal Year 2023-24 Annual Update. This plan was developed with local stakeholders including adults and seniors with severe mental illness, families of children, adults and seniors living with severe mental illness, providers of services, law enforcement agencies, educators, social service agencies, veterans, providers of alcohol and drug services, health care organizations, and other important interests.

Behavioral Health Services remains committed to partnering with constituents and stakeholders throughout the process which includes meaningful stakeholder involvement on behavioral health policy, program planning and implementation, monitoring, quality improvement, evaluation and budget allocation.

The MHSA has provided Sacramento County Behavioral Health Services and the diverse communities we serve an unprecedented opportunity to engage and partner in developing and promoting a shared plan to serve our clients across their lifespan. Building on the successes we have achieved over the years and embracing the opportunities for growth, we are steadfast in our commitment to uphold the [MHSA General Standards](#) which are the bedrock of the MHSA and Sacramento County's Behavioral Health Services values.

In solidarity with community,

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Ryan Quist, Ph.D.

Director, Behavioral Health Services



### Executive Summary

Proposition 63 was passed by California voters in November 2004, and became known as the Mental Health Services Act (MHSA). MHSA authorized a tax increase on millionaires (1% tax on personal yearly income in excess of \$1 million) to develop and expand community-based mental health programs. The goal of MHSA is to reduce the long-term negative impact on individuals and families resulting from untreated serious mental illness.

Sacramento County is one of eighteen counties located in the Central Mental Health Region of the State of California. The State of California, Department of Finance estimates the 2022 population of Sacramento County to be approximately 1.6 million. As such, Sacramento is considered a large county, especially in comparison with the populations of surrounding counties. Sacramento County contains one of the most ethnically and racially diverse communities in California. The Sacramento American Indian/Alaska Native community includes tribal people from many different States and regions with unique cultures and histories, including the first indigenous communities of Sacramento; the Nisenan people, the Southern Maidu, Valley and Plains Miwok, Patwin Wintun peoples, and Wilton Rancheria, Sacramento's only federally recognized Tribe. Historically, Sacramento County has been one of three counties with the highest number of newly arriving refugees in California. In recent years, Sacramento County has resettled more Refugees and Special Immigrant Visa holders than any other county in California. Global events transpiring over the past year have resulted in an increase in the number of refugees arriving from Afghanistan and the Ukraine, thereby enriching the diversity of our community. With the addition of Arabic as a threshold language in 2017 and Farsi in 2020, Sacramento County now has a total of seven threshold languages (Arabic, Cantonese, Farsi, Hmong, Russian, Spanish, and Vietnamese). We welcome these new residents and continue to work towards meeting the unique needs of these emerging communities.

Sacramento County has worked diligently on the planning and implementation of every MHSA component. The plans for each component of MHSA are the result of local community planning processes. The programs contained in the plans work together with the rest of the system to create a continuum of services that address gaps in order to better meet the needs of our diverse community.

The **Community Services and Supports (CSS)** component provides funding for mental health treatment services and supports for children/youth and their families living with severe emotional disturbance and Transition Age Youth (TAY), adults and older adults living with a serious mental illness. Housing is also a large part of the CSS component. In Sacramento County, there are 12 approved CSS Work Plans, together containing numerous programs. Recently, two new Full Service Partnership (FSP) programs were added and they will be fully implemented in FY 2022-23. Over the years, these programs have expanded and evolved as we strive to deliver high quality and effective services to meet the needs of children/youth, TAY, adults, older adults and their families.

In FY 2021-22, the MHSA Steering Committee supported a seven percent increase across MHSA-funded treatment programs to create additional service capacity. The Steering Committee also supported a ten percent rate increase across MHSA-funded CSS direct service programs, as well as increasing FSP program capacity (new and expanded).

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The **Prevention and Early Intervention (PEI)** component provides funding for programs and activities designed to prevent mental illness from occurring or becoming more severe and disabling. Sacramento County's PEI Plan is comprised of four (4) previously approved programs containing programs designed to address suicide prevention and education; strengthening families; integrated health and wellness; and mental illness stigma and discrimination reduction.

In FY 2021-22, the MHSA Steering Committee supported a seven percent increase across PEI direct service programs to create additional service capacity, as well as a ten percent increase to provider rates.

The **Innovation (INN)** component provides time-limited funding to test new mental health practices or approaches or adapted approaches with the goal of increasing access (including access for underserved groups), increasing the quality of services, or promoting interagency collaboration.

Sacramento County's first approved **INN Project**, known as the Respite Partnership Collaborative (RPC) spanned five years from 2011 – 2016. The mental health respite programs established through this project have transitioned to MHSA CSS/PEI funding and are described in this Annual Update.

In May 2016, the Mental Health Services Oversight and Accountability Commission (MHSOAC) approved Sacramento County's second INN Project, known as the Mental Health Crisis/Urgent Care Clinic. The Clinic began providing services November 2017. With support from the MHSA Steering Committee, the services in this INN Project will transition to MHSA CSS funding in July 2022.

In May 2018, the MHSOAC approved Sacramento County's third INN Project, known as the Behavioral Health Crisis Services Collaborative (BHCSC). The project is a public/private partnership with Dignity Health and Placer County with the intent to establish integrated adult crisis stabilization services on a hospital emergency department campus in the northeastern region of Sacramento County. The BHCSC began providing services September 2019. The project term ended February 2023.

In June 2020, the MHSOAC approved Sacramento County's fourth INN Project, Multi-County Full Service Partnership (FSP) INN Project. The project aims to improve how counties collect and use data to define and track outcomes that are meaningful for FSP clients and to help counties use data to inform program design and improve FSP service delivery.

In June 2020, the MHSOAC approved Sacramento County's fifth INN Project, Forensic Behavioral Health Multi-System Teams, now known as Community Justice Support Program.. This project adapts and expands a teaming approach for the adult forensic behavioral health population. Project services and multi-system teams began delivering services in FY 2021-22.

The **Workforce Education and Training (WET)** component provides time-limited funding with a goal to recruit, train and retain diverse culturally and linguistically competent staff for the public mental health system and ensure they are adequately trained to provide effective services and administer programs based on wellness and recovery. Sacramento County's WET Plan is comprised of seven (7) approved actions. Per Welfare and Institutions Code (WIC) Section

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5892(b), Counties may use a portion of the CSS funds to sustain WET activities once the time-limited WET funds are exhausted. Therefore, these activities are being sustained with CSS funding.

Through California's Office of Statewide Health Planning and Development WET Plan, WET grant funding was awarded to five (5) regional partnerships to fund activities that support the workforce needs of each of the counties within those regional partnerships. Participating counties are required to provide a match in order to access funding made available to their respective regional partnership. With MHSA Steering Committee support, Sacramento County is participating in the Central Regional Partnership.

On September 25, 2020, California Governor Gavin Newsom signed Senate Bill (SB) 803, which directs the State of California Department of Health Care Services (DHCS) to establish Peer certification requirements by July 1, 2022, validating the importance of peer support services in mental health treatment by recognizing peers as Medi-Cal providers. In alignment with SB 803, DHCS established statewide requirements for the development of Medi-Cal certification programs of Peer Support Specialists. California Mental Health Services Authority (CalMHSA), on behalf of California counties, will implement and administer all components of the Peer Support Specialist Certification program, including required data collection and submission to DHCS, certification of Peers, exam administration, investigations, and approval, auditing, and monitoring of training vendors.

During FY 2020-21, the County established within the County employment system a Behavioral Health Peer Specialist series that includes the creation of Behavioral Health Peer Specialist, Senior Behavioral Health Peer Specialist, and Behavioral Health Peer Specialist Program Manager classifications. With MHSA Steering Committee support, Sacramento County's Behavioral Health Peer Specialist Program Managers will oversee the implementation of the Peer Support Specialist Certification program in Sacramento County in close collaboration with CalMHSA.

The **Capital Facilities (CF)** project was completed in Fiscal Year 2015-16. The project renovated three buildings at the Stockton Boulevard complex that houses the Adult Psychiatric Support Services (APSS) clinic, Peer Partner Program and INN Project #2: Mental Health Crisis/Urgent Care Clinic. Those renovations allowed for an expansion of service capacity with space for additional consumer and family-run wellness activities and social events.

The **Technological Needs (TN)** project, contained within the Capital Facilities and Technological Needs component, funds and addresses our commitment to move to an Electronic Health Record and Personal Health Record to improve client care. Per WIC Section 5892(b), Counties may use a portion of the CSS funds to sustain TN projects once the time-limited TN funds are exhausted. Therefore, these activities are being sustained with CSS funding.

Detailed descriptions of the programs and activities for each of the above MHSA components are contained in the MHSA Fiscal Year (FY) 2023-24 Annual Update.

The Draft MHSA FY 2023-24 Annual Update will be posted for a 30-day public comment period, from March 6 through April 5, 2023. The Mental Health Board will conduct a hybrid Public Hearing, held in person and virtually, on Wednesday, April 5, 2023 beginning at 6:00 p.m.

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This Public Hearing will be a hybrid meeting at 700 H Street, Hearing Room 1, Sacramento, CA 95814. Community members may attend in person or virtually. Teleconference access information will be posted to the MHSA webpage, <https://dhs.saccounty.gov/BHS/MHSA>, at least one (1) week prior to the Public Hearing.

If a community member would like to attend the Public Hearing and needs to arrange for an interpreter or a reasonable accommodation, please contact Anne-Marie Rucker as soon as possible, but no later than Wednesday, March 29, 2023, at (916) 875-3861 or [ruckera@saccounty.gov](mailto:ruckera@saccounty.gov).