BOARD OF SUPERVISORS, COUNTY OF LAKE, STATE OF CALIFORNIA

RESOLUTION 2014-47

RESOLUTION ADOPTING THE MENTAL HEALTH SERVICES ACT FY 2013/14 ANNUAL UPDATE

RECITALS

WHEREAS, AB 1467, the omnibus health trailer bill for the 2012/13 state budget was chaptered into state law on June 27, 2012; and

WHEREAS, included among the amendments to the Mental Health Services Act was the requirement that three-year plans and annual updates be adopted by the county board of supervisors prior to submission to the Mental Health Services Oversight and Accountability Commission.

RESOLVED BY THE BOARD OF SUPERVISORS OF THE COUNTY OF LAKE, STATE OF CALIFORNIA, that the Mental Health Services Act FY 2013/14 Annual Update is hereby approved and adopted.

THIS RESOLUTION was passed and adopted by the Board of Supervisors of the County of Lake at a regular meeting thereof on the 8th day of April 2014, by the following vote:

AYES: Supervisors Comstock, Smith, Farrington, Brown and Rushing

NOES: None

ABSENT OR NOT VOTING: None

ATTEST: **Matt Perry**
Clerk of the Board of Supervisors

By: Mina Flores
Deputy

COUNTY OF LAKE

Chair, Board of Supervisors

APPROVED AS TO FORM:
ANITA GRANT
County Counsel

By: Anita R Grant

The within instrument is a correct copy of the Document on file in this office.
ATTEST: 4-8-14
MATT PERRY
Clerk of the Board of Supervisors of the State of California in and for the County of Lake
By Mina Flores

BOARD OF SUPERVISORS LAKE COUNTY, CAL

BOARD OF SUPERVISORS LAKE COUNTY, CAL

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Lake County Department of Behavioral Health Services

6302 13th Avenue - PO Box 1024
Lucerne, CA 95458-1024

Mental Health Services Act

Annual Update to
3-Year Program & Expenditure Plan
Fiscal Year 2013/2014

30-Day Comment Period
June 18 - July 17, 2013
Public Hearing
July 18, 2013 at 4pm

MHSA COUNTY COMPLIANCE CERTIFICATION

County: Lake - 17

Local Mental Health Director	Program Lead
Name: Kristy Kelly, MFT	Name: Jim Isherwood, MHSA Coordinator
Telephone Number: 707-274-9101	Telephone Number: 707-274-9101
E-mail: kristy.kelly@lakecountyca.gov	E-mail: jim.isherwood@lakecountyca.gov
County Mental Health Mailing Address: Lake County Behavioral Health PO Box 1024 Lucerne, CA 95458	

I hereby certify that I am the official responsible for the administration of county mental health services in and for said county and that the County has complied with all pertinent regulations and guidelines, laws and statutes of the Mental Health Services Act in preparing and submitting this annual update, including stakeholder participation and nonsupplantation requirements.

This annual update has been developed with the participation of stakeholders, in accordance with Welfare and Institutions Code Section 5848 and Title 9 of the California Code of Regulations section 3300, Community Planning Process. The draft annual update was circulated to representatives of stakeholder interests and any interested party for 30 days for review and comment and a public hearing was held by the local mental health board. All input has been considered with adjustments made, as appropriate. The annual update and expenditure plan, attached hereto, was adopted by the County Board of Supervisors on April 8, 2014.

Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code section 5891 and Title 9 of the California Code of Regulations section 3410, Non-Supplant.

All documents in the attached annual update are true and correct.

Kristy Kelly, MFT
Local Mental Health Director/Designee (PRINT)

Signature Date

County: Lake County

Date: April 15, 2014

MHSA COUNTY FISCAL ACCOUNTABILITY CERTIFICATION[1]

County/City: Lake - 17

- ☐ Three-Year Program and Expenditure Plan
- ☑ Annual Update
- ☐ Annual Revenue and Expenditure Report

Local Mental Health Director	County Auditor-Controller / City Financial Officer
Name: Kristy Kelly, MFT	Name: Cathy Saderlund
Telephone Number: 707-274-9101	Telephone Number: 707-263-2311
E-mail: kristy.kelly@lakecountyca.gov	E-mail: cathy.saderlund@lakecountyca.gov
Local Mental Health Mailing Address: Lake County Behavioral Health PO Box 1024 Lucerne, CA 95458	

I hereby certify that the Three-Year Program and Expenditure Plan, Annual Update or Annual Revenue and Expenditure Report is true and correct and that the County has complied with all fiscal accountability requirements as required by law or as directed by the State Department of Health Care Services and the Mental Health Services Oversight and Accountability Commission, and that all expenditures are consistent with the requirements of the Mental Health Services Act (MHSA), including Welfare and Institutions Code (WIC) sections 5813.5, 5830, 5840, 5847, 5891, and 5892; and Title 9 of the California Code of Regulations sections 3400 and 3410. I further certify that all expenditures are consistent with an approved plan or update and that MHSA funds will only be used for programs specified in the Mental Health Services Act. Other than funds placed in a reserve in accordance with an approved plan, any funds allocated to a county which are not spent for their authorized purpose within the time period specified in WIC section 5892(h), shall revert to the state to be deposited into the fund and available for other counties in future years.

I declare under penalty of perjury under the laws of this state that the foregoing and the attached update/report is true and correct to the best of my knowledge.

Kristy Kelly, MFT
Local Mental Health Director (PRINT)

Signature Date

I hereby certify that for the fiscal year ended June 30, 2013, the County/City has maintained an interest-bearing local Mental Health Services (MHS) Fund (WIC 5892(f)); and that the County's/City's financial statements are audited annually by an independent auditor and the most recent audit report is dated 12/31/13 for the fiscal year ended June 30, 2013. I further certify that for the fiscal year ended June 30, 2013, the State MHSA distributions were recorded as revenues in the local MHS Fund; that County/City MHSA expenditures and transfers out were appropriated by the Board of Supervisors and recorded in compliance with such appropriations; and that the County/City has complied with WIC section 5891(a), in that local MHS funds may not be loaned to a county general fund or any other county fund.

I declare under penalty of perjury under the laws of this state that the foregoing and the attached report is true and correct to the best of my knowledge.

Cathy Saderlund
County Auditor Controller / City Financial Officer (PRINT)

Signature Date 3/18/14

[1] Welfare and Institutions Code Sections 5847(b)(9) and 5899(a)

ACKNOWLEDGEMENTS

Lake County Behavioral Health Department wishes to thank the many participating stakeholders who gave their time and energy to this process.

Lake County Behavioral Health
MHSA Committee Members:

Kristy Kelly, MFT, Behavioral Health Director
Linda Morris, MFT, Deputy Director, Clinical Services
Scott Abbott, MFTI, Behavioral Health Compliance Manager
Jim Isherwood, MHSA Coordinator
Sarah Deng, MHSA Analyst
Dennis Skinner, MFT, Team Leader, FSP
Francois Van Wyk, MFT, Team Leader, FSP
June Wilson, MFT, Team Leader, FSP/Forensics
Karin Hudson, PsyD, Team Leader, Crisis/Outreach and Engagement
Kevin Thompson, MPA, Behavioral Health Operations and Admin Manager
Jim Gessner, Treatment and Prevention Coordinator, AODS
Carole Ford, Peer Support Specialist
Kathy Herdman, Parent Partner
Stephanie Wilson, MPA, WET/Housing Specialist
Edgar Ontiveros, Latino Outreach and Engagement Specialist
Thomas Leon Brown, Tribal Outreach and Engagement Specialist

Stakeholders and Key Contributors:

Circle of Native Minds Tribal Elders
Bridge Peers
Latinos United Lake County
Redwood Children's Services/Harbor on Main
Konocti Senior Support/Sr. Peer Counseling/Friendly Visitor Program
First 5 Lake County/MotherWise
St. Helena Clearlake Medical Clinic
Lake Family Resource Center
Lake County Office of Education/Safe Schools
Lake County Social Services
Lake County Probation
Lake County Behavioral Health Staff Members
Lake County Sheriff's Office
Lake County Veteran's Services
Lakeport Police Department
Lake County Tribal Health Consortium
Vet Connect Lake County

Introduction:

Over the past two years the Mental Health Services Act (MHSA) experienced significant changes as a result of the economic challenges at the state level. Legislation in 2011 (AB100) resulted in the following changes to how the MHSA is administered:

1. Funding distribution will be a continuous monthly appropriation.
2. MHSA plans will be approved at the local level.
3. Guidance and approval will no longer be provided by the Department of Mental Health (DMH) or the Mental Health Services Oversight and Accountability Commission (MHSOAC).
4. Statute and regulations will guide local policy and procedure.
5. Plans and financial reports will be submitted to the MHSOAC for evaluation purposes.

In June of 2012 the California Legislature provided clarification on the changes brought about by AB100 with the budget trailer bill AB1467. This policy resulted in the following:

1. MHSA plans will be approved at the local level with the exception of Innovation which will require approval by the MHSOAC.
2. The local approval process now requires adoption by the Mental Health Board and the Board of Supervisors.
3. County certification is required by both the Behavioral Health Director as well as the County Auditor/Controller.
4. The Community Program Planning process will include additional stakeholder involvement required by statute.
5. Cost per client is to be reported for Children, Youth, Adults, and Older Adults.
6. Performance outcomes are to be reported as available.

The annual update for fiscal year 2013-2014 represents continued implementation and minor adjustments to existing approved programming. Additional programs/projects being considered at this time include:

1. A school-based prevention program to identify and support students who have experienced trauma or who may be at risk of suicide.
2. An innovative approach to integration and care coordination of mental health, substance abuse, and primary care services focused on consumers with co-occurring disorders.
3. Expansion of the Crisis Access Continuum to include a mobile access team and direct linkage to other MHSA and community resources.
4. Additional funding directed to capital facilities projects to accommodate program growth directly related to MHSA implementation.

It is expected in the coming year that Lake County will do a thorough assessment and evaluation of MHSA programming and undergo a robust stakeholder planning process to develop a three-year integrated plan.

Community Program Planning and Stakeholder Process

The Community Program Planning process in Lake County is an ongoing process of key informant contact, monthly departmental MHSA meetings, monthly meetings with consumers, and planning meetings that include county-wide stakeholders. The information gathered through this process is considered and incorporated in the resulting Annual Update for fiscal year 2013-2014. Community stakeholder meetings were held quarterly in fiscal year 2012-2013 on the following dates:

July 11, 2012
October 10, 2012
January 16, 2013
April 17, 2013

Community Planning Meetings -

Participants	
Organization	Total
1st Five/Mother-Wise	8
Circle of Native Minds Wellness Center	5
Clearlake Counseling Center	1
Community Care HIV/AIDS Program	1
Community Member	3
EPI-Center	1
IHSS	1
Konocti Senior Support	5
Lake County Behavioral Health	30
Lake County Hospice	2
Lake County Office of Education	4
Lake County Tribal Health	2
Lake Family Resource Center	1
Lakeport Senior Center	1
Migrant Education	1
Peer Rights Advocate	1
Redbud Health Care District	2
Redwood Children's Services/The Harbor	10
Redwood Coast Regional Center	1
The Bridge/Consumers	7
Vet Connect/Veteran's Services	1
Grand Total	88

(Information presented at these meetings is attached as Appendix A.)

Key Informant Meetings -

Throughout the year the MHSA Coordinator reaches out to existing collaborations, consortiums, and individuals in the community to take input on needs and gaps in services available in Lake County and their relation to the existing plan. In fiscal year 2012-2013 this effort included

attendance at standing meetings for the Tribal Elders Talking Circle, the Health Policy Cabinet, the Forensic Multi-Disciplinary Team, the Continuum of Care, and MH Consumer Leadership. Individual key informants for the year include representatives from Lake County Tribal Health, First 5 Lake County, Konocti Senior Support, and Lake County Office of Education.

Local Review Process -

The 2013-2014 annual update is to be posted for 30 days on the County website, copies are distributed to all active stakeholders via e-mail, and hard copies are made available at Department clinics, the peer support center, and the tribal wellness center, and by mail upon request. At the end of the 30-day posting period, the annual update is presented to the Mental Health Board (MHB) at their monthly meeting for input and adoption. The MHB holds a public hearing to address substantive comments or input. The comments and input are documented in the Annual Update with corresponding responses or actions. The Annual Update is then scheduled to be heard by the Lake County Board of Supervisors for adoption. A copy of the Annual Update is then forwarded to the Mental Health Services Oversight and Accountability Commission for informational and evaluation purposes.

Comment Period and Substantive Feedback -

The plan update was made available for public comment for 30 days prior to the Mental Health Board meeting and public hearing on July 18, 2013.

Lake County Behavioral Health received a call from a local foundation interested in supporting the proposed funding of Challenge Day events in the County. The call referred to the MHSA PEI plan to support these events by increasing the Prevention Mini-Grant limit to $2,500. The caller thought the mini-grants would be able to fund the entire amount for each day-long event in the amount of $5,000. It was clarified that matching funds and community support was expected to be detailed in the application process as the Challenge Day program is expected to need this level of commitment.

MHSA Programming in Lake County

Component	Program Name	Program Description
CSS - FSP	Full Service Partnership	Consumers of all ages (children 0-15, transition age youth 16-25, adults 26-59, and older adults 60+) who meet eligibility requirements are provided "whatever it takes" services. A full array of recovery- oriented mental healthcare, including psychiatric services, is provided to consumers enrolled in an FSP. Services and supports include funding for housing, food, clothing, primary healthcare, transportation, education, and vocational opportunities.
CSS - GSD	Crisis Access Continuum	Provides increased access and an introduction to mental health recovery concepts at the earliest opportunity for consumers experiencing challenges. Provides a local crisis hotline, a warm line, and outreach and engagement services for consumers who have recently been hospitalized or released from a crisis evaluation, and respite in a supported transitional housing setting.
CSS - GSD	Forensic Mental Health Partnership	Provides support for consumers who encounter legal problems or are incarcerated in jail or juvenile hall due to mental illness. Assists consumers in addressing their mental health needs, navigating the legal process, transition planning, and provides support in the community after release from incarceration through service coordination, clinical services, and the FSP program when indicated.
CSS - GSD	Housing Access	Provides resources and linkage to MHSA-subsidized housing for FSP consumers, one-time funding for those consumers at risk of losing their housing or needing assistance getting established in housing, and transitional housing for homeless consumers.
CSS - GSD	Older Adult Access	Provides outreach and engagement services, linkage to resources, mental health interventions, and FSP programming to seniors who may be experiencing mental health challenges. The Senior Peer Counseling program provides peer-aged volunteer support to older adults who may be isolating or experiencing mild mental health concerns.
CSS - GSD	Integrated Physical and Mental Health	Works with consumers and links them to primary care physicians. This expanding element in the recovery planning process is a critical component of comprehensive services and supports that has been identified as an obstacle to wellness for consumers experiencing mental health difficulties.
CSS - GSD	Peer Support	Supports both transition age youth and adult consumers. TAY and Adult Wellness Centers provide a gathering point for consumers. Programs provide access to services (including non-mental health related), peer support, socialization, and companionship to these two age groups. The concepts of wellness, recovery, and resiliency are imbedded in the programming in both locations.

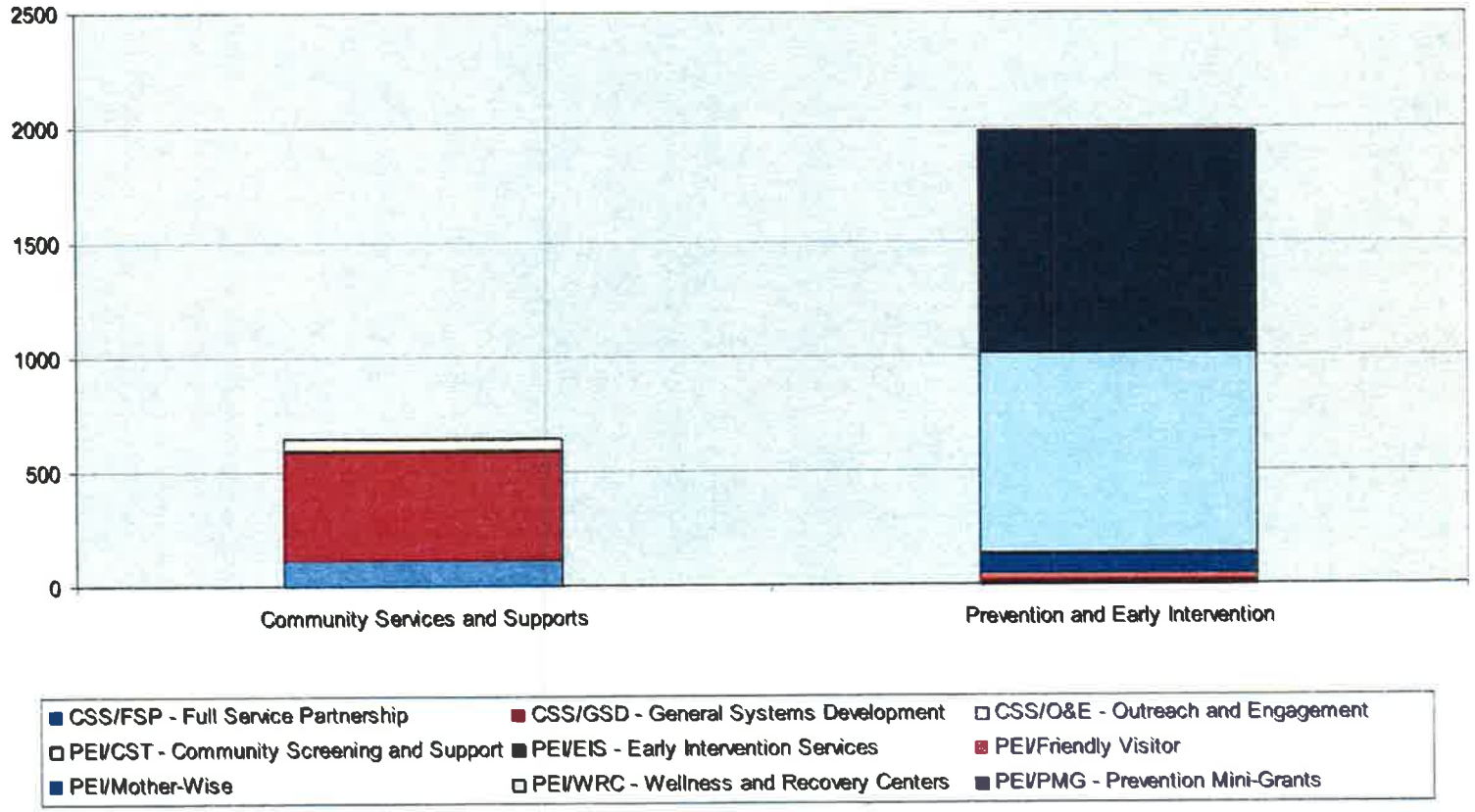
Component	Program Name	Program Description
CSS - GSD	Parent Partner Support	Supports families involved with community mental health. A Parent Partner with "lived experience" as a family member assists families with navigating the system, service coordination, group support, and, as an FSP team member, assists the family through the FSP process.
CSS - OE	Community Outreach and Engagement	Two outreach programs specifically target the Tribal and Latino communities. Also identified as unserved or underserved in Lake County are the homeless population, the transition age youth and older adult age groups, as well as the unique cultural groups of military veterans and those who identify as LGBTQ.
PEI	Early Intervention Services	Lake County Behavioral Health provides the equivalent of one full-time mental health specialist to provide direct early intervention services and supports to those consumers and families who experience the first onset of a serious emotional disturbance or serious mental illness.
PEI	Early Student Support	Enhances the social and emotional development of young students (grades K-3) who are experiencing school adjustment difficulties such that they are served in an intensive services setting. Alternative personnel provide direct services to students under ongoing supervision and training by credentialed school psychologists in collaboration with Lake County Behavioral Health Department professional staff.
PEI	Wellness and Recovery Centers	The Bridge Peer Support Center in Clearlake, Circle of Native Minds Center in Lakeport and the proposed Latino and Family Centers in the southern and eastern parts of the county respectively, serve niche populations, promote cultural competency through program design, and allow access to resources and linkage to needed services.
PEI	Older Adult Outreach and Prevention	The Friendly Visitor Program provides companionship to the vulnerable population of homebound older adults. The volunteers offer individualized companionship, support, and friendship on a regular basis to seniors who have limited access to outside activities. Reassuring phone calls and access to the MHSA- funded Senior Peer Counseling Program are also benefits of the program.
PEI	Postpartum Depression Screening and Support	Mother-Wise provides volunteers, in their role as Saathi, who offer mothers the companionship of a listening ear and a helping hand. They offer real support and solutions to mothers at a time when they need it the most through home visitation. Mother-Wise services are available for all pregnant women or new moms with babies under twelve months, regardless of income.

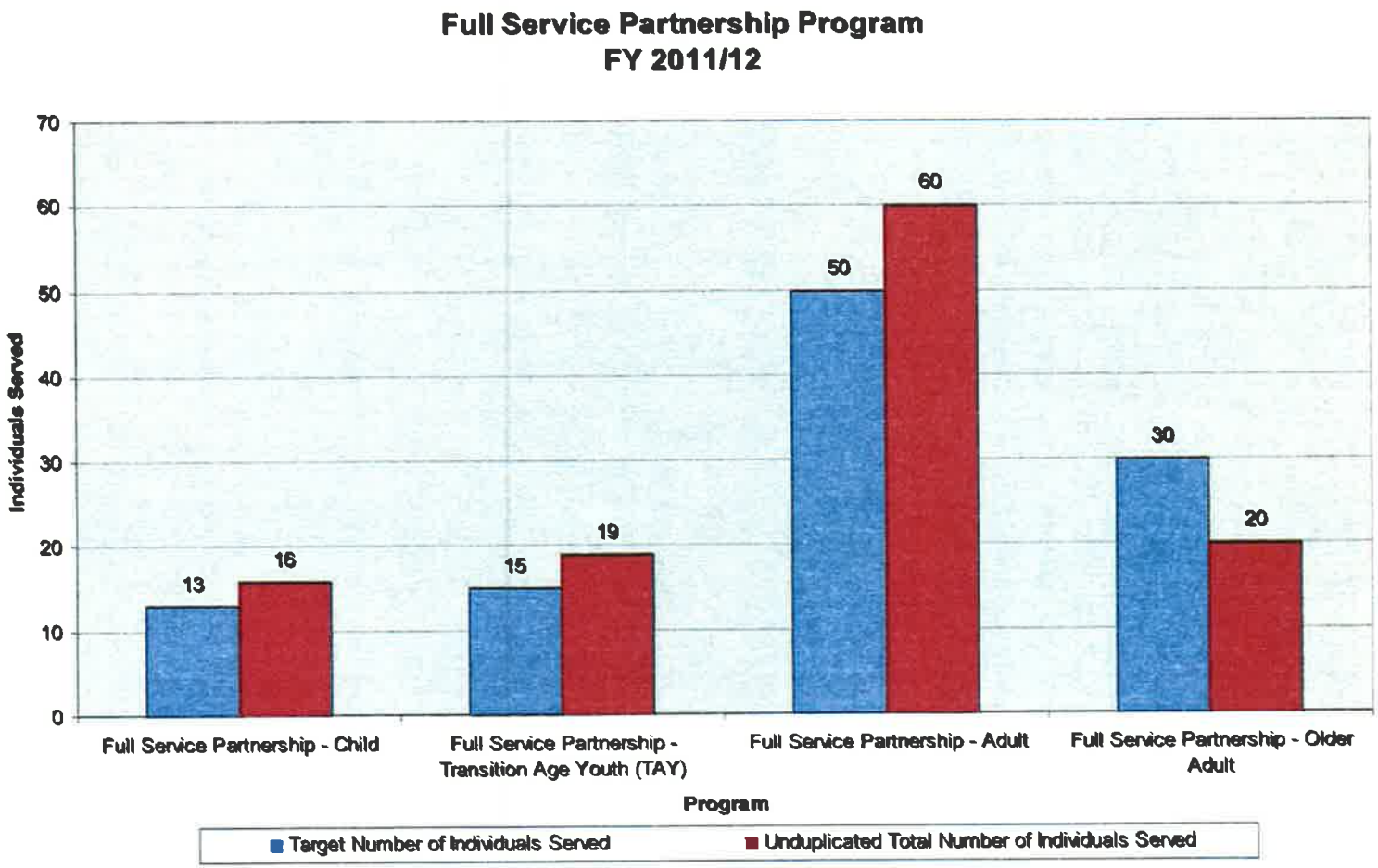
Component	Program Name	Program Description
PEI	TAY Peer Support	Funding for an outreach coordinator position at the MHSA-funded TAY Drop-In Center and is intended to reduce disparities in access to mental health services to this identified priority population (transition aged youth). This position provides project coordination, peer training for like-aged volunteers at the center, and expands the existing programming to include outreach and prevention activities for the TAY population.
PEI	Community Screening and Treatment	Will serve Lake County Behavioral Health clients in community collaboration for screening and treatment for trauma and co-occurring disorders.
PEI	Prevention Mini- Grants	Invites community-based providers and organized consumer and family groups to design prevention programming and submit a funding request to Lake County Behavioral Health. This mini-grant program issues funding of $500 to $1,500 for projects as diverse as Challenge Day, Children's Grief and Loss Groups, Vet Connect, Sheriff's Activity League Program, Latinos United Cultural and Behavioral Enrichment Project, Youth Football Camp, and Traditional Pomo Dance Classes.
PEI	Training, Technical Assistance, and Capacity Building	Lake County has committed this resource to the California Mental Health Services Authority and the Superior Region Data Workgroup to identify outcome measures to be used across programs. This pilot project is being facilitated by RAND corporation in collaboration with Modoc County.
CFTN	Capital Facilities	The Clearlake Clinic will be renovated to provide a more integrated experience that promotes wellness, recovery, and resiliency and increased access and engagement to underserved populations.
CFTN	Lake County Electronic Health Record Project	Addresses technological needs for secure, reliable, real-time access to client health record information where and when it is needed to support care. Includes the following components: implementation of Anasazi software, conversion to Microsoft SQL server, conversion of paper charts, purchasing additional hardware, and ongoing service/maintenance, as well as meeting Meaningful Use and Interoperability requirements.
WET	Workforce Education and Training	Provides funding for workforce staffing support, training and staff development, mental health career pathways strategies, and financial incentives to address shortages in the public mental health workforce.
WET	Superior Region WET Collaborative	Lake County has been a contributing member of this 16-county partnership since 2008. The collaborative is focused on the development of career pathways in community mental health in conjunction with institutions of higher education in the region.
INN	Peer Informed Access	A well-informed Peer Committee representing a diverse group of community member stakeholders assist in steering the development of a more welcoming, engaging, and culturally relevant experience for those seeking services.

Local Program Data and Evaluation Efforts

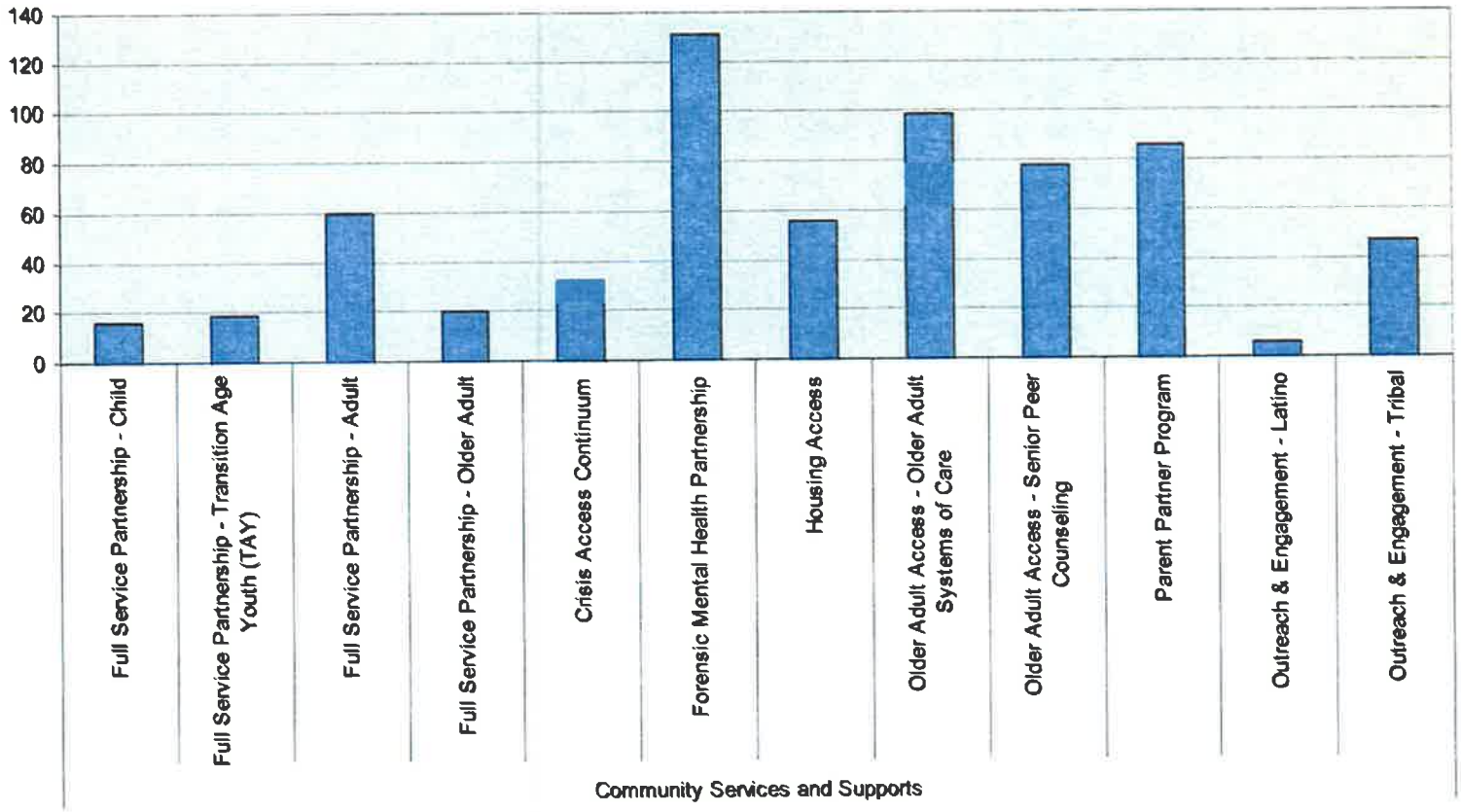
The following exhibits represent the continued effort to improve data collection and evaluation of programming at the local level. There is an expectation that this capacity will grow to be able to show community, system, and individual outcomes in order to better inform decisions made in the Community Program Planning process. Efforts are also being made at the State level to provide additional reporting. Selected information provided by the statewide effort was used by the Department in a presentation to the Board of Supervisors on June 4, 2013 (Appendix B).

Lake County Behavioral Health
Mental Health Services Act
Individuals Served by Program
FY 2011/12

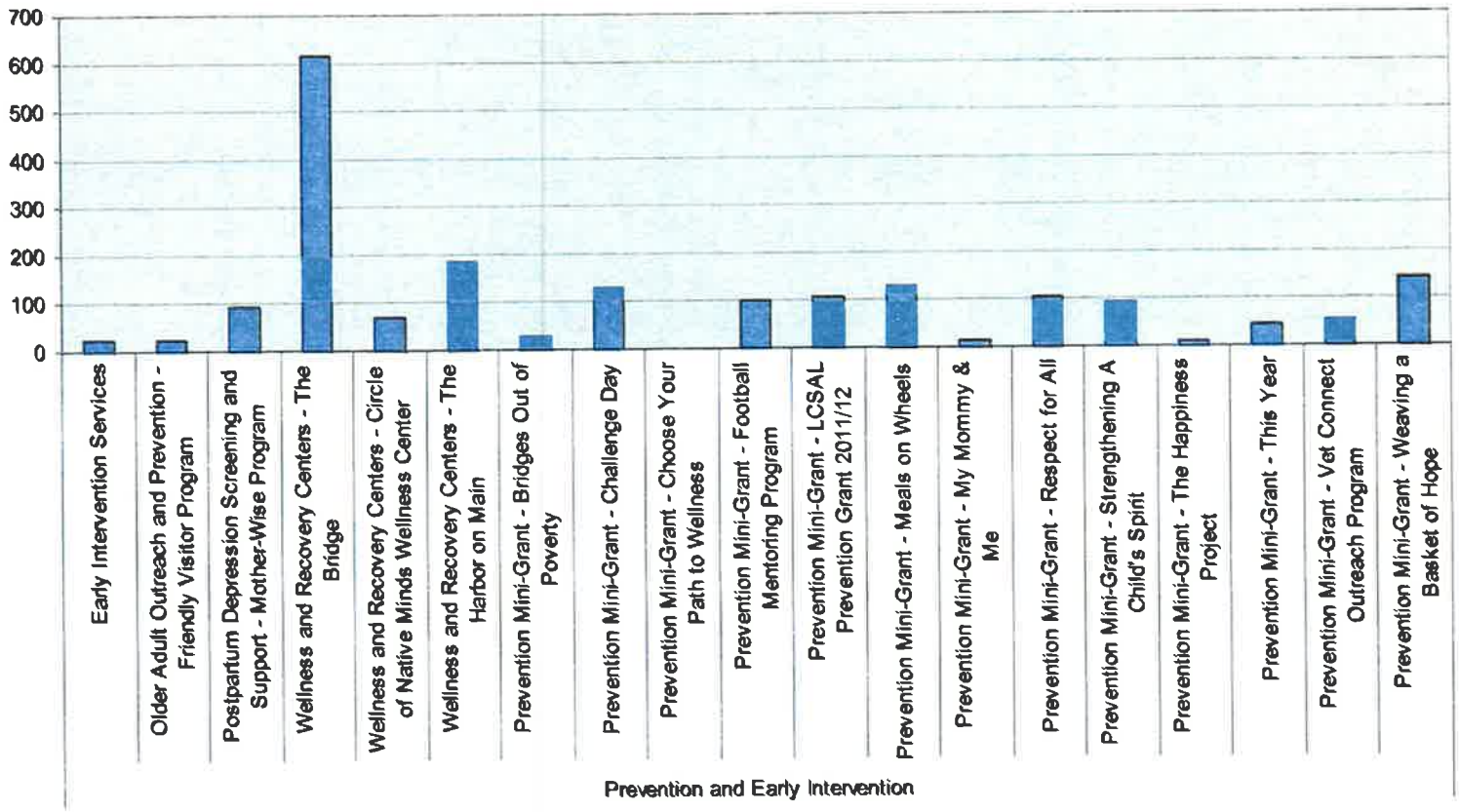



Full Service Partnership Program
FY 2011/12
Individuals Served
70
60
50
40
30
20
10
0
13
16
15
19
50
60
30
20
Full Service Partnership - Child
Full Service Partnership - Transition Age Youth (TAY)
Full Service Partnership - Adult
Full Service Partnership - Older Adult
Program
Target Number of Individuals Served
Unduplicated Total Number of Individuals Served

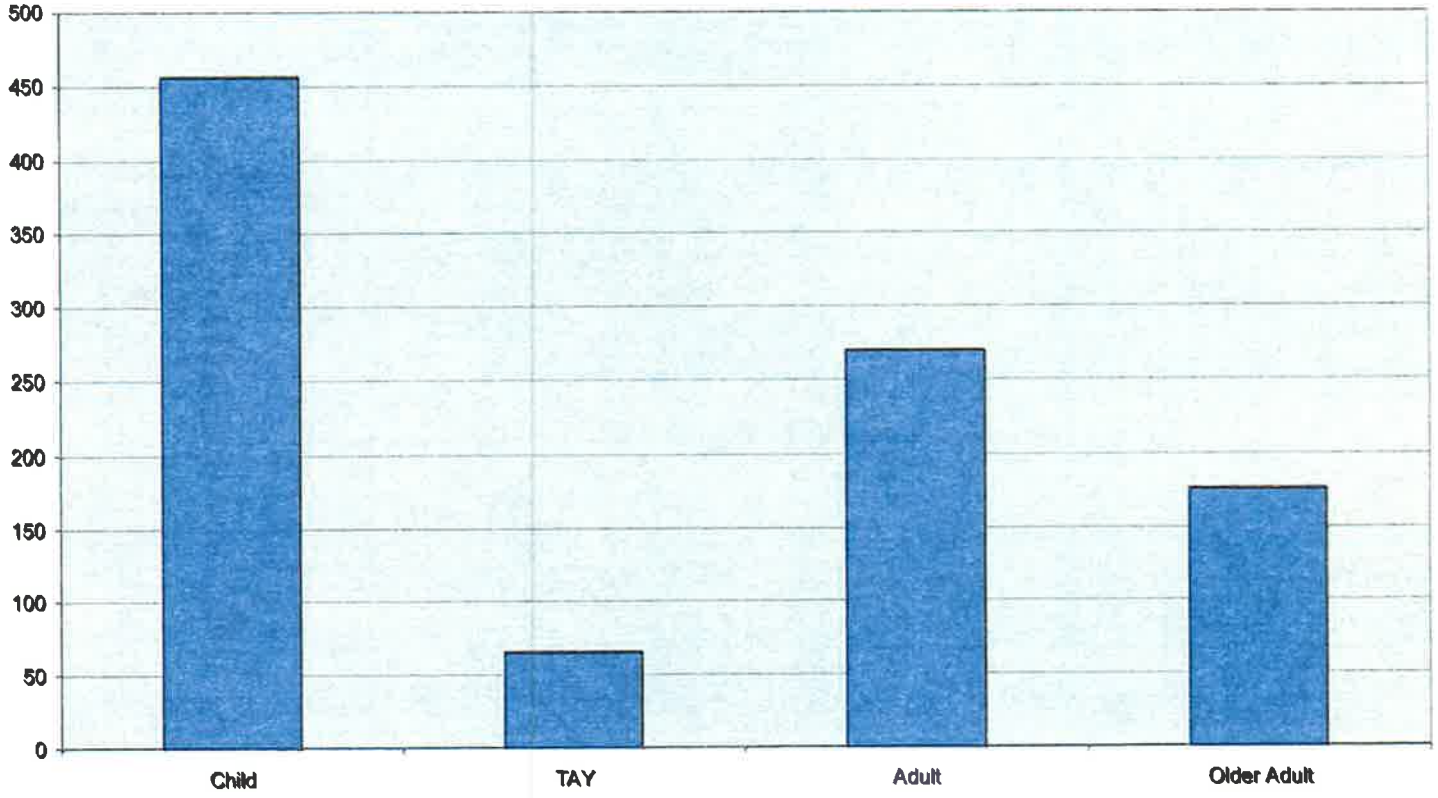
Community Services and Supports
Individuals Served by Program
FY 2011/12



Prevention and Early Intervention
Individuals Served by Program
FY 2011/12



Prevention Mini-Grant Program
Individuals Served by Age Group
FY 2011/12



MHSA Program Budget for FY 2013/14

Component	Program Name	Budget Amount	Budget Narrative	FY 2011/12 Number Served	FY 2011/12 Expense	FY 2011/12 Cost per Person	FY 2013/14 Planned Number Served	FY 2013/14 Planned Expense	FY 2013/14 Planned Cost per Person
CSS	Full Service Partnership	$ 1,020,000	No changes to existing programs.	115	$ 1,493,452.83	$ 12,986.55	108	$ 1,020,000	$ 9,444.44
CSS	General System Development	$ 795,000	No changes to existing programs.	1251	$ 617,908.20	$ 493.93	1300	$ 795,000	$ 611.54
CSS	Community Outreach and Engagement	$ 185,000	No changes to existing programs.	53	$ 132,863.86	$ 2,506.87	75	$ 185,000	$ 2,466.67
PEI	Early Intervention Services	$ 120,000	No changes to existing programs.	23	$ 72,248.48	$ 3,141.24	36	$ 120,000	$ 3,333.33
PEI	Early Student Support	$ 60,000	No changes to existing programs.	12	$ 70,000.00	$ 5,833.33	16	$ 60,000	$ 3,750.00
PEI	Wellness and Recovery Centers	$ 150,000	No changes to existing programs.	872	$ 129,437.71	$ 148.44	1000	$ 150,000	$ 150.00
PEI	Older Adult Outreach and Prevention	$ 20,000	No changes to existing programs.	26	$ 17,781.52	$ 683.90	30	$ 20,000	$ 666.67
PEI	Postpartum Depression Screening and Support	$ 60,000	No changes to existing programs.	94	$ 42,500.00	$ 452.13	120	$ 60,000	$ 500.00
PEI	TAY Peer Support	$ 30,000	No changes to existing programs.	185	$ 20,000.00	$ 108.11	240	$ 30,000	$ 125.00
PEI	Community Screening and Treatment	$ 40,000	No changes to existing programs.	0	$ -	$ -	40	$ 40,000	$ 1,000.00
PEI	Prevention Mini-Grants	$ 35,000	No changes to existing programs.	968	$ 23,549.48	$ 24.33	1000	$ 35,000	$ 35.00
PEI	Training, Technical Assistance, and Capacity Building	$ 8,900	No changes to existing project.						
CFTN	Capital Facilities	$ 525,000	No changes to existing project.						
CFTN	Technological Needs	$ 175,000	No changes to existing project.						
WET	Workforce Education and Training	$ 200,000	No changes to existing projects.						
	Peer Informed Access	$ 75,000	No changes to existing project. New project to be submitted as a Plan Update during the coming year.						
INN	New Project TBD	$ 75,000							

FY 2013/14
MHSA FUNDING SUMMARY

County: Lake **Date:** 6/17/2013

	MHSA Funding					
	CSS	**WET**	**CFTN**	**PEI**	**INN**	**Local Prudent Reserve**
A. Estimated FY 2013/14 Funding						
1. Estimated Unspent Funds from Prior Fiscal Years	$552,125	$400,000	$485,000	$138,031	$72,359	
2. Estimated New FY 2013/14 Funding	$2,107,430			$526,857	$138,647	
3. Transfer in FY 2013/14[a]	($360,000)	$0	$450,000	($90,000)		$0
4. Access Local Prudent Reserve in FY 2013/14	$0			$0		$0
5. Estimated Available Funding for FY 2013/14	$2,299,555	$400,000	$935,000	$574,888	$211,006	
B. Estimated FY 2013/14 Expenditures	$2,000,000	$200,000	$700,000	$450,000	$150,000	
C. Estimated FY 2013/14 Contingency Funding	$299,555	$200,000	$235,000	$124,888	$61,006	

[a]Per Welfare and Institutions Code Section 5892(b), Counties may use a portion of their CSS funds for WET, CFTN, and the Local Prudent Reserve. The total amount of CSS funding used for this purpose shall not exceed 20% of the total average amount of funds allocated to that County for the previous five years.

D. Estimated Local Prudent Reserve Balance	
1. Estimated Local Prudent Reserve Balance on June 30, 2013	$1,127,751
2. Contributions to the Local Prudent Reserve in FY 2013/14	$0
3. Distributions from Local Prudent Reserve in FY 2013/14	$0
4. Estimated Local Prudent Reserve Balance on June 30, 2014	$1,127,751

Lake County Mental Health and AOD Services
Mental Health Services Act
Stakeholder Meeting
July 11, 2012

Agenda:

- Lunch and Housekeeping
- MHSA Update
- Peer Support/Community Outreach
- Innovation Steering Committee
- Open Discussion

Funded by Proposition 63

Lake County Mental Health and AOD Services
Mental Health Services Act
Stakeholder Meeting
July 11, 2012

MHSA Update:

- AB 100 and AB 1467
- 3-Year Integrated Plan
- Innovation Project
- Early Intervention Programming
- Measuring & Evaluating Outcomes

Funded by Proposition 63

AB 100 and AB 1467

- AB 100 Realignment – April 2011
- Department of Health Care Services
- Local Planning/Local Approval
- AB 1467 Budget Trailer – June 2012
- Addresses Discrepancies/Gaps

Lake County Mental Health and AOD Services
Mental Health Services Act
Stakeholder Meeting
July 11, 2012

MHSA 3-Year Integrated Plan

- Quarterly Community Meetings
- Targeted Stakeholder Meetings
- Key Informant Interviews
- Information Access and Input
- Goal – June 30, 2013

Funded by Proposition 63

Lake County Mental Health and AOD Services
Mental Health Services Act
Stakeholder Meeting
July 11, 2012

Innovation Project

- Resource Development Associates
- 2.5 Years
- Recruitment and Training
- Assessment and Recommendations
- Evaluation of Learning

Funded by Proposition 63

Early Intervention Programming

- Screening for Prodromal Symptoms
- Ages 12-25
- Structured Treatment
- Very Good Outcomes
- Less Prolonged Suffering and Cost

Lake County Mental Health and AOD Services
Mental Health Services Act
Stakeholder Meeting
July 11, 2012

Measuring and Evaluating Outcomes

- Training, Technical Assistance, and Capacity Building Funds
- RAND/SRI Supporting Project
- One or Two Measures Across Programs
- Evaluation of Outcomes
- Decisions Made Based on Data

Funded by Proposition 63

Peer Support/Community Outreach

- The Bridge Peer Support Center
- Harbor on Main Youth Center
- Circle of Native Minds Wellness Center
- Latino Wellness Center (in development)
- Family Wellness Center (in development)

The Bridge Peer Support Center

- Providing social, emotional, and spiritual support for un-served and underserved adults.
- Established in 2010 (formerly the Lighthouse, est. 2007).
- Promoting recovery emotionally, socially, and with sobriety.
- Transportation for those who live outside the Clearlake area remains a challenge.
- New for 2012/13.

Harbor on Main Youth Center

- Connecting local youth to community resources, engaging them in the community, giving them something to do.
- Complete redesign in the past three months.
- Numbers/feedback.
- Successful programs.
- Opportunities for growth.
- New for 2012/13.

Lake County Mental Health and AOD Services
Mental Health Services Act
Stakeholder Meeting
July 11, 2012

Circle of Native Minds Wellness Center

- Culture
- Traditions
- Healing
- Respect/Honor
- Understanding

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Latino Outreach and Engagement

- Increasing access to mental health services in the Latino community.
- Promoting mental health services in Spanish.
- Providing assistance in Spanish to increase comfort levels and confidence.
- Providing outreach services in the community.
- Reducing suicide, incarceration, school failure, removal of children from their homes.
- New for 2012/13 - Latino Wellness Center.

Parent Partner

- Supporting families involved with community mental health.
- Increasing awareness and improving effectiveness of parent-professional partnerships to meet the needs of families.
- Participating in program and community meetings to maximize parent voice, choice, and involvement throughout the service delivery process.
- New for 2012/13 - Family Wellness Center.

Innovation Steering Committee:

- Community Stakeholders
- Multicultural Diversity
- Lived Experience Preferred
- 2-year Commitment
- Extensive Training
- Valuable Contribution to Lake County

Lake County Mental Health and AOD Services
Mental Health Services Act
Stakeholder Meeting
July 11, 2012

Jim Isherwood
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Lake County Behavioral Health
Mental Health Services Act
Stakeholder Meeting
October 10, 2012

Agenda

- Lunch and Housekeeping
- Local Update
- Regional and Statewide Initiatives
- Discussion and Input

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Lake County Behavioral Health
Mental Health Services Act
Stakeholder Meeting
October 10, 2012

Local Update

- 3-Year Integrated Plan
- Prevention Mini-Grants
- Innovation Project
- Funding
- etc…

Lake County Behavioral Health
Mental Health Services Act
Stakeholder Meeting
October 10, 2012

MHSA 3-Year Integrated Plan

- Additional Year to Prepare
- Healthcare Reform
- Across System
- Additional Requirements
- Goal – June 30, 2014

Lake County Behavioral Health
Mental Health Services Act
Stakeholder Meeting
October 10, 2012

Prevention Mini-Grants

- 21 Applications
- 18 Awards
- Diversity
- Youth Focus
- Next Round – September 2013

Innovation Project

- Steering Committee Assembled
- 1.5 day Summit August 16-17
- Workgroup/Learning Session 9/21
- Lunchtime Learning Sessions
- Provider Networking Events

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Funding

- Monthly Distribution
- Planning Based on Estimates
- Variation Expected
- Contingencies
- Prudent Reserve

etc…

- Forensic Mental Health Partnership
- ASIST Trainings
- Latino Wellness Center
- Early Intervention Services
- Regional Data Workgroup - Outcomes

Lake County Behavioral Health
Mental Health Services Act
Stakeholder Meeting
October 10, 2012

Regional and Statewide Initiatives

- WET Superior Region Partnership
- North Bay Suicide Prevention Project
- "Know the Signs" Campaign
- Stigma and Discrimination Reduction
- Student Mental Health

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Lake County Behavioral Health
Mental Health Services Act
Stakeholder Meeting
October 10, 2012

Discussion and Input

- Outreach and Engagement – PEI?
- Community Screening and ***Treatment***
- Approach to 3-year Integrated Plan
- Capital Facilities and Technology Needs
- Funding Contingencies
- Prudent Reserve

Lake County Behavioral Health
Mental Health Services Act
Stakeholder Meeting
October 10, 2012

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Mental Health Services Act Community Program Planning

Lake County Department
of
Behavioral Health

January 16, 2013

Agenda

- Lunch
- Introductions and Housekeeping
- Outcomes Data from 2008-2011
- Lake County Services Data 2011-2012
- Review of Programming 2012-2013
- Plan for 2013-2014
- Discussion

Metrics, Outcomes & Impacts

- **FSP Cost Offsets**

FSP Cost and Cost Offset results provided by the MHSOAC and UCLA/EMT Associates, Inc.

	Psychiatric	Physical Health	Criminal Justice	Total
FY 2008/09	$ (52,442.75)	$ 158,608.19	$ 42,479.83	$ 148,645.27
FY 2009/10	$ 354,147.80	$ 206,771.56	$ 30,932.23	$ 591,851.59

Metrics, Outcomes & Impacts

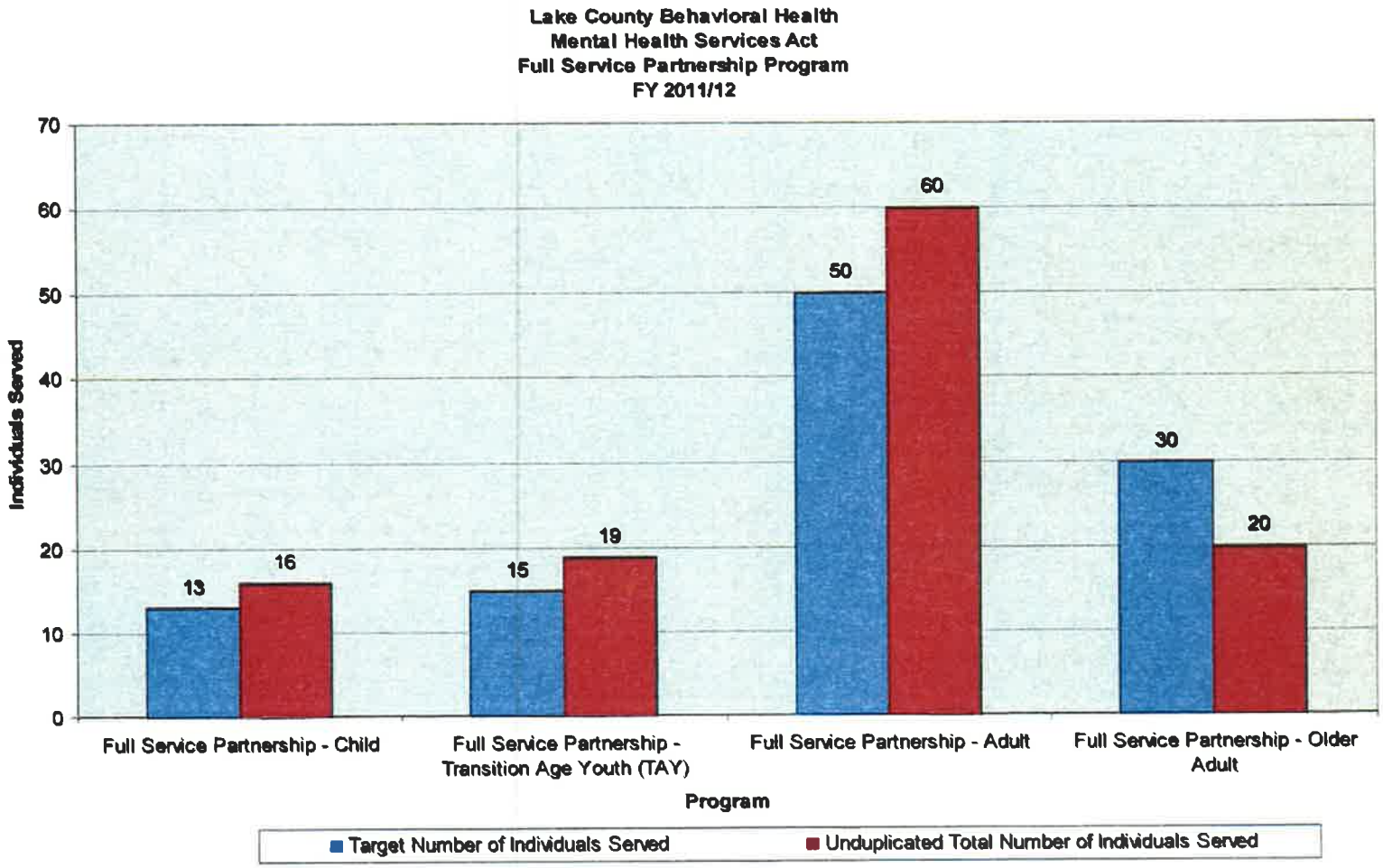
- **FSP Data for FY 2010/11**

  Metrics provided by the MHSOAC and California State University, Sacramento.

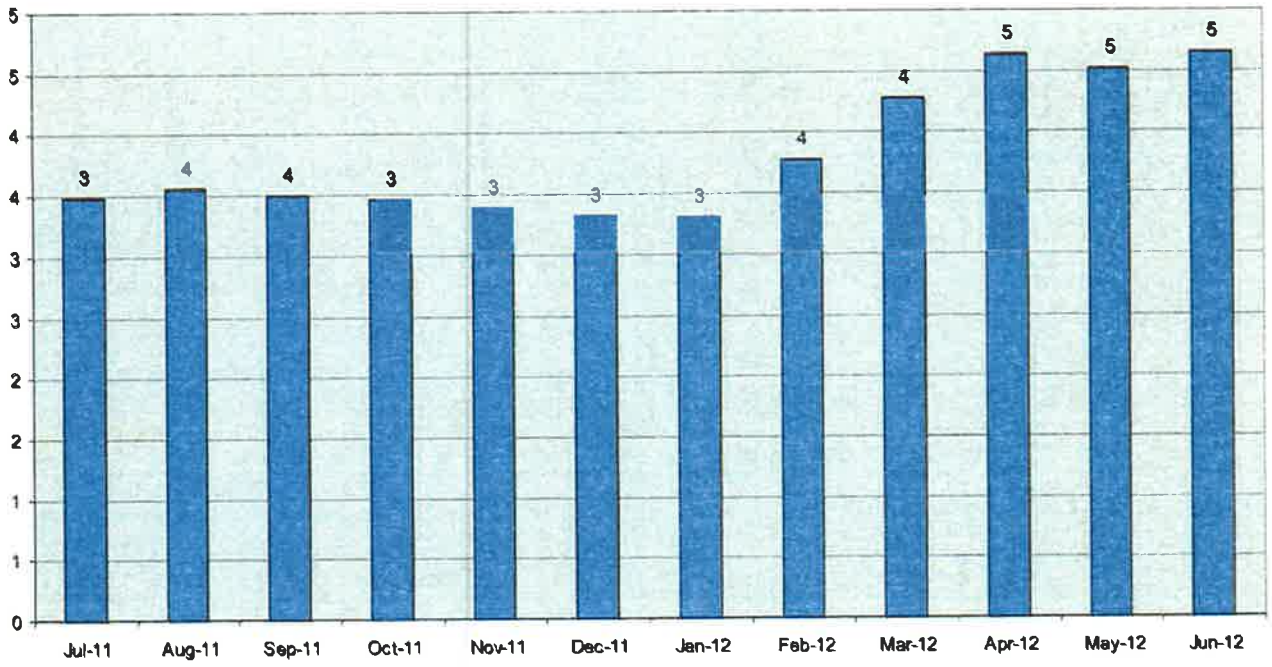
Discontinue Reason	***Total Served***	
Still Serving	*85*	*70%*
Met Goals	***17***	***14%***
*Other**	*19*	*16%*
All	*121*	*100%*

** Includes Deceased, Chose to Discontinue, Institutionalized, Moved, Not Located, Placed in Juvenile Hall, Serving Jail, and Did Not Meet Target Criteria.*

Full Service Partnership - FSP

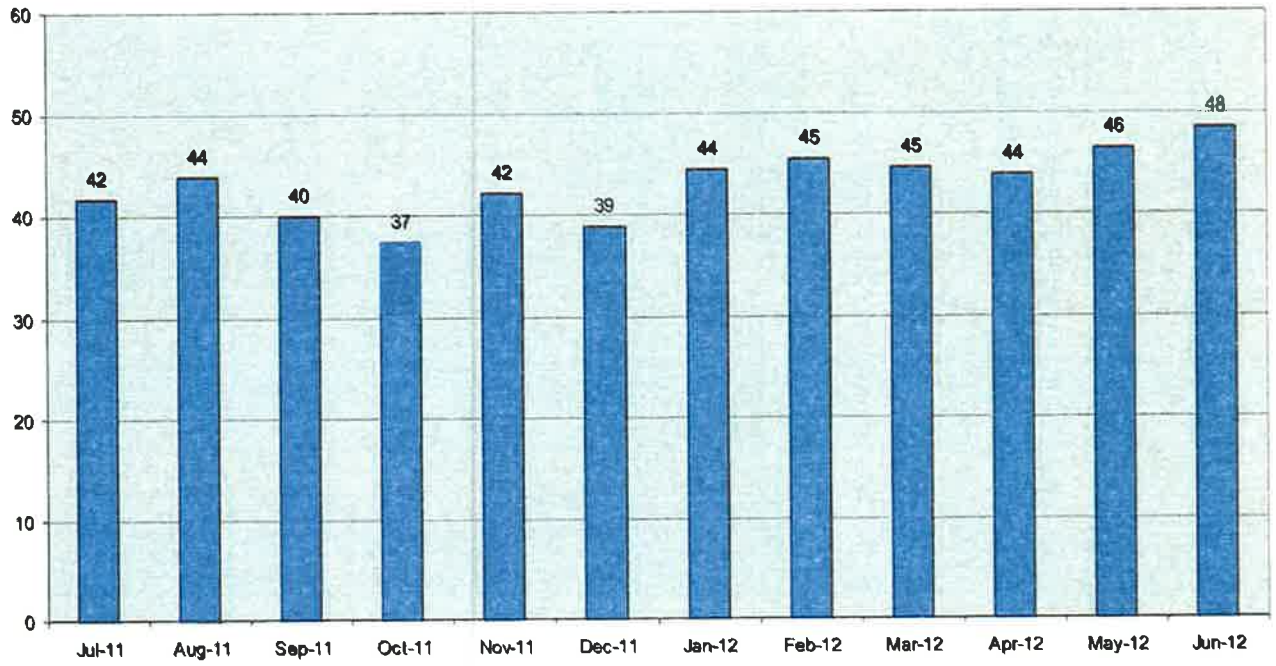


Full Service Partnership - FSP

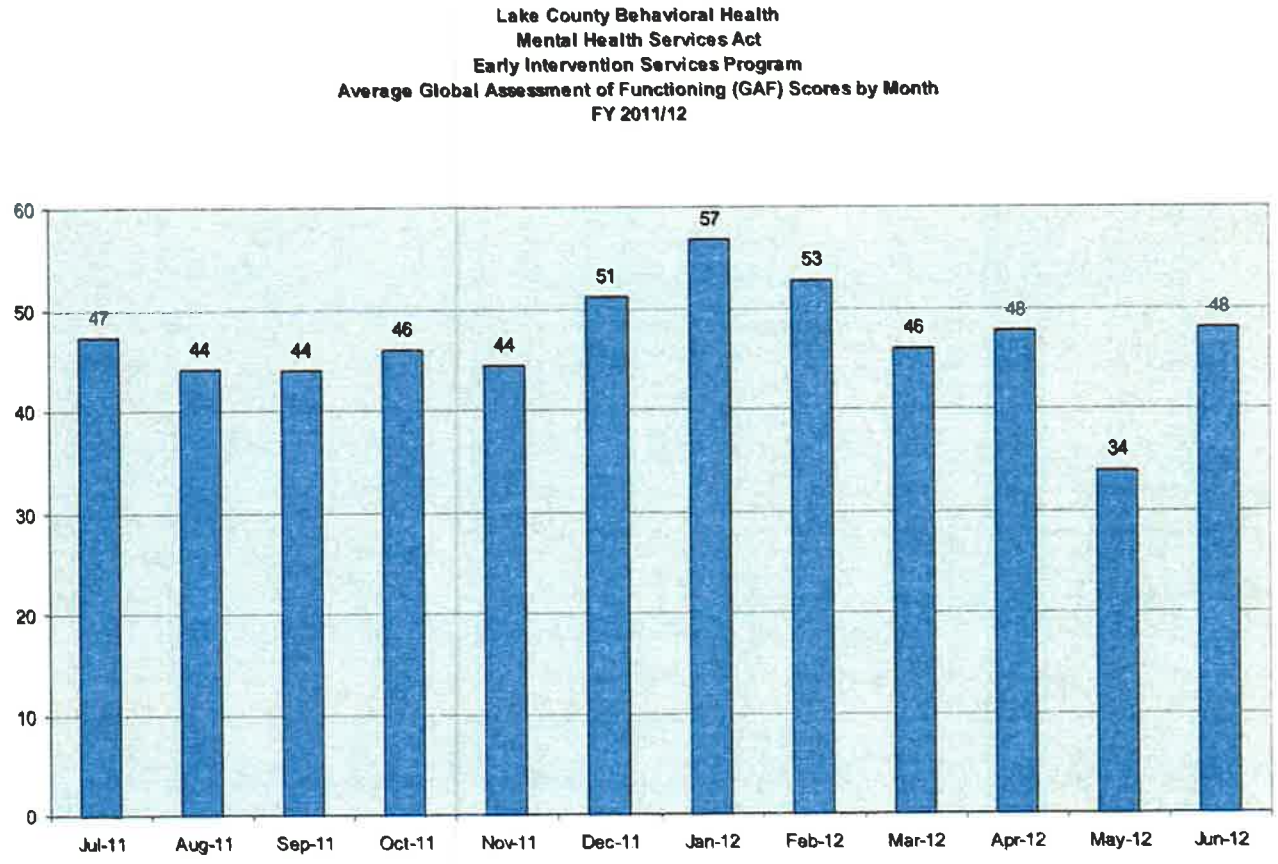


Full Service Partnership - FSP

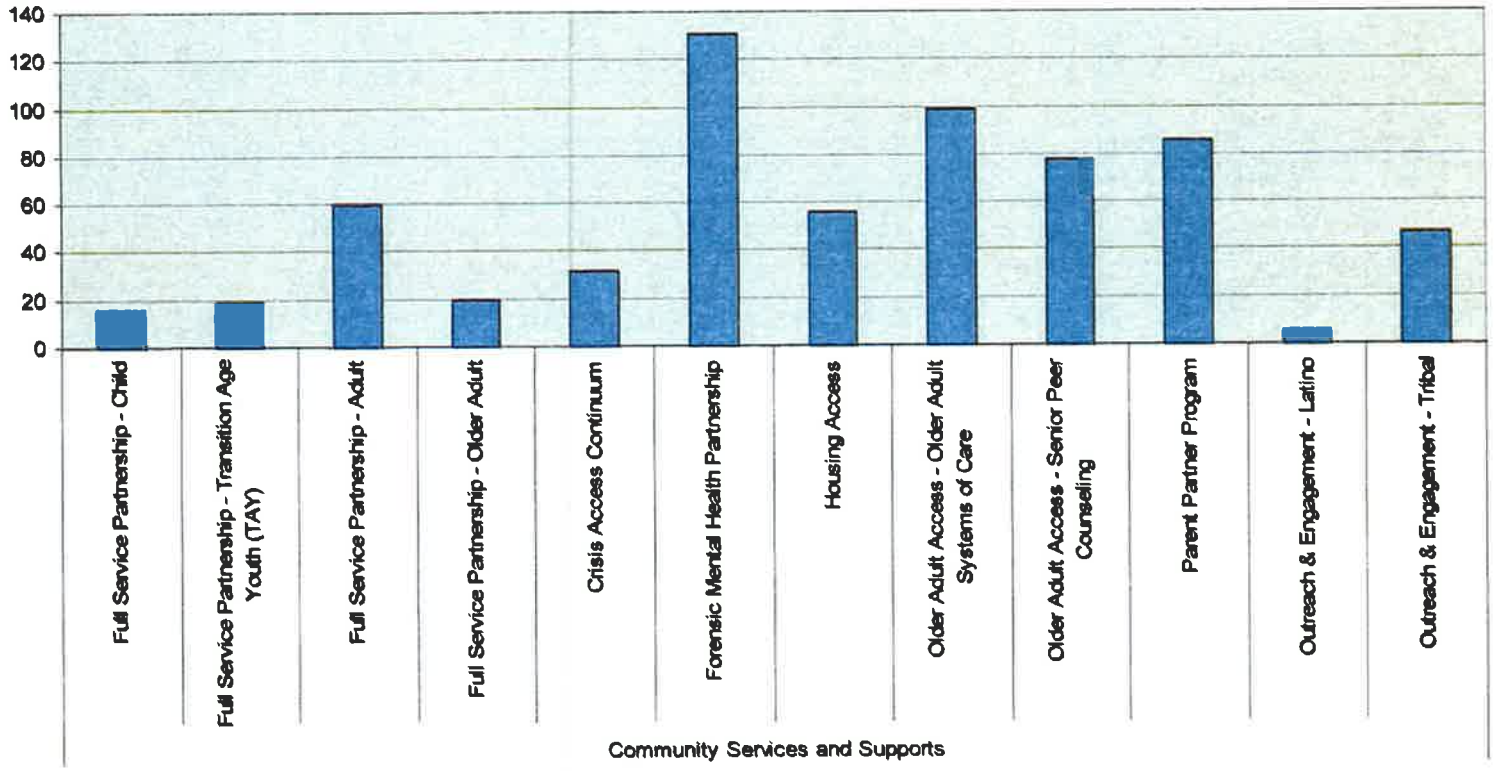
Lake County Behavioral Health
Mental Health Services Act
Full Service Partnership Program
Average Global Assessment of Functioning (GAF) Scores by Month
FY 2011/12



Early Intervention Services - EIS



Community Services and Supports



Demographics

Lake County Behavioral Health
Mental Health Services Act
Demographics of Individuals Served
FY 2011/12

Age Range	Count of Age Range	Percent of Age Range
0-15	11	4.25%
16-25	42	16.22%
26-59	146	56.37%
60 & Over	60	23.17%
Grand Total	259	100.00%

Gender	Count of Gender	Percent of Gender
F	136	52.51%
M	123	47.49%
Grand Total	259	100.00%

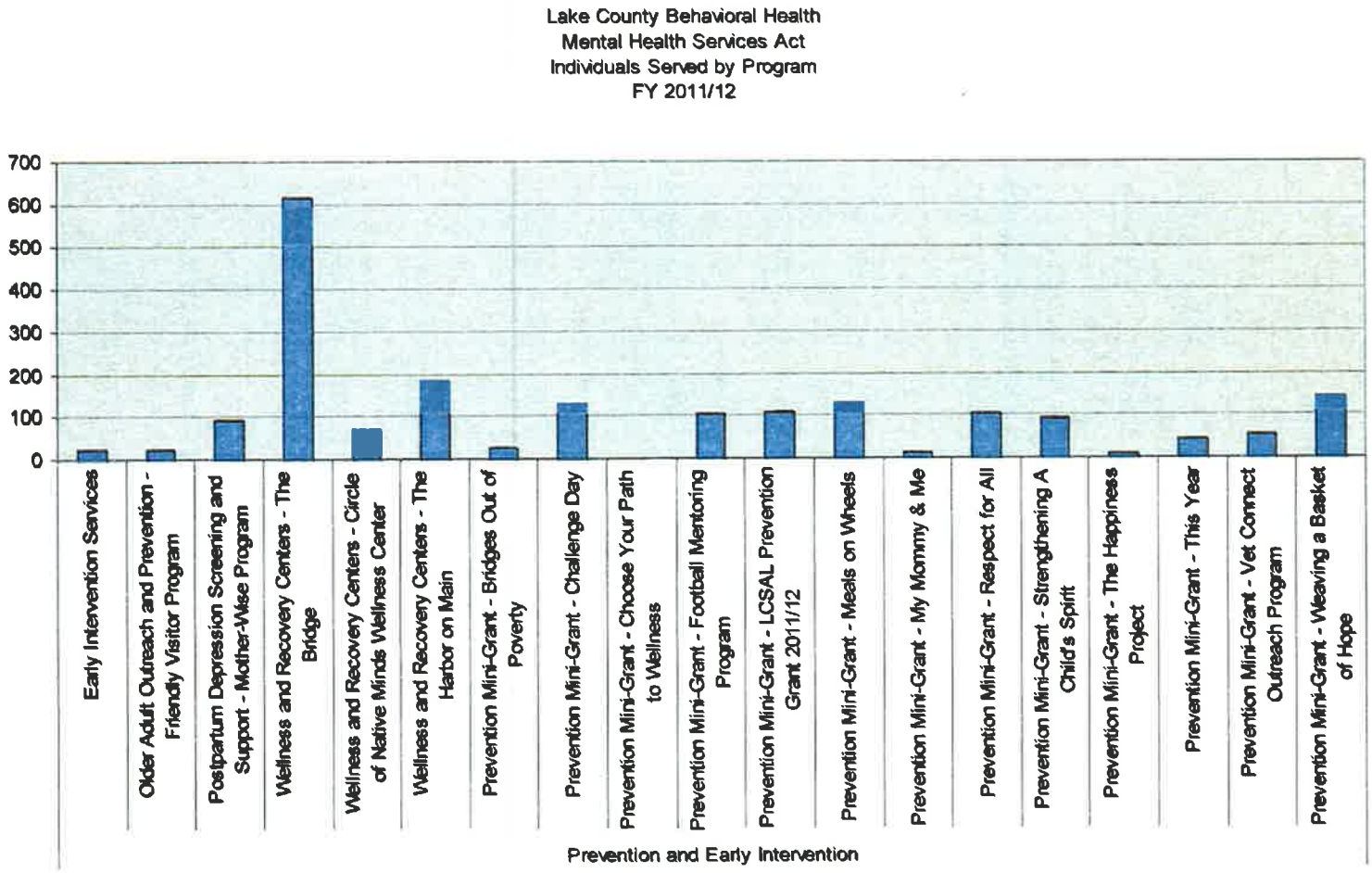
Ethnicity	Count of Ethnicity	Percent of Ethnicity
Mexican/Mexican American/Chicno	12	4.63%
Puerto Rican	2	0.77%
Other Hispanic Latino	7	2.70%
Not Hispanic	180	69.50%
Unknown/Not Reported	58	22.39%
Grand Total	259	100.00%

Race	Count of Race	Percent of Race
Asian	2	0.77%
Black/African American	9	3.47%
Native American	11	4.25%
White/Caucasian	201	77.61%
Other	12	4.63%
Multiple	14	5.41%
Unknown/Not Reported	10	3.86%
Grand Total	259	100.00%

Primary Language	Count of Primary Language	Percent of Primary Language
English	246	94.98%
Spanish	9	3.47%
Mien	1	0.39%
Unknown / Not Reported	3	1.16%
Grand Total	259	100.00%

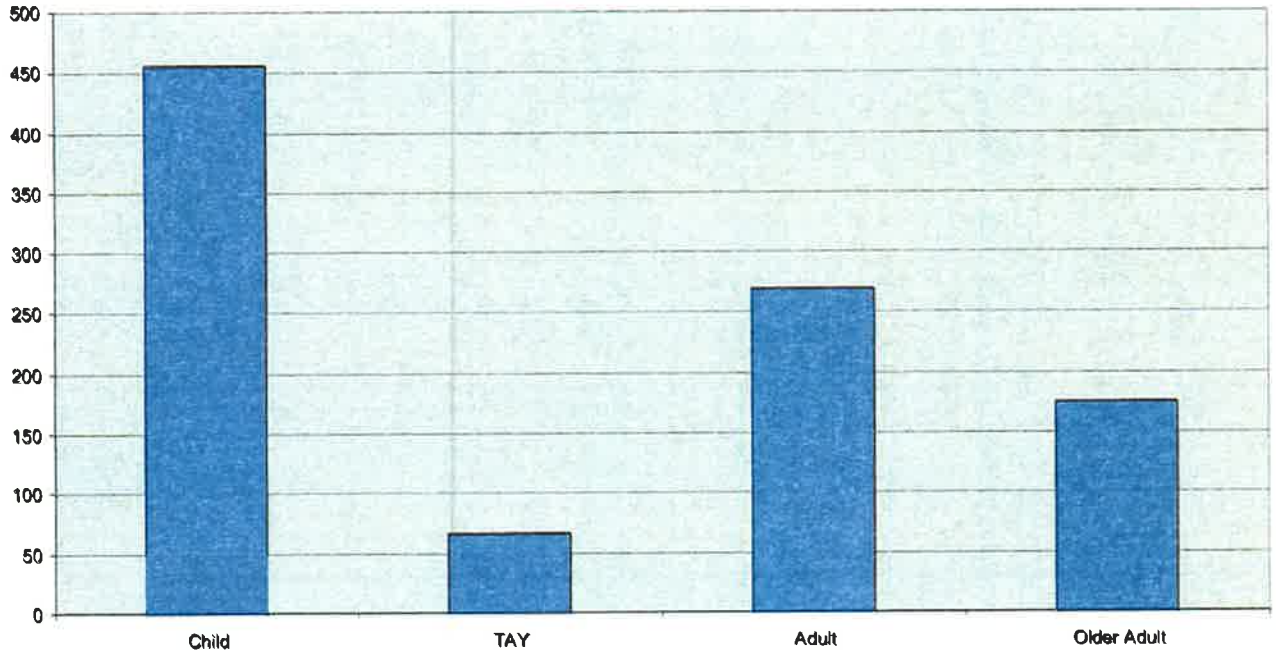
City of Residence	Count of City of Residence	Percent of City of Residence
CLEARLAKE	92	35.52%
CLEARLAKE OAKS	18	6.95%
CLEARLAKE PARK	2	0.77%
COBB	2	0.77%
EUREKA	3	1.16%
FREMONT	1	0.39%
GLENHAVEN	3	1.16%
HIDDEN VALLEY LAKE	8	3.09%
KELSEYVILLE	21	8.11%
LAKEPORT	41	15.83%
LOCH LOMOND	2	0.77%
LOWER LAKE	5	1.93%
LUCERNE	20	7.72%
MIDDLETOWN	7	2.70%
MODESTO	3	1.16%
NICE	23	8.88%
SANTA CRUZ	1	0.39%
STANDISH	1	0.39%
UPPER LAKE	3	1.16%
WILLITS	1	0.39%
WITTER SPRINGS	1	0.39%
YUBA CITY	1	0.39%
Grand Total	259	100.00%

Prevention and Early Intervention

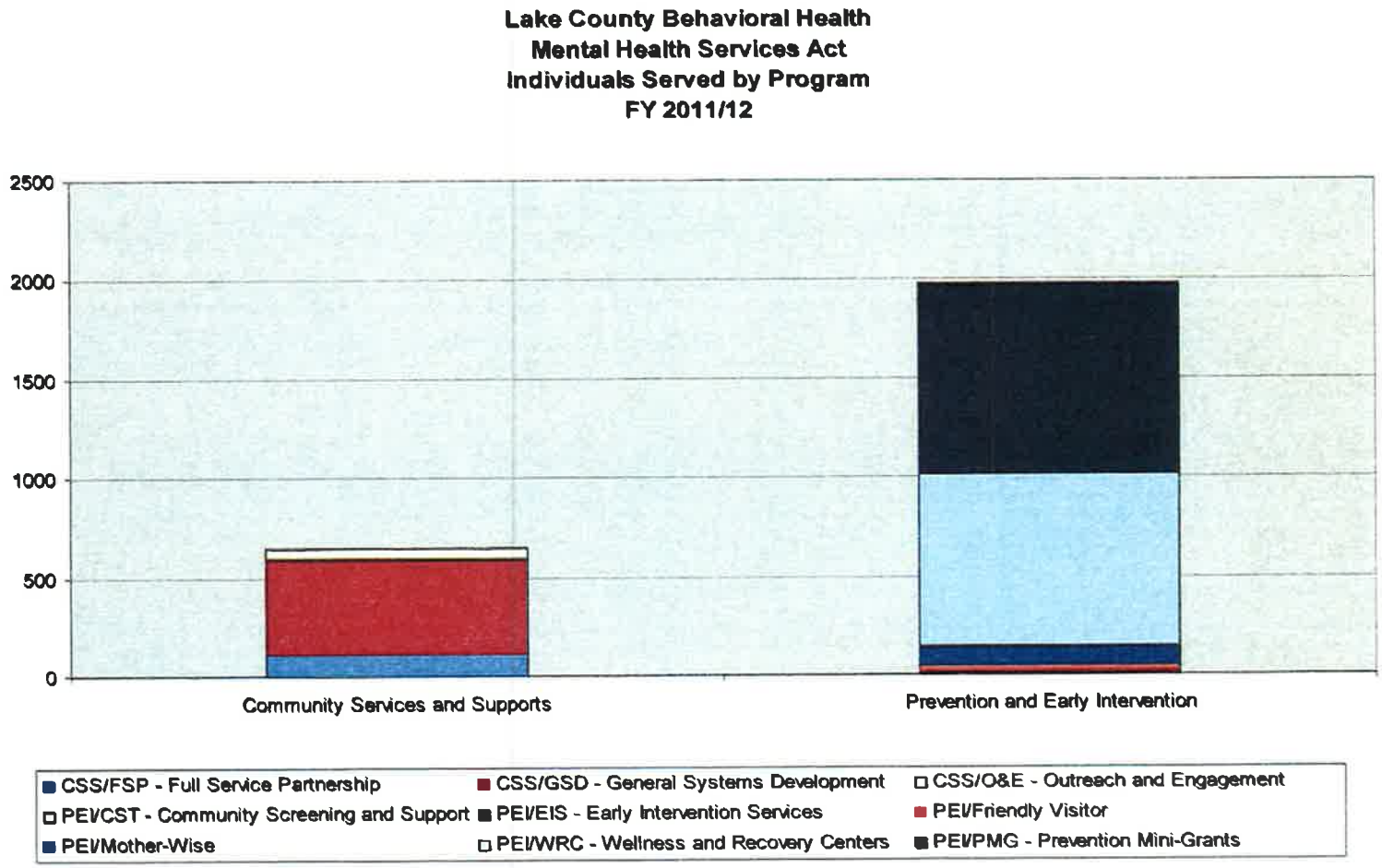


Prevention and Early Intervention

Lake County Behavioral Health
Mental Health Services Act
Prevention Mini-Grant Program
Individuals Served by Age Group
FY 2011/12



Total Number Served: 2,633



2012-2013 in Review

- Annual Update Requirements
- Funding
  - Distributions
  - Contingencies
- Community Services and Supports
  - Full Service Partnership
    - All Age Groups
      - 0-15
      - 16-25
      - 26-59
      - 60+
  - General Systems Development
    - Crisis Access
    - Housing Access
      - Permanent
      - Transitional
    - Peer Support
    - Parent Partner
    - Older Adult SOC
    - Forensic MHP
    - Integrated Services
  - Outreach and Engagement
    - Tribal
    - Latino

2012-2013 Continued

- Prevention and Early Intervention
  - Early Intervention Services
  - Wellness Centers
  - Early Student Support
  - Mother-Wise*
  - Friendly Visitors
  - TAY Peer Support
  - Mini-Grants
  - Community Screening and Treatment

*Mother-Wise has requested an additional $9,650 for FY 2012/13 due to projected funding shortfall – Plan Update forthcoming.

- Innovation
- Capital Facilities
- Technological Needs
- Workforce Education and Training
- Housing

Plan for 2013-2014

- Requirements of AB100 and AB1467
  - Local Process
  - Distributions vs. Allocations
  - Auditor Controller Certification and BOS Adoption
  - PEI and Treatment
- Contingencies
- Programming
  - Community Services and Supports
  - Prevention and Early Intervention
  - Innovation
  - Capital Facilities
  - Technological Needs
  - Workforce Education and Training
  - Housing

Mental Health Services Act
Community Program Planning

Contact:

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WELLNESS • RECOVERY • RESILIENCE

Welcome!

Please help yourself to something to eat. The meeting will start at 1pm.

Funded by Proposition 63

Lake County Behavioral Health Services
Mental Health Services Act
Stakeholder Meeting
April 17, 2013

WELLNESS · RECOVERY · RESILIENCE

Agenda:

- Lunch and Housekeeping
- MHSA Overview (AB100 & 1467)
- Local Community Planning Process
- Annual Update for Fiscal Year 13/14
- MHSA 3-Year Integrated Plan
- Open Discussion

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MHSA Overview (AB100 & 1467)

- Proposition 63, approved by voters in 2004
- AB100 Realignment of State functions (04/2011)
  - Department of Mental Health dissolved
  - MH Services to Department of Healthcare Services
  - Local control/approval of MHSA plans
  - All funding at State distributed to Counties in June 2011

MHSA Overview (AB100 & 1467)

- AB1467 2012/2013 Budget Trailer Bill
  - Adjustments to statute (MHSA)
  - Increased local planning requirements
  - County Certification to include Auditor/Controller
  - Mental Health Board review
  - Board of Supervisors adoption
  - Mental Health Services Oversight and Accountability Commission
    - Innovation approval

WELLNESS · RECOVERY · RESILIENCE

Local Planning and Approval Process:

- Stakeholders and Planning
- MHB Review
- 30 day posting for comment
- MHB/Public Hearing
- County Certification
- BOS Adoption
- Submit to MHSOAC within 30 days

Lake County Behavioral Health Services
Mental Health Services Act
Stakeholder Meeting
April 17, 2013

WELLNESS · RECOVERY · RESILIENCE

Annual Update for Fiscal Year 13/14:

- No substantial changes to programs
- All component plans in place
  - Community Services and Supports
  - Prevention and Early Intervention
  - Innovation
  - Workforce Education and Training
  - Capital Facilities and Technological Needs

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Lake County Behavioral Health Services
Mental Health Services Act
Stakeholder Meeting
April 17, 2013

WELLNESS · RECOVERY · RESILIENCE

MHSA 3-Year Integrated Plan:

- Targeted Stakeholder Meetings
- Key Informant Interviews
- Quarterly Community Meetings
- Information Access and Input
- Goal – June 30, 2013

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Lake County Behavioral Health Services
Mental Health Services Act
Stakeholder Meeting
April 17, 2013

WELLNESS · RECOVERY · RESILIENCE

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WELLNESS • RECOVERY • RESILIENCE

Impacts From Lake County's Implementation of the Mental Health Services Act

Kristy Kelly, M.F.T., Director
Department of Behavioral Health

June 4, 2013

REPORT TO LEGISLATURE - AB 2034 (May, 2003) (MODEL FOR PROP. 63)

- The number of days of psychiatric hospitalization since enrollment dropped 55.8%.
- The number of days of incarceration dropped 72.1%.
- The number of days spent homeless dropped 67.3%.
- The number of days of full-time employment increased 65.4%
- The number of days of part-time employment increased 53.1%

The Mental Health Services Act in Lake County

- Lake County has received a total of $14,543,987 in new funding since 2005 to support client services, infrastructure, and innovation.
- In the past two years (FY 10/11 & 11/12) MHSA funding for services totaled $3,975,500.
- 2,835 people were served during this period with an average expenditure of MHSA funds of $1,402 per person.
- Services take place throughout the community; homes, schools, senior centers, as well as clinics.

Defining Features of Full Service Partnership (FSP)

- Full spectrum of community services (CCR, Title 9, Division 1, Chapter 14, Section 3200.150) *the mental health and non-mental health services and supports necessary to address the needs of the client, and when appropriate the client's family, in order to advance the clients goals and achieve outcomes that support the client's recovery, wellness and resilience.*
- *51% + of the Community Services and Supports Plan.*

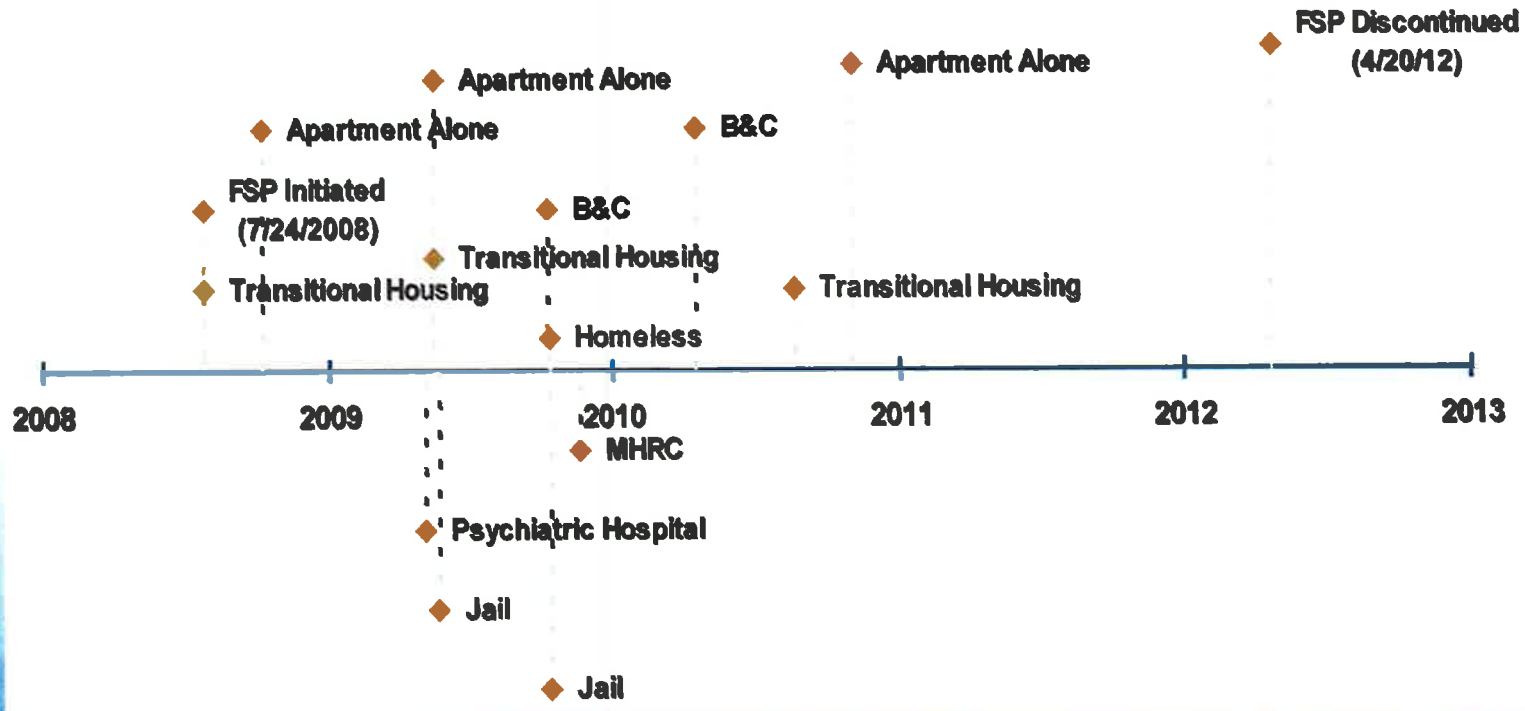
Criteria for FSP Service (average=120 enrolled per year)

- Section 3620.05. Must meet eligibility under WIC 5600.3 *and* be unserved or underserved and one of the following:
  - Homeless or at risk of homelessness
  - Involved in the criminal justice system
  - At risk of involuntary hospitalization or institutionalization
  - Frequent users of hospitals or emergency room services as the primary source for mental health treatment
  - Have experienced a first episode of serious mental illness
  - At risk of out of home care

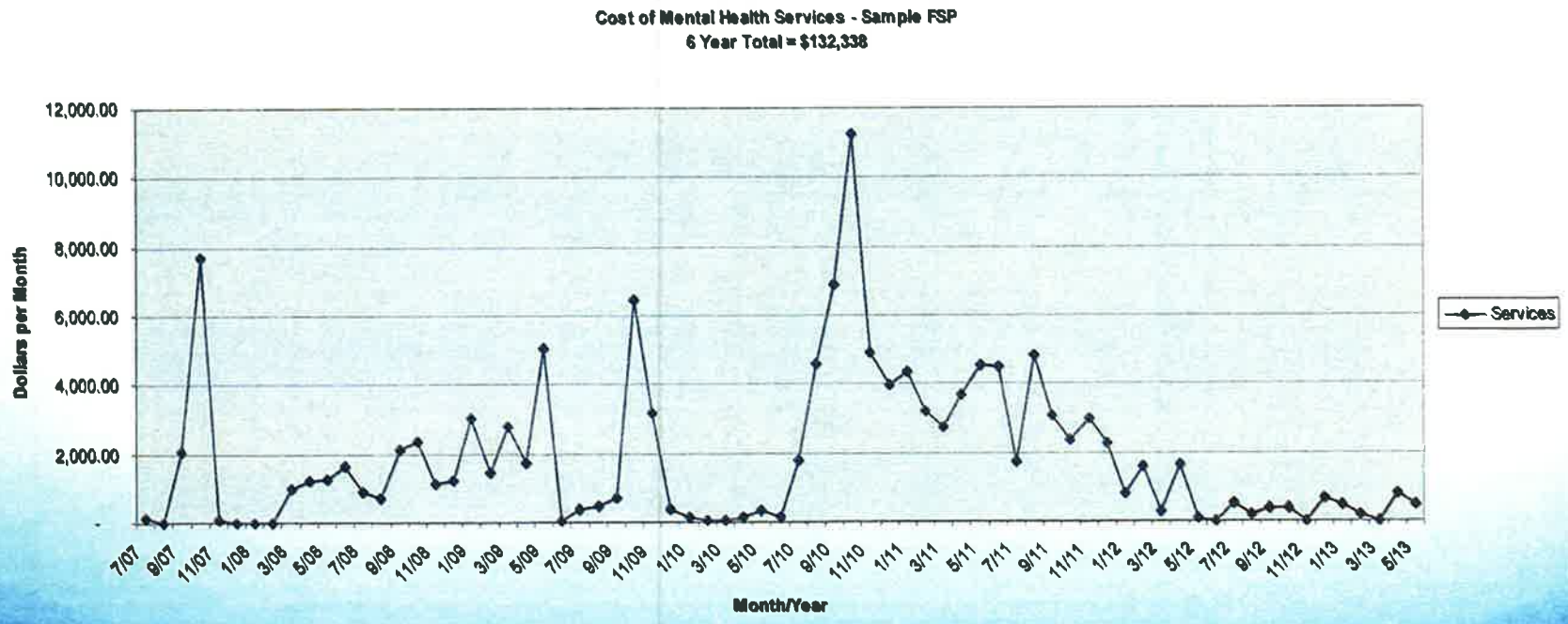
Funding for FSP

- MHSA Community Services and Supports Plan FSP allocation
  - Used as match for Medi-Cal @ 50/50
  - Used to fund indigent client care

LCBH SAMPLE FSP



COST OF MH SERVICES
SAMPLE FSP
6-YEAR TOTAL = $132,388

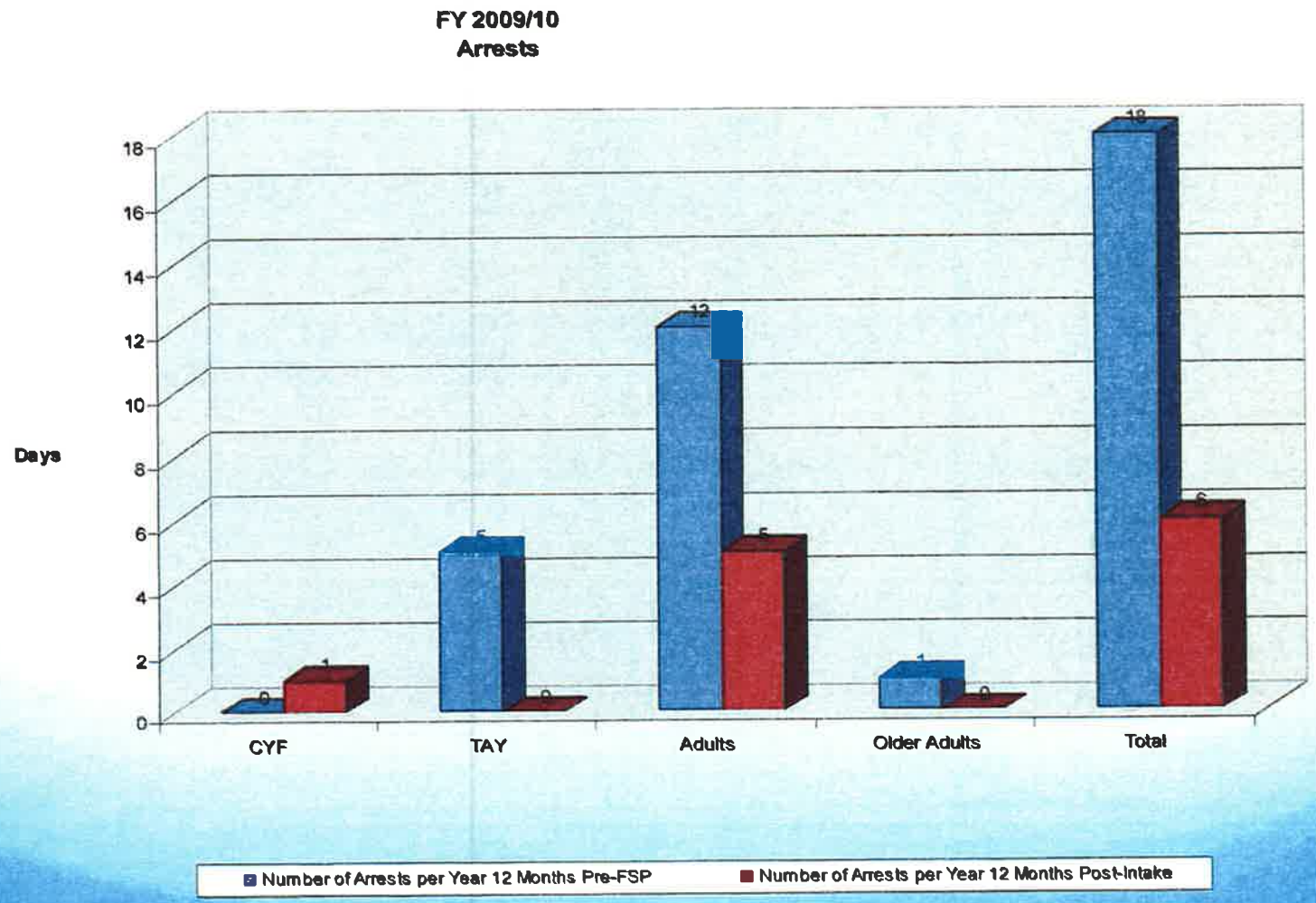


COST SAVINGS FOR LAKE COUNTY

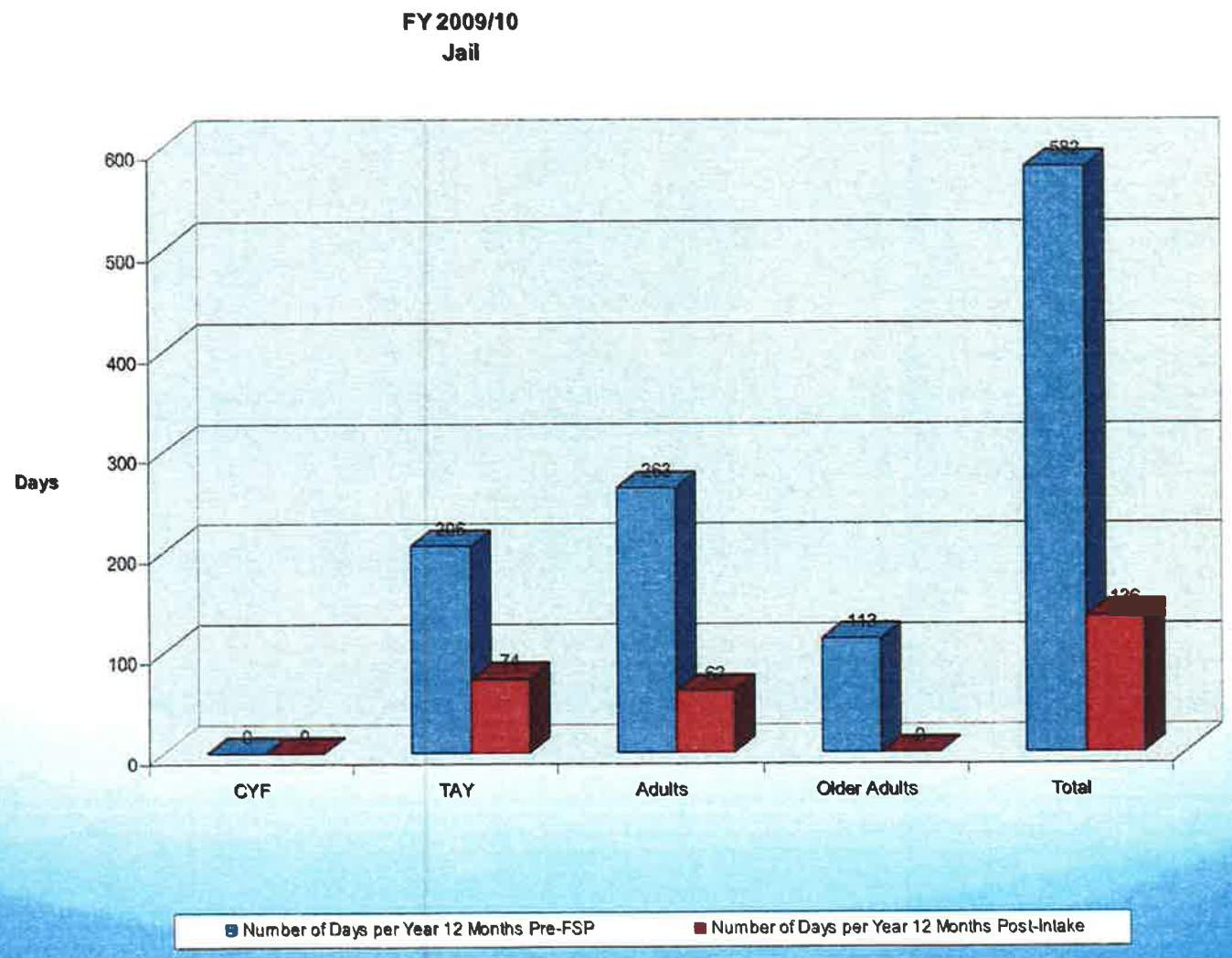
FSP Cost and Cost Offset results provided by the Mental Health Services Act Oversight and Accountability Commission and UCLA/EMT Associates, Inc.

	PSYCHIATRIC Amount of Offset	PHYSICAL HEALTH Amount of Offset	CRIMINAL JUSTICE Amount of Offset	TOTAL Amount of Offset
FY 2008/09	$ (52,442.75)	$ 158,608.19	$ 42,479.83	$ 148,645.27
FY 2009/10	$ 354,147.80	$ 206,771.56	$ 30,932.23	$ 591,851.59

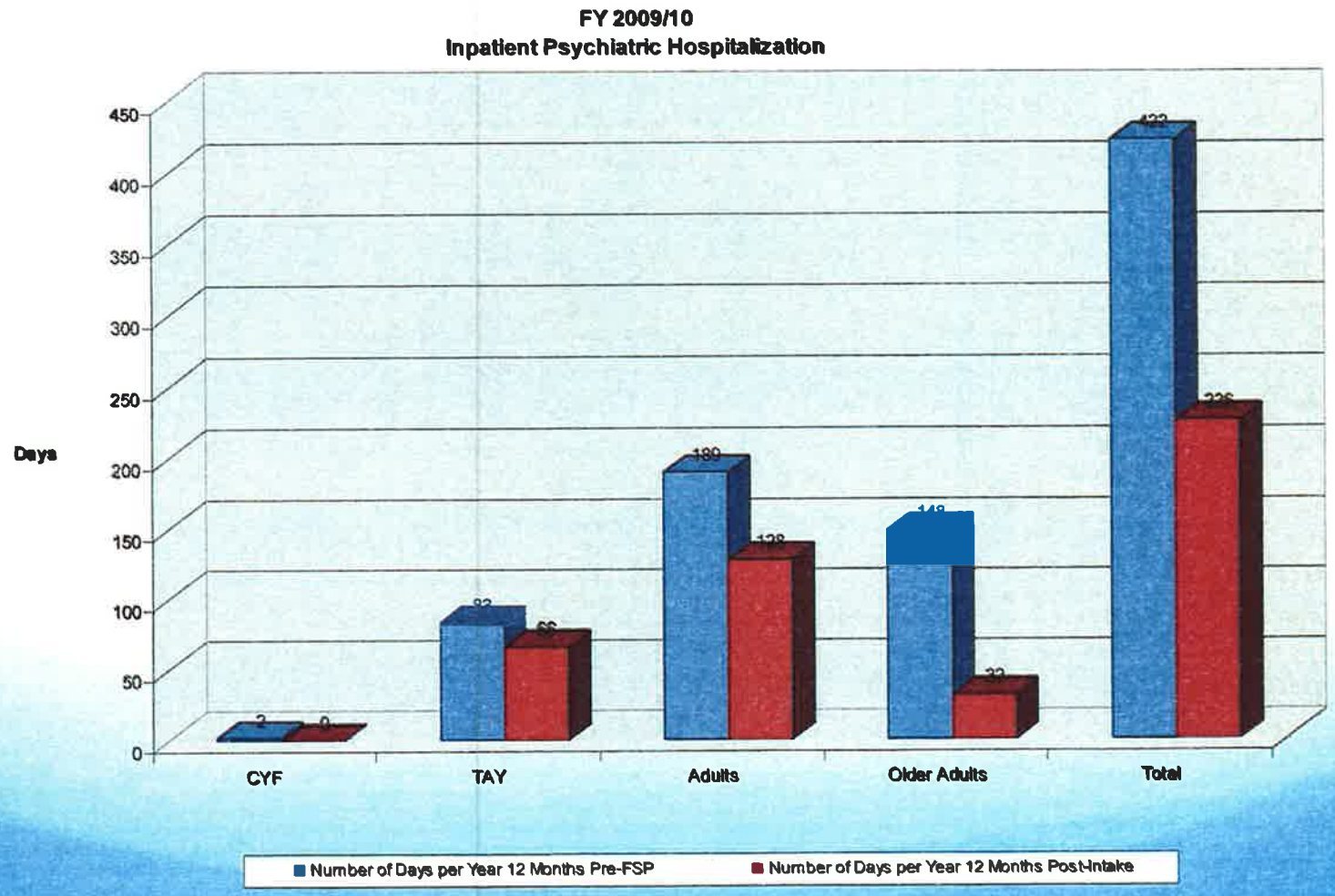
FEWER ARRESTS



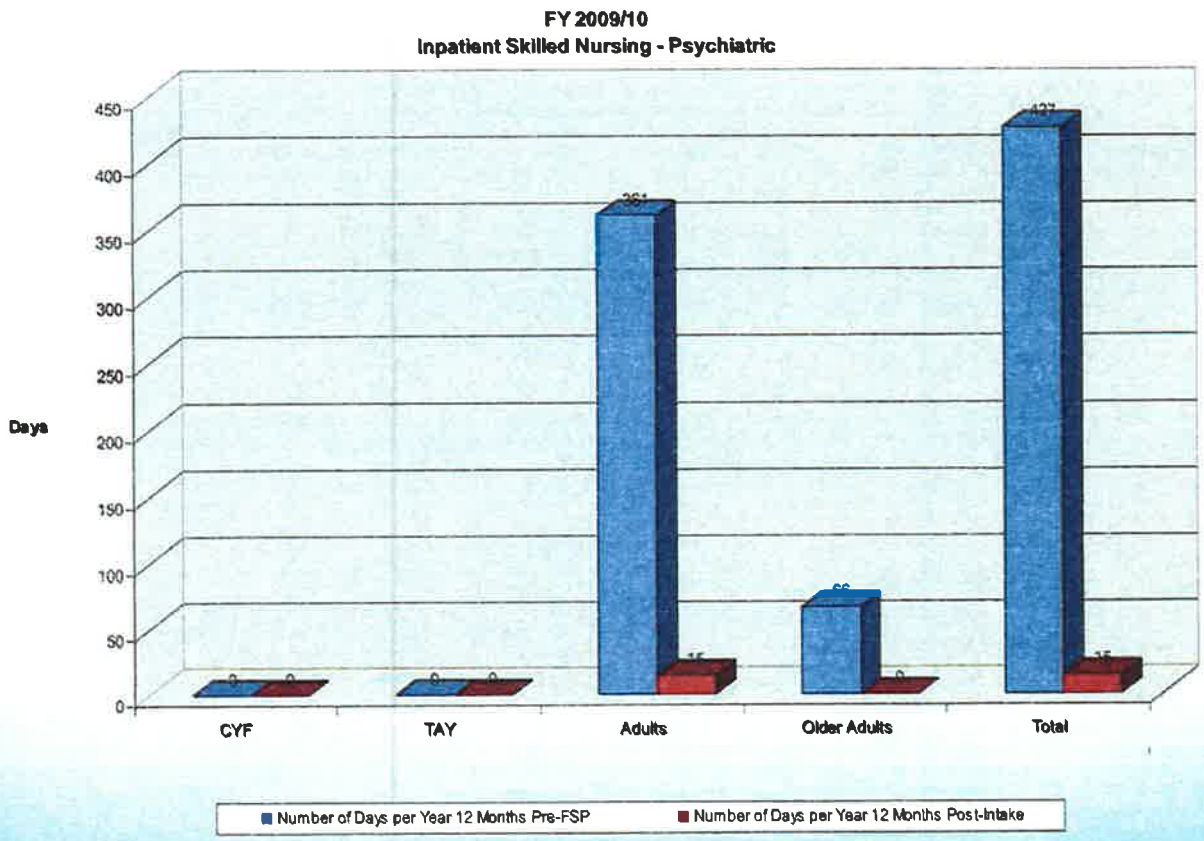
REDUCED TIME IN JAIL



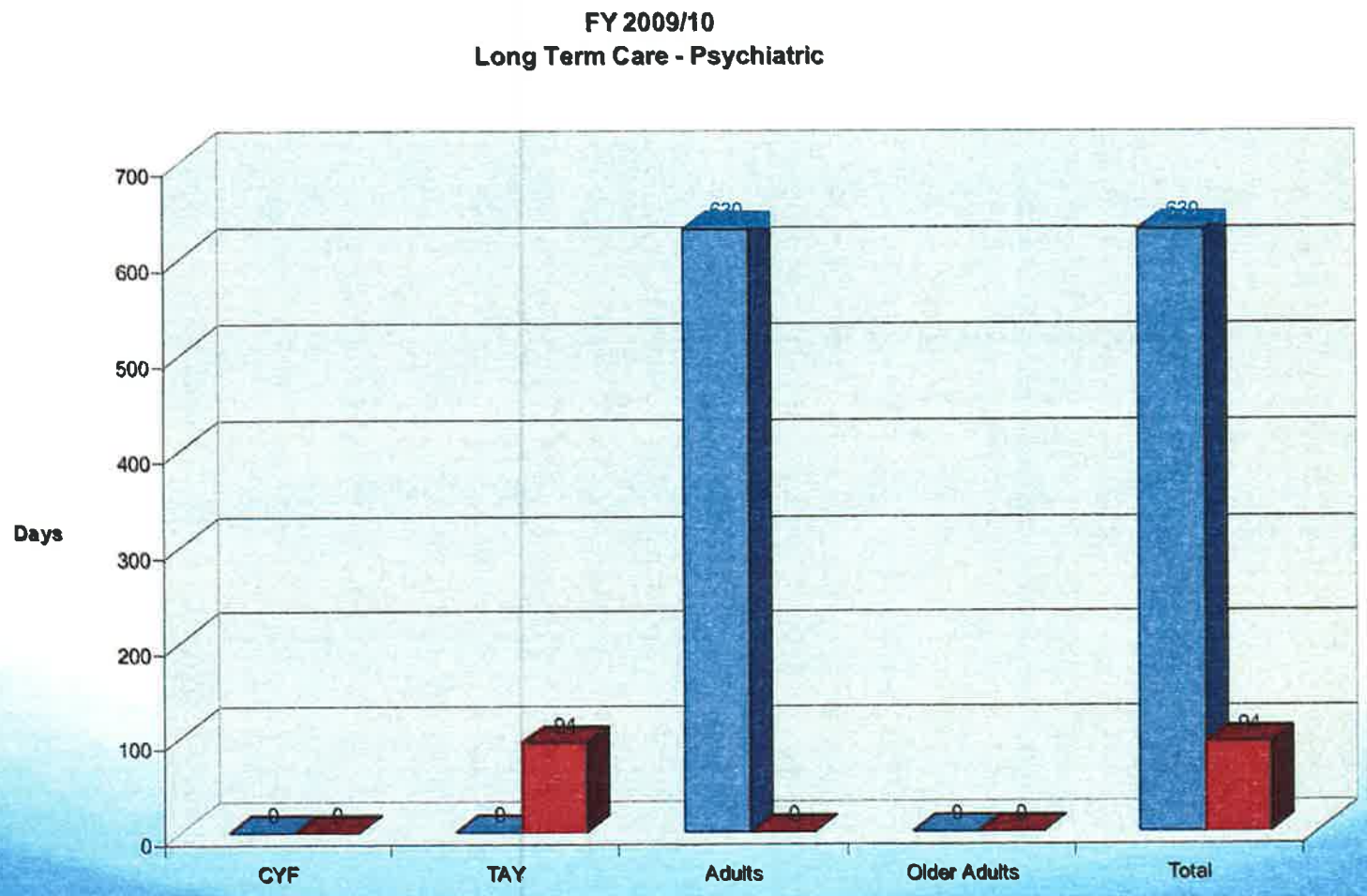
LESS PSYCH INPATIENT CARE



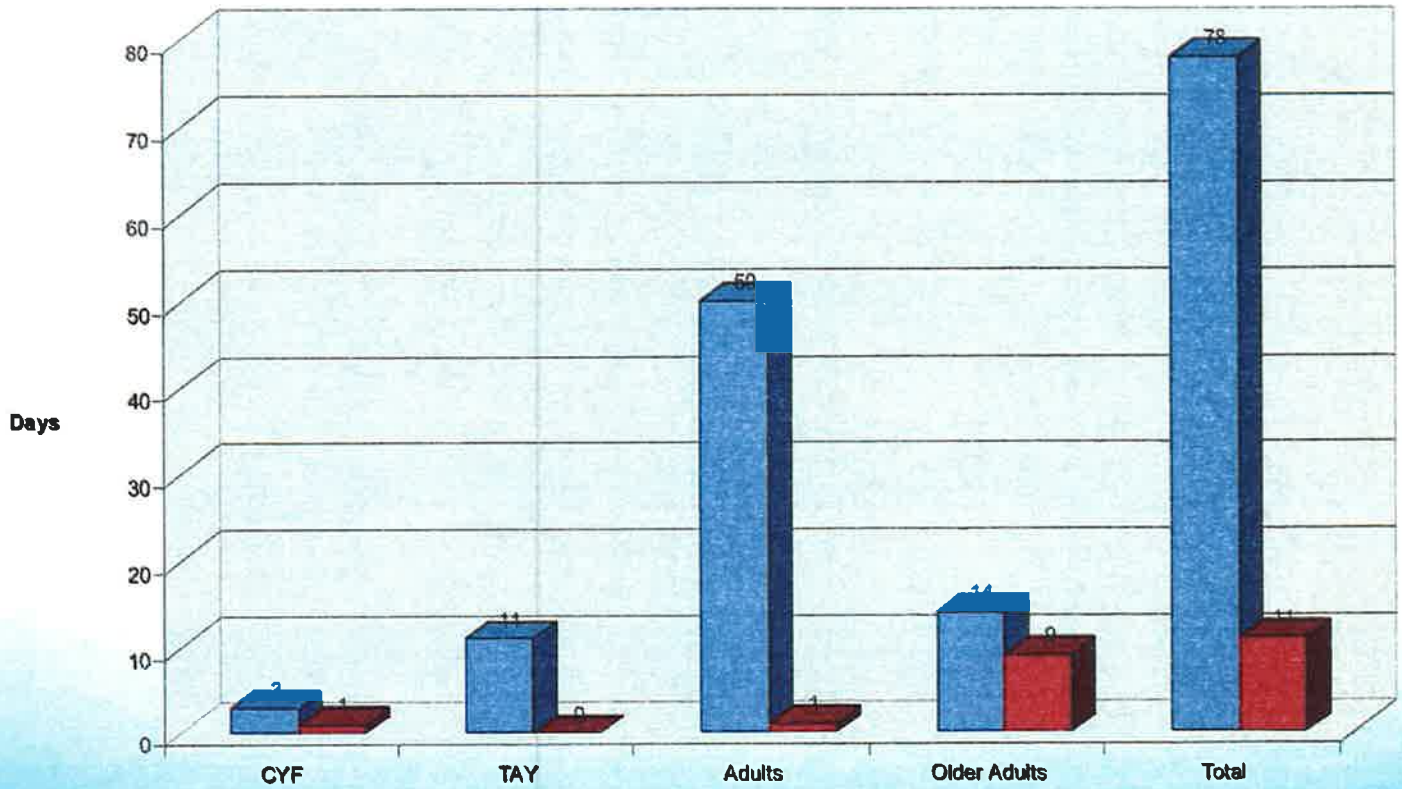
LESS PSYCHIATRIC SKILLED NURSING



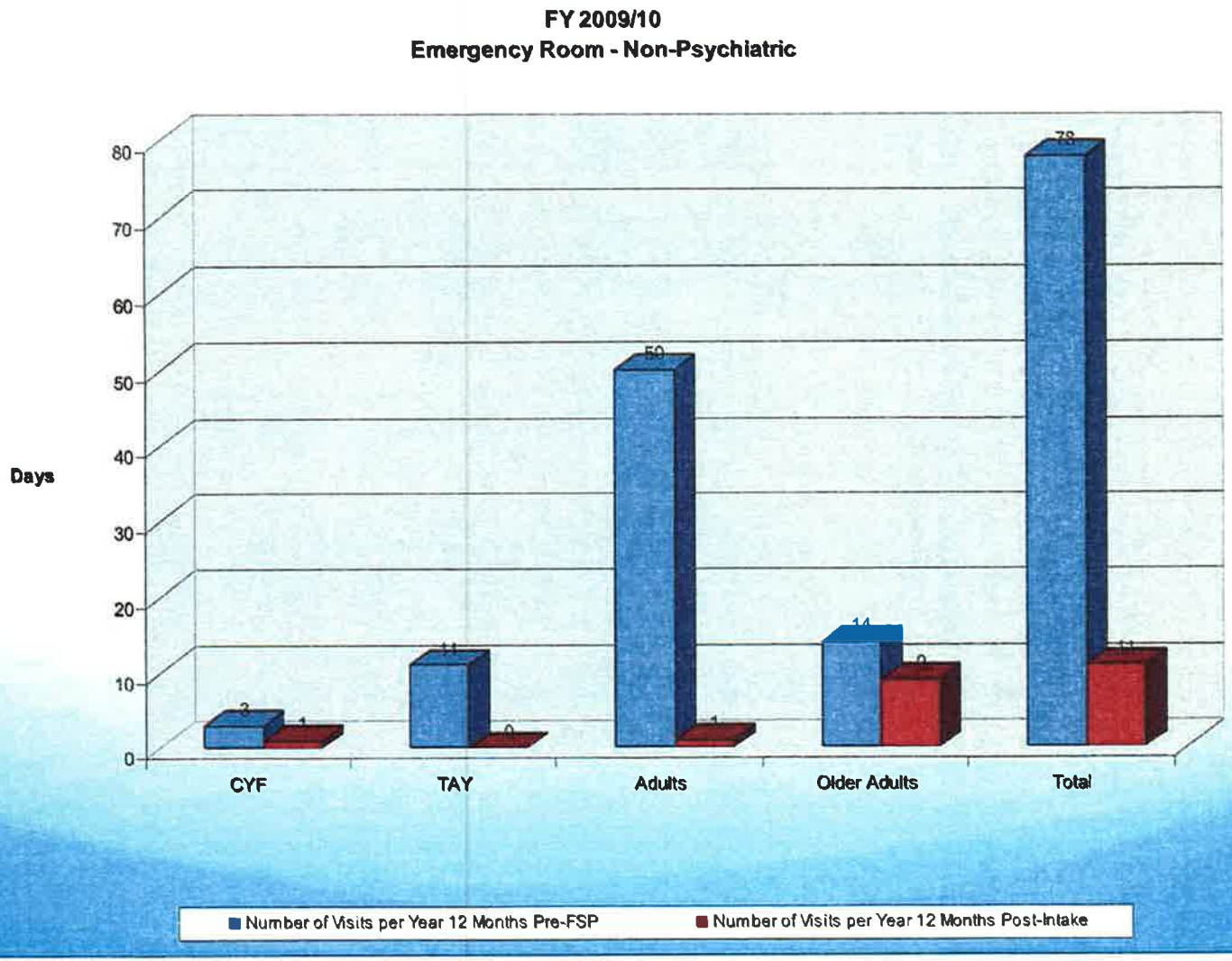
REDUCED LONG-TERM CARE



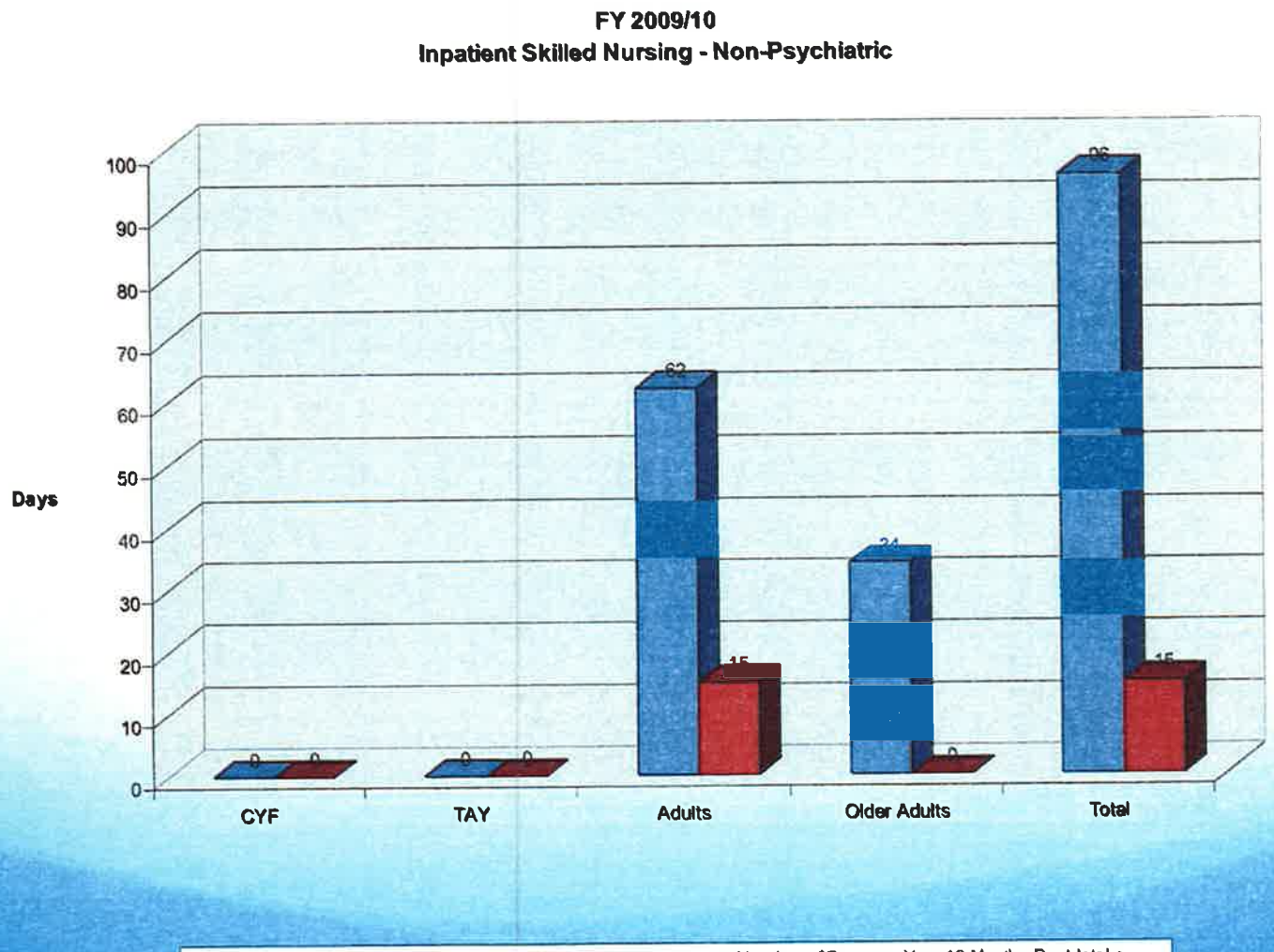
FEWER ER VISITS NON-PSYCH



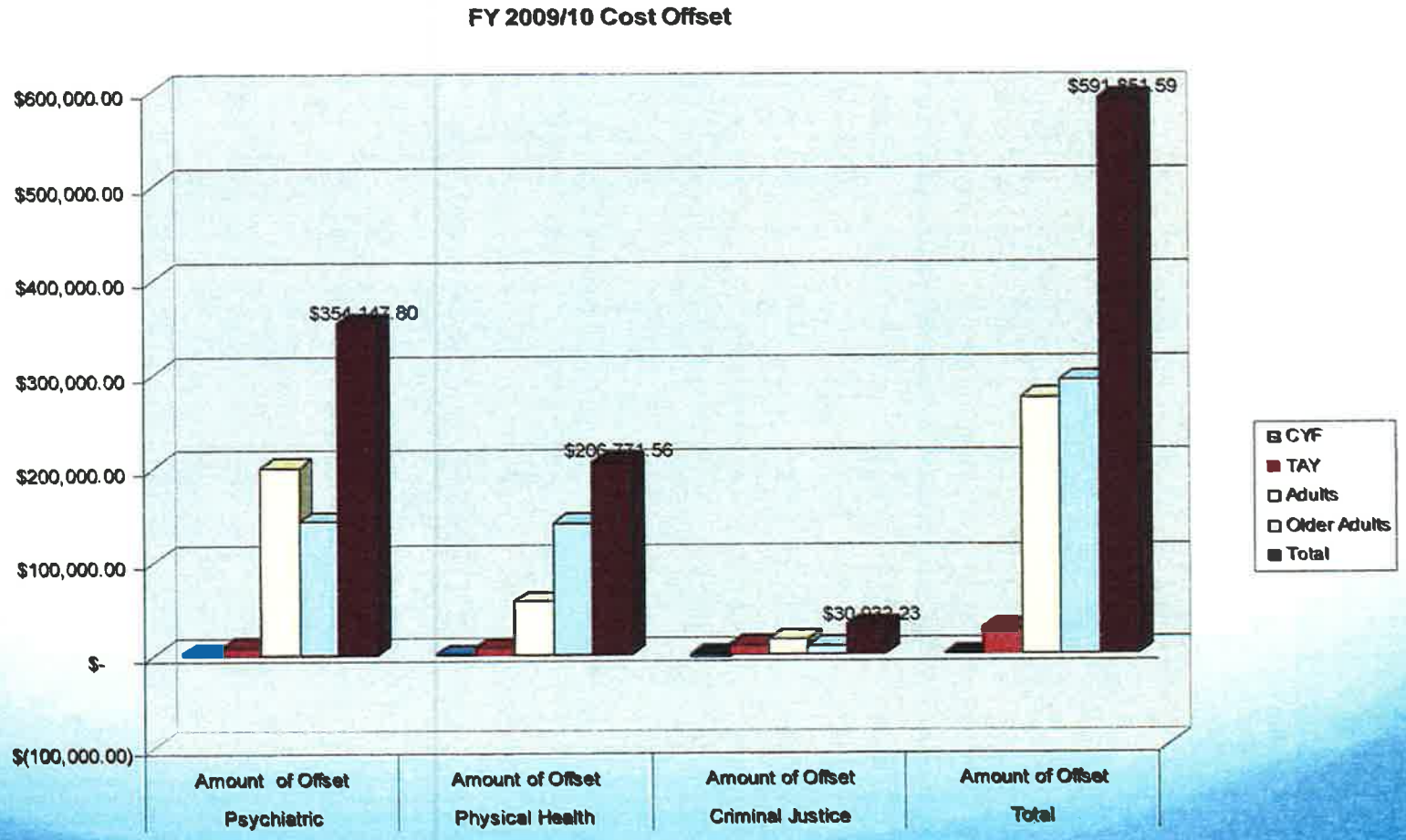
FEWER DAYS IN THE HOSPITAL – NON-PSYCH



LESS NON-PSYCH SKILLED NURSING CARE



09/10 - COST OFFSETS
$591,851



FSP Client Outcomes

- 74% fewer clients visited the Emergency Room after enrolling in FSP programs, with an 86% decrease in the number of visits.
- Clients in FSP programs spent 77% fewer days in jail after enrolling in FSP programs.
- 62% fewer clients were arrested after enrolling in FSP programs, with a 67% reduction in the number of arrests.

* based on FY 2009/10 data provided by the MHSOAC and UCLA/EMT Associates, Inc.

FSP Client Outcomes

- 75% fewer clients were hospitalized in Inpatient Physical Hospitals after enrolling in FSP programs, with a 71% decrease in the number of days spent in those hospitals.
- 67% fewer Adults and Older Adults were hospitalized in Inpatient Skilled Nursing – Non-Psychiatric facilities after enrolling in FSP programs, with an 84% decrease in the number of days spent in those facilities.

* based on FY 2009/10 data provided by the MHSOAC and UCLA/EMT Associates, Inc.

FSP Client Outcomes

- 48% fewer clients were hospitalized in Inpatient Psychiatric Hospitals with a 46% decrease in the number of days spent in those hospitals.
- 50% fewer Adults and Older Adults were placed in Inpatient Skilled Nursing – Psychiatric with a 96% decrease in the number of days spent in those facilities.
- 67% fewer clients were hospitalized in Long Term Care – Psychiatric facilities with an 85% decrease in the number of days spent in those facilities.

* based on FY 2009/10 data provided by the MHSOAC and UCLA/EMT Associates, Inc.

Lake County FSP Cost Offsets

- An analysis done through the Mental Health Services Act Oversight and Accountability Commission for FSP clients served in Lake County during FY 09/10 yielded:
  - 27% offset of FSP costs for Transition Age Youth
  - 158% offset of FSP costs for adults
  - 214% offset of FSP costs for older adults