MENTAL HEALTH SERVICES ACT (MHSA)
FY 2022 ANNUAL UPDATE COMMUNITY PROGRAM PLANNING PROCESS
FRIDAY, MARCH 12, 2021
VIRTUAL MEETING
<table>
<thead>
<tr>
<th>TOPIC</th>
<th>TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Introductions &amp; Welcome by Director (Sherri Terao)</td>
<td>2:00PM</td>
</tr>
<tr>
<td>2. Public Comment Period</td>
<td>2:10PM</td>
</tr>
</tbody>
</table>
| 3. MHSA (Evelyn Tirumalai)  
  a. General MHSA Requirements  
  b. MHSA SLC Priority areas as a result of COVID-19 | 2:20PM |
| 4. Adult/Older Adult System of Care (Margaret Obilor)  
  a. Priorities & Program Utilization Overview  
  b. Q/A | 2:25PM |
| 5. Timeline & Next Steps | 3:40PM |
| 6. Adjourn | 4:00PM |
MEETING AGREEMENTS

Raise hand on Zoom or on camera to provide feedback. Can also provide feedback in the chat box.

Give space, take space.
MHSA COMPONENTS

ONGOING Required Programs and Services

CSS: Community Services & Supports
- Outreach and direct services for children, TAY, adults and older adults with SED/SMI
- Funds BHSD Housing programs
- At least 51% of CSS for Full-Service Partnerships

PEI: Prevention & Early Intervention
- Prevention services to prevent the development of mental health problems
- Early intervention services to screen and intervene with early signs of mental health issues
- At least 51% for serving ages 0-25 yrs old.

INN: Innovation
- Funding to test new approaches that may improve access, collaboration, and/or service outcomes for un-, under-, and inappropriately-served populations

OPTIONAL Programs and Services, carved out of CSS revenue

CFTN: Capital Facilities & Technology Needs
- Infrastructure to implement an electronic health record and support MH facilities (county-owned, operated)

WET: Workforce Education & Training
- Support to build, retain, and train a competent public mental health workforce

MHSA County Funding*

*Counties received 10-year allocations for WET and CFTN activities. One-time allocation ended on 2016.

Acknowledgement: Harbage Consulting
### 2020 MHSA SLC PRIORITY AREAS AS A RESULT OF COVID-19

<table>
<thead>
<tr>
<th>Families and Children</th>
<th>Transitional Age Youth</th>
<th>Adult/Older Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Focused outreach</strong>, via radio, TV, texting, etc.</td>
<td><strong>Strengthen collaborations</strong> across county government entities, e.g. homeless and housing, public health, social services, behavioral health, etc.</td>
<td><strong>Access to technology and how to use it</strong></td>
</tr>
<tr>
<td><strong>Continue momentum engaging</strong> with communities, e.g. virtual town halls, etc.</td>
<td><strong>Access to technology to improve</strong> social connectedness</td>
<td><strong>Focused outreach</strong>, getting out to communities</td>
</tr>
<tr>
<td><strong>Focused support</strong> to families with school-age children</td>
<td></td>
<td><strong>Access to behavioral health services in person</strong></td>
</tr>
<tr>
<td><strong>Strengthen collaborations</strong> county wide and across departments</td>
<td></td>
<td><strong>Focus on access and service delivery with a focus on</strong> race and equity</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Crisis services</strong></td>
</tr>
</tbody>
</table>

**Consider an Innovations Project that intentionally addresses COVID-19 and racial equity**
OUR VISION

The Santa Clara County BHSD- AOA System of Care seeks to provide a Continuum of Care successful in supporting individuals experiencing behavioral health symptoms in the community, and ensuring that all residents facing the challenges of mental illness are:

• Physically and emotionally healthy, happy and thriving;
  In safe and permanent living situations;
• Part of a caring and supportive social network;
  Involved in meaningful school, work, and family activities
• Stable and secure within their environment and not causing harm to self and others
ADULT SYSTEM OF CARE OVERARCHING GOALS

**interrupt** the cycle of EPS, hospitalization, and incarceration and facilitate connection to care

- Targeted outreach and engagement teams for high utilizers
- Modified MH Urgent Care to become a primary point of entry and include same-day access and short-term outpatient treatment

**strengthen** the community-based system of care for people with the most intense service needs

- Strengthened existing FSP programs
- Implemented Assertive Community Treatment
- Created Adult Outreach Teams
- Strengthening Adult Residential Treatment

**facilitate** access to the appropriate level of care and align capacity to demand

- Building processes for county-led level of care determinations and authorizations
SYSTEM PRIORITIES

- Co-occurring disorder capacity in all programs, and especially FSP/ACT/CJS/SUTs
- Trauma-informed system of care
- Consistent recovery orientation across all programs
OVERVIEW OF PRESENTATION

- Adult & Older Adult Services
- Justice Involved Services
- Intensive and Residential Services
- BHSD Housing Services
- Consumer & Family Affairs, Cultural Communities Wellness Program
Community Services & Supports (CSS):
  • Assertive Community Treatment (ACT)
  • Intensive Full Service Partnership (IFSP)
  • Full Service Partnership (FSP)
  • Adult Outpatient Services
  • Older Adult Outpatient Services
  • CalWORKs
  • County Behavioral Health Outpatient Clinics

Prevention & Early Intervention (PEI):
  • Older Adult PEI
  • New Refugee Services
  • Integrated Behavioral Health (IBH)

Innovation (INN):
  • Individual Placement Services (IPS) Employment Services
CSS: AOA Assertive Community Treatment, Intensive Full-Service Partnership and Full-Service Partnership Utilization (FY19-21)

Contracts vs. Actual Served

Contracted vs. Actual Financial

OA Intensive Programs Outreach Dollars

Successful Discharge (%) Intensive Programs
CSS: AOA Assertive Community Treatment, Intensive Full-Service Partnership and Full-Service Partnership Dosage Contracted vs. Actual
CSS: AOA Outpatient Clients Utilization

### Contracted vs Actual Served

<table>
<thead>
<tr>
<th>Year</th>
<th>Contracted</th>
<th>Actual Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY21</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Contracted vs Actual Financial

<table>
<thead>
<tr>
<th>Year</th>
<th>Contracted</th>
<th>Actual Financial</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td></td>
<td>$5,000,000</td>
</tr>
<tr>
<td>FY20</td>
<td></td>
<td>$10,000,000</td>
</tr>
<tr>
<td>FY21</td>
<td></td>
<td>$15,000,000</td>
</tr>
</tbody>
</table>
CSS: AOA Outpatient Clients Dosage Contracted vs. Actual & Successful Discharges
CSS: AOA Outpatient WARMS Utilization and Dosage

**Clients**
- Warms Contracted vs. Actual Served
- Warms Contracted vs. Actual Financial
- Dosage Contracted vs Actual

**Contracted vs. Actual Served**
- FY20 Contract Slots
- FY20 Total Clients Served
- FY21 Contract Slots
- FY21 Total Clients Served Annualized

**Contracted vs. Actual Financial**
- FY20 Contract
- FY20 Actual
- FY21 Contract
- FY21 Annualized Jul-Nov

**Dosage Contracted vs Actual**
- 2019 Contracted
- 2019 Actual
- 2020 Contracted
- 2020 Actual
- 2021 Contracted
- 2021 Actual
PEI: Older Adult Prevention and Early Intervention & New Refugee Program Utilization

**Number of Clients**

- **FY19 contract**
- **FY20 slots**
- **FY21 contracted slots**
- **FY21 clients served (July to Nov)**

**Dosage Contracted vs Actual**

- **FY19**
- **FY20**
- **FY21**

**Successful Discharge (%)**

- **PEI OA**
- **New Refugee**
- **Target**

**Contracted vs Actual Financial**

- **FY19 Contract**
- **FY19 Actual**
- **FY20 Contract**
- **FY20 Actual**
- **FY21 Contract**
- **FY21 Actual**

**Funding**

- **FY19**
- **FY20**
- **FY21**
- **FY22**

**Number of Clients Served**

- **FY19**
- **FY20**
- **FY21**
Integrated Behavioral Health (IBH) Clients Served

IBH Provider 1 Demographics

IBH Provider 2 Demographics

Integrated Behavioral Health (IBH) Clients Served

FY 19 – Clients served (unduplicated)

FY 20 – Clients served (unduplicated)
Innovation Program- Individual Placement Services (IPS)

**IPS Contract vs Actual and Employed**

- **Number of Clients**
  - Contracted
  - Numbers served estimated
  - Numbers employed estimated

**INN - IPS Clients' Wages**

- **Wages ($)**
  - FY19 (April to
    - Minimum Wage
    - Maximum Wage
  - FY20
  - FY21

**IPS FY20 Demographic Race**

- **Numbers of Clients**
  - American
  - Asian
  - Black or...
  - Hispanic/Lat...
  - Native...
  - White
  - Unreported...
  - More than...

**Axis Title**

- Catholic Charities
- Momentum
- Fred Finch
CSS: AOA CalWORKs Utilization

**Contracted vs. Actual Served**

<table>
<thead>
<tr>
<th>FY</th>
<th>Contract Slots</th>
<th>Actual Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>FY20</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>FY21</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Contracted vs Actual Financial**

<table>
<thead>
<tr>
<th>FY</th>
<th>Contract</th>
<th>Actual</th>
<th>Annualized Jul-Nov</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY19</td>
<td>$500,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY20</td>
<td>$1,000,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY21</td>
<td>$1,500,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**CalWORKs Outpatient Programs**

### Direct Service Staffing

<table>
<thead>
<tr>
<th></th>
<th>AACI</th>
<th>Gardner</th>
<th>CCSCC</th>
<th>County MHST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapist/Clinicians</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>Rehabilitation Counselors</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatrists</td>
<td>0.22</td>
<td>0.3</td>
<td>0.75</td>
<td>0.25</td>
</tr>
</tbody>
</table>

### Contracted Client Capacity

<table>
<thead>
<tr>
<th></th>
<th>FY19</th>
<th>FY20</th>
<th>FY21 (First 6 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AACI</td>
<td>75</td>
<td>75</td>
<td>60</td>
</tr>
<tr>
<td>Gardner</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CCSCC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>County MHST</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>130</td>
<td>150</td>
<td>176</td>
</tr>
</tbody>
</table>

### Unduplicated Clients

### Successful Discharge (%)

### Dosage Contracted vs Actual FY21
Central Wellness and Benefits Center
Demographics FY2019
Demographics FY2020
Demographics FY2021 (first 2 months)

Downtown Behavioral Health Clinic
Demographics FY2019
Demographics FY2020
Demographics FY2021 (first 2 months)

Central Wellness and Benefits Center
Language Preference

Downtown Behavioral Health Clinic
Language Preference
County Clinic Staffing

- Downtown Behavioral Health (FTE)- Capacity 900
- Central Wellness and Benefit Center (FTE)- Capacity 1050

Unduplicated Clients

- Downtown
- Central Wellness and Benefits

County Clinics

- FY2019
- FY2020
- FY21 (first 2 months)
SYSTEM PRIORITIES ROADMAP

- Deflection Point
- Screening and assessment
- Timely Access
- Targeting inter-generational effects of incarceration
- Successful integration into community
COORDINATED SYSTEM OF CARE

- Behavioral Health
- Adult Custody Health
- Superior Court
- Pre-Trial
- Public Defender/District Attorney
- Parole
- Probation

COUNTY OF SANTA CLARA
Behavioral Health Services
### Prevention and Early Intervention (PEI) - REENTRY CENTER
- Screenings and Referrals to treatment services
- Onsite outpatient treatment services
- Linkages to Community Resources
- Serves X clients

**OUTCOMES**
- During the FY20, the BHT served 1,745 unique clients over 5,213 visits
- 529 critical needs screenings were conducted
- 671 clinical needs screenings were conducted
- 561 referrals were made to substance use treatment providers
- 84 referrals were made to mental health treatment providers
- 180 referrals were made to community service providers

### Community Services and Support (CSS) – Full Service Partnership
- Comprehensive Assessments
- Plan Development
- Individual and Group Therapy
- Case Management
- Crisis Intervention
- Peer Support Services
- Outreach and Engagement
- Flex Funding
- Warm Handoffs

**OUTCOMES**
- In FY20, FSP served 767 unique clients
- 709 Total FSP program admissions.
- FSP overserved the contracted annual client served by 220%
- As of 12/31/2020, CDCR contract sunset, with our CBOs successfully transitioning clients into appropriate levels of care

### Community Services and Support (CSS) - Forensic Assertive Community Treatment (FACT)
- Intensive Community Based Outpatient Services 80-90% in community
- Low Staff to Client Ratio: 1:8
- Multidisciplinary Treatment Team includes dedicated Psychiatrist, Therapist, Nurses, Substance Use Counselor, Vocational/Educational Specialist, Benefits Specialist, Peer Support Specialist
- Mental Health and Substance Use Treatment
- Vocational/Education Support and Linkages
- Transitional Housing Support
- Non-emergency medical services by nursing staff

**OUTCOMES**
- A total of 64 clients were admitted into FACT in FY 2020.
- In FY 2020, 92% were diverted from unnecessary hospitalization, and 59% were diverted from incarceration
CRIMINAL JUSTICE SERVICES

**Community Services and Support (CSS) - Evans Lane Wellness & Recovery Program**
- Outpatient and Residential Services
- Assessment /Plan Development
- Individual/Group Therapy
- Case Management
- Crisis Intervention
- Medication Support
- Linkage to other level of care
- Housing Stability Assessment
- Community service providers

**OUTCOMES**
- In FY 2020, a total of 142 clients were served. Upon graduation 68% obtained stable housing, 38% obtained employment, 13% attended school and 68% maintained sobriety.
- 91.7% Success Rate in Outpatient Program discharges

**Community Services and Support (CSS) - Criminal Justice Intensive Outpatient**
- Intensive Outpatient Services include Individual/Group Therapy
- Case Management
- Crisis Intervention
- Medication Support Services
- Outreach and Engagement
- Flex Funding
- Collateral Services
- Warm Hand Offs

**OUTCOMES**
- A total of 163 clients were admitted into IOP in FY 2020, 53% were diverted from unnecessary hospitalization, and 53% were diverted from unnecessary incarceration.

**Community Services and Support (CSS) - Faith Based Resource Centers**
- Faith based services
- Outreach
- Linkage to mental health & substance use services/community resources
- Flex funding
- Social Support
- Case management services, including one touch
- Mentorship to support clients transitioning back to community

**OUTCOMES**
- During FY2020, the FBRCs provided 14,844 services to 2,299 reentry clients
- In FY 2020, 58% of case managed clients successfully discharged from the program.
**MEASURES OF SUCCESS**

### Diversion of Clients from Jail to Services Provided in the Community

- Measures the successful diversion of qualified clients from the jail system to a Behavioral Health Criminal Justices Services program that meets needs of each qualified client. The goal is to increase the percent of clients diverted from jail into appropriate levels of community care and services.

### Post-Custody Clients in Treatment Services

- The Behavioral Health Services Department aims to measure the number of post-custody clients engaged in treatment services for more than 30 days after being released from criminal justice custody. Seeking treatment for more than 30 days correlates to better mental health and substance use treatment outcomes for clients.

<table>
<thead>
<tr>
<th>OUTCOME/RESULT</th>
<th>FY2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Unduplicated Clients Served</td>
<td>1,093</td>
</tr>
<tr>
<td>Number of Service Days</td>
<td>272,603</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OUTCOME/RESULT</th>
<th>FY2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post-Custody Clients in Treatment &gt; 30 days</td>
<td>1,610</td>
</tr>
</tbody>
</table>
## CJS FY2020 SUCCESSFUL DISCHARGE

<table>
<thead>
<tr>
<th>Level of Care</th>
<th>Success Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>THU</td>
<td>35%</td>
</tr>
<tr>
<td>Aftercare</td>
<td>43%</td>
</tr>
<tr>
<td>Co-Occurring</td>
<td>20%</td>
</tr>
<tr>
<td>CRT</td>
<td>53%</td>
</tr>
<tr>
<td>Evans Lane-Outpatient</td>
<td>82%</td>
</tr>
<tr>
<td>Evans Lane-Residential</td>
<td>29%</td>
</tr>
<tr>
<td>FSP</td>
<td>26%</td>
</tr>
<tr>
<td>IOP</td>
<td>53%</td>
</tr>
<tr>
<td>PRCS</td>
<td>95%</td>
</tr>
<tr>
<td>FACT</td>
<td>11%</td>
</tr>
<tr>
<td><strong>OVERALL</strong></td>
<td><strong>34%</strong></td>
</tr>
</tbody>
</table>

*FY2020 the total number of discharges is 1,248*
## CJS FY2020 Program Utilization

### FY2021 (July-Dec)

<table>
<thead>
<tr>
<th>Level of Care</th>
<th>Contract Annual Caseload</th>
<th>Actual Annual Capacity</th>
<th>Variance (+ over/ - under)</th>
<th>Annual Capacity Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aftercare</td>
<td>110</td>
<td>23</td>
<td>-87</td>
<td>UNDER</td>
</tr>
<tr>
<td>Co-Occurring</td>
<td>106</td>
<td>134</td>
<td>28</td>
<td>OVER</td>
</tr>
<tr>
<td>FACT</td>
<td>120</td>
<td>64</td>
<td>-56</td>
<td>NEW CONTRACT</td>
</tr>
<tr>
<td>FSP</td>
<td>348</td>
<td>767</td>
<td>419</td>
<td>OVER</td>
</tr>
<tr>
<td>IOP</td>
<td>165</td>
<td>163</td>
<td>-2</td>
<td>AT CONTRACT</td>
</tr>
<tr>
<td>PRCS</td>
<td>20</td>
<td>17</td>
<td>-3</td>
<td>AT CONTRACT</td>
</tr>
<tr>
<td>Evans Lane Outpatient</td>
<td>105</td>
<td>41</td>
<td>-64</td>
<td>UNDER</td>
</tr>
<tr>
<td>Evans Lane Residential</td>
<td>56</td>
<td>72</td>
<td>16</td>
<td>OVER</td>
</tr>
<tr>
<td>THU</td>
<td>80</td>
<td>79</td>
<td>-1</td>
<td>AT CONTRACT</td>
</tr>
<tr>
<td>CRT</td>
<td>417</td>
<td>112</td>
<td>-305</td>
<td>NEW CONTRACT</td>
</tr>
</tbody>
</table>

**FOCUS ON AFTERCARE AND EVANS LANE**
COORDINATED SYSTEM OF CARE

- Emergency Psychiatric Services
- Acute Psychiatric Services
- Licensing Agencies
- Outpatient Treatment Agencies
- Criminal Justice Services
- Social Services
- Public Guardian’s Office
SYSTEM PRIORITIES AND NEXT STEPS

- Reduce rate of recidivism into psychiatric services
- Maximize residential capacity for the vulnerable population
- Reduce inpatient utilization for the county
- Reduce shame and suffering for the SMI consumers
- Prepare consumers to live independently in the community
# RESIDENTIAL CARE SERVICES

<table>
<thead>
<tr>
<th>CRISIS RESIDENTIAL</th>
<th>RESIDENTIAL CARE FACILITIES (BOARD AND CARES)</th>
<th>CRISIS STABILIZATION UNIT (CSU)</th>
<th>ADULT RESIDENTIAL TREATMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provides short-term (30 days), less restrictive, structured, voluntary therapeutic residential services to individuals who are experiencing a mental health crisis.</td>
<td>• Provides a supportive environment (9+ months), with specialized behavioral and medical treatment programs with a goal of “Rehabilitation” that focuses on maximizing an individual’s level of functioning.</td>
<td>• 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.</td>
<td>• Provides long term (12+ months), less restrictive, treatment setting structured clinical treatment services in a residential setting.</td>
</tr>
<tr>
<td>• Provides medication support, crisis intervention, counseling, case management, and community linkages.</td>
<td>• Provides medication support, ADL assistance, and community linkages.</td>
<td>• Provides medication support, crisis intervention, case management, and community linkages.</td>
<td>• Provides medication support, crisis intervention, counseling, case management, and community linkages.</td>
</tr>
</tbody>
</table>
Residential Services Utilization

Crisis Residential

<table>
<thead>
<tr>
<th>Year</th>
<th>Admission</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>111</td>
<td>99</td>
</tr>
<tr>
<td>2019</td>
<td>149</td>
<td>149</td>
</tr>
<tr>
<td>2020</td>
<td>141</td>
<td>138</td>
</tr>
</tbody>
</table>

Crisis Stabilization Unit

<table>
<thead>
<tr>
<th>Year</th>
<th>Admission</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>162</td>
<td>162</td>
</tr>
<tr>
<td>2019</td>
<td>496</td>
<td>496</td>
</tr>
<tr>
<td>2020</td>
<td>723</td>
<td>723</td>
</tr>
</tbody>
</table>
Residential Services Utilization

Residential Care Facility

Admission
Discharge

Adult Residential Treatment

Admission
Discharge
### Residential Services – Contracted Slots

#### RCF

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total MFO</th>
<th>Total Actuals**</th>
<th>Variance</th>
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<tbody>
<tr>
<td>FY21</td>
<td>$2,683,567</td>
<td>$2,034,594</td>
<td>$648,973</td>
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<tr>
<td>FY20</td>
<td>$2,685,723</td>
<td>$2,308,110</td>
<td>$377,613</td>
</tr>
<tr>
<td>FY19</td>
<td>$2,412,740</td>
<td>$2,245,569</td>
<td>$167,171</td>
</tr>
</tbody>
</table>

#### Crisis Stabilization Unit

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total MFO</th>
<th>Total Actuals**</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY21*</td>
<td>$1,977,710</td>
<td>$1,961,587</td>
<td>$16,123</td>
</tr>
<tr>
<td>FY20***</td>
<td>$3,955,420</td>
<td>$2,384,170</td>
<td>$1,571,250</td>
</tr>
<tr>
<td>FY19***</td>
<td>$3,955,420</td>
<td>$2,190,466</td>
<td>$1,764,954</td>
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</tbody>
</table>
Residential Services – Contracted Slots

### Crisis Residential

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total MFO</th>
<th>Total Actuals**</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY21</td>
<td>$10,162,983</td>
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<td>$9,984,243</td>
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</tr>
</tbody>
</table>

### Adult Residential Treatment

<table>
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<tr>
<th>Fiscal Year</th>
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</tr>
</tbody>
</table>
Program Description

• **South County Reintegration and Supportive Services**: Supportive Housing Services to adults from southern region of Santa Clara County, who are homeless or chronically homeless and involved in the criminal justice system

• **Supportive Services for SMI**: Supportive Housing Services for chronically homeless individuals diagnosed with serious mental illness

• **Supportive Services for High Utilizers of EPS**: Supportive Housing Services for chronically homeless individuals who are seriously mentally ill and/or high utilizers of EPS
Housing Outcome: Community Solutions

**Enrollment Data**

<table>
<thead>
<tr>
<th>Community Solutions ICM Program Enrollments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled</td>
</tr>
<tr>
<td>----------</td>
</tr>
<tr>
<td>319 CM</td>
</tr>
<tr>
<td>H1K CCP Bella Terra</td>
</tr>
<tr>
<td>H1K CCP Gilroy Sobrao</td>
</tr>
<tr>
<td>RAP 1 PATH</td>
</tr>
<tr>
<td>South County Reintegration (HUD)</td>
</tr>
<tr>
<td>TAY</td>
</tr>
</tbody>
</table>

**Days to Housing**

Community Solutions: Average Days to Housing by Agency ("Move in Date" minus "Project Start Date")

<table>
<thead>
<tr>
<th>Agency</th>
<th>Days to Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jill Divenson...</td>
<td>60.3</td>
</tr>
<tr>
<td>RAP 1 PATH...</td>
<td>81.3</td>
</tr>
<tr>
<td>H1K CCP Gilroy...</td>
<td>109.0</td>
</tr>
<tr>
<td>319 CM (amt)</td>
<td>110.6</td>
</tr>
<tr>
<td>South County...</td>
<td>117.5</td>
</tr>
</tbody>
</table>
Housing Outcomes: Community Solutions

Community Solutions ICM Programs
Housing Retention CY2020

- 96%
- 100%
- 100%
- 91%
- 96%
- 100%

Community Solutions ICM Programs
Connection to Behavioral Health and Medical Home

- 94%
- 100%
- 100%
- 93%
- 91%
- 80%
Utilization of Budget - Direct Services and Total Expense (Percentage of Budget Utilized)

Precovid

- Utilization of Direct Services Budget %: 67.21%
- Non-Medi-Cal Budget %: 32.79%
- Medi-Cal As Percentage of Direct Services: 88.80%

Covid

- Utilization of Direct Services Budget %: 77.55%
- Non-Medi-Cal Budget %: 32.80%
- Medi-Cal As Percentage of Direct Services: 67.20%

Allocation of Medi-Cal and Non-Medi-Cal As Percentage of Direct Services

Precovid

- Budget DS Medi-Cal %: 67.21%
- Budget DS Non-Medi-Cal %: 32.79%
- Actual DS Medi-Cal %: 11.20%

Covid

- Budget DS Medi-Cal %: 67.20%
- Budget DS Non-Medi-Cal %: 32.80%
- Actual DS Medi-Cal %: 5.83%
DIVISION PRIORITIES

Increase Outreach and Engagement

Promote Wellness and Recovery

Promoting and Integrating Peer Services into the Behavioral Health System (I.E. Inpatient, Outpatient, Crisis Services)

Increase Culturally Sensitive Services and Highlight Lived Experience to Improve Customer Service

Increase in Self Help, Consumer and Family Involvement

Increase Natural Networks of Supportive Relationships
## CONSUMER AFFAIRS, FAMILY AFFAIRS, CULTURAL COMMUNITIES WELLNESS PROGRAM

### Consumer Affairs

**Consumer Affairs** is dedicated to transformation through advocating, being involved with, and implementing changes to the mental health system. Consumer Affairs operates Zephyr and Esperanza Self Help Center.

- **Services**
  - Linkages to resources and referrals for services
  - Client and family support
  - Advocacy
  - 1:1 individual support
  - Wellness and recreational groups
  - Support self improvement
  - Resources and educational workshops
  - COVID resources for individuals

### Family Affairs

**Family Affairs** assists families in navigating the behavioral health system of care. Family Affairs offer direct support, information and education with the goal of providing recovery and hope.

- **Services**
  - Linkages to resources and referrals for services for families
  - Assisting families in court
  - Support families and individuals to access resources post incarceration to transition back into the community
  - Collaborate with NAMI for family support services
  - Provide family support
  - Advocate for families
  - Support groups for families
  - COVID resources for families

### Cultural Communities Wellness Program

**Cultural Communities Wellness Program (CCWP)** promotes culturally and ethnically sensitive services. CCWP strives to ensure that underserved and un-served populations receive the services they need through outreach and engagement activities in the community and support individuals and families who may not seek services due to linguistic, cultural, and/or ethnic barriers.

- **Services**
  - Community outreach and engagement
  - Community events and resources
  - Client and family support with cultural focus
  - Support groups (i.e., LGBTQ, Cultural wellness, grief)
  - Mental health community Conference
  - Collaboration with CBOs and county teams on new projects that include peer support engagement and cultural services for clients
  - Behavioral health training and Workshops
  - COVID resources for the community
## FY20- Services Provided by Programs

### Consumer Affairs
- MHSA Positions: 9.5
  - 1 Program Manager
  - 1 Office Specialist
  - 5 Full Time Mental Health Peer Support Workers
  - 5 Part Time (0.5) Mental Health Peer Support Workers
- FY20: 8410 Services

### Family Affairs
- MHSA Positions: 11
  - 1 Program Manager
  - 1 Office Specialist
  - 9 Full Time Mental Health Peer Support Workers
- FY20: 1077 Services

### Cultural Communities Wellness Program
- MHSA Positions: 14.5
  - 1 Program Manager
  - 12 Full Time Mental Health Peer Support Workers
  - 3 Part Time (0.5) Mental Health Peer Support Workers
- FY20: 378 Service Events, 5222 Services
SLC Members and Members of the Public are encouraged to provide their feedback and input during meetings and after meetings through post-meeting surveys.
## NEXT STEPS

<table>
<thead>
<tr>
<th>ACTIVITIES</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Needs Assessment</strong></td>
<td>• Surveys</td>
</tr>
<tr>
<td></td>
<td>• Virtual Listening Sessions/Town Hall meetings</td>
</tr>
<tr>
<td></td>
<td>• Review of Programs</td>
</tr>
<tr>
<td><strong>MHSA SLC Planning Session #1</strong></td>
<td>• Children, Youth and Families Program Highlights and Discussion</td>
</tr>
<tr>
<td>Thursday, February 11, 2021 3:00PM – 5:00PM</td>
<td></td>
</tr>
<tr>
<td><strong>MHSA SLC Planning Session #2</strong></td>
<td>• Adult/Older Adult, LGBTQ, Client/Consumer Program Highlights and Discussion</td>
</tr>
<tr>
<td>Tuesday, February 16, 2021 3:30PM - 5:30PM</td>
<td></td>
</tr>
<tr>
<td><strong>MHSA SLC Planning Session #3</strong></td>
<td>• Criminal Justice System, Housing, Workforce Education &amp; Training, Suicide Prevention/Suicide and Crisis Services Program Highlights and Discussion</td>
</tr>
<tr>
<td>Friday, February 19, 2021 3:00PM – 5:00PM</td>
<td></td>
</tr>
<tr>
<td><strong>MHSA SLC Planning Session #4</strong></td>
<td>• Prioritization Discussion and Recommendation</td>
</tr>
<tr>
<td>Monday, March 1, 2021 12:30PM - 2:30PM</td>
<td></td>
</tr>
<tr>
<td><strong>MHSA SLC Planning Session #5</strong></td>
<td>• Budget Analysis and Recommendations</td>
</tr>
<tr>
<td>Thursday, March 4, 2021 4 - 5PM</td>
<td></td>
</tr>
<tr>
<td><strong>MHSA SLC Planning Session #6</strong></td>
<td>• Children, Youth and Families System of Care Outcomes and Utilization</td>
</tr>
<tr>
<td>Friday, March 5, 2021 3:00PM - 5:00PM</td>
<td></td>
</tr>
<tr>
<td><strong>MHSA SLC Planning Session #7</strong></td>
<td>• Adult/Older Adult System of Care Outcomes and Utilization</td>
</tr>
<tr>
<td>Friday, March 12, 2021 2:00PM - 4:00PM</td>
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</tr>
<tr>
<td>MHSA SLC Planning Sessions – Dates TBD for the week of March 15, 2021</td>
<td>• Prioritization Discussion and Recommendations</td>
</tr>
</tbody>
</table>
PLEASE PROVIDE YOUR FEEDBACK ON TODAY’S MEETING:

https://www.surveymonkey.com/r/Mar12_SLC_Feedback
THANK YOU

For questions or additional information, contact:
Evelyn Tirumalai, MPH - Senior Manager, MHSA Administration
Evelyn.Tirumalai@hhs.sccgov.org

For questions on Prevention & Early Intervention (PEI) programming, contact:
Roshni Shah, MPH – Program Manager, MHSA Administration
Roshni.Shah@hhs.sccgov.org