



COUNTY OF SONOMA

575 ADMINISTRATION
DRIVE, ROOM 102A
SANTA ROSA, CA 95403

SUMMARY REPORT

Agenda Date: 11/5/2024

To: County of Sonoma Board of Supervisors

Department or Agency Name(s): Department of Health Services

Staff Name and Phone Number: Jennifer Solito, 707-565-4774; Jan Cobaleda-Kegler, 707-565-5157

Vote Requirement: 4/5th

Supervisorial District(s): Countywide

Title:

Mental Health Services Act Fiscal Year 2024-2025 Annual Plan Update and Expenditure Plan with Fiscal Year 2022-2023 Program Report

Recommended Action:

- A. Adopt the Mental Health Services Act Fiscal Year 2024-2025 Annual Plan Update with Fiscal Year 2022-2023 Program Report.
- B. Authorize the Director of Health Services, or designee, to execute the first amendment to an agreement with Seneca Family of Agencies, subject to review and approval by counsel, for mental health services for youth, adding \$1,000,000 for a new not-to-exceed amount of \$2,050,000 for the term of July 1, 2024 through June 30, 2025; and, authorize the Director of Health Services, or designee, to execute any future modifications to the contract in an amount not too exceed \$100,000 from the first amendment amount and which does not significantly change the scopes of service in order to program unanticipated revenues and/or to address increased service needs through June 30, 2025, subject to review and approval by County Counsel.
- C. Authorize the Director of Health Services, or designee, to execute an agreement with Mission Consulting, subject to review and approval by counsel, in an amount not to exceed \$300,000 for the term of November 1, 2024 through June 30, 2026, to assist with the planning and implementation of Proposition 1; and, authorize the Director of Health Services, or designee, to execute any future modifications to the contract in an amount not too exceed \$100,000 from the original amount and which does not significantly change the scope of service in order to program unanticipated revenues and/or to address increased service needs through June 30, 2026, subject to review and approval by County Counsel..
- D. Adopt a budget resolution adjusting the fiscal year 2024-2025 adopted budget, increasing appropriations in the Department of Health Services by \$1,000,000 to reflect revenue and expenditures associated with mental health services for youth agreements and amendments.

(4/5th Vote Required)

Executive Summary:

In November 2004, California voters approved Proposition 63, the Mental Health Services Act (MHSA). The Act imposes a one percent income tax on personal income over \$1 million. Much of the funding is provided to counties to fund mental health programs consistent with their local plans. As required by California Welfare

and Institutions Code Section 5847, each county mental health program must prepare and submit a three-year program and expenditure plan and annual update, adopted by the county Board of Supervisors, to the Mental Health Services Oversight and Accountability Commission and the California Department of Health Care Services (DHCS) within 30 days of adoption.

MHSA-funded programs provide a full array of services in communities throughout Sonoma County, with a focus on wellness and recovery. The Department of Health Services (“DHS” or “the Department”), along with community partners, have created a behavioral health system that is peer, client, and family member driven, is culturally responsive and linguistically appropriate, and promotes a vision in which recovery is possible.

The enclosed MHSA Annual Program Report includes outcomes for FY 2022-2023, and the plan and budget for 2024-2025. The Draft FY 2024-2025 MHSA Annual Update and Expenditure Plan and FY 2022-2023 Program Report was posted and emailed for public review on September 17, 2024. Virtual and in person meetings were conducted to present to stakeholders for review and receive feedback.

Discussion:

DHS recommends Board adoption of the Draft FY 2024-2025 MHSA Annual Update and Expenditure Plan and FY 2022-2023 Program Report. The draft Plan is provided as Attachment 2 to this report and is posted on the DHS website: [Sonoma County MHSA Draft FY 2024-2025 Annual Plan Update < https://sonomacounty.ca.gov/Main%20County%20Site/Health%20and%20Human%20Services/Health%20Services/Documents/Behavioral%20Health/mental-health-services-act/FY%2024-25-Annual-Update-DRAFT-10092024.pdf >](https://sonomacounty.ca.gov/Main%20County%20Site/Health%20and%20Human%20Services/Health%20Services/Documents/Behavioral%20Health/mental-health-services-act/FY%2024-25-Annual-Update-DRAFT-10092024.pdf).

Upon Board adoption of the Draft FY 2024-2025 MHSA Annual Plan Update with FY 2022-2023 Program Report, the plan will be sent to the California Department of Health Care Services and the Mental Health Services Oversight and Accountability Commission within 30 days of Board approval, per state regulations. The Mental Health Services Act provides funding to expand community mental health services in five components, each of which addresses specific goals for priority populations, key community mental health needs, and age groups that require special attention. The MHSA Report is organized in the context of these five funding components:

Community Services and Supports - Provides enhanced mental health services for Seriously Emotionally Disturbed children and youth and Seriously Mentally Ill adult populations.

- **Prevention and Early Intervention** - Programs that prevent mental illnesses from becoming severe and disabling, emphasizing improvement on timely access to services for underserved populations.
- **Innovation** - Novel, creative and/or ingenious mental health practices/approaches that are expected to contribute to learning, which are developed within communities through a process that is inclusive and representative, especially of unserved and underserved individuals.
- **Capital Facilities and Technological Needs** - Works towards the creation of facilities that are used for the delivery of Mental Health Services Act services to mental health clients and their families, or for administrative offices. Funds may also be used to support an increase in peer-support and consumer run facilities, development of community-based settings, and the development of a technological infrastructure for the mental health system to facilitate the highest quality and cost-effective services and supports for clients and their families.
- **Workforce Education and Training** - The goal of the Workforce Education and Training component is to develop a diverse workforce. Clients and families/caregivers are given training to help others by providing skills to promote wellness and other positive mental health outcomes. They can work

collaboratively to deliver client- and family-driven services, provide outreach to unserved and underserved populations, as well as services that are linguistically and culturally competent and relevant, and include the viewpoints and expertise of clients and their families/caregivers.

The FY 2024-2025 Annual Plan Update includes an Executive Summary, details on the Community Program Planning Process, highlights the changes from the FY 2023-2026 Three-Year Plan, information on Behavioral Health Services Act, and the FY 2024-2025 Expenditure Plan.

The MHSA Plan describes discussions with the community during the extensive integrated planning process, as well as ongoing feedback from stakeholders from several venues, including MHSA Steering Committee, Community Program Planning Workgroup, General Stakeholders, Listening Sessions, and Mental Health Board meetings.

The MHSA Program Report includes outcomes for the MHSA funded programs in FY 2022-2023. The Annual Program Report provides a description of Mental Health Services Act-funded programs, clients served, and program performance outcome data for FY 2022-2023.

The draft MHSA 2024-2025 Annual Plan Update and Expenditure Plan and Program Report for FY 2022-2023 was posted and emailed for public comment on September 17, 2024, to start the 30-day public comment period. Additionally, in-person and virtual meetings were conducted on August 12, 2024, August 14, 2024 and October 15, 2024 to present the plan to stakeholders for review and feedback. The public comment period concluded at the public hearing hosted by the Mental Health Board on October 15, 2024. The public hearing also provided the community an opportunity to provide feedback about the plan.

The FY 2024-2025 Annual Plan Update includes the following changes from the FY 2023-2026 Three-Year Plan:

Component: Community Services and Supports

Community Services and Supports served 12,041 individuals through 18 programs. For a breakdown of how many individuals were served by program and service type, see Attachment 5 - Community Services and Supports & Prevention and Early Intervention Services Breakdown.

Full-Service Partnership (FSP) teams:

The FSP teams provide wrap-around services to clients in our system of care with the most serious mental health impairments and the majority of the Community Services and Supports funds must be allocated to the FSP teams.

- **Adding a Full-Service Partnership (FSP) Team for Unhoused Adults:** This FSP will serve adults who are homeless or at risk of being homeless with serious mental health challenges. This program is budgeted at \$1,700,000 annually.

The addition of this FSP team will provide wrap around, intensive recovery oriented behavioral health services and housing support for 75 individuals. The FSP team will collaborate with clients to attain the client's goals.

- **Adding a Transitional Age Youth (TAY) Housing Program:** The Behavioral Health Division will conduct a Request for Proposal (RFP) to contract with a provider to house TAY Full-Service Partnership (FSP) clients. The RFP will consist of funds to secure a house or facility and provide supportive services. The FY 2024-2025 is budgeted at \$2,300,000, and there will be on going annual expenses of \$300,000.

This facility will provide temporary and/or permanent supported housing for a total of 6-20 Transition Age Youth (18-25 year olds) Full-Service Partnership clients.

Component: Prevention and Early Intervention (PEI)

Prevention and Early Intervention served 9,532 individuals through 13 programs. For a breakdown of how many individuals were served by program and service type, see Attachment 5 - Community Services and Supports & Prevention and Early Intervention Services Breakdown.

- Adding **Peer and Family Support Services** will work in conjunction with the new Behavioral Health School Partnership program. Funding the Peer and Family Support Services of this program is budgeted at \$200,000 annually.

The Peer and Family Support Services is an Early Intervention program that will support 50-100 young people in accessing peer support from available community organizations, provide a safe space to talk about mental health symptoms in a non- judgmental setting, assist youth in learning about available options for treatment, if desired, and assist youth in navigating mental health treatment systems.

- Adding **Seneca Wraparound (WRAP) Program:** This Early Intervention program will provide services for children and youth who are involved in foster care, the juvenile justice system, and/or who are at risk of out of home placement or psychiatric hospitalization. This program is budgeted at \$1,000,000 annually. Action B of this staff report requests Board authority to amend the current agreement with Seneca, subject to review and approval by counsel, to add this program and associated funding.

The addition of this Seneca WRAP program will serve 73 children (0-15 years old) and 32 youth (16 to 25-year-olds). The program encourages coordination among agencies, disciplines, and communities to enhance outcomes for youth and families. WRAP services aim to prevent children and youth from going to higher levels of care by increasing resilience and recovery, teaching positive coping skills to youth, and improving caregiver ability to successfully support the youth in their care. WRAP services are designed to be short term, intensive interventions lasting 6 - 12 months.

Proposition 1 Impacts:

The Department is preparing for the transition of MHSA and the implementation of Proposition 1, also known as Behavioral Health Services Act (BHSA), to be fully operational by July 1, 2026. BHSA will change the funding components of the 1% tax and expand the target population to support individuals with moderate to severe substance use disorders (SUD) only. BHSA will transition from 5 MHSA funding components to 3 BHSA funding categories commencing with the 2026-2029 fiscal years integrated plan. BHSA prioritizes 30% of local BHSA funding for housing; and requires half of housing funding to be earmarked for individuals meeting the federal definition of “chronically homeless.” The Act also increases the state’s allocation from 5% to 10% of the tax funds resulting in the redirection of local funds to: a state-administered behavioral health workforce initiative and state-administered population-based prevention program.

To assist with the planning and implementation of BHSA, the Department is requesting, via Action C of this staff report, to contract with Mission Consulting. Mission Consulting was selected to be on the list of qualified consultants by the County Human Resources’ Organizational Development Consultant RFP (SC001-0000001791). If approved, the Department will enter into a two-year contract for \$300,000, subject to review

and approval by counsel, in the second quarter of FY 2024-2025. The scope of work includes project planning and implementation, research and analysis of BHSA requirements, high level gap analysis, BHSA transition planning and support, MHSA capacity assessment, and summary report.

Strategic Plan:

This item directly supports the County’s Five-year Strategic Plan and is aligned with the following pillar, goal, and objective.

Pillar: Healthy and Safe Communities

Goal: Goal 1: Expand integrated system of care to address gaps in services to the County’s most vulnerable.

Objective: Objective 3: Assess and determine the most appropriate community response program to respond to individuals in the community experiencing a psychiatric emergency, including an analysis of whether to expand the Mobile Support Team, and bring a recommendation

Racial Equity:

Was this item identified as an opportunity to apply the Racial Equity Toolkit?

No

Prior Board Actions:

On December 12, 2023 the Board adopted the Mental Health Services Act 2023-2026 Three-Year Plan & Expenditure Plan and the Annual Program Report for 2022-2022.

On January 24, 2023 the Board adopted the Mental Health Services Act 2022-2023 Program Plan Update & Expenditure Plan and the Annual Program Report for 2020-2021.

On December 7, 2021, the Board adopted the Mental Health Service Act Program Plan Update and Expenditure Plan for 2021-2022 and Annual Program Report for 2019-2020.

On June 9, 2020, the Board adopted the Mental Health Services Act Three-Year Plan for 2020-2023 and Annual Program Report for 2018-2019.

On January 8, 2019 the Board adopted the Mental Health Services Act Update for 2018-2019 and Annual Program Report for 2016-2017.

FISCAL SUMMARY

Expenditures	FY24-25 Adopted	FY25-26 Projected	FY26-27 Projected
Budgeted Expenses	\$150,000	\$150,000	
Additional Appropriation Requested	\$1,000,000		
Total Expenditures	\$1,150,000	\$150,000	
Funding Sources			
General Fund/WA GF			
State/Federal	\$500,000		
Fees/Other			

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Use of Fund Balance	\$650,000	\$150,000	
General Fund Contingencies			
Total Sources	\$1,150,000	\$150,000	

Narrative Explanation of Fiscal Impacts:

This item will increase the FY 2024-2025 adopted budget by \$1,000,000 to support the Seneca contract increase, as outlined in Action B. The funding sources will be split equally between the MHSA PEI Fund balance (\$500,000) and the required local match of Federal Financial Participation (FFP) (\$500,000).

The total \$700,000 use of MHSA Fund Balance includes \$200,000 for the FY 2024-2025 budgeted Mission Consulting contract services (Action C) and an additional request to increase appropriations of \$500,000 to support the Seneca contract increase (Action B).

The remaining \$100,000 of the total \$300,000 Mission Consulting contract will be included in the FY 2025-2026 budget request and funded through the MHSA Fund balance.

Staffing Impacts:			
Position Title (Payroll Classification)	Monthly Salary Range (A-I Step)	Additions (Number)	Deletions (Number)

Narrative Explanation of Staffing Impacts (If Required):

N/A

Attachments:

Attachment 1 - Budget Resolution

Attachment 2 - Mental Health Services Act Fiscal Year 2024-2025 Annual Plan Update with Fiscal Year 2022-2023 Program Report

Attachment 3 - Draft Agreement with Seneca Family of Agencies

Attachment 4 - Draft Agreement with Mission Consulting

Attachment 5 - Community Services and Supports & Prevention and Early Intervention Services Breakdown

Related Items "On File" with the Clerk of the Board:

None