

MHSA Two-Year Program and Expenditure Plan FY 2024-25 and 2025-26



MHSA Steering Committee
Presentation

March 21, 2024

Andrea Crook, MS
MHSA Program Manager

Dawn Williams
Data Analytics Program
Manager

Jane Ann Zakhary
Administration, Planning, and
Outcomes Division Manager

Two-Year vs. Three-Year Plan - Reminder

In 2020, Assembly Bill (AB) 81 created flexibilities for the Covid-19 crisis – allowing counties to extend the timeframe of their currently approved Update to include FY 2020-21



With support from the MHSA Steering Committee, Sacramento extended our MHSA FY 2019-20 Annual Update to include FY 2020-21 which shifted MHSA Three-Year Plan timeline



In an effort to get all counties back on the same planning schedule, DHCS requested an MHSA Two-Year Plan for FY24-25, 25-26 rather than the usual Three-Year Plan

Community Program Planning

- March 4 – April 3, 2024: 30-day posting for public review and comment
- March 21, 2024: MHSA Steering Committee Presentation and Collective Comment
- March 26, 2024: BHS Cultural Competence Committee Presentation and Collective Comment
- April 3, 2024: Mental Health Board conducts Public Hearing for Public Comment

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.

- In Fiscal Year 2022-23:
 - 2,684 unduplicated partners (clients) were served across the implemented Full Service Partnership Programs
 - 27,226 clients were served across the General System Development programs

**Mental Health Services Act (MHSA)
Community Services & Supports (CSS)
Component**

SAC1 Community Opportunities for Recovery and Engagement	SAC2 Sierra Elder Wellness	SAC3 Permanent Supportive Housing (PSH)	SAC4 Transcultural Wellness Center (TWC)	SAC5 Wellness & Recovery	SAC6 Adult Full Service Partnership (Adult FSP)	SAC7 Juvenile Justice Diversion and Treatment Program (JJDTF)	SAC8 Transition Age Youth Full Service Partnership (TAY FSP)	SAC9 Crisis Residential Program (CRP)	SAC10 Children's Community Mental Health Services	SAC11 Mental Health Urgent Care Clinic (MHUCC)	SAC12 Family FSP
Adult Psychiatric Support Services (APSS) Clinic	Sierra Elder Wellness FSP	New Direction FSP	TWC FSP	Peer Partners	Integrated Services Agency (ISA) FSP	JJDTF FSP	TAY FSP	15-bed CRP	Consultation, Support and Engagement Teams (CSET)	MHUCC	Family FSP
Community Outreach Recovery Empowerment (CORE)		Pathways FSP		Consumer & Family Voice (CFV)	Sacramento Outreach Adult Recovery (SOAR) FSP			15-bed CRP	Flexible Integrated Treatment (FIT)		
		Sacramento Adults Recovering in Strengths-based Environment (ARISE) FSP		Sacramento Advocates for Family Empowerment (SAFE)	Outpatient Assisted Services & Integrated Supports (OASIS) FSP			15-bed CRP			
		Adult Residential Treatment (ART)		Certified Peer Specialist – Leadership Liaison Program				15-bed CRP			
		Augmented Board and Care (ABC)		Peer Support Services Program							
				Mental Health Crisis Respite Center							
				Abiding Hope Respite House							
				Mental Health Respite Program							

Bolded outline indicates Full Service Partnership (FSP) program.

Un-bolded outline indicates General System Development (GSD) program.

Uncolored background indicates programs that ended early FY2023-24



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 county-operated and contracted components: Adult Psychiatric Support Services (APSS), Community Outreach Recovery Empowerment (CORE)
 - 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
 - Services will also be provided to support clients at MHSA-financed housing developments

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 New Direction, Pathways, Sacramento ARISE, 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
 - Peer Support Services Program is a redesign of the Peer Partner Program and the Sacramento Advocates for Family Empowerment (SAFE) Program
 - Supporting clients linked to the Adult Psychiatric Support Services clinic, Mental Health Treatment Center, and other County-operated programs
 - Certified Peer Specialist – Leadership Liaison Program (CPS-LLP) is a redesign of the Consumer and Family Voice Program
 - Mental Health Respite Programs: Mental Health Crisis Respite Center, Abiding Hope Respite House, and Mental Health Respite Program

CSS Component (continued)

- SAC-6 Adult Full Service Partnerships
 - Provide 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
 - Services are also provided to support clients at MHSA-financed housing developments
 - Includes Integrated Services Agency (ISA), Sacramento Outreach Adult Recovery (SOAR) and Outpatient Assisted Services & Integrated Supports (OASIS)

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 at risk populations
 - Services include outreach, engagement, retention and transition strategies that emphasize independent living and life skills, and mentorship
 - Services are also provided to support clients at MHSA-financed housing developments

CSS Component (continued)

- SAC-9 Crisis Residential Program (CRP)
 - Short-term residential treatment programs that operate in a structured home-like setting
 - Voluntary community-based services are designed for individuals who can be appropriately served in a community setting and meet psychiatric inpatient criteria 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 CRP in Rancho Cordova
 - 15-bed Transition Age Youth CRP in Sacramento

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 outpatient services to children and youth with serious emotional disturbance under the age of 21 years

CSS Component (continued)

- SAC-11 Mental Health Urgent Care Clinic (MHUCC)
 - With support from the MHSA Steering Committee, the time-limited MHSA Innovation Project 2: MHUCC program services transitioned from the Innovation (INN) Component to CSS funding in FY 2022-23
 - Voluntary and immediate access to short-term crisis intervention services, including integrated services for co-occurring substance abuse disorders, to individuals of all age groups (children, TAY, adults, and older adults) who are experiencing a mental health crisis

CSS Component (continued)

- SAC-12 Family Full Service Partnership
 - Family Full Service Partnership (FSP) program addresses the mental health and wellness of an individual client through a family systems lens. The Family FSP serves children age 0-21 and adult parents/caregivers of children age 0-21 and their family.
 - The ultimate goal is to sustain health, wellness, safety and stability through the natural supports of a family system.
 - Services also support clients at MHSA-financed housing developments

CSS Full Service Partnership Program FY 2022-23 Outcomes

- Unstable “Housing” decreased by 63.2%
- Homeless (unsheltered) days decreased by 82.6%
- Mental Health/Substance Use ER visits decreased by 58.5% and events decreased by 66.9%
- Psychiatric hospitalizations decreased by 52.3%
- Psychiatric hospitalization days decreased by nearly 15.7%
- Arrests decreased by 65.7%.
- Incarcerations decreased by 35.1%
- Incarceration days decreased by 48.5%
- Employment rate, of partners with employment as goal, increased by 23.4%

MHSA Housing Program Accomplishments

- Housing for homeless individuals living with serious mental illness
- In 2022, the MHSA-funded Programs:
 - 2,070 clients received any type of housing related flex fund support
 - 192 families received rental assistance
 - 70.4% only needed 1-2 months of rent gap
 - 1,018 singles/couples received rental assistance
 - 46.4% only needed 1-2 months of rent gap
 - Added 37 dedicated apartments totaling 256 live units

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 2022-23:
 - 73,260 served across Suicide Prevention
 - Over 270,000 outreached through Suicide Prevention
 - 3,590 served across Strengthening Families
 - 17,000+ educated and 404 trained through Strengthening Families
 - 807 served across Integrated Health and Wellness
 - 2,093 served across PEI Time-Limited Grants

**Mental Health Services Act (MHSA)
Prevention & Early Intervention (PEI)
Component**

Suicide Prevention

- Suicide Crisis Line
- Emergency Department Follow-Up Services
- Suicide Bereavement Support Groups and Grief Services
- Supporting Community Connections (SCC)
 - Consumer-Operated Warm Line
 - Hmong, Vietnamese, Cantonese-Speaking
 - Slavic/Russian-Speaking
 - Youth/TAY
 - Older Adult
 - African American
 - American Indian/Alaskan Native
 - Latino/Spanish-Speaking
 - Arabic-Speaking
 - Iu Mien
 - Ukrainian Phone Support
 - *Afghan (coming soon)*
 - *Farsi-speaking (coming soon)*
- Community Support Team (CST)
- Crisis Navigation Program (CNP)
- Mobile Crisis Support Teams (MCSTs)
- Caregiver Crisis Intervention Respite
- Rejuvenation Haven
- The Ripple Effect Respite
- Q-Spot Youth/TAY Respite
- Lambda Lounge Adult Mental Health Respite

Strengthening Families

- Quality Child Care Collaborative (QCCC)
- CPS Mental Health Team
- Bullying Prevention Education & Training
- Youth Mental Health First Aid (YMHFA)
- Early Violence Intervention Begins with Education (eVIBE)
- Adoptive Families Respite Program
- The Source
- Safe Zone Squad
- Youth Help Network
- Student Mental Health and Wellness Collaborative

Integrated Health & Wellness

- Sacramento Early Diagnosis and Preventative Treatment (SacEDAPT)
- SeniorLink
- Community Responsive Wellness Program for the Black Communities of Sacramento (CRWP)

Mental Health Promotion

- "Mental Illness: It's not always what you think" project
 - Multi-Media Outreach
 - Stakeholder Engagement
 - Community Outreach
 - Stop Stigma Sacramento Speakers Bureau
- Mental Health Matters

Time-Limited Community Driven PEI Program

- 34 Sacramento County Community-Based Organizations

PEI Component (continued)

- Suicide Prevention Program
 - Suicide Crisis Line
 - Emergency Department Follow-Up Services
 - Suicide Bereavement Support Groups and Grief Services
 - Supporting Community Connections (SCC):
 - Consumer-Operated Warm Line; Hmong, Vietnamese, Cantonese; Slavic/Russian-Speaking; Youth/Transition Age Youth; Older Adult; African American; American Indian/Alaskan Native; Latino/Spanish-Speaking, Iu Mien, Arabic-Speaking, Ukrainian Phone Support
 - Farsi, Afghan SCC programs pending

PEI Component (continued)

- Suicide Prevention Program (continued)
 - Community Support Team
 - Crisis Navigation Program
 - Mobile Crisis Support Teams
 - Mental Health Respite Programs:
 - Caregiver Crisis Intervention Respite
 - Rejuvenation Haven (for Teens and TAY)
 - The Ripple Effect 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
 - Student Mental Health and Wellness Collaborative
 - Youth Help Network

PEI Component (continued)

- Integrated Health and Wellness Project
 - Sacramento Early Diagnosis and Preventative Treatment (SacEDAPT)
 - SeniorLink
 - Community Responsive Wellness Program for Black Communities of Sacramento

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

- Program and competitive bidding process administered by CalMHSA
 - Round One: 34 grants awarded
 - Round Two: 27 grants awarded

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

**Mental Health Services Act (MHSA)
Workforce Education and Training (WET) Component**

Action 1: Workplace Staffing Support
BHS WET Coordinator

Action 2: System Training Continuum

**Action 3: Consumer and Family Member Employment and Stipends
for Individuals, Especially Consumers and Family Members, for Education
Programs to Enter the Mental Health Field**

Action 4: High School Training
Arthur A. Benjamin Health Professions High School (AABPHS), Sacramento City
Unified School District and Valley High School Health TECH Academy (VHSHTA),
Elk Grove Unified School District

Action 5: Psychiatric Residents and Fellowships
UCD Psychiatry Residents and Fellowship Training; Mental Health and Substance Use
Prevention and Treatment Provider Training; UCD Residents and Post-Doctoral Fellows
at Youth Detention Facility; and BHS Clinical Child Psychology, Pre-Doctoral Internship
Training Program

Action 6: Multidiscipline Workforce Recruitment and Retention
BHS Loan Repayment Program

Action 7: Consumer Leadership Stipends

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

Innovation (INN) Component

Mental Health Services Act (MHSA) Innovation (INN) Component

**INN Project 1:
Respite Partnership Collaborative
(RPC)**
2011-2016
*Programs sustained after 2016
with CSS or PEI funding*

Capital Adoptive Families Alliance

Del Oro Caregiver Resource Center

Turning Point Community Programs:
Abiding Hope Respite House

Iu Mien Community Services

Saint John's Program for Real Change

TLCS: Crisis Respite Center

A Church for All: Ripple Effect

Sacramento LGBT Community Center:
Lambda Lounge

Wind Youth Services

Gender Health Center

Sacramento LGBT Community Center:
Q Spot

**INN Project 2:
Mental Health
Crisis/Urgent Care Clinic**
2017 – 2022
Program sustained after 2022 with CSS funding

Mental Health Urgent Care Clinic (MHUCC)
Turning Point Community Programs

**INN Project 4:
Multi-County Full Service
Partnership Innovation Collaborative**
2020 - Present

Multi-County Full Service Partnership (FSP)
Collaborative
Third Sector & Sacramento, Fresno, San
Bernardino, San Mateo, Siskiyou, Ventura
counties

**INN Project 6:
allcove Sacramento**
2024 – Present

allcove Sacramento
Greater Sacramento Urban League

**INN Project 3:
Behavioral Health Crisis Services
Collaborative**
2018 - 2023

Behavioral Health Crisis Services
Collaborative
BHS, Placer County & Dignity Health

**INN Project 5:
Forensic Behavioral Health
Multi-System Teams**
2021 - Present

Community Justice Support Program
El Hogar

**INN Project 7:
Community-Defined Mental Wellness
Practices for the African American/
Black/African Descent Unhoused**
2024 – Present
Provider(s) to be determined

Active INN Projects

- 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

Active INN Projects (continued)

- Community Justice Support Program
 - Focuses 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 now known as Multi-System Teams
 - Outcomes include: increased collaboration; immediate access to services; care coordination and reduced re-incarcerations

Active INN Projects (continued)

- allcove Sacramento
 - Youth Drop-in Center, administered by the Greater Sacramento Urban League
 - Multi-county initiative led by the MHSOAC which began in 2020
 - Mental wellness center serving youth 12 to 25 years of age
 - Contract to be executed in FY 2023-24

Active INN Projects (continued)

- Community Defined Mental Wellness Practices for African American/Black/African Descent Unhoused
 - Phase 1 includes more community conversations, facilitated by trusted community sites.
 - Currently being scheduled
 - Phase 2 will start procurement process
 - Phase 3 will be implementation and evaluation

Capital Facilities and Technological Needs (CF/TN) Component

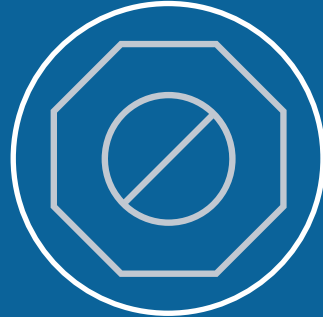
- Technological Needs Project
 - Furthers the County's efforts in achieving the federal objectives of meaningful use of electronic health records to improve client care
 - BHS, along with other participating counties, moved to SmartCare (semi-statewide EHR) to align with CalAIM initiatives

MHSA Component, Program, & Budget

- MHSA for Sacramento County FY 2024-25



Community
Services &
Supports (CSS)
76% of funding



Prevention & Early
Intervention (PEI)
19% of funding



Innovation (INN)
5% of funding



Workforce
Education &
Training (WET)
Sustained with
CSS funding



Capital Facilities/
Technological
Needs (CFTN)
Sustained with
CSS funding

Budget

	MHSA Funding					
	A	B	C	D	E	F
	Community Services and Supports	Prevention and Early Intervention	Innovation	Workforce Education and Training	Capital Facilities and Technological Needs	Prudent Reserve
A. Estimated FY 2024/25 Funding						
1. Estimated Unspent Funds from Prior Fiscal Years	23,198,746	4,137,471	18,518,430	2,306,977	4,624,593	
2. Estimated New FY 2024/25 Funding	66,363,200	16,590,800	4,366,000			
3. Transfer in FY 2024/25a/	(4,500,000)			1,000,000	3,500,000	0
4. Access Local Prudent Reserve in FY 2024/25	0	0				0
5. Estimated Available Funding for FY 2024/25	85,061,946	20,728,271	22,884,430	3,306,977	8,124,593	
B. Estimated FY 2024/25 MHSA Expenditures	72,133,345	14,838,102	7,423,225	2,262,151	5,510,776	
C. Estimated FY 2025/26 Funding						
1. Estimated Unspent Funds from Prior Fiscal Years	12,928,601	5,890,169	15,461,205	1,044,826	2,613,817	
2. Estimated New FY 2025/26 Funding	53,922,000	13,480,500	3,547,500			
3. Transfer in FY 2025/26a/	(2,500,000)			1,000,000	1,500,000	0
4. Access Local Prudent Reserve in FY 2025/26	0	0				0
5. Estimated Available Funding for FY 2025/26	64,350,601	19,370,669	19,008,705	2,044,826	4,113,817	
D. Estimated FY 2025/26 Expenditures	64,350,601	19,370,669	7,423,225	2,044,826	4,113,817	
E. Estimated FY 2025/26 Unspent Fund Balance	0	0	11,585,480	0	0	

Budget (continued)

F. Estimated Local Prudent Reserve Balance	
1. Estimated Local Prudent Reserve Balance on June 30, 2024	13,196,792
2. Contributions to the Local Prudent Reserve in FY 2024/25	0
3. Distributions from the Local Prudent Reserve in FY 2024/25	0
4. Estimated Local Prudent Reserve Balance on June 30, 2025	13,196,792
5. Contributions to the Local Prudent Reserve in FY 2025/26	0
6. Distributions from the Local Prudent Reserve in FY 2025/26	0
7. Estimated Local Prudent Reserve Balance on June 30, 2026	13,196,792

Attachment E

MHSA Funding Summary

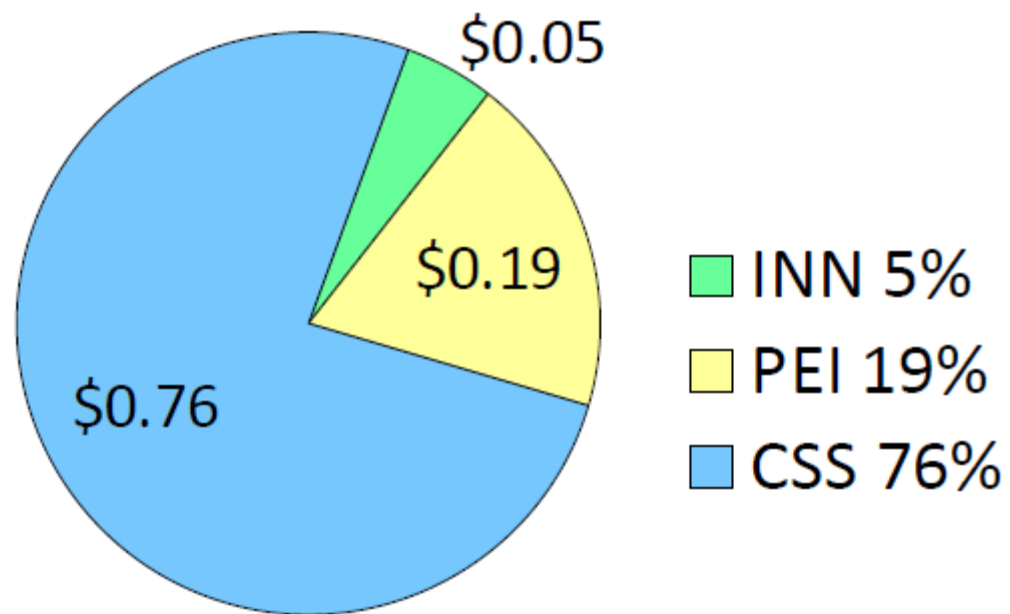
- CSS Component Funding
 - Majority must be directed to Full Service Partnership programs
 - 76% of each MHSA dollar is CSS
 - Unspent and new CSS funding is combined to:
 - Sustain CSS programming and activities
 - Sustain critical activities in WET and CF/TN
 - Sustain successful and applicable INN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

- Mental Health Services Act (MHSA) funding is generated by a 1% tax on personal income in excess of \$1M
 - As income tax-based revenue, MHSA funding is greatly impacted by the economy (impacts lag by approximately 2 years)
 - MHSA revenue is volatile and difficult to project
- In FY 2023-24, Sacramento County allocation increased from 3.43% to 3.54% of State MHSA funding due to statewide recalculation distribution

County Certification

- County Fiscal Accountability Certification
- This certification will be completed and signed after Sacramento County Board of Supervisors approval

Attachments

- A. MHSA Steering Committee Charter
- B. Innovation Focus Group Summary July 2023
- C. 2022 Human Resources Survey Report
- D. Behavioral Health Racial Equity Collaborative Meeting Celebration
- E. MHSA Two Year Plan Funding Summary
- F. MHSA Housing Portfolio Catalog
- G. Community Driven PEI Grant Awardees
- H. Annual Prevention and Early Intervention Program and Evaluation Report
- I. INN3 - Behavioral Health Crisis Services Collaborative Final Evaluation Report
- J. INN4 - Multi-county FSP Project Summary
- K. INN5 - Community Justice Support Program Report FY 2022-23
- L. MHSA General Standards
- M. Acronym List

Member Questions, Discussion and Collective Comment

- Overall, is the MHSA Steering Committee in support of moving the MHSA Two-Year Plan forward?
- Is there additional feedback that should be considered?
- Is there feedback regarding the general format?