

## MENTAL HEALTH SERVICES ACT

## Draft Fiscal Year 2017-18, 2018-19, 2019-20 Three-Year Program and Expenditure Plan

Posted for 30-day Public Review and Comment February 5, 2018 through March 7, 2018

## **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 2013 population of Sacramento County to be approximately 1.45 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 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.

Assembly Bill (AB) 114, passed in 2017, clarifies and defines the MHSA reversion process. MHSA funding that is subject to reversion is a subset of unspent funds that were not spent in the designated timeframe. The timeframe varies dependent on MHSA component. For example, the Community Services and Supports and Prevention and Early Intervention components are typically three years. Through AB114, Counties have an opportunity to develop a plan to spend funds that would avoid reversion if specific criteria are met.

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 adults living with a serious mental illness. Housing is also a large part of the CSS component. In Sacramento County, there are nine (9) previously approved CSS Work Plans containing nineteen (19) 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, adults, older adults and their families.

As addressed in the previous Three-Year Plan and Annual Updates, the Division of Behavioral Health Services facilitated a three-phased community planning process to expand CSS programming beginning in 2014. This new and expanded programming will be fully implemented in Fiscal Year 2017-18.

In addition, in alignment with the Board of Supervisors action on November 7, 2017, the Division of Behavioral Health Services facilitated community planning process in December 2017 and January 2018 resulting in recommended mental health treatment services expansion for individuals living with a serious mental illness who are homeless or at-risk of homelessness. This new and expanded programming is included in this Draft Three-Year Plan. Expansion of existing programming is targeted to begin in FY 2017-18 and new programming will roll out in FY 2018-19.

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 projects containing thirty-one (31) programs designed to address suicide prevention and education; strengthening families; integrated health and wellness; and mental illness stigma and discrimination reduction. In FY2015-16, this component was expanded to include mental health respite programs, as well as Mobile Crisis Support Teams. In FY2016-17, the Mobile Crisis Support Teams were expanded from two teams to four teams.

This Three-Year Plan includes a recommended plan to dedicate identified AB114 PEI reversion funding to mental health services for foster youth, in alignment with the November 7, 2017, Board of Supervisors action. This new programming will roll out in FY 2018-19.

In addition, in alignment with the Board of Supervisors action on November 7, 2017, the Division of Behavioral Health Services facilitated community planning process in December 2017 and January 2018 resulting in recommended mental health treatment services expansion for individuals living with a serious mental illness who are homeless or at-risk of homelessness. Expansion of existing programming is targeted to begin in FY 2017-18 and new programming will roll out in FY 2018-19.

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 more detail in the 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 opened in November 2017.

This MHSA Three-Year Plan includes the proposed third INN Project, known as the Behavioral Health Crisis Services Collaborative INN Project #3. 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 area of Sacramento County. This proposed project was developed as a result of a local community planning process and is pending approval by the California Mental Health Services Oversight

and Accountability Commission (MHSOAC) and the Sacramento County Board of Supervisors. The project proposes to utilize AB114 INN reversion funds, as defined above.

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.

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.

The Capital Facilities (CF) project was completed in Fiscal Year 2015-16. The project renovated three buildings at the Stockton Boulevard complex that house 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.

Detailed descriptions of the programs and activities for each of the above MHSA components are contained in the MHSA Fiscal Year (FY) 2017-18, 2018-19, 2019-20 Three-Year Plan.

The Draft MHSA Fiscal Year (FY) 2017-18, 2018-19, 2019-20 Three-Year Plan is being posted for a 30-day public comment period from February 5 through March 7, 2017. The Mental Health Board will conduct a Public Hearing on Wednesday, March 7, 2018 beginning at 6:00 p.m. at the Grantland L. Johnson Center for Health and Human Services, located at 7001-A East Parkway, Sacramento, CA 95823.

If a community member would like to attend the Public Hearing and needs to arrange for an interpreter or a reasonable accommodation, please contact Jay Ma as soon as possible but no later than Wednesday, February 28, 2018, at (916) 875-4639 or <a href="MaJay@saccounty.net">MaJay@saccounty.net</a>.