



EXECUTIVE SUMMARY

of the

DRAFT

MENTAL HEALTH SERVICES ACT

Fiscal Year 2021-22, 2022-23, 2023-24

Three-Year Program and Expenditure Plan

Posted for 30-day Public Review and Comment
May 3, 2021 through June 2, 2021

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 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 2018 population of Sacramento County to be approximately 1.5 million. As such, Sacramento is considered a large county, especially in comparison with the populations of surrounding counties. Sacramento is one of the most diverse communities in California with six threshold languages (Arabic, Cantonese, Hmong, Russian, Spanish, and Vietnamese). Historically, Sacramento County has been one of three counties with the highest number of newly arriving refugees in California. Arabic was added as a threshold language in 2017. 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 all components of MHSA. The passage of AB100 in 2011 and AB1467 in 2012 made many significant changes to MHSA, including the shift from published funding allocations to monthly distributions based on taxes collected as well as the transfer of plan/update approval authority from the State level to local Boards of Supervisors.

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 ten (10) previously approved CSS Programs/Work Plans containing numerous programs. 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.

As addressed in the previous Three-Year Plan, BHS facilitated a community planning process in FY 2017-18 resulting in new and expanded mental health treatment services and housing supports for individuals living with a serious mental illness who are homeless or at-risk of homelessness. With support from the MHSA Steering Committee, BHS further expanded the CSS Component to address individuals experiencing or at-risk of homelessness. This new and expanded programming was fully implemented in FY 2020-21.

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.

The previous Three-Year Plan included a new PEI program to provide mental health services for foster youth, as recommended and supported by the MHSA Steering Committee and the Board of Supervisors. This new program started late FY 2018-19 and expanded to serve all youth in FY 2019-20.

In FY 2017-18, BHS facilitated a community planning process resulting in expansion of mental health services and supports for individuals living with a serious mental illness who are homeless or at-risk of homelessness in the suicide prevention programming. Expanded programming began in FY 2017-18.

The previous Annual Update included the new PEI program: Trauma Informed Wellness for the African American Community developed through a community program planning process that included the formation of an Ad Hoc Workgroup. African American Community Listening Sessions were conducted to further refine the program recommendation. In late FY 2018-19, the MHSA Steering Committee supported and recommended further expanding the PEI Component to include new time-limited community capacity building PEI programming, as well as the expansion of existing PEI programming. The PEI component expansion in these areas began mid FY 2019-20.

The **Innovation (INN)** component provides time-limited funding to test new and/or improved mental health practices or 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 sustainable MHSA CSS/PEI funding and are described in the Three-Year Plan.

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 opened in November 2017.

The previous Three-Year Plan included the 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 MHSOAC in approved this project in May 2018. The BHCSC opened in September 2019.

The previous Annual Update included the 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. This project plan was approved by the MHSOAC in June 2020.

In June 2020, the MHSOAC approved Sacramento County's fifth INN Project, Forensic Behavioral Health Multi-System Teams. This project will adapt and expand a teaming approach for the adult forensic behavioral health population. Implementation progress for this Project is described in this Three-Year Plan.

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 eight (8) previously approved actions. Per Welfare and Institutions Code (WIC) Section 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 the State's WET Plan, they are awarding WET grant funding to five regional partnerships to fund activities that support the workforce needs of each of the counties within those regional partnerships. Counties are then asked to provide a match in order to access funding made available to their respective regional partnership. In April 2020, the MHSA Steering Committee supported Sacramento County's participation in the Central Regional Partnership.

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 through a multi-phased approach. 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) 2021-22, 2022-23, 2023-24 Three-Year Plan.

The Draft MHSA FY 2021-22, 2022-23, 2023-24 Three-Year Plan will be posted for a 30-day public comment period, from May 3 through June 2, 2021. The Mental Health Board will conduct a Public Hearing, held virtually, on Wednesday, June 2, 2021 beginning at 6:00 p.m.

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, May 26, 2021, at (916) 875-3861 or ruckera@saccounty.net.