

# **Draft MHSA Fiscal Year 2021-22, 2022-23, 2023-24 Three-Year Plan**

MHSA Steering  
Committee Presentation  
May 20, 2021

## COVID-19 Impacts

- MHSA Steering Committee and other Boards/Committees shifted to virtual platforms
- Providers quickly and adeptly shifted to offering virtual video- and telephone-based care
- Essential services continued to be provided in-person with additional safety protocols
- Providers assisted clients and participants with access to technology and technical assistance as needed

# Community Program Planning

- May 3 – June 2, 2021: 30-day posting for public review and comment
- May 20, 2021: MHSA Steering Committee Presentation and Collective Comment
- May 25, 2021: BHS Cultural Competence Committee Presentation and Collective Comment
- June 2, 2021: Mental Health Board Presentation and Collective Comment
- June 2, 2021: Mental Health Board conducts Public Hearing

# Community Services and Supports (CSS) Component

- Provides funding for mental health treatment services and supports for children/youth and families living with severe emotional disturbance and adults/older adults living with a serious mental illness
- In Fiscal Year 2019-20:
  - 2,596 unduplicated clients were served across the implemented Full Service Partnership Programs
  - 14,264 unduplicated clients were served across the General System Development programs

## CSS Component (continued)

- SAC-1 Community Opportunities for Recovery and Engagement
  - Community-based mental health treatment services for individuals being released from acute care settings or at risk for entering acute care settings who are not linked to on-going mental health services
  - Includes contracted and county-operated components: APSS, TCORE, and Regional Support Teams
  - Services include housing supports for homeless/at-risk of homelessness

## CSS Component (continued)

- SAC-2 Sierra Elder Wellness
  - Full Service Partnership providing specialized geriatric services including psychiatric medication support, multidisciplinary mental health assessments, treatment, and intensive case management services for older adults who require intensive services to remain living in the community at the least restrictive level of care

# CSS Component (continued)

- SAC-3 Permanent Supportive Housing
  - Full Service Partnerships providing seamless services designed to meet the increasing needs of the underserved homeless population
  - Permanent supportive housing services include expedited benefits acquisition, integrated, comprehensive high intensity services, and rapid access to permanent housing
  - Services also provided to support clients at MHSA-financed housing developments
  - Includes Guest House, New Direction, Pathways, Arise, Flexible Housing Pool, Adult Residential Treatment, and Augmented Board and Care Programs

## CSS Component (continued)

- SAC-4 Transcultural Wellness Center
  - Full Service Partnership designed to increase penetration rates and reduce mental health disparities in the Asian/Pacific Islander (API) communities
  - Provides full range of services with interventions and treatment that take into account the cultural and religious beliefs and values, traditional and natural healing practices, and associated ceremonies recognized by the API communities



# CSS Component (continued)

- SAC-5 Wellness and Recovery
  - Wellness and Recovery Centers offer an array of comprehensive services and wellness activities designed to support clients in their recovery goals – Expanded capacity and housing supports for homeless/at-risk of homelessness
  - Peer Partner Program provides peer support services to clients linked to the Adult Psychiatric Support Services clinic and Mental Health Treatment Center
  - Consumer and Family Voice and Sacramento Advocates for Family Empowerment (SAFE) Programs promote the BHS mission to effectively provide quality mental health services through advocacy, system navigation, trainings, support groups
  - Mental Health Respite Programs: Mental Health Crisis Respite Center, Abiding Hope Respite House and Mental Health Respite

## CSS Component (continued)

- SAC-6 Adult Full Service Partnership
  - Provides an array of high intensity services designed to serve consumers with persistent and significant mental illness who may also have co-occurring substance use disorder and/or co-morbid medical concerns, many of whom are transitioning from long-term hospitalizations
  - Services include housing supports for homeless/at-risk of homelessness

## CSS Component (continued)

- SAC-7 Juvenile Justice Diversion and Treatment
  - Provides screenings, assessments and intensive integrated mental health services and Full Service Partnership supports to eligible youth (and their families) involved or at risk of involvement in the Juvenile Justice System

## CSS Component (continued)

- SAC-8 Transition Age Youth (TAY) Full Service Partnership
  - Provides Full Service Partnership services to TAY who are risk of or experiencing homelessness, aging out of the child mental health system, involved in or aging out of the child welfare or foster care system or juvenile/criminal justice system, at risk of psychiatric hospitalization, experiencing first episode of a serious mental illness, and other at risk populations
  - Services include outreach, engagement, retention and transition strategies that emphasize independent living and life skills, and mentorship

# CSS Component (continued)

- SAC-9 Crisis Residential Program (CRP)
  - Voluntary community-based services are designed for persons who meet psychiatric inpatient criteria (who can be appropriately served in a community setting) or are at risk of admission due to an acute crisis
    - 15-bed CRP in Rio Linda
    - 15-bed CRP in South Sacramento
    - 15-bed Transition Age Youth CRP
    - 15-bed CRP in Rancho Cordova

# CSS Component (continued)

- SAC-10 Children's Community Mental Health Services
  - Consultation, Support and Engagement Team (CSET) Program is designed to address the needs of children and youth who have been commercially sexually exploited
  - Flexible Integrated Treatment (FIT) Program provides strength-based, culturally competent, flexible and integrated, child/youth-centered, family driven, developmentally appropriate, effective quality mental health services to children and youth with serious emotional disturbance under the age of 21 years

# CSS Full Service Partnership Program FY 2019-20 Outcomes

- Homeless occurrences decreased by 64.6%
- Homeless days decreased by 89.4%
- ER visits for psychiatric reasons decreased by 90.8%
- ER visits for medical reasons decreased by 92.9%
- Psychiatric hospitalizations decreased by 68.1%
- Psychiatric hospitalization days decreased by 91.2%
- Arrests decreased by 44.1%
- Incarcerations decreased by 54.3%
- Incarceration days decreased by 83.7%
- Employment rate - Of partners with employment as goal, 25.2% were working during the FY

# MHSA Housing Program Accomplishments

- Housing for homeless individuals living with mental illness
- In FY 2019-20, MHSA funded programs:
  - Housed 563 clients/households who were literally homeless
  - Prevented 1,172 clients/households who were at imminent risk from becoming homeless
  - Served 161 clients/households residing in MHSA-funded apartments
  - Provided rental assistance to 4,682 clients/households
  - Provided 7,815 services utilizing MHSA housing flex funds
- MHSA Housing Portfolio
  - Currently 221 apartments across 10 developments
  - Pipeline 167 units at 5 developments
  - Exploring opportunities to expand (e.g. NPLH, vouchers, housing grants)



# 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
- In Fiscal Year 2019-20:
  - 46,315 served across Suicide Prevention
  - 1,971 served in Respites
  - 3,175 served across Strengthening Families
  - 571 served in Integrated Health and Wellness

# PEI Component (continued)

- Suicide Prevention Program
  - Suicide Crisis Line and Emergency Dept Follow-Up/Postvention Services
  - Suicide Bereavement Support Groups and Grief Services
  - Supporting Community Connections (Consumer-Operated Warm Line; Hmong, Vietnamese, Cantonese; Slavic/Russian-Speaking; Youth/Transition Age Youth; Older Adult; African American; Native American; Latino/Spanish-Speaking, Iu-Mien, Arabic-Speaking)

# PEI Component (continued)

- Suicide Prevention Program (continued)
  - Community Support Team
  - Mental Health Navigator Program
  - Mobile Crisis Support Teams
  - Mental Health Respite Programs:
    - Caregiver Crisis Intervention Respite
    - Homeless Teens and TAY Respite
    - The Ripple Effect Respite
    - Danelle's Place Respite
    - Q Spot Youth/TAY Respite
    - Lambda Lounge Adult Respite

## PEI Component (continued)

- Strengthening Families Program
  - Quality Child Care Collaborative
  - CPS Mental Health Team
  - Bullying Prevention Education and Training
  - Youth Mental Health First Aid
  - Early Violence Intervention Begins with Education
  - Adoptive Families Respite Program
  - The Source
  - Safe Zone Squad

## PEI Component (continued)

- Integrated Health and Wellness Project
  - Sacramento Early Diagnosis and Preventative Treatment (SacEDAPT)
  - SeniorLink
  - Trauma Informed Wellness Program for the African American Community

# PEI Component (continued)

- Mental Health Promotion Program
  - “Mental Illness: It’s not always what you think”
    - Multi-media outreach
    - Social media and microsite
    - Stakeholder engagement
    - Collateral material
    - Community outreach events
  - Stop Stigma Sacramento Speakers Bureau
  - Mental Health Matters

# Time-Limited Community Driven PEI Program

- Programs and competitive bidding process administered by CalMHSA
- 34 programs funded for up to two years of operation

# Workforce Education and Training (WET) Component

- Time-limited funding with a goal to recruit, train and retain diverse culturally and linguistically competent staff for the public mental health system
- Activities are sustained with CSS funding
- Highlights include: two high schools implementing behavioral health curriculum; Mental Health First Aid (MHFA) training for community and system partners and Youth MHFA training for teachers and school staff; Mental Health Interpreter Training; Psychiatric Residents and Fellowships Training Program; and Wellness Recovery Action Plan (WRAP) Facilitator Training



# Innovation (INN) Component

- Provides funding to test new and/or improved mental health practices or approaches with the goal of increasing access, increasing the quality of services, or promoting interagency collaboration
  - Projects are limited to terms of five years or less
  - Successful projects may be sustained with CSS and/or PEI funding, as appropriate based on funding requirements and system needs

# INN Projects

- **Mental Health Crisis/Urgent Care Clinic**
  - Adapts urgent care clinic/medical model to provide crisis response/care for individuals experiencing a mental health crisis
  - Outcomes include: Creating an effective alternative for individuals needing crisis care; Improving client experience in achieving and maintaining wellness; Reducing unnecessary or inappropriate psychiatric hospitalizations, incarcerations and emergency room visits; and Improving care coordination across the system of care

## INN Projects (continued)

- Behavioral Health Crisis Services Collaborative
  - Public/private partnership with Dignity Health and Placer County
  - Integrated adult crisis stabilization services at Mercy San Juan adjacent to emergency department
  - Outcomes include: Improving behavioral health outcomes through a public/private collaboration; Improving the integration of medical and mental health crisis stabilization services through a public/private partnership

## INN Projects (continued)

- Multi-County Full Service Partnership (FSP)
  - Project will implement new data informed strategies to program design and continuous improvement for FSP programs
  - County-specific implementation and evaluation technical assistance for outcomes-focused FSP improvements
  - Outcomes include: Improving how FSP priority outcomes are defined and tracked; new/strengthened data collection and analysis; shared FSP best practice framework; Increasing clarity and consistency of FSP enrollment criteria, referral and program graduation processes

## INN Projects (continued)

- Forensic Behavioral Health Multi-System Team
  - Focused on justice involved adults (18+) and older adults to increase access to mental health services, promoted interagency and community collaboration related to mental health services, supports and outcomes
  - Adapts and expands on the Child and Family Team Child Welfare model
  - Outcomes include: increased collaboration; immediate access to services; care coordination and reduced re-incarcerations

# Capital Facilities and Technological Needs (CF/TN) Component

- Technological Needs Project
  - Furthers the County's efforts in achieving the federal objectives of meaningful use of electronic health records to improve client care

# Budget

- Revenue projections are increasing
- Expenditure projections are being refined to adjust for additional Medi-Cal reimbursement
- Budget figures will be updated as soon as revised projections are available

## County Certifications

- County Compliance Certification
- County Fiscal Accountability Certification
- These certifications will be completed and signed after Sacramento County Board of Supervisors approval



# Attachment E

## MHSA Funding Summary

- CSS Component Funding
  - Majority must be directed to Full Service Partnership programs
  - 76% of each MHSA dollar is CSS
  - Unspent and new CSS funding is combined to:
    - Sustain CSS programming and activities
    - Sustain critical activities in WET and CF/TN
    - Sustain successful and applicable INN projects
    - Sustain MHSA Housing Program investments

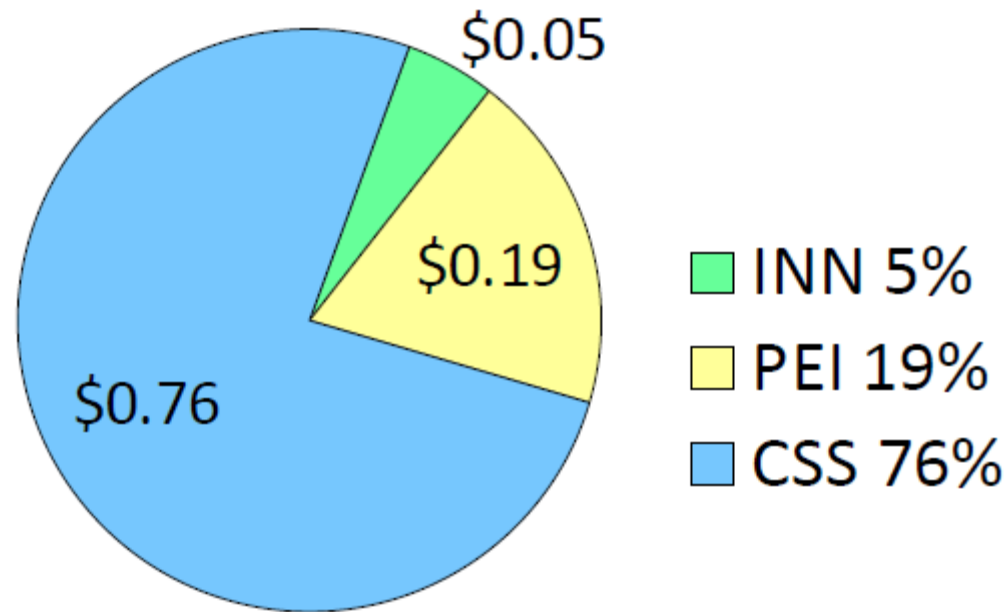
# Attachment E

## Funding Summary (continued)

- PEI Component Funding
  - Majority must be directed to services for ages 0-25
  - 19% of each MHSA dollar is PEI
- INN Component Funding
  - Funding to test new/improved mental health practices or approaches
  - Projects can span up to 5 years (not sustainable)
  - 5% of each MHSA dollar is INN

# Attachment E

## Funding Summary (continued)



# Attachment E

## Funding Summary (continued)

- WET Component Funding
  - Time-limited funding
  - Activities must be sustained by CSS funding
- CF/TN Component Funding
  - Time-limited funding
  - Activities must be sustained by CSS funding
- Prudent Reserve
  - Per W&I Code, counties must establish and maintain a prudent reserve to ensure MHSA-funded programs continue when revenues decline

# Attachment E

## Funding Summary (continued)

- Overarching Points
  - MHSA funding is generated by 1% tax on personal income in excess of \$1M
    - Greatly impacted by shifts in the economy (impacts lag by approximately 2 years)
    - MHSA revenue is volatile and difficult to project
  - In FY 2019-20, Sacramento County allocation *increased* from 3.23% to 3.26%

# Attachments

- A: DHCS Form 5510 MHSA Update Extension FY 2020-21
- B: Stakeholder Input Sessions
- C: Cultural Competence & Ethnic Services Newsletters 186
- D: Assisted Outpatient Treatment Input Sessions
- E: MHSA Three-Year Plan Funding Summary
- F: MHSA Steering Committee Presentations re Stakeholder Input and Adult Outpatient Transformation
- G: MHSA Housing Portfolio Catalog
- H: Community Driven PEI Grants Overview
- I: Annual PEI FY 2019-20 Evaluation Report
- J: 2019 Human Resources (HR) Survey Report
- K: Innovation (INN) FY 2019-20 Evaluation Report
- L: Multi-County FSP Innovation Project Progress Report March 2021
- M: 2019 Penetration Rates / FY 2019-20 Retention Rates

# Member Questions

## Collective Comment

- Overall, is the Steering Committee in support of the programs and activities in the MHSA Three-Year Plan?
- Is there additional feedback that should be considered?
- Is there feedback regarding the general format?