



# COUNTY OF SONOMA

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

## SUMMARY REPORT

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**Agenda Date:** 12/12/2023

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**To:** County of Sonoma Board of Supervisors

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

**Staff Name and Phone Number:** Tina Rivera, 707-565-4774; Melissa Ladrech, 707-565-4909

**Vote Requirement:** 4/5th

**Supervisorial District(s):** Countywide

**Title:**

Mental Health Services Act Expenditure Plan and Staffing Allocations

**Recommended Action:**

- A) Adopt the Mental Health Services Act 2023-2026 Three-Year Program Plan and Expenditure Plan.
- B) Adopt a personnel resolution amending the Department of Health Services Department Allocation list to add 4.00 Full-Time Equivalent Senior Client Support Specialist allocations to support the Sonoma County Behavioral Health Access Team and the Collaborative Treatment and Recovery Team (CTRT) effective December 12, 2023.
- C) Adopt a resolution authorizing budgetary adjustments to the fiscal year 2023-2024 adopted budget, programming \$460,000 in Mental Health Services Act Community Support Services Fund balance to support the requested position allocations. (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 in excess of \$1 million. The County of Sonoma MHSA estimated June 30, 2024, available balance net of the most recent ongoing programming is \$18.3 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.

The Behavioral Health Division within the Department of Health Services (“DHS” or “the Department”), is presenting to the Board of Supervisors the draft MHSA FY 23-26 Three-Year Plan and Expenditure Plan (MHSA FY 23-26 Three Year Plan) and Program Report for FY 21-22, which was posted and emailed for public review on May 22, 2023. Following the 30-day public comment period the Mental Health Board hosted a public hearing on the plan on June 20, 2023. As part of its expenditure plan, the Department is requesting the addition of 4.0 FTEs in the Senior Client Support Specialist job classification allocation as part of this item.

To cover the labor costs of the additional FTE allocation for FY 23/24, DHS will allocate \$460,000 in funds from the Community Support Services portion of MHSA funding. Future ongoing annual increased staffing costs of \$740,000 will be financed with a mix of Federal Financial Participation funds and MHSA Community Support Services funding.

**Discussion:**

**MHSA FY 2023-2026 Three-Year Plan and Expenditure Plan**

DHS recommends Board adoption of the Mental Health Services Act FY 2023-2026 Three-Year Plan and Expenditure Plan and Annual Program Report for FY 2021-2022 (MHSA Report). Each year counties are required to provide a 3-Year Plan or Annual Plan Update and Expenditure Plan accompanied by a Program Report for a previous year in order to comply with MHSA regulations and continue to be eligible to receive MHSA allocations. The plan was publicly posted for 30 days to receive comments and now needs Board of Supervisor approval as required by the State. A link to The Plan, which is posted on the DHS website, is provided near the end of the Discussion section. BOS approval is required for state submission; which, in turn, is required to continue to receive MHSA fiscal allocation.

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:

1. Community Services and Supports - Provides enhanced mental health services for Seriously Emotionally Disturbed children and youth and Seriously Mentally Ill adult populations.
2. Prevention and Early Intervention - Programs that prevent mental illnesses from becoming severe and disabling, emphasizing improvement on timely access to services for underserved populations.
3. 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.
4. 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.
5. 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.

MHSA FY 2023-26 Three Year Plan reflects input from the community stakeholders during the extensive integrated planning process, as well as ongoing feedback from stakeholders from several venues, including Mental Health Services Act Steering Committee, Community Program Planning Workgroup, Stakeholder Committee, and Mental Health Board meetings. This Community Program Planning Process (CPPP), governed by CCR Title 9 Section 3300, is detailed on pages 21-38 of the plan. This CPPP section includes the structure of Sonoma's CPPP, representation of the MHSA Steering Committee, meeting dates and topics discussed. This section also provides details about the activities of the Community Program Planning Committee, Stakeholder meetings, community Listening Sessions, the development of the Semi-Statewide Enterprise Health Record System Improvement Innovation Project and the Suicide Prevention Coalition. The content of the MHSA FY 23-

26 Three Year Plan includes:

- Executive Summary
- Description of Sonoma County
- Community Program Planning Process
- Capacity Assessment
- Key recommendations and significant changes for FY 23-26
- Detailed description of MHPSA programs and services planned for FY 23-26 by component.
- Update on No Place Like Home
- FY 2023-2026 Expenditure Plan
- Annual Program Report for FY 2021-2022

Summary of Services provided by Program in Fiscal Year 2021-22:

<b>Component</b>	<b>Number of Community Members Served</b>
Community Services and Supports	11,322
Prevention and Early Intervention	9,455
<b>Total Community Members</b>	<b>20,777</b>

After the Board of Supervisors reviews and approves the Draft FY 23-26 MHPSA Program and Expenditure Plan and FY 21-22 Annual Program Report the approved plan will be sent to the Department of Health Care Services and the Mental Health Services Oversight and Accountability Commission within 30 days of BOS approval as per state regulations.

MHPSA Draft 2023-26-Three-Year-Plan-and-Report -

<https://sonomacounty.ca.gov/Main%20County%20Site/Health%20and%20Human%20Services/Health%20Services/Documents/Behavioral%20Health/mental-health-services-act/Sonoma%20County-MHPSA-FY%2023-26-Three-Year-Plan-and-Report.pdf>

### **Staffing Request**

To support the Sonoma County Behavioral Health Access Team and the Collaborative Treatment and Recovery Team (CTRT), the Department is requesting the addition of four (4) Senior Client Support Specialist (SCSS) position allocations as part of this item.

One SCSS allocation will support the Sonoma County Behavioral Health Access Team by providing behavioral health care navigation assistance to Medi-Cal patients admitted to Sonoma County hospital emergency departments (ED) for a mental health or substance abuse disorder. For Sonoma County Medi-Cal patients, 2021 baseline data indicate that only 7% of visits for substance use disorders resulted in a follow-up substance use treatment services within 7 days; 12% within 30 days. For those challenged with mental health issues, data showed that only 53% of ED visits for mental health conditions resulted in a follow-up service within 7 days; 66% within 30 days. A root cause analysis conducted with hospital staff and behavioral health staff revealed that it was the lack of a coordinated point of behavioral health contact, that is currently preventing ED staff from discharging patients with mental health follow-up appointment service information. Connecting clients to community mental health and substance use treatment as close as possible to the point at which they ED visit will decrease repeat utilization of high-level hospital and costly crisis level resources, and provide safer and healthier Sonoma County communities where residents obtain the resources they need to thrive

and flourish. The 1.0 FTE Senior Client Support Specialist staff would assist hospital staff in facilitating outpatient mental health follow-up care appointments by: 1) Ascertaining which behavioral health delivery system is most appropriate for the patient, 2) Arranging outpatient appointment times for patients prior to discharge from ED; 3) Arrange follow up appointments and internal communication with existing behavioral health staff for patients currently open to services through Sonoma County Behavioral Health. In addition, the SCSS would provide care navigation and rapid case management to clients coming through Access line. This will benefit all Medi-Cal beneficiaries requesting mental health and substance use services.

Three (3) SCSS allocations will support the Collaborative Treatment and Recovery Team (CTRT) by providing coordination of care, targeted case management, social rehabilitation support, and resource/referral linkages to clients newly entering services through Behavioral Health. The current CTRT program only has 3 staff members serving 210 clients, meaning they have 70 person caseloads. Best practice, according to [SAMHSA] would recommend a 50-person caseload for a lower intensity team, and a 30-person caseload for urgent intensity teams. Having a sufficiently staffed initial treatment team is essential to delivering timely mental health services and preventing negative and costly clinical outcomes.

Failure to staff sufficient capacity to meet the community need will result in unnecessary wait times and in financial sanctions from the State per DHCS BH IN #23-041]. All four (4) SCSS positions will support the Mental Health Plan's performance improvement project to improve timeliness and access to mandated and necessary services in the system of care. Per Title 42, Code of Federal Regulations, Part 438, DHCS contracts with an External Quality Review Organization (EQRO) which conducts an annual review of mental health plans and evaluates information related to quality, timeliness, and access. EQRO reviews consists of site visits, consumer and family member focus groups, mental health plan and provider staff focus groups, data analysis and reporting, information system reviews, and the evaluation of Mental Health Plan Performance Improvement Projects (PIPS). A PIP is a focused effort to improve specific administrative or clinical performance in order to improve access to and quality of care. Mental health plans are required to maintain two PIPS; one administrative; one clinical. This PIP will work on improving timeliness and access to care.

These positions will improve revenue capture through better coordination of client planning with our community-based organizations services and partnering agencies.

**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?**

Yes

The Department will ensure accountability, communicate, and evaluate results in the following ways:

- Every year an Annual Program report is developed by the MHSA team that includes demographics, outcomes, and accomplishments of each program. Anti-Racists Results Based Accountability (AR-RBA) is also being implemented with most of the MHSA contracts.
- Future planning cycles will continue to include examination of data by race/ethnicity and include AR-RBA outcomes. In addition, outreach and engagement for community input the MHSA team will incorporate additional efforts to engage community members at rates commensurate with the demographics of the county. In the future the MHSA team will also examine the availability of community-level data points on well-being and mental health that can be disaggregated by race/ethnicity. A new Electronic Health Record that is being implemented by the Behavior Health Division may also improve staff ability to enter and track client data.
- The MHSA team has an ongoing Community Program Planning process detailed on pages 25-41 of the MHSA FY 23-26 Three Year Plan that includes details about the MHSA Steering Committee, Stakeholder Committee, Community Program Planning Committee, and Listening Sessions. Additionally, a comprehensive capacity assessment is conducted every three years.

**Prior Board Actions:**

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**

<b>Expenditures</b>	<b>FY 23-24 Adopted</b>	<b>FY 24-25 Projected</b>	<b>FY 25-26 Projected</b>
Budgeted Expenses		\$740,000	\$760,000
Additional Appropriation Requested	\$460,000		
<b>Total Expenditures</b>	<b>\$460,000</b>	<b>\$740,000</b>	<b>\$760,000</b>
<b>Funding Sources</b>			
General Fund/WA GF			
State/Federal		\$740,000	\$760,000
Fees/Other			
Use of Fund Balance	\$460,000		
Contingencies			
<b>Total Sources</b>	<b>\$460,000</b>	<b>\$740,000</b>	<b>\$760,000</b>

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**Agenda Date:** 12/12/2023

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**Narrative Explanation of Fiscal Impacts:**

The Department is requesting additional appropriations in the amount of \$460,000 in FY 23-24 which includes 7 months of Staffing costs and one-time staff set up costs. Funding for year one will come from the Community Support Services section of the overall MHSA fund; current fund balance estimate as of June 30, 2024 is \$18,300,000. Future year staffing costs will be funded via MHSA and Federal Financial Participation for Medical services provided.

<b>Staffing Impacts:</b>			
<b>Position Title (Payroll Classification)</b>	<b>Monthly Salary Range (A-I Step)</b>	<b>Additions (Number)</b>	<b>Deletions (Number)</b>
Senior Client Support Specialist	\$6,409.20 - \$7,788.44	4.0	0.0

**Narrative Explanation of Staffing Impacts (If Required):**

The recruitments will be conducted to fill the positions as soon as possible after Board approval.

**Attachments:**

Attachment 1 - Personnel Resolution

Attachment 2 - Budget Resolution

Attachment 3 - Sonoma County Mental Health Services Act DRAFT Fiscal Year 2023-2026 Three-Year Plan with Fiscal Year 2021-2022 Annual Report

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

None