

SYSTEM OF CARE: ADULT/OLDER ADULT Fiscal Year 2020 (July 1, 2019 – June 30, 2020)

MHA Component/ Program	Target Population	FY20 Target Number Served	FY20 Actual Number Served	Outcome Highlights	FY20 Budget	Expenses			Total Expenses*	Funding Source	
						Payroll	CBO	Object 2		MHA Funds	Medical FFP/Other
FSP - Assertive Community Treatment (ACT)	This is an evidence-based psychiatric rehabilitation practice that provides a comprehensive approach to service delivery to consumers with serious mental illness (SMI). Often referred to as a “hospital without walls,” ACT uses a multidisciplinary team, which typically includes a team leader, psychiatrist, a nurse, substance abuse and vocational specialists, and a peer counselor, with the goal to reduce/prevent hospitalization, homelessness, institutionalized care.	200	81	<ul style="list-style-type: none"> 81 clients have been served since program ramp up in October 2019 41 clients were discharged from an Institution of Mental Disease (IMD), of the clients discharged only 4 have returned to an IMD 90% success in keeping clients out of IMDs 	\$ 3,508,848	\$ 0	\$ 2,769,585	\$ -	\$ 2,769,585	\$ 2,545,815	\$ 223,771
FSP Intensive FSP for Adults/Older Adults (combined)	IFSP is designed to provide intensive, wraparound services that are recovery oriented, consumer driven, culturally responsive, trauma-informed, and co-occurring capable. Services are intended to be “full service” in that IFSP programs do “whatever it takes” to support a consumer in their recovery process 24 hours per day, seven days a week.	400	186	<ul style="list-style-type: none"> 186 clients have been served since program ramp up in December 2019 88% of those discharged from an IMD remained in the community. 12% recidivism rate into an IMD 	\$12,005,717	\$ 0	\$12,013,414	\$ 337	\$12,013,414	\$ 8,987,405	\$ 3,026,345
FSP Maintenance	This FSP level provides a full spectrum of community services necessary to attain each consumer’s quality of life goals that reflect the their cultural values, which may include living arrangements, social supports,	488	592	<ul style="list-style-type: none"> 21% reduction in the use of EPS services This program has met its goals of reducing homelessness, timely treatment, assessment and disruption of placement. 							

*Actual Expenditures per MHA Annual Revenue and Expenditure Report (ARER)

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	education, and employment.										
County Clinics (Downtown MH and Central Wellness & Benefits Services)	The program was designed to provide a full spectrum of community services necessary to attain each consumer’s quality of life goals that reflect their cultural values, which may include living arrangements, social supports, education, and employment.	2,309	2,130	<ul style="list-style-type: none"> Increased clients served: from 1953 to 2130 Penetration rate increased in several demographics Gender- male and female Ethnicity- African American, Native American, White Age Group- 6-17, 18-59 Improved timely access. Improved successful discharges through graduation transition to a lower level of care Improved mental health and overall meaningful daily functioning. Clients were able to obtain stable housing 	\$ 9,084,589	\$ 6,679,621	\$ -	\$ 1,078,947	\$ 7,758,568	\$ 7,758,568	\$1,601,701

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Hope Services	Hope Services was designed to improve the quality of life for individuals with developmental disabilities through providing counseling, case management, and psychiatric services to adults, and senior citizens with a qualifying mental health diagnosis and a developmental disability.	750	985	<ul style="list-style-type: none"> The program has continued successfully to stepdown of clients to primary care physician. This program has continued expansion of case management services (particularly in partnership with housing agencies and training regarding housing). 	\$ 1,305,472		\$ 3,822,194	\$ -	\$ 3,822,194	\$ 2,090,555	\$ 1,731,639
CalWORKS Community Health Alliance	The CalWORKs Community Health Alliance (Health Alliance) provides behavioral health services to adult clients enrolled in the Welfare-to-Work (WTW) Program who experience mental health and substance use issues. Health Alliance is a partnership between Santa Clara County Social Services Agency, Santa Clara Valley Health and Hospital Systems' Substance Use Treatment Services Division (SUTS), and Behavioral Health Services Division.	634	335	<ul style="list-style-type: none"> This program continues to do an outstanding job serving clients with behavioral health concerns receiving CalWORKs benefit The program will consider extending hours of operation to 6 pm or later. This will allow people who are employed to continue participating in therapy. 	\$2,403,008	\$ 37,175	\$ 1,597,844	\$ 2,417	\$ 1,637,437	\$ 432,356	\$ 766,465

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Outpatient Services for Older Adults	The Older Adult Outpatient Service is a comprehensive Behavioral health program for consumers ages 60 years and above.	1,123	408	<ul style="list-style-type: none"> Modify contracts to meet changing needs 	\$2,173,893	\$ 108,777	\$ 4,050,520	\$ 927	\$ 4,160,224	\$ 2,232,691	\$ 1,927,532
Mental Health Urgent Care	<p>Mental Health Urgent Care (MHUC) is a walk-in outpatient clinic for Santa Clara County residents who are experiencing behavioral health crisis and need help.</p> <p>Mental Health Urgent Care provides screening, assessment, crisis intervention, referral and short-term treatment for adolescents and adults.</p> <p>As a consumer-focused program, its goals are to provide immediate relief to people in distress and to help them maintain stability in their lives. The program is designed to avoid involuntary hospitalization, psychiatric emergency room visits, and incarceration.</p>	1,996	6,436	<ul style="list-style-type: none"> The program served over 6,436 clients in FY 20 Stepped up to act as the essential business during the pandemic The program has been open 14 hours a day, 7 days a week 	\$4,086,258	\$ 2,629,675	\$ -	\$ 2,442,490	\$ 5,072,165	\$ 5,072,165	\$ 807,087
Crisis Stabilization and Crisis Residential Treatment	<p>CS: Provides short-term (23.9 hours length of stay) to individuals experiencing a mental health crisis. Services include medication evaluations, crisis prevention, assessments, and community linkages.</p> <p>CRT: Provides short-term (30</p>	CS: 368 CRT: 77	CS: 768 CRT: 160	<ul style="list-style-type: none"> Provides short-term (30 days), less restrictive, structured, voluntary therapeutic residential services to individuals who are experiencing a mental health crisis Provides long term (12 	\$25,001,871	\$ 188,618	\$ 34,279,811	\$ -	\$ 34,468,429	\$18,780,813	\$15,672,321

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	days), less restrictive, structured, voluntary therapeutic residential services to individuals who are experiencing a mental health crisis			months), less restrictive, treatment setting structured clinical treatment services in a residential setting							
Adult Residential Treatment	Provides long term (12 months), less restrictive, treatment setting structured clinical treatment services in a residential setting.	-	-	<ul style="list-style-type: none"> BHSD will explore other potential options with the Office of Supportive Housing Initial proposal resulted in lack of qualified proposal submissions for ART facilities 	\$1,550,700	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Community Placement Team Services and Institution of Mental Disease (IMD) Alternative Program	Case management, housing and linkage support by a 24-hour case management unit that provides services to consumers returning to the community from other settings. IMD alternative adds comprehensive treatment services in a supportive, structured environment as an alternative to a locked setting serving up to 45 consumers for approximately 6 months.	100	77	<ul style="list-style-type: none"> Crisis and hospital diversion CPT connects clients with FSP services, clinic appointments or supportive housing 45 bed services at full capacity serving adults ages 18-54 yrs of age with serious mental illness (SMI) or co-occurring diagnoses. 	\$5,837,635	\$ 963,467	\$ 4,038,792	\$155	\$ 5,002,414	\$ 3,528,655	\$ 1,473,759
Connections Program	CP is a collaboration with Adult Protective Services (APS) to provide case management and linkage services to older adults who are at risk of abuse and neglect and have come to the attention of APS. The program serves isolated older adults with a mental illness, homebound and	109	60	<ul style="list-style-type: none"> Served 60 older adults with case management and linkages to behavioral health services 	\$151,000	\$ 163,754	\$ -	\$ -	\$ 163,754	\$ 163,754	\$ -

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	not correctly connected to services.										
Clinical Case Management Team for Older Adults (Elder Health)	This offers an array of services to engage older adults who may be reluctant or unable to access needed mental health services due to geographic barriers, limited mobility, health issues or stigma associated with receiving mental health services in a clinic.	-	-	<ul style="list-style-type: none"> Starts in FY21 	\$ 2,100,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
In Home Outreach Teams (IHOTs)	A mobile team of clinicians and peer specialists would receive referrals from the community and follow-up clients post crisis for 3- to 60 days to assess needs and facilitate connections to behavioral health services.	300	-	<ul style="list-style-type: none"> Late ramp up in FY2020 Executed 2 CBO contracts Setting up the County team 	\$ 1,860,000	\$ 373,109	\$ 619,344	\$ 373,109	\$ 992,453	\$ 992,453	\$ -
CSS TOTAL					\$71,068,991	\$ 11,144,196	\$ 63,191,504	\$ 3,898,382	\$ 77,860,637	\$52,585,230	\$24,821,832
Violence Prevention Program	Services for dually involved youth involving Peer Support Workers who conduct outreach in gang impacted neighborhoods, act as "violence interrupters," and recognize and identify youth with mental health needs	200	0	Program still in implementation stage	\$199,020	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Intimate Partner Violence Prevention					\$350,000	\$ -	\$ -	\$ -	\$ -	\$ -	
Integrated Behavioral Health (Now called	People with mental and substance abuse disorders may die decades earlier than the average person — mostly from untreated and	1,500	867	Concluded RFP, still in negotiations. Funding reduced to \$800,000	\$ 1,148,390	\$245,520	\$1,000,468	\$ 7,918	\$1,253,907	\$1,253,907	\$ -

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MHSA Component/Program	Target Population	FY20 Target Number Served	FY20 Actual Number Served	Outcome Highlights	FY20 Budget	Expenses			Total Expenses*	Funding Source	
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Integrated Prevention Services for Cultural Communities)	preventable chronic illnesses like hypertension, diabetes, obesity, and cardiovascular disease that are aggravated by poor health habits such as inadequate physical activity, poor nutrition, smoking, and substance abuse.										
Elder Story Telling	This program serves culturally isolated older adults with mild to moderate depression using the culturally proficient technique of life review and storytelling (reminiscence) and incorporating innovative service component to help reduce the elder client's depressive symptoms and restore their position of social connectedness with their family, friends, caregivers and community.	-	-	Just concluded RFP program, not beginning until FY 2022	\$900,00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
New Refugees Program	The New Refugee program provides an array of outreach, engagement, and prevention activities treatment for new refugees & asylum seekers in Santa Clara County.	350	96	<ul style="list-style-type: none"> To address possible food insecurity, the program continued to provide Shelter in Place kits which included non-perishable food items and simple board game activities that the families can utilize to cope with the social isolation. Clients have reported that they have been able, at different degrees, to cope with multitasking with different functions 	\$691,043	\$ -	\$ 496,832	\$ -	\$ 496,832	\$423,454	\$73,378

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				(parenting, schooling, working from home or outside home, caregiving to another person, etc.). <ul style="list-style-type: none"> Resources from the community have been crucial for clients and their families to retain some normalcy with their routines and basic needs (e.g., codes for free transportation through Lyft to support clients to maintain job or attend medical appointments). 							
Culture is Prevention	Culture Prevention links high need populations with a particular focus on American Indian/Alaska Native youth and families involved in the foster care and juvenile justice systems.	500	-	Program discontinued in FY 2021 and folded into Culture-Specific Wellness Centers	\$54,769	\$ -	\$ 41,990	\$ -	\$41,990	\$41,990	\$ -
Culture Specific Wellness Centers	Cultural specific wellness centers provide a variety of healing services, community engagement activities, and health education occurs specifically designed and implemented for specific cultural communities.	-	-	Newly implemented program began Jan 2021, these providers have been working closely with Consumer Affairs and Peer Support to outreach to clients	\$1,500,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Promotores	Culturally and linguistically targeted outreach within communities and neighborhoods to create enhanced	-	-	Program began operations in January 2021, modification was made to mid-year budget to outreach and work closely with	\$1,200,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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	linkages/referrals from and to nearby clinics to community services provided by Peer Health Educators.			Consumer Affairs & Peer Support team to reach out to B/C and other residential care facilities							
Older Adult In-Home Peer Respite Program	The OA Peer Respite is designed to provide free supportive counseling, visitation, and respite services provides caregivers of older adults a break from caregiving while simultaneously providing older adult consumers with companionship and social support.	-	-	Just concluded RFP & negotiation program is slated to begin FY2021	\$400,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Law Enforcement Training	Specialized trainings to police officers in order to improve their responses to someone experiencing a mental health crisis.	600	1,571	<ul style="list-style-type: none"> 600 individuals with SMI or SED referred to BHSD systems of care. 	\$311,236	\$ -	\$ -	\$91,280	\$91,280	\$91,280	\$ -
Cultural Communities Wellness Program	Cultural and Ethnic Communities who can benefit from outreach and engagement for Behavioral Health linkages, resources and peer support. Highlighted communities includes: African Heritage Community, African Immigrant Community, Chinese Community, Latino Community, Filipino Community, Native Family Community and Vietnamese Community.	6,000	<ul style="list-style-type: none"> 378 Service Events 5222 individuals served 	<ul style="list-style-type: none"> New HomeFirst collaboration to provide peer support and linkages for Behavioral Health resources to the homeless population New Trauma Informed Training, provided 3 events and trained 65 community members CCWP have provided 42 MHFA, 14 WRAP sessions, 13 QPR Trainings- trainings to communities and agencies, 1014 community 	\$1,850,000	\$1,215,521	\$ -	\$250,101	\$1,465,622	\$1,465,622	\$ -

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				members served. <ul style="list-style-type: none"> • Create community support and distribution of COVID related information to communities who traditionally have barriers to access. 							
Office of Consumer Affairs	Community members and individuals with SMI, family members, caregivers and support providers who need access to MH services, linkages and resources.	400	Zephyr: 5,697 Esperanza: 1,741 East Valley: 648 DTBH: 54 Total: 8,140	<ul style="list-style-type: none"> • 3-5 educational presentations per month • 11% growth from prior year for Zephyr • 26% growth from prior year for Esperanza • New Computer Learning Center at Esperanza • Create community support and distribution of COVID related information to communities who traditionally have barriers to access. 	\$429,651	\$1,039,953	\$ -	\$8,393	\$1,048,346	\$1,048,346	\$ -
Office of Family Affairs	Family members, support providers and caregivers of individuals with SMI who need access to MH services, support, linkages and resources. Co-facilitation groups with NAMI.	400	1,077	<ul style="list-style-type: none"> • 596 COVID related services provided • Support families who have family members facing incarceration, individuals who are incarcerated and post incarceration to help transition individuals back into the community. 	\$733,377	\$331,795	\$ -	\$10,859	\$342,654	\$342,654	\$ -
PEI TOTAL					\$10,015,876	\$2,832,789	\$1,539,290	\$ 368,551	\$4,740,631	\$4,667,253	\$73,378

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