



M E M O R A N D U M
HEALTH AND HUMAN SERVICES
ADULT SYSTEM OF CARE
County of Placer

TO: Board of Supervisors

DATE: March 8, 2016

FROM: Jeffrey S. Brown, M.P.H., M.S.W., Director of Health and Human Services

SUBJECT: Mental Health Service Act Plan 2014-2017 and Expenditure Plan

ACTION REQUESTED

1. Adopt the 2015-2016 Placer County Mental Health Services Act Plan Annual Update and Expenditure Plan.

BACKGROUND

In 2005, Placer County received funding and implemented services under the State-funded Mental Health Services Act (MHSA). Placer County has used this State funding to expand intensive mental health and crisis services to people with severe mental illness and develop evidence-based prevention programs to reach those who were at risk of mental illness. In addition, these funds have supported housing projects, staff and provider development, and facility and technology improvements. This funding has been managed so that these services remained stable during the recent economic downturn. The funds support County-operated programs, contracted programs, and necessary administrative support for management and reporting. The MHSA consists of five components, each with different goals. The Board of Supervisors is required to approve Annual Updates and Year Plan and their Expenditure Plans.

Direct Services for People (Community Services and Supports): In partnership with community agencies, over 700 adults and children were provided services to assist them to successfully remain in the community. There were 354 adults and children who received Full Service Partnership Services/ intensive out-client. These services are provided 24 hours a day and seven days a week. The cost is much lower than the alternative institutional placement or incarceration and results in significant positive outcomes. For adults who were enrolled more than a year in FY 2014-15, the intensive out-client treatment resulted in a 53 percent reduction in homeless days, psychiatric hospitalization days decreased by 8 percent, and jail days decreased by 48 percent.

Crisis and follow-up services will provide treatment interventions and assistance with appropriate services to 1,020 people who will be evaluated in crisis but not hospitalized. Results include increased engagement in treatment, and future hospitalizations are expected to be reduced.

Evidence-based peer support services were provided to families, children and adults offered by Peer Advocates and Education/ Outreach workers in the Latino and Native American communities.

Housing Program: The Housing Program has two developments in Auburn, providing permanent supportive housing to 17 people. All the initial housing funds have been spent. The Campaign for Community Wellness has recommended an "over-the-counter" process for money set-aside to address housing, capital facility and technology. At this time there is an interest in finding a 15-20 unit apartment to for persons with serious mental illness receiving full service partnership services.

Workforce Education and Training (WET): This program provided County, contract agencies, consumers and family members' with education and training to develop skills to improve service delivery. These activities included coordination, training of professionals and paraprofessionals in evidence-based interventions, culture responsiveness, leadership development, increased availability of e-learning and development of mental health career pathways.

Capital Facilities and Technology: This program provided capital funding for MHSA programs and funding to implement an electronic medical record program. Currently, we have one Capital Facility

request to improve the entrance to the Welcome Center; however no work has begun. The implementation of an electronic medical record for all behavioral health services is both a program goal and a mandate.

Prevention and Early Intervention: Prevention and Early Intervention activities are intended to prevent mental illnesses from becoming severe and disabling by treating individuals early in its emergence and by providing services to those individuals or groups whose risk of developing a serious mental illness is higher than the average population. Activities also include education for increasing recognition of early signs of mental illness, suicide prevention programs, and stigma and discrimination reduction programs. These services are brief interventions or short-term treatment programs. There will be 20 programs funded to serve approximately 3,000 people focusing on strengthening families and youth with parenting classes, therapy, and social skill development, to note a few. These programs are also designed to reduce depression in new mothers and to reduce the effects of trauma on children and their families. Engagement of people who have been traditionally underserved is a goal of this plan, and through these prevention and early intervention efforts, more people in the Hispanic and Native American communities will receive culturally appropriate services.

Innovations: Innovations include programs designed to develop a new strategy or new learning to improve some form of mental health practice. Placer County is currently in the Community Planning Process for the new three-year plan that will be created and presented under separate cover. The new plan focus will be on intensive services for homeless individuals.

Conclusion: This Plan was vetted with the Mental Health, Alcohol, and Drug Advisory Board, our local stakeholder Steering Committee (Campaign for Community Wellness) and posted for 30 days in order to receive public comment. The 30-day public comment period for this Plan ended on February 22nd. A Public Hearing was held by the Mental Health, Alcohol, and Drug Advisory Board on February 22nd. No comments were received.

The Campaign for Community Wellness (CCW), a community-based steering committee overseeing the implementation of this Mental Health Services Act plan in Placer County, is pleased with the results of the investments made through this plan. The CCW goal is to support the traditional and non-traditional mental health system in Placer County using innovative, collaborative, culturally-competent, and consumer-guided approaches. It supports the continuation of these programs and looks forward to working collaboratively to continue to improve services and supports for all people in Placer County experiencing mental health issues.

FISCAL IMPACT

Mental Health Services Act revenues of \$14,495,800 and the accompanying expenditures have been included in the Department's Fiscal Year 2015-16 Final Budget. No County General Funds are required.

The Annual Update and Expenditure Plan is on file with the Clerk of the Board for review.