



# Sacramento County Mental Health Board

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June 3, 2024

Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

**To: Sacramento County Board of Supervisors**  
**Re: Mental Health Board Budget Recommendations for FY 2024-25**

Honorable Supervisors:

The Sacramento County Mental Health Board's (MHB) statutory duties in the Welfare and Institutions Code Section 5604.2(a) include reviewing and evaluating the community's public mental health needs and services and advising the governing body and the local mental health director as to any aspect of the local mental program. Consistent with these duties, the MHB has reviewed the Sacramento County Recommended Budget for FY 2024-25.<sup>1</sup> We have evaluated how it aligns with the policy and fiscal recommendations that the MHB has made in the past and are making recommendations in support of growth proposals for county departments with an emphasis on Behavioral Health Services (BHS) programs.

## **Expanding Access to Equitable Mental Health Services for Children, Youth, and Families**

[In a letter dated 7/05/2023](#), the MHB issued strong support for BHS recommended actions for therapeutic behavioral services and youth intensive placement pool, as these actions directly align with the MHB's overarching recommendation that Sacramento County prioritize placement stability, avoid institutionalization, increase access to trauma-informed supports, and meet the needs of children in foster care in family-based settings, especially youth with more intensive needs. Thus, the MHB supports all of the following growth proposals to the DHS budget, in addition to related departments, that will result in increased availability of mental health services for children, youth, and families in Sacramento County.

- **Increase appropriations and revenues for Heartland Family Full-Service Partnership in the amount of \$1,644,740 to support an increase in capacity by 50 units and provide support to a program which has been operating over their contracted capacity since opening in March 2023.** The families being served are referred by CPS, experiencing homelessness and often escaping domestic violence. Increasing this capacity will enhance the options for the specialized needs of this population, which will result in families mitigating their risk of homelessness, improve their safety, and reduce interactions with CPS. This funding supports Behavioral Health Services' commitments for supporting services at new

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<sup>1</sup> <https://bdm.saccounty.gov/FY2024-25BudgetInformation/Documents/Recomm.Budget/CompleteRecomm.Budget.pdf>

Permanent Supportive Housing units. Funded by Patient Care Revenue. Contingent on the approval of a growth request in the Patient Care Revenue budget.

- **Add \$1,171,700 in additional revenues and appropriations to assume the contract previously held by Probation to provide mental health services to the recently realigned State Division of Juvenile Justice population that is housed at the Youth Detention Facility in the Valley Oak Youth Academy (VOYA).** Probation now provides funding for some staff to provide services and was preparing to sunset this contract, however BHS believes that a hybrid approach of a community provider and County staff can increase coverage especially in light of continued hiring challenges, and leverage support resources in both organizations to serve this complex population. It is expected that the new billing opportunity in the CalAIM Justice-Involved Initiative will allow the program to earn Patient Care Revenue. Funded by Patient Care Revenue. Contingent on the approval of a growth request in the Patient Care Revenue budget.
- **Health Services: Increase appropriations and revenues in the amount of \$2,000,000 to support an ongoing increase to the contract with the Sacramento County Office of Education (SCOE) to increase the program's level of service.** The planned site expansion from 40 sites to 80 sites requires additional clinicians (provided by SCOE) to provide Medi-Cal reimbursable services to students. The total cost of this request is offset by an equivalent increase in Medi-Cal revenues. Funded by Medi-Cal revenue.
- **Social Services – Child, Family, and Adult Services: Add 3.0 FTE HS Social Worker and 1.0 FTE Senior Office Assistant to support compliance with Welfare & Institutions Code, Section 5352.5, which mandates services to persons under a Lanterman-Petris-Short (LPS) Conservatorship by \$459,207.** This request is funded with DHS Patient Care Revenue (PCR) and contingent upon approval of a linked growth request in the DHS Budget (BU 7200000).
- **Social Services – Child, Family, and Adult Services: Add \$140,472 for 1.0 FTE Human Services (HS) Program Specialist to support DCFAS's Kin-First System and Continuous Quality Improvement based on Assembly Bill 207 (Chaptered 573) and All County Letter (ACL) 23-12, along with funding under County Fiscal Letter (CFL) 22/23-49, which reflects the critical need for dedicated staff.** This role is essential for implementing culturally responsive and trauma-informed approaches effectively, ensuring the success of kin-first initiatives and improving permanency outcomes for children in foster care. This growth is funded with the Excellence in Family Finding, Engagement and Support (EFFES) State allocation.
- **Social Services – Child, Family, and Adult Services: Add \$135,501 for 1.0 FTE HS Supervisor - Master's Degree position for Welcome Homes.** The addition of the position will allow the Welcome Homes to have a Supervisor on site 18-22 hours a day providing oversight and supervision to staff that are caring for youth awaiting placement. The position is partially funded by Federal revenue (27%) and General Fund (73%).
- **Social Services – Child, Family, and Adult Services: Request for \$3,000,000 in on-going General Fund to fund multiple community-based providers, who will operate Welcome Homes and Assessment & Diagnostic Centers to be licensed as Transitional Shelter Care Facilities or Short Term Residential Therapeutic Programs.** The agency/agencies will provide trauma-informed stabilization, assessments and shelter care services for children waiting for a foster care placement.

### **Homelessness and Housing**

The MHB has a history of supporting increased housing and mental health services for individuals with mental illness experiencing homelessness. In a letter to the Board of Supervisors dated 8/18/2020, we advocated for additional staffing for mental health programs serving individuals with mental illness experiencing homelessness and for mobile services that would increase their accessibility. In [a letter to the Board dated 3/5/2021](#), after a severe weather event, the MHB advocated for expanded access to warming/cooling shelters. Finally, [in a letter to the Board dated 9/9/2021](#), in response to the Board's inquiry about the MHB's budget priorities for FY 2022-23, the MHB ranked housing, including supporting low and middle-income housing, affordable housing, and housing for currently unhoused people, and homelessness services and initiatives, including the homeless encampment initiative and trauma-informed services for people experiencing homelessness as two of its five top priorities. As a result of this long-standing support, the MHB supports the following growth proposals for BHS as well as the department of Homeless Services and Housing:

- **Add appropriations and revenues in the amount of \$3,059,003 to complete the transfer of Behavioral Health Bridge Housing (BHBH) to the Department of Homeless Services and Housing (DHS) to support interim housing with 100 beds for clients served through the BHBH Program (Reso No. 2023-0886) across multiple Safe Stay Communities in Fiscal Year (FY) 2024-25 and 150 beds in subsequent FYs.** DHS is the operating partner for this program and holds the service agreements for bed space. Funded by BHBH grant funding and the program runs through June 30, 2027. Contingent on the approval of a growth request in the DHS budget.
- **Increase funding to the El Hogar Community Justice Support Programs in the amount of \$180,000 to support the addition of 30 Permanent Supportive Housing units for the Arden Star Housing Project.** The request allocates \$132,000 to staffing costs for two Resource Specialists and \$48,000 to housing funding to support several months of rent while individuals are waiting for lease up. Funded by Patient Care Revenue. Contingent on the approval of a growth request in the Patient Care Revenue budget (BU 7209000).
- **Increase funding to the El Hogar Sierra Elder Wellness Program in the amount of \$445,311 to support increased capacity from 150 to 180 Permanent Supportive Housing units.** The request includes \$357,000 in staffing costs for two Resource Specialists and three Services Coordinators, \$48,000 to housing funding to support several months of rent while individuals are waiting for lease up, and \$40,311 to housing subsidy funds to cover the high cost of subsidizing the older adult population. Funded with Patient Care Revenue. Eligible for Realignment. Contingent on the approval of a growth request in the Patient Care Revenue budget (BU 7209000).
- **Homeless Services and Housing: Add Behavioral Health Bridge Housing (BHBH) funding to support 100 beds of interim housing across multiple Safe Stay Communities.** \$2,759,003 will be utilized for operations and \$300,000 will fund administrative support and oversight across multiple positions within DHS. In FY 2024-25, 80 beds currently operational across two Safe Stay sites will become 100% dedicated to serve BHBH eligible participants. Approximately \$1,022,897 in County General Fund and \$1,503,677 in American Rescue Plan Act funding will be offset by BHBH funds with this programmatic and funding shift. The remaining \$532,429 in BHBH funding will be utilized to dedicate 20 beds for

BHBH participants at a planned Safe Stay Community that is not currently operational. This will offset \$60,000 in Encampment Resolution Fund funding. An additional 50 BHBH-funded beds are anticipated to be available at planned Safe Stay communities beginning in FY 2025-26, for a total of 150 beds. The program will run through June 30, 2027. DSHS is the operating partner for this program and holds the service agreements for bed space. This request is contingent upon approval of a linked growth request in the DHS Budget (BU 7200000).

### **Behavioral Health Crisis Care Continuum**

The MHB has a long history of supporting increased funding for behavioral health care treatment in the least restrictive setting. In November 2022, the MHB approved [recommendations regarding Behavioral Health Services Provided to Individuals Detained in Sacramento County Jails](#). These recommendations were submitted to the Board of Supervisors and Behavioral Health Services Director and they were presented at the 12/07/22 Sacramento County Board of Supervisors meeting, "Report on Population Reduction Efforts And Request For Direction On Steps To Address Jail Facility Deficiencies For Mays Consent Decree Compliance." Additionally, the MHB has endorsed recommendations made by the Public Health Advisory Board in March 2022 regarding [investments needed to promote sustainable reduction in the Sacramento County jail population](#). Both sets of recommendations highlight the need for Sacramento County residents to receive mental health treatment in the least restrictive, community-based environment. Based on these sets of recommendations, the MHB supports all of the following growth proposals:

- **Add 3.0 FTE Psychiatric Nurses to support insufficient staffing at the Mental Health Treatment Center (MHTC), which specializes in the treatment of mental health patients with the highest level of needs.** The MHTC faces critical staffing shortages, impacting patient intake and increasing Extra Help and Overtime costs by over 20% in FY 2022-23. Staff mandates occur when there is insufficient staffing and employees are mandated to stay on shift to ensure adequate coverage of duties; these have surged by 103% since 2018. The lack of mandated positions has reached 8%, exacerbating the challenge post-COVID. Additional staff are essential to meet state ratios, comply with doctor's orders, and ensure patient and staff safety. Approval of this request will allow MHTC to decrease staff mandates, reduce costs, improve employee satisfaction, and mitigate turnover. Funded by Patient Care Revenue.
- **Increase the Acute, Subacute, Crisis Stabilization (CSU) and Electroconvulsive Therapy Contract Pool in the amount of \$6,769,536 for Acute Psychiatric Inpatient costs as a result of Kaiser Carve-In discontinuing provision of Specialty Mental Health Services to Sacramento County beneficiaries, transitioning responsibility to Sacramento County, per the Department of Health Care Services (DHCS).** Projections are based on Kaiser current usage of 5,856 bed days at a rate of \$1,156. Approval of the funding increase will ensure the ability to pay providers for services that are mandated for Sacramento County beneficiaries. In FY 2022-23 DHCS allocated Sacramento County new ongoing 2011 Realignment funding in the annual amount of \$11,638,627 specifically for Kaiser carve-in to ensure Sacramento Medi-Cal members continue to have access to Specialty Mental Health Services. This request is funded by 2011 Behavioral Health Realignment and 1991 Mental Health Realignment and is contingent on the approval of growth requests in the 2011 Realignment (BU 7440000) and 1991 Realignment (BU 7480000) budget units.
- **Increase the Acute, Subacute, Crisis Stabilization (CSU), and Electroconvulsive Therapy contract pool in the amount of \$11,500,000 to support increased costs**

**caused by added providers, provider rate increases, and volume increases.** These services are mandated for Sacramento County beneficiaries. The request allocates \$7,300,000 to support anticipated annual cost for new CSU Sierra Vista, \$2,200,000 to support provider rate increases as pool rates move closer to industry standards, and \$2,000,000 to support increased costs as additional beds have become available. This request is funded by \$4,750,000 of Patient Care Revenue and \$6,750,000 of 1991 Mental Health Realignment and is contingent on the approval of growth requests in the budgets of Patient Care Revenue (BU 7209000), and 1991 Realignment budget units.

- **Add funding to increase on-call appropriations by \$40,000 to meet increased workload demands requiring time off coverage at the Mental Health Treatment Center (MHTC).** Increased demands include chart audits, and medication delivery changes. This need to increase on-call appropriations to cover costs from 6 to 10 days a month has been identified and requested by the MHTC Pharmacist in Charge and is supported by the MHTC management team. Approval of this request will allow MHTC Pharmacy to meet the increased program support and patient needs, improving their health, wellness, and continuum of care. Adequately staffing the pharmacy increases productivity and efficiency, and mitigates the potential for medication errors that can cause serious injury or death. Funded by Patient Care Revenue. Contingent on the approval of a growth request in the Patient Care Revenue budget

### **Jail Population Reduction and Alternatives to Incarceration for Individuals with Mental Illness**

In November 2022, the MHB approved [recommendations regarding Behavioral Health Services Provided to Individuals Detained in Sacramento County Jails](#). These recommendations were submitted to the Board of Supervisors and Behavioral Health Services Director and they were presented at the 12/07/22 Sacramento County Board of Supervisors meeting, "Report on Population Reduction Efforts And Request For Direction On Steps To Address Jail Facility Deficiencies For Mays Consent Decree Compliance." Additionally, the MHB has endorsed recommendations made by the Public Health Advisory Board in March 2022 regarding [investments needed to promote sustainable reduction in the Sacramento County jail population](#). Based on their alignment with these sets of recommendations, the MHB supports of the following growth proposals for the department of Correctional Health, overseen by Health Services, and Public Defender, overseen by the Public Safety and Justice Agency:

- **Health Services – Correctional Health Services: Utilize \$80,000 in Opioid funds to partially fund the implementation of Medication Assisted Treatment (MAT).** Correctional Health Services (CHS) is increasing Drugs/Pharmaceutical supplies budget by \$2,000,000. Adult Correctional Health Pharmacy increases drugs/pharmaceutical supplies to support the expensive medication need to treat patient with substance use disorder under the MAT program and hepatitis C and comply with the requirement of discharge medication with 30-day medication supply including suboxone to supply medication to patients with existing medications and are being released through court order. If approved, the County anticipates coming into compliance with the requirements of medication provisions for patient care in medical and mental health services as mandated by Remedial Plan/Mays Consent Decree. \$80,000 of the \$2,000,000 will be funded with Opioid Settlement funds. The remainder will be funded with ARPA. Contingent on the approval of a growth request in the Correctional Health budget (BU 7410000).
- **Public Safety and Justice – Public Defender: Restore 2.5 FTE Attorney Level 5 Criminal positions to absorb increased workload in critical mandated duties, including mental health diversion, pretrial advocacy, Racial Justice Act advocacy, immigration advisement duties, preliminary hearings, and felony trials by \$768,621.**

This request supports AB109 Priority Plans B2, B3, and B7 and Mays Consent Decree Jail Population Reduction Plans 16, 22, 23, 30, 31.

- **Public Safety and Justice – Public Defender: Implement an electronic case management system (CMS) to replace the outdated paper file system. CMS is required to preserve confidential client files, increase operational efficiency, reduce paper waste, improve data sharing with system partners, and provide performance analytics for data driven decision making by \$376,000.** CMS will support AB109 Priority Plans B2, B3, and B7 by streamlining the processing of mental health diversion and collaborative court cases, pretrial needs assessment and support services, and expungement and record modification services. CMS will support Mays Consent Decree Jail Population Reduction Plans 8, 16, 22, 23, 30, 31, and 33.

Although listed under growth not recommended, MHB supports the following growth requests by the Conflict Criminal Defender and Public Defender departments under the Public Safety and Justice Agency due to the alignment of the stated positions and duties with recommendations made by the MHB in November 2022 pertaining to behavioral health services provided to individuals detained in Sacramento County jails; that is, that individuals with mental illness that are involved in the criminal justice system receive community-based care in the least restrictive setting possible:

- **Public Safety and Justice – Conflict Criminal Defenders: Add \$251,836 for 1.0 full time contractor position to the Conflict Criminal Defenders office to serve as lead mental health diversion (MHD) attorney.** This position is necessary to oversee the MHD unit, assign cases, review work product, ensure the MHD attorneys, investigators and ancillary service providers are meeting the needs of the clients. The MHD lead attorney will also act as the liaison to the courts, PD and DA's offices for all MHD issues that may arise, appear for all meetings relating the MHD and appear in court as necessary.
- **Public Safety and Justice – Conflict Criminal Defenders: Add \$250,000 in funds for additional mental health diversion services.** In order for the Conflict Criminal Defenders office to remain compliant with the mental health diversion laws and avoid 6th Amendment due process issues, CCD must expand their current mental health unit. Additionally, the Equal Protection Clause demands that CCD clients have same resources available as the Public Defender to assist in their defense. To avoid lawsuits, CCD is seeking to expand their current unit.
- **Public Safety and Justice – Public Defender: Add \$504,201 for 2.0 FTE Attorney Level 5 positions and associated overhead costs to provide mandated legal representation for clients living with mental illness.** Additional attorneys are needed to comply with the increase in workload due to changes in the Mental Health Diversion law which expanded the scope of people eligible to have their cases diverted if they comply with a treatment plan. The Public Defender has a mandated duty to file a formal application for diversion for clients living with mental illness and qualify for diversion. Filing an application requires investigation, research, briefing, and working with system partners to create a treatment plan. If the Court grants diversion, the Public Defender has a continuing duty to represent the client and manage their case until their treatment plan is completed, which can take 1-2 years. Cases that previously closed with a plea bargain after a few court appearances now stay on an attorney's caseload for much longer with increased duties and workload. This request supports AB109 Plans B2 and B3 and Mays Consent Decree Jail Population Reduction Plans 16, 22, 23, 31.

- **Public Safety and Justice – Public Defender: Add \$581,417 for 2.0 FTE Principal Attorney positions and associated overhead costs to provide necessary supervision, training, and oversight to ensure Public Defender is providing constitutionally mandated client representation and complying with new duties under the Racial Justice Act, Mental Health Diversion Act, and other resentencing reform laws.** Public Defender’s current supervisor to staff ratio (1:6) is significantly lower than other public Defender offices (1:5) and the District Attorney’s Office (1:3.6). Additional Principal Attorneys are needed to reduce case delays and unnecessary pretrial detention, ensure cases are properly investigated, ensure clients are diverted and offered mental health and substance use treatment when appropriate, ensure Racial Justice violations are investigated and litigated, and minimize risk of liability to the County. This request supports AB109 Priority Plans B2, B3, and B7 and Mays Consent Decree Jail Population Reduction Plans 16, 22, 23, 30, 31.

### **Behavioral Health Services Administrative, Technical, and Non-Technical Support**

There are a number of growth requests related to the administration of Behavioral Health Services that the MHB supports because they increase the effectiveness and productivity of the division:

- **Add 1.0 FTE Account Clerk Lv 2 to the Behavioral Health Services Quality Management Inpatient Hospital Utilization Review Team to support in invoicing, quality assurance, and data tracking for inpatient hospital claims.** This position will support the processing of an increased volume of claims caused by the transition of responsibility of providing Specialty Mental Health Services to Sacramento County as mandated by the Department of Health Care Services (DHCS). Providing funding for this position will help to ensure that the County remains in compliance with Welfare and Institutions Codes and DHCS policy. Request includes a one-time cost of \$2,980 for a laptop and cell phone. Funded by Patient Care Revenue. Contingent on the approval of a growth request in the Patient Care Revenue budget.
- **Fund the reallocation of 1.0 FTE Information Technology Applications Analyst to 1.0 FTE Information Technology Business Systems Analyst 3 in the Department of Technology (DTECH).** This position oversees the claiming for Substance Use Prevention and Treatment (SUPT) Medi-Cal and Other Healthcare Coverage payors and provides technical and non-technical support for the BHS Electronic Health Records (EHR) system. New payment reform requirements have added levels of complexity to this assignment such that the higher classification is warranted. Funded with Mental Health Service Act (MHSA) funds. Contingent on the approval of growth requests in the DTECH (BU 7600000) and MHSA (BU 7290000) budgets.
- **Reallocate a 0.8 FTE Pharmacist to a 1.0 FTE Pharmacist to provide chart auditing capacity. Pharmacy staff must conduct required chart audits (42 C.F.R. 438.236 (b) and Cal. Code Regs., tit 9, 1810.326) at approximately 60 outpatient Child and Adult Mental Health clinics, and further increases are planned (E.g. Mental Health Services Act expansion for individuals experiencing homelessness).** Current staffing cannot meet the workload demands of the increasing number of mandatory chart audits. Medication reviews are the particular focus of California Department of Health Care Services relating to psychotropic and addictive medications prescribed in high-level placements and psychiatric hospitalizations. The addition of 0.2 FTE will improve the County’s ability to meet audit requirements and stay in compliance with inpatient and outpatient mental health with

medication standards. Funded by Patient Care Revenue. Contingent on the approval of a growth request in the Patient Care Revenue budget.

- Request to fund an increase in contract services from the Department of Technology which has expertise in Social Health Information Exchange (SHIE) Compliance and Data Security.** Dedicated compliance staff for the SHIE will directly address the potentially costliest and most dangerous risks we face, data breach, data loss and regulatory non-compliance. Approval of this request will reduce the County's vulnerability to these risks. This request is funded with Managed Care Plan revenue and is contingent on the approval of growth requests in the budgets of the Office of Compliance (BU 5740000), Department of Technology (BU 7600000), and Correctional Health
- Increase revenues and appropriations for an interfund agreement between the Department of Child, Family, and Adult Services (DCFAS) and Behavioral Health Services (BHS) in the amount of \$459,207 to support compliance with Welfare & Institutions Code, Section 5352.5, which mandates provision of services to persons under a Lanterman-Petris-Short (LPS) Conservatorship.** A LPS Conservatorship arranges for personal care of an individual who has been referred by a psychiatrist associated with a Short-Doyle facility or state hospital and approved for conservatorship following an investigation and court hearing. Adequate funding is needed to support the LPS Unit within the Public Conservator's office. Approval of this request will allow the County to provide sufficient services and oversight to persons in an LPS Conservatorship and avoid noncompliance with W&I 5352.5. Funded by Patient Care Revenue. Eligible for Realignment. Contingent on approval of corresponding growth requests in the budgets of DCFAS (BU 7800000) and Patient Care Revenue

### **Recommendations to Address Behavioral Health Workforce Crisis**

Lastly, the MHB approved [a set of recommendations in May 2023 to address the behavioral health workforce crisis affecting Sacramento County](#). Specifically, it was recommended that the hourly rate at which BHS Mental Health Counselors are compensated be increased by 13.5%, and the hourly rate at which Senior Mental Health Counselors are compensated be increased by 17.6%, to be competitive with the private behavioral health sector in order to recruit and retain qualified candidates for positions with the highest vacancy rates in BHS. Although there has been a slight increase in salary for some BHS positions, the MHB respectfully requests that the Board of Supervisors continue to consider these recommendations when deliberating and taking action on the recommended county budget for FY 2024-25.

In conclusion, the MHB commends Sacramento County BHS Director Dr. Ryan Quist, BHS Deputy Director Kelli Weaver, LCSW, and all BHS staff for their innovativeness, perseverance, and dedication to expanding access to quality and equitable behavioral health services for Sacramento County while simultaneously planning and implementing multiple new initiatives that will transform the Sacramento County Behavioral Health Service delivery system. The MHB supports the identified growth requests that will result in increased availability of behavioral health services for Sacramento County residents. The MHB believes that all behavioral health services must be culturally, ethnically, and linguistically relevant and we strongly encourage BHS to continue addressing behavioral health equity disparities, specifically behavioral health racial equity disparities, by allocated robust and sustainable funding for all of Sacramento County's underserved and historically marginalized populations.



Thank you for your consideration of our recommendations. If you have any questions, please contact me at (916) 202-1890 or by email at [corrine@drcorrinemcintosh.com](mailto:corrine@drcorrinemcintosh.com).

Sincerely,

A handwritten signature in cursive script that reads "Corrine McIntosh Sako, Psy.D., LMFT".

Corrine McIntosh Sako Psy.D. LMFT, Chairperson  
Sacramento County Mental Health Board

cc: Ryan Quist, PhD, Behavioral Health Services Director