



COUNTY OF SANTA CLARA  
**Behavioral Health Services**

**MHSA STAKEHOLDER LEADERSHIP COMMITTEE REVIEW OF PROGRAMS**

VIRTUAL ZOOM MEETING

APRIL 9, 2020 2:30-4:00PM

# MHSA SLC REVIEW OF PROGRAMS VIRTUAL MEETING

APRIL 9, 2020

TOPIC	TIME
<b>Virtual Meeting Opens to Accommodate for Technical Difficulties</b> <i>MHSA Staff</i>	1:30 pm
<b>Welcome and Introductions</b> <i>Toni Tullys, MPA, BHSD Director</i>	2:30 pm
<b>MHSA Fiscal Update</b> <i>Virginia Chen, MBA, Senior Departmental Fiscal Officer</i>	2:40 pm
<b>Proposed Program Recommendations</b> <i>Sherri Terao, EdD, BHSD Systems of Care Deputy Director</i>	3:00 pm
<b>Q&amp;A</b>	3:30 pm
<b>Next Steps/Comment Form/Adjourn</b>	4:00 pm

# COVID-19 PANDEMIC & IMPACTS ON BEHAVIORAL HEALTH

- The pandemic has stretched all counties to address multiple and critical client/consumer needs.
- There is an immediate need to provide direct services and funding during the crisis.
- Based on discussions with behavioral health stakeholders, Department of Health Care Services plans to provide an official response/Frequently Asked Questions addressing COVID-19 and the MHSA.
  - *This could include greater flexibility with MHSA funding and timelines.*

# COVID-19 IMPACT ON MHSA FUNDING

- State revenues decreased in March 2020.
- The delay in State Income Tax payments will likely impact MHSA funding in Fiscal Year (FY) 2022.
- The financial impact of COVID-19 may result in additional decreases to MHSA funding.
- BHSD expected an over expenditure of MHSA funding in FY22 & FY23, as a result of expanding services and utilizing unspent MHSA funds.
- In early FY21, BHSD planned to launch a stakeholder process to review and prioritize MHSA services and programs and to balance expenses with funding allocations. These changes would be included in the FY21 MHSA Plan Update.
- In the current environment, a planning process is essential.

## GOALS FOR TODAY'S MEETING

- Review program modifications to Fiscal Year (FY) 2020 MHSa Annual Plan Update (Draft)
- Review proposed program modifications to FY21-23 Three-Year Plan (Draft) with focus on FY21
- Share the proposed FY21-23 Expenditure Plan
- Provide update on current Innovations Projects
- Discuss DRAFT MHSa Three Year Plan and next steps



# MHSA CONSISTS OF FIVE COMPONENTS AND EACH HAS ITS DISTINCT REQUIREMENTS

## Ongoing Funding

- **Community Services and Supports (CSS)**—provides funds for direct services to individuals with severe mental illness. Full Service Partnerships (FSP) are in this category; FSPs provide wrap-around services or “whatever it takes” services to consumers.
- **Prevention and Early Intervention (PEI)**—provides funds to recognize early signs of mental illness and to improve early access to services and programs, including the reduction of stigma and discrimination.
- **Innovation (INN)** – provides funds to evaluate new approaches that increase access to the unserved and/or underserved communities. This component requires State approval (MHSOAC).

## One Time Funding (Counties may continue to fund from CSS distribution)

- **Capital Facilities and Technological Needs (CFTN)**—provides funds for building projects and increasing technological capacity to improve mental illness service delivery.
- **Workforce, Education and Training (WET)**—provides funds to improve and build the capacity of the mental health workforce.

# FINANCIALS FOR FY20 ANNUAL UPDATE AND FY21-23 PLAN

FY19-20	CSS	PEI	INN	WET	CFTN	TOTAL
<b>Unspent from FY19</b>	43,590,751	21,265,183	24,061,454	0	11,642,662	100,560,050
Revenue	73,854,244	18,463,561	4,858,832	0	0	97,176,637
Expenditure	(82,592,455)	(21,388,741)	(11,714,914)	(3,129,104)	(4,711,566)	(123,536,780)
Transfer from CSS	(3,129,104)			3,129,104		0
Prudent Reserve Transfer (req)	1,547,519	498,320				2,045,839
<b>Unspent Balance</b>	<b>33,270,955</b>	<b>18,838,323</b>	<b>17,205,372</b>	<b>0</b>	<b>6,931,096</b>	<b>76,245,746</b>
<b>FY20-21</b>						
Revenue	77,201,068	19,300,267	5,079,018	0	0	101,580,352
Expenditure	(83,773,828)	(25,839,255)	(7,757,736)	(3,129,104)	(5,241,566)	(125,741,489)
Transfer from CSS	(3,129,104)			3,129,104		0
<b>Unspent Balance</b>	<b>23,569,091</b>	<b>12,299,335</b>	<b>14,526,653</b>	<b>0</b>	<b>1,689,530</b>	<b>52,084,609</b>
<b>FY21-22</b>						
Revenue	78,248,204	19,562,051	5,147,908	0	0	102,958,163
Expenditure	(83,773,828)	(25,839,255)	(5,937,067)	(3,129,104)	(5,241,566)	(123,920,820)
Transfer from CSS	(6,681,140)			3,129,104	3,552,036	0
<b>Unspent Balance</b>	<b>11,362,327</b>	<b>6,022,131</b>	<b>13,737,495</b>	<b>0</b>	<b>0</b>	<b>31,121,952</b>
<b>FY22-23</b>						
Revenue	80,138,540	20,034,635	5,272,272			105,445,448
Expenditure	(83,773,828)	(25,839,255)	(4,372,585)	(3,129,104)	(1,241,566)	(118,356,338)
Transfer from CSS	(4,370,670)			3,129,104	1,241,566	0
<b>Unspent Balance</b>	<b>3,356,369</b>	<b>217,511</b>	<b>14,637,182</b>	<b>0</b>	<b>0</b>	<b>18,211,062</b>

\* FY20 includes the transfer in excess of the PR maximum threshold to CSS and PEI

# FY20 MHSA ANNUAL PLAN UPDATE

## CHANGES: PROGRAMS FOR CHILDREN, YOUTH, AND FAMILIES

### Increase Capacity

- Increased capacity to facilitate implementation of Children and Transition Age Youth Intensive Full Service Partnerships (IFSP).
- Increased allocation to the Youth Therapeutic Integrated Program (YTIP) to provide more intensive and integrated services.
- Increased Families and Children's outpatient services caseloads at two critical service locations, Alum Rock and Uplift, to meet both network adequacy and timeliness as required by Department of Health Care Services.

### Redesign and Realign

- Redesigned the Children and Youth Mobile Response and Stabilization Services Children in Youth and Families Cross Systems Initiatives Division to efficiently address youth and children related crisis calls to the County's Call Center.
- Exploring the TAY Triage to Support Re-entry Program to meet the needs of youth coming out of juvenile detention, Emergency Psychiatric Services and hospital stays.
- Transferred the clinical portion of School Linked Services back into Prevention and Early Intervention to appropriately serve children and family needs.



# FY20 MHSA ANNUAL PLAN UPDATE

## CHANGES: PROGRAMS FOR ADULT/OLDER ADULT SYSTEM OF CARE

### Increase Capacity

- Increased capacity to facilitate implementation of Adult and Older Adult Intensive Full-Service Partnerships (IFSP) and Assertive Community Treatment (ACT).
- Increased capacity and allocation to facilitate implementation of the Forensic Assertive Community Treatment (FACT) for justice-involved adults with an SMI.
- Increased Adult/Older Adult outpatient services caseloads at two critical service locations, Gardner and Goodwill, to meet both network adequacy and timeliness requirements.
- Increased allocation for the Transitional Housing Unit (Rainbow) for 15 women coming out of custody and receiving mental health services (expansion of services).

# FY21-23 MHSA PROGRAM AND EXPENDITURE PLAN

## PROGRAM UPDATES: ADULT/OLDER ADULT SYSTEM OF CARE

*Older Adult Collaboration with Senior Nutrition Centers:* discontinued

*Independent Living Facilities Project:* discontinued

*Voluntary County Contribution to CalMHSA for PEI:* discontinued

*Elders' Storytelling and Older Adult In-Home Peer Respite:* RFP issued and award in process, reduced allocation

*Clinical Case Management Team for Older Adults:* Currently in planning status, county-operated

*Intensive FSP Services for Older Adults:* in place



# FY21-23 MHSA PROGRAM AND EXPENDITURE PLAN

## PROPOSED CHANGES: PROGRAMS FOR ADULT/OLDER ADULT SYSTEM OF CARE

### **Modification**

- Enhance supplemental health care beds for clients/consumers stepping down from IMD (AOA) and released from jail (CJS) with length of stay for two years or more.

### **Addition**

- Add a Homeless Engagement Access Team (HEAT) to include ongoing street-based outreach, engagement and mental health treatment for mentally ill homeless individuals who have been difficult to engage and linking them to appropriate treatment and stabilizing services which may include interim housing (MHSA Housing)
- Add 10 Mental Health Triage beds at the Sobering Station for homeless consumers exhibiting mental health symptoms that do not meet 5150 requirements



# FY21-23 MHSA PROGRAM AND EXPENDITURE PLAN

## STATEWIDE MODIFICATIONS: WORKFORCE EDUCATION AND TRAINING

### **WET programs will be implemented by Regional Partnerships:**

- Pipeline Development
- Undergraduate College & University Scholarships
- Clinical Master & Doctoral Graduate Education Stipends
- Loan Repayment Program
- Retention Activities

### **WET Funding for Regional Partnerships:**

- County of Santa Clara will send matching contribution during FY2022 in order to participate in regional WET partnership



## INNOVATION PROJECTS

Project	Description	Status
<b>Client and Consumer Employment</b>	Implements Individual Placement & Support/Supported Employment (IPS/SE) model, views employment as a critical element to recovery and wellness	<i>Continuing - Project extended to 2/1/2023</i>
<b>Faith-Based Training and Supports</b>	Develops customized behavioral health training plans for faith/spiritual leaders and behavioral health providers, goal to increase knowledge, skills of faith leaders and increases behavioral health services providers' understanding of the role of spirituality in client/consumer wellness/recovery	<i>Continuing - Project extended to 10/1/2022</i>
<b>Psychiatric Emergency Response Team (PERT) and Peer Linkage</b>	Reduces utilization of EPS and acute psychiatric hospitalization services for County of Santa Clara residents experiencing acute mental health crises. Pairs law enforcement officer with clinician and connects to post crisis peer support services	<i>Continuing - Project extended to 6/1/2022</i>
<b>Allcove (Ramp up and Implementation)</b>	Integrated center with health and mental health care, on-site psychiatric services, alcohol and drug treatment, education, employment, peer support services to meet the needs of youth ages 12-25 with emerging mental health issues	<i>Ramp up and Implementation Continuing – Ramp up budget extended to 11/15/20</i>

## INNOVATION PROJECTS

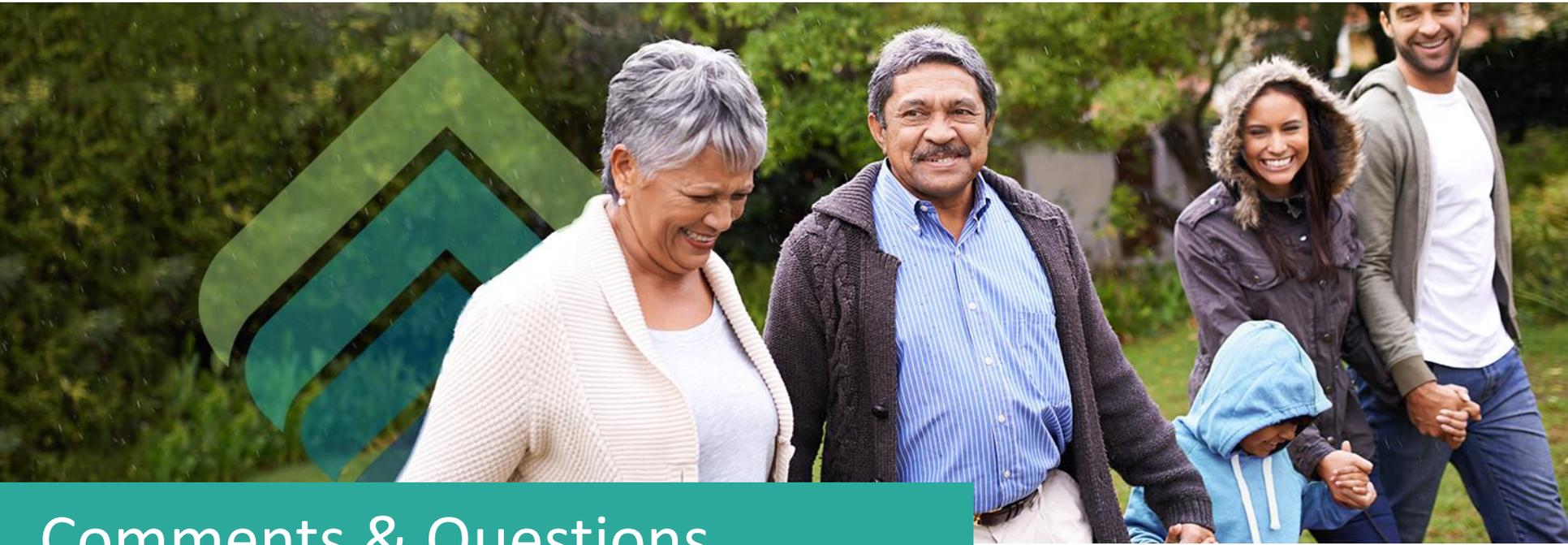
Project	Update	Status
<b>Multicultural Community Center</b>	<ul style="list-style-type: none"> <li>Challenges finding a site for community center</li> </ul>	<p><i><b>MCC INN project discontinued</b></i>  <i>Using PEI funding to establish 5 Cultural Wellness Centers with co-located services</i></p>
<b>Tech Suite Cohort</b>	<ul style="list-style-type: none"> <li>CalMHSA Tech Suite cohort has experienced challenges addressing liability, privacy, online trolls, lack of training of peer listeners, lack of connection to local crisis support services, counties in cohort have not implemented any apps to date</li> </ul>	<p><i><b>Tech Suite Cohort INN discontinued</b></i>  <i>BHSD independently exploring technology apps</i></p>
<b>Reach Out, Engage, and Connect</b>	<ul style="list-style-type: none"> <li>Friendly calling outreach program to engage isolated older adults in behavioral health services will be incorporated into an existing program/older adult system of care</li> </ul>	<p><i><b>REC INN discontinued</b></i>  <i>Incorporated into existing program</i></p>
<b>Room Match</b>	<ul style="list-style-type: none"> <li>Partnership explored with Office of Supportive Housing (OSH) and did not move forward</li> </ul>	<p><i><b>Room Match INN discontinued</b></i>  <i>OSH currently funding similar Room Match project in Santa Clara County</i></p>

## INNOVATION PROJECTS AND NEW SUBMISSIONS

- MHSOAC approved no-cost extensions of approved BHSD INN Projects
- BHSD released request for new INN submissions (N=23 ideas submitted)
- Compile/summarized new INN submissions
- Review all submissions and convene an SLC and stakeholders meeting as part of the MHSA Planning Process in July or August 2020

## Current Timeline

Date	Activity	Goals
<p><b>April 9, 2020</b> 2:30pm – 4:00pm</p>	<p><b>Virtual MHSA SLC Meeting</b> BHSD is inviting you to a scheduled Zoom meeting. <a href="https://zoom.us/j/946132517">https://zoom.us/j/946132517</a></p> <p>Meeting ID: 946 132 517 +16699006833,,946132517# US (San Jose) +14086380968,,946132517# US (San Jose)</p>	<p>Review of Programs and Recommendations</p>
<p><b>April 11 – May 10, 2020</b></p>	<p><b>30-Day Public Comment Period</b></p>	<p>Review of MHSA Draft Plans, submit public comments: <a href="https://www.surveymonkey.com/r/2020MHSA_PublicCommentForm">https://www.surveymonkey.com/r/2020MHSA_PublicCommentForm</a> <b>or</b> Email Comments Directly to: <a href="mailto:MHSA@hhs.sccgov.org">MHSA@hhs.sccgov.org</a></p>
<p><b>May 11, 2020</b> 2:30-3:30pm</p>	<p><b>Virtual Public Hearing</b> <i>hosted by</i> Behavioral Health Board (depending on Governor’s executive order and County’s Health Officer order of shelter in place)</p>	<p>Request approval of Draft Plans by Behavioral Health Board</p>
<p><b>June 2, 2020</b></p>	<p><b>Request Board of Supervisor Approval/Adoption</b> of MHSA Draft Plans</p>	<p>Required by MHSA regulations</p>
<p><b>June 30, 2020</b></p>	<p><b>Submission of Adopted/Approved Plans to DHCS and MHSOAC</b></p>	<p>In accordance with state regulations</p>



# Comments & Questions

## THANK YOU

Toni Tullys, MPA  
Director, Behavioral Health Services

Sherri Terao, EdD  
Deputy Director, BHSD Systems of Care

Todd Landreneau, PhD, CHC, CPHQ  
Deputy Director, BHSD Managed Care Services

Virginia Chen, MBA  
Senior Departmental Fiscal Officer

**For questions, additional information or other concerns, contact:**

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