



SANTA CLARA COUNTY MENTAL HEALTH SERVICES ACT

MHSA Annual Update Report to MHSA Stakeholder Leadership Committee (SLC) Meeting July 29, 2013




Revised: July 23, 2013


MHSA SLC Agenda



1. Introductions
2. Overview of County's MHSA Plan
3. MHSA Key Performance Measures by Component
4. Year to Date Accomplishments
5. FY13 Budget and FY14 MHSA Revenue Projections
6. FY14 MHSA Recommended Plans by Component
7. Overall budget change from FY13 to FY14
8. Other Requests Received by MHD
9. Next Steps - Tentative MHSA Annual Update Schedule
10. Comments/Questions




Overview of County's MHSA Plan



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Overview of MHSA Components



1. **Community Services and Supports (CSS)** - makes up 80% of ongoing annual MHSA funds. This component funds ongoing system expansion and improvement for new and current clients.
2. **Prevention and Early Intervention (PEI)** makes up 20% of ongoing funds. This component funds early intervention and prevention services.
3. **Innovative Programs (INN)** is drawn from CSS and PEI funding in the amount of 5% of the combined CSS/PEI annual pool of funds. INN component funds innovative projects and programs that will test new models of service delivery or system improvement.
4. **Workforce Education and Training (WET)** - one-time funds to be spent over 10 years for consumer, family and staff training and workforce development at the state and local levels.
5. **Capital Facilities and Technological Needs (CFTN)** - one-time funds to be spent over 10 years funding for facilities, and technology.

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Performance Measures by MHSA Component



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MHSA Key Performance Measures by Plan Component				
Community Services & Supports (CSS)	Prevention & Early Intervention (PEI)	Innovation (INN)	Workforce Education & Training (WET)	Capital Facilities & Technology Needs (CFTN)
<ul style="list-style-type: none"> Reduction of subjective suffering from mental illness Increase meaningful use of time and capabilities in school, work, activity Reduce homelessness and increase safe and permanent housing Increase access to substance abuse treatment Increase natural networks of supportive relationships Reduction in multiple foster care placements Reduction in incarceration/juvenile justice involvement Reduction in disparities in service access Increase in self-help and consumer/family involvement 	<ul style="list-style-type: none"> Reduction of Stigma and Discrimination Reduction of Disparities in Access to Mental Health Services Reduction of Psycho-Social Impact of Trauma Prevention and Early Intervention of At-Risk Children, Youth and Young Adult Populations experiencing onset of serious Psychiatric Illness Reduction and Prevention of Suicide Risk 	<ul style="list-style-type: none"> Increase access to underserved groups Increase the quality of services, including better outcomes Promote interagency collaboration Increase access to services 	<ul style="list-style-type: none"> Have a workforce fully integrated and reflective of the cultural and ethnic diversity of consumers and family members at all levels of the workforce, including employees, interns, and volunteers Provide employment opportunities and integrated support mechanisms throughout the system Enhance staff training and develop opportunities and career pathways for County and Community Based Organization (CBO) staff Provide training and educational opportunities in the mental health system 	<ul style="list-style-type: none"> Provide a comprehensive electronic medical record for consumers that can be shared in a secure & shared across service providers (EHR Project) Create a single data repository for all of the MHD information (EDW Project) Provide computer labs and basic PC skills training for consumers in established Wellness Centers across the County (CLC Project) Enhance the current Mental Health Department website (WEB Project) Provide a housing and/or bed availability database (BHX Project) Create secure, real-time data system of client records accessible across agencies to provide a cross agency view of registered consumer's demographic, service & other information (CHR Project) Improve access to high risk populations in the downtown & east San Jose service areas; areas with the highest concentration of at-risk youth (Medi-Plex Project) Improve the current space for Self-Help Center to have a computer training room & several activity rooms which will allow multiple group activities (DTMH Project)

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Year to Date Accomplishments

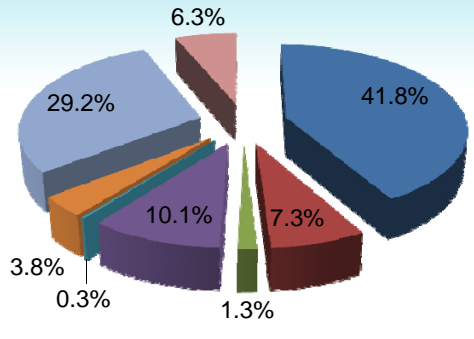


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FY07 to FY12 Outcomes Achieved:



Increased access to underserved (CSS, PEI):
64.5% of newly served are from underserved population.
(Source: Unicare)



Ethnicity	Percentage
Latino	41.8%
African American	7.3%
Native American	1.3%
Asian/Pacific Islander	10.1%
Mixed Race	0.3%
Other Ethnicity	3.8%
Caucasian/White	29.2%
Unknown Ethnicity	6.3%

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FY07 to FY12 Outcomes Achieved:

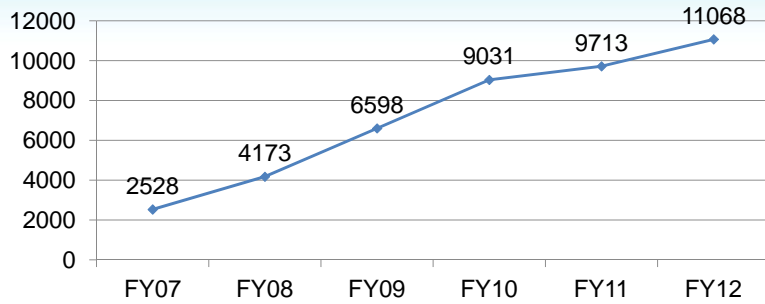
Increase in access to services (CSS, PEI):

Number of individuals served in new MHSA programs.

(Source: Unicare)



Number Served



% change from Prior Year	FY07	FY08	FY09	FY10	FY11	FY12
	N/A	65%	58%	37%	8%	14%

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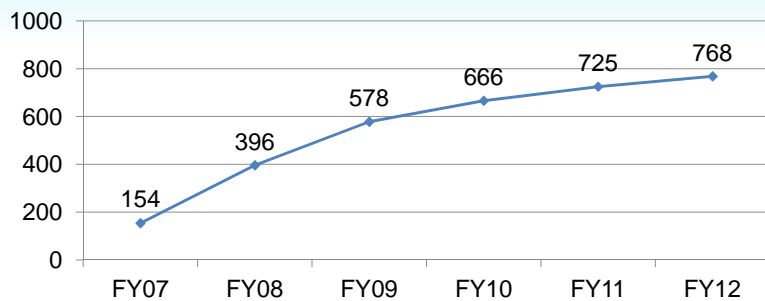
FY07 to FY12 Outcomes Achieved:

Reduction of subjective suffering from mental illness:

Number of individuals served in new FSP programs (Source: Unicare), with significant reduction of homelessness, incarceration, and hospitalizations.



Number Served



% change from Prior Year	FY07	FY08	FY09	FY10	FY11	FY12
	N/A	157%	46%	15%	9%	6%

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FY07 to FY12 Outcomes Achieved:

Increased self-help and consumer/family involvement (i.e., recovery oriented services) (WET) – close to 500 trainings in multiple Evidenced Based Practices have been provided resulting in a better trained and more diverse workforce.



WET Plans:	W2: Promising Practice-Based Training In Adult Recovery Principles And Child, Adolescent And Family Service Models	W3: Improved Services & Outreach to Unserved and Underserved Populations	W4: Welcoming Consumers and Family Members	W5: WET Collaboratio with Key Systems
# Trainings:	358	68	43	12
Some of the Types of Trainings Provided but not limited to:	<ul style="list-style-type: none"> -- MORS -- Motivational Interviewing -- Co-Occurring Disorders -- Clinical Supervision -- SSI Benefits Training -- Bridges Out of Poverty -- Laugh Yourself Safe -- Peer Run Start Up 101 -- CANS Training -- Bridges Out of Poverty -- Trauma Focused Cognitive Behavioral 	<ul style="list-style-type: none"> -- Various cultural competency trainings 	<ul style="list-style-type: none"> -- Welcoming Trainings -- Client Culture Trainings 	<ul style="list-style-type: none"> --CIT Trainings

MHSA FY13 Budget and Estimated Component Funding Projections for FY14



MHD's FY13 MHSA Budget



CSS, PEI, and INN: Funds subject to a 3-year reversion period.

Component	Ongoing	One-Time	Total
CSS	\$42,109,836	\$925,409	\$43,035,245
PEI	\$13,686,913	\$6,524,726	\$20,211,639
INN	\$4,669,029	\$2,053,085	\$6,722,113
Total	\$60,465,778	\$9,503,220	\$69,968,998

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County's MHSA WET and CFTN One-Time Funds



WET and CFTN: one-time funds subject to a 10-year reversion period.

Component	FY06-07	FY07-08	FY08-09	FY09-10	Total
WET	\$4,799,400	\$5,171,300		\$2,000,000	\$11,970,700
CFTN		\$16,205,300	\$5,091,700		\$21,297,000
Total	\$4,799,400	\$21,376,600	\$5,091,700	\$2,000,000	\$33,267,700

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MHSA Estimated Component Funding Statewide as of June 2013 (in millions of dollars)



Component	ACTUAL		ESTIMATED			
	FY11	FY12	FY13	FY14	FY15	FY16
CSS	\$783.6	\$741.0	\$1,154.2	\$898.5	\$997.9	\$954.6
PEI	\$216.2	\$185.2	\$288.5	\$224.6	\$249.5	\$238.6
INN*	\$119.6	\$48.7	\$75.9	\$59.1	\$65.7	\$62.8
Total	\$1,119.4	\$974.9	\$1,518.6	\$1,182.2	\$1,313.1	\$1,256.0
% Change		-12.9%	55.8%	-22.2%	11.1%	-4.3%

*5% of the total funding must be utilized for innovative programs (W&I Code Section 5892(a)(6)).

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MHSA Estimated Component Funding for Santa Clara as of June 2013




Component	ACTUAL		ESTIMATED			
	FY12	FY13	FY14	FY15	FY16	
CSS	\$33,536,100	\$53,051,426	\$41,299,483	\$45,872,400	\$43,877,644	
PEI	\$9,037,900	\$13,262,856	\$10,324,871	\$11,468,100	\$10,969,411	
INN From CSS 80%	N/A	\$2,792,180	\$2,173,657	\$2,414,337	\$2,309,350	
INN from PEI 20%	N/A	\$698,045	\$543,414	\$603,584	\$577,337	
INN*	\$2,238,600	\$3,490,225	\$2,717,071	\$3,017,921	\$2,886,687	
Total	\$44,812,600	\$69,804,507	\$54,341,425	\$60,358,421	\$57,733,742	
% Change		55.8%	-22.2%	11.1%	-4.3%	

*5% of the total funding must be utilized for innovative programs (W&I Code Section 5892(a)(6)).

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FY14 Recommended Plans



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Community Services and Supports (CSS)

CSS Programs		Recommended	
		FY2013 Funding	FY2014 Funding
C01	Children's Full Services Partnerships	\$1,150,074	\$1,150,074
C02	Child System Development	\$290,657	\$290,657
C03	Children/Family Behavioral Health OP Sys Redesign	\$2,679,427	\$2,707,715 *
T01	Transition Age Youth System of Care Development	\$1,035,965	\$1,035,965 *
T02-04	Behavioral Health Sys Redesign/TAY Crisis/Drop-In Svcs	\$1,436,289	\$1,436,289 *
A01	Adult Full Service Partnerships	\$4,545,934	\$4,351,925 *
A02	Adult Behavioral Health Services Outpatient Sys Redesign	\$7,589,738	\$9,502,696 *
A03	Criminal Justice System Jail Aftercare Program	\$6,680,608	\$6,680,608
A04	Urgent Care	\$3,523,171	\$8,223,500 *
A05	Consumer and Family Wellness and Recovery Services	\$1,059,761	\$1,059,761 *
OA01	Older Adult Full Service Partnerships	\$371,288	\$371,288
OA02-04	Older Adult Behavioral Health Svcs Outpatient Redesign	\$1,585,042	\$1,495,042 *
HC01	Behavioral & Primary Health Care Partnership	\$5,230,979	\$0 *
HO01	Housing Options Initiative	\$2,437,350	\$2,424,240 *
LP01	Learning Partnership	\$1,845,676	\$1,593,772 *
AD01	<u>CSS Administration</u>	\$1,573,287	\$1,573,287 *
Total CSS		\$43,035,246	\$43,896,819
Change from FY2013			\$861,573

*Recommended FY14 Budget / Reallocation Change

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FY14 CSS Preliminary Recommended Changes



C03: Children and Family Behavioral Health Outpatient Services Redesign

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	For FY14, Child and Adolescent Needs and Strengths (CANS) Trainings be funded under existing ongoing "Triple P" budget item in PEI Project 2 therefore the one-time FY13 budget allocation in C03 will be removed.	One-Time	(\$13,250)
(2)	As a result of the settlement agreement in Katie A v. Bonta, the State of CA has agreed to take a series of actions that are intended to transform the way California children/youth who are in foster care, or who are at imminent risk of foster care placement receive access to MH services including assessment and individualized treatment. As a result, the MHD is requiring MH screening for all children in foster care. As such, a 0.5 FTE Health Services Representative (HSR) is needed to provide clerical support in registering clients in the Unicare system.	One-Time	\$41,538
(3)	Redirect ongoing funds set aside for services/supplies to fund 0.50 FTE Developmental Behavioral Pediatrician for Kidscope. No additional funds are needed.	Ongoing	\$0
Continue C03 changes next slide - subtotal items 1-3			\$28,288

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FY14 CSS Preliminary Recommended Changes



C03: Children and Family Behavioral Health Outpatient Services Redesign

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
Subtotal of C03 items 1-3 from prior slide			\$28,288
(4)	Redirect ongoing funds set aside for Juvenile Competency Restoration Training Program to fund a Psychologist/Evaluator for the purpose of conducting independent competency evaluations (ICE). Given the increase in number of youth being served, it is recommended that a contract be developed with a Psychologist/Evaluator to conduct ICE. MHD proposes to redirect ongoing funds set aside of \$133,190 for the University of Virginia's training contract to cover the \$74,000 expense related to ICE. No additional funding required.	One-Time	\$0
Overall C03 FY14 Recommended Change (Items 1-4)			\$28,288

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FY14 CSS Preliminary Recommended Changes



T01: TAY Full Service Partnership

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Based on FY14 CBO negotiations, the three current TAY FSP CBO Providers reported the ability to expansion of available FSP slots within their programming. The increase in the number of slots will not require a change in the budget. FY13 total # of slots is 70 and for FY14 119 slots; Community Solutions from 35 to 52, Momentum from 17 to 40, and Starlight from 18 to 27.	Ongoing	\$0
Overall T01 FY14 Recommended Change			\$0

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FY14 CSS Preliminary Recommended Changes



A01: Adult Full Service Partnership

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Adjust FSP budget since Indian Health Center (IHC) will be using/redirecting a portion of their Adult FSP allocation for their new "Culture is Prevention Program" under PEI Project 2 Plan.	Ongoing	(\$94,009)
(2)	Adjust "Enhanced Residential Recovery Services" budget based on actual experience. In FY12, actual expenses were approximately \$806,000 while the current FY13 yearend expense estimates are projected at about \$883,000. For FY14, propose adjusting budget from \$1,000,000 to \$900,000.	Ongoing	(\$100,000)
Overall A01 FY14 Recommended Change			(\$194,009)

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FY14 CSS Preliminary Recommended Changes



A02: Adult Behavioral health Outpatient Services Redesign

Item #	Description	Type	Amount
(1)	County MHD position moves between various CSS work plans A02, A04 and HC01 are needed.	Ongoing	(\$35,700)
(2)	Create new 1.0 FTE Health Services Office Supervisor (HSOS) to support MHSA Downtown Mental Health Clinic.	One-Time	\$98,334
(3)	The two-year INN-03 Adult with Autism and Co-occurring Mental Health Disorders Project funded with INN funds ended on June 30, 2013. MHD recommends to sustain/integrate the project into the A02 work plan due to the positive results in the use of the Schedule for the Assessment of Psychiatric Problems Associated w/ Autism (SAPPA) tool. SAPPA has been able to more precisely identify the co-occurring mental health disorder at a faster rate.	Ongoing	\$350,324
(4)	New A02 program "Intensive Transition Services" which will focus on wellness and recovery. Program's weekly schedule will be based on a "wellness wheel" and offer skills-building critical to participants' success in emotional growth/regulation, effective social engagement and interaction, spiritual balance, healthy living, etc.	One-Time	\$1,500,000
Overall A02 FY14 Recommended Change			\$1,912,958

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FY14 CSS Preliminary Recommended Changes



A04: Urgent Care

Item #	Description	Type	Amount
(1)	Merge work plan HC01 (Behavioral/Primary Health Care Partnership) into A04. HC01 was designed to improve the interface between behavioral health and primary healthcare in collaboration w/mental health & substance abuse providers. Central Wellness Benefit Center (CWBC) part of HC01 offers MH assessments & links clients w/needed services and helps unsponsored consumers w/applying for Medicare, Medi-Cal and SSI programs. Propose to rename A04 work plan to "Central Wellness and Urgent Care Services" to reflect the merge.	Ongoing	\$5,230,979
(2)	Position of moves of 3 Rehab Counselors to work plan A02 and the addition of 1.0 P49 Psychiatrist in CWBC.	Ongoing	(\$107,450)
(3)	Adjust Urgent Care Med budget based on current staffing.	Ongoing	(\$350,000)
(4)	Redirect a portion of ongoing program services/supplies \$314,441 budget to support Law Enforcement Liaison (LEL) contracts, Urgent Care MOU with Protective Services, and a portion to offset costs relating to Psychiatrist costs. Overall, no change in the budget due to redirection.	Ongoing	\$0
(5)	Remove one-time budget set aside for Law Enforcement Liaisons (LELs) in FY13.	One-Time	(\$73,200)
Overall A04 FY14 Recommended Change			\$4,700,329

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FY14 CSS Preliminary Recommended Changes



A05: Consumer and Family Wellness and Recovery Services

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Attendance at the North County Self Help Center (Phoenix) has been steadily declining over the past year. The centers hours have been reduced to adjust for the loss of clientele. Currently only two individuals use the center regularly and drop-in groups are largely unattended. As a result, the MHD recommends closing the site and reallocating the resources to other Office of Consumer Affairs activities. Consumers who have continued to use the center will be connected with other local resources. Proposed change does not result in a budget change in work plan A05.	Ongoing	\$0
Overall A05 FY14 Recommended Change			\$0

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FY14 CSS Preliminary Recommended Changes



OA02-04: Older Adult Behavioral Health Services Outpatient Redesign

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	In FY2013, MHD in collaboration with the City of San Jose providing one-time MHSA funds for Geriatric Specialists FTEs in multiple senior centers that serve underserved ethnic populations as a pilot to explore the ability of center staff to identify and address behavioral health needs of underserved seniors who utilize City nutrition centers. The FY13 one-time amount is \$280,000. However, due to late start of the project, approximately \$90,000 will be spent in FY2013. The one-time amount for FY2014 reflects the remaining balance of \$190,000.	One-time	(\$90,000)
Overall OA02-04 FY14 Recommended Change			(\$90,000)

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FY14 CSS Preliminary Recommended Changes



HC01: Behavioral and Primary Health Care Partnership

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Merge work plan HC01 (Behavioral/Primary Health Care Partnership) into A04. HC01 was designed to improve the interface between behavioral health and primary healthcare in collaboration w/ mental health & substance abuse providers.	Ongoing	(\$5,230,979)
Overall HC01 FY14 Recommended Change			(\$5,230,979)

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FY14 CSS Preliminary Recommended Changes



HO01: Housing

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Delete vacant 1.0 FTE Management Aide/Management Analyst Position and add new 1.0 FTE MH Community Worker who will work on assisting high needs clients w/ obtaining & maintaining permanent supportive housing.	Ongoing	\$13,198
(2)	Adjust the Temporary Housing Subsidy Program (THSP) MHSA funding based on current contract with Catholic Charities, \$481,659 MHSA funds.	Ongoing	(\$26,308)
(3)	Housing for Homeless Addicted to Alcohol (HHAA) HUD Grant. Propose to continue program but reduce MHSA funding by \$100,000 which will be replaced with County General Funds. Change MHSA funding from \$198,413 to \$100,000.	Ongoing	(\$100,000)
(4)	Propose to fund Intensive Case Management (ICM) South County program with MHSA funds. MHD intends to increase ICM services for the southern region of the County. Add \$100,000 MHSA funding through redirection of funds from item #3.	Ongoing	\$100,000
Overall HO01 FY14 Recommended Change			(\$13,110)

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FY14 CSS Preliminary Recommended Changes



LP01: Learning Partnership

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	The new 2.0 FTEs licensed Mental Health Program Specialists added in FY13 will be funded with existing MHSA WET funds. Remove budget from LP01.	Ongoing	(\$251,904)
Overall LP01 FY14 Recommended Change			(\$251,904)

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FY14 CSS Preliminary Recommended Changes




AD01: CSS Administration

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	MHD recommends swapping a budgeted unclassified Management Analyst Program Manager (MAPM I/II) position with a new Sr. Mental Health Program Specialist (Sr. MHPS) position for the MHSA Coordinator Role. This will require an add/delete action but will not need additional funds.	Ongoing	\$0
Overall AD01 FY14 Recommended Change			\$0

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Prevention and Early Intervention (PEI)




	FY2013 Funding	Recommended FY2014 Funding
PEI Programs		
P1 Community Engagement/Capacity Building for Reducing Stigma/Discrimination	\$1,742,278	\$1,701,278 *
P2 Strengthening Families and Children	\$10,041,626	\$9,787,538 *
P3 PEI Interventions for Individuals Experiencing Onset of Serious Psychiatric Illness	\$2,780,999	\$2,472,002 *
P4 Primary Care/Behavioral Health Integration for Adults/Older Adults	\$2,817,357	\$5,000,781 *
P5 Suicide Prevention Strategic Plan	\$1,010,125	\$1,283,500 *
<u>PEI Administration</u>	<u>\$1,819,254</u>	<u>\$1,819,254</u>
Total PEI	\$20,211,639	\$22,064,353
Change from FY2013		\$1,852,714

*Recommended FY14 Budget Change

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FY14 PEI Preliminary Recommended Changes



PEI P1: Community Engagement and Capacity Building for Reducing Stigma and Discrimination

Item #	Description	Type	Amount
(1)	In FY13, one-time funds were set aside for the ECCAC and Self-Help services agreements but during the year as the MHPSW positions were getting filled there was actually no need to access the one-time funds. For FY14, it proposed not to continue the \$206,000 one-time funds for ECCAC services agreements and one-time funds of \$200,000 for Self-Help service agreements.	One-Time	(\$406,000)
(2)	MHD program staff and ECCAC members expressed the need for program supplies funding for each ECCAC group. Propose \$5,000 in funding per ECCAC group. Currently there are seven groups.	One-Time	\$35,000
(3)	Add two new groups: 1) a Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) ECCAC group, and 2) a Veterans' group. Allocate \$160,000 per group which is closely equivalent to 1.5 FTE MHPSW allocated per ECCAC group in MHD. In addition, allocate \$5,000 per group for program supplies. Propose new one-time funding of \$330,000 in FY14 and release an RFP this year.	One-Time	\$330,000
Overall PEI P1 FY14 Recommended Change			(\$41,000)

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FY14 PEI Preliminary Recommended Changes



PEI P2: Strengthening Families and Children

Item #	Description	Type	Amount
(1)	For FY13, one time funds were set aside for training related to the SFP project for practitioners. The one-time budget of \$150,000 is not needed going forward as future PEI P2 related trainings will come from the "Triple P" ongoing budget line item.	One-Time	(\$150,000)
(2)	The School Linked Services (SLS) Pilot / Planning phase of the project has ended.	One-Time	(\$40,000)
(3)	School Linked Services MHSa match total for five Community Based Organizations (CBOs) actually comes out to \$296,785 based on CBO Exhibit Bs. Continue and adjust one-time funding from \$323,119 to \$296,785 based on current budget contracts.	One-Time	(\$26,334)
(4)	The one-time budget set aside for Mobile Crisis/Transition Services was \$128,954 in FY13 however the one-time funds is no longer needed since the program's budget will be incorporated into the one-time budget of \$512,582 set aside for F&C PEI services which will remain the same for FY14.	One-Time	(\$128,954)
Continue PEI P2 changes next slide - Subtotal items 1-4			(\$345,288)

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FY14 PEI Preliminary Recommended Changes



PEI P2: Strengthening Families and Children

Item #	Description	Type	Amount
Subtotal of PEI P2 items 1-4 from prior slide			(\$345,288)
(5)	One-time funds set aside for CEUS Early and Periodic Screening, Diagnosis, & Treatment (EPSDT) Training will not need to continue as future PEI P2 related trainings will come from the "Triple P" ongoing budget line item.	One-Time	(\$18,800)
(6)	Propose new one-time funding for Social Marketing Plan for Violence Prevention Campaign, a SCCPHD initiative. The social marketing plan will include market research, stakeholder engagement, assessment of local, State & National efforts, identification of appropriate methods/interventions.	One-Time	\$20,000
(7)	In an effort to inform SCC residents, schools & communities about the resources available through School Linked Services (SLS), the MHD proposes to allocate one-time funds for website development & resource materials to help inform the community about SLS and the services/resources available to children/youth/families.	One-Time	\$60,000
(8)	Increase one-time funding amount for the SLS Coordinator program budget from \$532,000 to \$562,000. Currently there is need to increase budget allocation for South County as there are four more South County schools slated to be added in FY14.	One-Time	\$30,000
Overall PEI P2 FY14 Recommended Change (Items 1-8)			(\$254,088)

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FY14 PEI Preliminary Recommended Changes



PEI P3: Prevention and Early Interventions for Individuals Experiencing the Onset of Serious Psychiatric Illness with Psychotic Features

Item #	Description	Type	Amount
(1)	Overall, the REACH Community Based Organization (CBO) contracts remain at \$1,350,000; \$675,000 per CBO. However, the MHSA portion has decreased since the CBOs are able to leverage Medi-Cal funding. For FY14, adjust MHSA funding based on current contract budgets totaling \$1,136,003.	Ongoing	(\$213,997)
(2)	The Family Consumer Driven one-time project with Starlight has ended.	One-Time	(\$95,000)
Overall PEI P3 FY14 Recommended Change			(\$308,997)

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FY14 PEI Preliminary Recommended Changes



PEI P4: Primary Care / Behavioral Health Integration for Adults/Older Adults

Item #	Description	Type	Amount
(1)	Primary Care Behavioral Health (PCBH) Contracts - For FY2013, PCBH CBOs MHSA amount reflects a partial year. For FY2014, the PCBH MHSA amount needs to be annualized and the necessary adjustment reflects an increase of \$780,100.	Ongoing	\$780,100
(2)	One-time funding for FQHC is still needed and MHD proposes to continue funding in FY2014 and increasing the one-time amount from \$1,000,000 to \$2,500,000. This funding will address a projected revenue shortfall in this service.	One-Time	\$1,500,000
(3)	Improving Mood-Promoting Access to Collaborative Treatment (IMPACT) Training to Practitioners need to continue. In FY13, \$198,676 one-time funds were set aside for the training and there is about \$102,000 balance left in the contract and training dates are scheduled in FY14.	One-Time	(\$96,676)
Overall PEI P4 FY14 Recommended Change			\$2,183,424

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FY14 PEI Preliminary Recommended Changes



PEI P5: Suicide Prevention

Item #	Description	Type	Amount
(1)	Additional one-time funds towards the Community Education and Information program budget line item to (a) carry out public awareness campaign of county crisis line through buses, digital mall advertisement, and expansion of ethnic media outreach, (b) develop and implement a long-term media plan that includes a sub-brand (SCC Suicide Prevention) and marketing tools in multiple languages, (c) Mini-grants to fund suicide prevention in high risk communities, and d) non-profit agency to administer and manager the over 50 trained QPR instructor pool.	One-Time	\$213,000
(2)	Additional one-time funds towards the evaluation program budget to: (a) to develop an evaluation dashboard and (b) to conduct a sampling survey on awareness, knowledge and attitudes regarding suicide prevention and crisis.	One-Time	\$58,375
(3)	Additional one-time funds needed for strategies four and five of PEI P5. Strategy Four is to implement policy and governance advocacy to promote systems change in suicide awareness while strategy five addresses data collection.	One-Time	\$2,000
Overall PEI P5 FY14 Recommended Change			\$273,375

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Innovative Programs (INN)



INN Programs	FY2013	Recommended
	Funding	FY2014 Funding
INN01 Early Childhood Universal Screening Project	\$727,364	\$727,364 *
INN02 Peer-run TAY Inn	\$1,356,053	\$1,301,053 *
INN03 Co-Occurring MH Disorders in Adults with Autism and Dev	\$411,282	\$0 *
INN04 Merging the Old with the New - Elders' Storytelling Project	\$428,042	\$388,042 *
INN05 Multi-Cultural Center (MCC)	\$799,567	\$499,567 *
INN06 Transitional Mental Health Services for Newly Released Inm:	\$492,264	\$742,264 *
INN07 Mental Health/Law Enforcement Post Crisis Intervention	\$625,420	\$0 *
INN08 Interactive Videos Scenarios Training	\$251,400	\$14,400 *
INN09 AB109/117 Re-Entry Multi-Agency Pilot aka "Re-Entry MAP	\$1,029,890	\$523,680 *
<u>Admin INN Administration</u>	<u>\$600,832</u>	<u>\$600,832</u>
Total INN	\$6,722,114	\$4,797,202
Change from FY2013		(\$1,924,912)

*Recommended FY14 Budget Change

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FY14 INN Preliminary Recommended Changes



INN-01: Early Childhood Universal Screening Project

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	INN-01 is slated to be implemented in FY14. There are one-time funds set aside for Extra-Help at \$192,694 and RFP application costs at \$250,000, with a combined total of \$442,694. MHD recommends redirecting portion of the funds set aside for the RFP application to cover expenses related to Extra-Help. For FY14 Extra-Help will be \$264,117 and the RFP application one-time budget at \$178,577. The project requires use of 2.5 FTEs extra help Rehabilitation Counselors (RC) to support parents within Pediatric Clinic settings to utilize developmental screening tools. The RC staff will assist parents/guardians in completing the screening tools prior to their child's well-check appointments. These staff will also participate in the project evaluation process.	One-Time	\$0
Overall INN-01 FY14 Recommended Change			\$0

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FY14 INN Preliminary Recommended Changes



INN-02: Peer-Run TAY Inn

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	One-Time funds set aside for the Department of Family and Children's Services (DFCS) HUB initiative will be adjusted from \$75,000 to \$50,000.	One-Time	(\$25,000)
(2)	One-time funds for VOICES Training Consultation was not utilized and not needed.	One-Time	(\$30,000)
Overall INN-02 FY14 Recommended Change			(\$55,000)

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FY14 INN Preliminary Recommended Changes



INN-03: Adults with Autism and Co-Occurring Mental Health Disorders

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	The INN-03 project ended on June 30, 2013 however due to the positive results of the two year project, it will be sustained and integrated into the A02 work plan. The data derived from the Adult with Autism and Co-Occurring Mental Health Disorders Program has demonstrated that the use of the Schedule for the Assessment of Psychiatric Problems Associated with Autism (SAPPA) has more precisely indentified the co-occurring mental health disorder at a faster rate. The FY14 proposed provider contract amount allocation in CSS work plan A02 for the program will be \$350,324, at the same level as FY13. The remaining balance of \$61,158 from the \$411,482 will not continue as the County personnel costs associated with the INN project will not continue in FY14.	One-Time	(\$411,482)
Overall INN-03 FY14 Recommended Change			(\$411,482)

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FY14 INN Preliminary Recommended Changes



INN-04: Elders' Storytelling Project

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	One-time start-up funding of \$20,000 for the project allocated to each CBO, totaling \$40,000 combined, will not continue in FY2014.	One-Time	(\$40,000)
Overall INN-04 FY14 Recommended Change			(\$40,000)

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FY14 INN Preliminary Recommended Changes



INN-05: Multi-Cultural Center (MCC) Project

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Due to high cost related to MCC facility/renovation MHD finds it would be more appropriate to fund cost related to the facility/renovation using CFTN funds and not INN funds. An estimate of the cost of the renovation is being completed. Current recommendation is to remove \$300,000 set aside for facility costs in the INN-05 project and redirect unspent funds from the CFTN component of MHSA to fund the MCC facility renovation costs.	Ongoing	(\$300,000)
Overall INN-05 FY14 Recommended Change			(\$300,000)

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FY14 INN Preliminary Recommended Changes



INN-06: Transitional Mental Health Services for Newly Released Inmates

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Move funding for the Three Faith-Based Resource Centers (FBRCs) in INN-09 project to INN-06. The FBRC program budget item totals \$800,000 with \$200,000 in INN-06 and also an additional \$600,000 in INN-09. The MHD finds the entire FBRC program budget item is more in line with the INN-06 project. The proposal is to move remaining \$600,000 FBRC budget line item in INN-09 to INN-0 which is based on two funding sources: \$250,000 MHSA funds and \$350,000 AB109 funds. The FBRCs: Bible Way Christian Center, Breakout Prison Outreach, and Maranatha Christian Center.	One-time	\$250,000
Overall INN-06 FY14 Recommended Change			\$250,000

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FY14 INN Preliminary Recommended Changes



INN-07: Mental Health / Law Enforcement Post Crisis Intervention

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	INN-07 ends June 30, 2013. The project was not successful and the MHD recommends not to sustain the project into existing MHSA plans. The project encountered numerous problems such as procedural issues. Final Evaluation Report is estimated to be completed by end of July 2013.	Ongoing	(\$625,420)
Overall INN-07 FY14 Recommended Change			(\$625,420)

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FY14 INN Preliminary Recommended Changes



INN-08: Interactive Videos Scenarios Training (IVST) Project

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	INN-08 ends June 30, 2013. Due to the project's success, the MHD proposes to integrate this project into work plan A04 (Urgent Care) and as well as in the WET component for training purposes. Final evaluation report is estimated to be completed by the end of 2013. A one-time budget of \$14,400 is needed in FY2014 to cover LEL expenses related to the completion of the final evaluation report. FY13 INN-08 budget was \$251,400 and for FY14 budget will be \$14,400.	One-time	(\$237,000)
Overall INN-08 FY14 Recommended Change			(\$237,000)

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FY14 INN Preliminary Recommended Changes



INN-09: AB109/117 Re-Entry Multi-Agency Pilot aka "Re-Entry MAP"

Item #	Description	Type	Amount
(1)	Move funding for the Three Faith-Based Resource Centers (FBRCs) in INN-09 project to INN-06. The FBRC program budget item is more in line with the INN-06 project. The FBRC budget line item is funded with \$250,000 MHSA funds and \$350,000 with AB109 funds. The FBRCs: Bible Way Christian Center, Breakout Prison Outreach, and Maranatha Christian Center.	One-time	(\$250,000)
(2)	MHD recommends to discontinue one-time funding for one Clinical Nurse from Custody and one Eligibility Worker from Social Services Agency (SSA) and request participating agency to fund their positions.	One-time	(\$256,210)
Overall INN-09 FY14 Recommended Change			(\$506,210)

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Workforce Education and Training (WET)



WET Programs		Recommended	
		FY2013 Funding	FY2014 Funding
W1	Workforce Education and Training Coordination	\$253,414	\$253,414
W2	Promising Practice-Based Training	\$1,075,577	\$1,075,577
W3	Improved Services and Outreach to Un-served & Underserved	\$605,577	\$605,577
W4	Welcoming Consumers and Family Members	\$536,153	\$536,153
W5	WET Collaboration with Key System Partners	\$100,000	\$100,000
W6	A Comprehensive Mental Health Career Pathway Model	\$181,153	\$181,153
W7	Stipends/ Incentives to Support Mental Health Career Pathway	\$954,000	\$954,000
<u>WET Administration</u>		<u>\$411,858</u>	<u>\$411,858</u>
Total WET		\$4,117,732	\$4,117,732
Change from FY2013			\$0

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FY14 WET Preliminary Recommended Changes



Overall WET FY14 Recommended Change - No proposed changes


Capital Facilities and Technological Needs (CFTN)



CFTN Programs		One-Time Funding
EHR	Electronic Health Record	\$15,601,000
EDW	Enterprise Data Warehouse	\$2,644,000
CLC	Consumer Learning Centers	\$572,000
WEB	Consumer Portal and Web Redesign	\$319,000
BHX	Bed and Housing Exchange	\$200,000
CHR	County Health Record	\$1,148,000
MediPlex	Relocation of Family & Children's Services (Kidscope, Las Plumas)	\$500,000
<u>DTMH</u>	<u>Renovation of Downtown Mental Health Self Help and Lobby areas</u>	<u>\$313,000</u>
Total CFTN		\$21,297,000 *

*Recommended FY14 Budget Change / Reallocation of funds


FY14 CFTN Preliminary Recommended Changes




CFTN:

<u>Item #</u>	<u>Description</u>	<u>Type</u>	<u>Amount</u>
(1)	Redirect unspent funds in CFTN component to fund the renovation costs for the Multi-Cultural Center (MCC) Facility.	One-time	\$0
Overall CFTN FY14 Recommended Change			\$0

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Overall Budget Change from FY13 to FY14



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MHSA Budget - CSS / PEI / INN

FY13 Budget and FY14 Recommended Budget



Budget Change	Ongoing	One-Time	Total
Community Services Supports (CSS)			
FY13	\$42,109,836	\$925,409	\$43,035,245
FY14	\$41,507,987	\$2,388,831	\$43,896,818
CSS Change	(\$601,849)	\$1,463,422	\$861,573
Prevention and Early Intervention (PEI)			
FY13	\$13,686,913	\$6,524,726	\$20,211,639
FY14	\$14,253,016	\$7,811,337	\$22,064,353
PEI Change	\$566,103	\$1,286,611	\$1,852,714
Innovation (INN)			
FY13	\$4,669,029	\$2,053,085	\$6,722,113
FY14	\$3,254,327	\$1,542,875	\$4,797,202
INN Change	(\$1,414,702)	(\$510,210)	(\$1,924,912)
Total Combined CSS / PEI / INN			
FY13	\$60,465,778	\$9,503,220	\$69,968,998
FY14	\$59,015,330	\$11,743,043	\$70,758,373
Total Change	(\$1,450,448)	\$2,239,823	\$789,375

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MHSA Budget - WET and CFTN


FY13 Budget and FY14 Recommended Budget



- **Workforce Education and Training (WET)** - No change is proposed in FY14.
- **Capital Facilities and Technological Needs (CFTN)** - MHD recommends reallocating unspent funds from existing CFTN allocation to fund facility and renovation costs of the Multi-Cultural Center (MCC).


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Other Requests Received by MHD			
Item	Proposed by	Background Info/Description	FY14 Proposal/Cost Info
(1)	Community Solutions (June 2013)	Community Solutions La Casa MHD contract under CSS work plan A02 provides beds within a 12-bed residential facility for SMI adults. Current program goals include assisting individuals to return to the community from acute psychiatric units and locked psychiatric treatment facilities and to provide diversion of individuals from admission to acute psychiatric hospitalization. In addition, provide medication services. FY13 funding for the residential treatment portion: Medi-Cal \$80,145 and MHSA \$133,574; total \$213,719. The medication services portion is \$10,209 Medi-Cal and \$17,015 MHSA; total \$27,224. Combined total is \$240,943.	Community Solutions proposes to increase capacity and develop a step-down THU. Requesting funds for 12 more THU beds. Cost estimated for 12 beds x \$37.51 bed rate x 365 days = \$164,294.
(2)	NAMI Santa Clara (May 2013)	NAMI's FY13 MHD contract includes providing: 7 five-week Education Courses, 8 ten-week peer-to-peer courses, 15 twelve-week family-to-family courses, 2 six-week basic courses, and 2 six-week NAMI Basic Courses; FY13 contract \$85,000 (MHSA WET funds). For FY14, NAMI would like to provide the additional classes and services offered by NAMI and New Creation Convent Ministry in collaboration with Grace Community Center.	NAMI proposes to increase contract budget to \$104,500 for additional # of classes/services. Proposal includes adding two more peer-to-peer courses, three Peer Pal Mentorship Matches, one Peer-Based Support Groups, and deleting one Basic Course; total funding request reflects an increase of \$19,500.



Next Steps

FY2013-14 MHSA Annual Update



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FY2013-14 MHSA Annual Update Schedule



July 2013	August 2013	September 2013	October 2013
<ul style="list-style-type: none"> MHD to participate in MHB Committee meetings in July to discuss progress updates and preliminary plans for Draft FY2013-14 MHSA Annual Update. Hold MHSA SLC meeting on July 29, 2013 to go over preliminary plans for Draft FY2013-14 MHSA Annual Update. 	<ul style="list-style-type: none"> Publish Draft FY2013-14 MHSA Annual Update Plan on August 2, 2013 for the required 30-day public comment/review period. Draft plan will be posted on the SCCMHD website. http://www.sccgov.org/sites/mhd/MHSA/Pages/default.aspx 	<ul style="list-style-type: none"> September 1, 2013 is the end of the required 30-day public review comment period – End of Business Day. September 5, 2013 MHSA SLC meeting. SLC to vote on Draft FY2013-14 MHSA Annual Update Plan. September 9, 2013 MHB Public Hearing to vote on Draft FY2013-14 MHSA Annual Update Plan. 	<ul style="list-style-type: none"> SCCMHD to request the County Board of Supervisor (BOS) to adopt Draft FY2013-14 MHSA Annual Update Plan as endorsed / approved by MHB and MHSA SLC tentatively Scheduled October 2013 TBD.

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Comments / Questions

Your Voice Matters!

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