



**MEASURE O: COUNTY OF SONOMA
MENTAL HEALTH, ADDICTION AND
HOMELESS SERVICES**

Annual Report for Fiscal Year 2022-2023

“

After championing the mental health needs of our community for many years, it was my great honor to see our campaign efforts come to fruition with Measure O. A tax of this kind, used solely for the purposes of mental health, addiction, and homeless services just in Sonoma County, is a powerful tool to help meet the critical needs of our family and neighbors in crisis.”

—SHIRLEE ZANE, OVERSIGHT COMMITTEE CHAIR



THIS REPORT MARKS THE SECOND FULL YEAR OF MEASURE O FUNDS BOLSTERING MENTAL HEALTH AND HOMELESS SERVICES IN OUR COMMUNITY.

Measure O is exceeding the expected revenue—providing new opportunities for expansion and innovative solutions to meet the challenges we continue to face—as we strive to evolve and adapt to the needs of our community every day. Thank you to the numerous partners in this work across the county and beyond.

This report highlights programs from each area of the measure’s expenditure plan, from crisis response to our work with the unsheltered. We are proud to highlight the great strides we are making in our **Fiscal Year 2022-2023 Annual Report**.



ABOUT MEASURE O

By mid-2018, the desperate need for expanded access to behavioral health and homeless services had reached crisis levels in Sonoma County. The wildfires of 2017 destroyed over 5 percent of the county's housing stock and overwhelmed our already strained local health care system. Budget shortfalls had resulted in severe reductions of vital services. The result was a drastic need for mental health services to address the trauma experienced by so many residents.

In response, a diverse group of community stakeholders came together to find a way to expand these much-needed services across Sonoma County. The result was Measure O.

Passed by over two-thirds of Sonoma County voters in November 2020, Measure O created a one quarter-cent sales tax to help protect and expand essential mental health and homelessness services over 10 years. Today, the Measure O expenditure plan provides \$30 million per year in support across five categories:

- 1. Behavioral Health Facilities**
- 2. Emergency Psychiatric and Crisis Services**
- 3. Mental Health and Substance Use Disorder Outpatient Services**
- 4. Behavioral Health Homeless and Care Coordination**
- 5. Transitional and Permanent Supportive Housing**

Even as Measure O services continue to grow, we have already seen the tremendous positive effects it is having in communities across Sonoma County.



sonoma county
DEPARTMENT OF HEALTH SERVICES



A REVIEW OF YEAR 2 OF MEASURE O IN SONOMA COUNTY

I want to personally thank the Citizens' Oversight Committee, a group of passionate and dedicated volunteers who come to this work to serve as guardians of the will of the voters, and even more so, as advocates. This work is challenging and rewarding, and this body plays a critical role in making Sonoma County a place where there is someone and somewhere to turn in times of need.

Tina Rivera, *Director, Department of Health Services*

MEASURE O CITIZENS' OVERSIGHT COMMITTEE

What do they do?

- ✦ Provide transparency and ensure fiscal accountability.
- ✦ Review the receipt and expenditures of Measure O revenue, including the county's annual independent audit in conjunction with the county's budget process.
- ✦ Produce an annual oral or written report on its review, which shall be considered by the Board at a public meeting.
- ✦ Serve a three-year term and are eligible to be reappointed by their appointing body.

FY 22-23 OVERSIGHT COMMITTEE MEMBERS

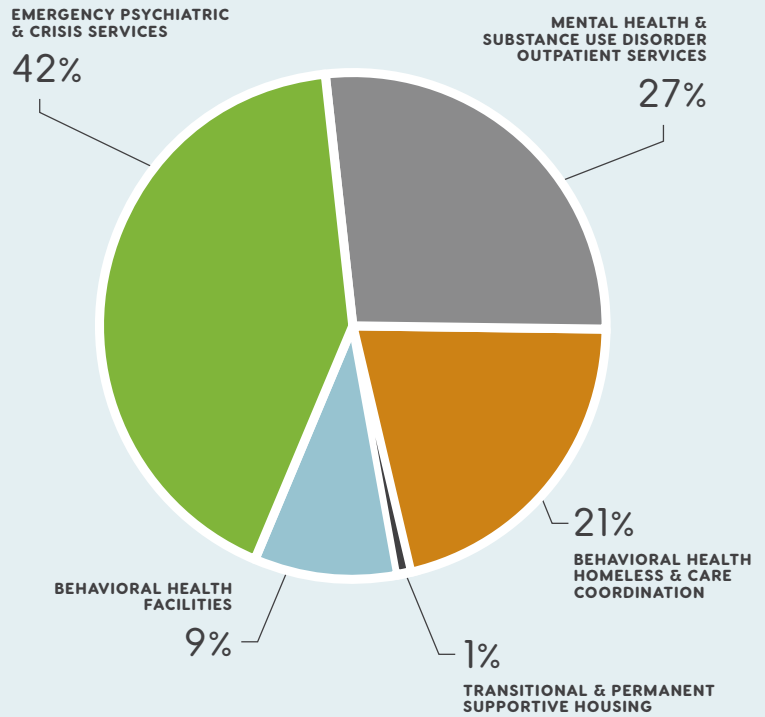
Ernesto Olivares
Betzy Chavez
Orlando O'Shea
Gregory Fearon
Shirlee Zane
Ben Ford
Kevin McDonnell



I've personally witnessed the fruits of the work funded by Measure O funding and am very grateful that the community at-large demonstrates their support by standing by and keeping Measure O funding alive and on-going. Since being on the Measure O Committee, I have benefited from learning about the funds and all the hard work invested by the county and partners. I am enthusiastic about the direction this committee is headed with all those involved."

-BETZY CHAVEZ, OVERSIGHT COMMITTEE VICE CHAIR

FY 22-23
**MEASURE O
 EXPENDITURES
 BY CATEGORY**
\$22,441,830



**REVENUE AND EXPENDITURES
 BY CATEGORY**

	Behavioral Health Facilities	Emergency Psychiatric & Crisis Services	Mental Health & Substance Use Disorder Outpatient Services	Behavioral Health Homeless & Care Coordination	Transitional & Permanent Supportive Housing	TOTALS
BEGINNING BALANCE	\$2,134,978	\$5,382,440	\$4,354,806	\$3,462,617	\$55,139	\$15,389,980
REVENUE	\$8,357,529	\$16,717,532	\$6,867,329	\$5,344,432	\$765,646	\$38,052,468
EXPENDITURES	\$7,787,371	\$8,999,838	2,928,688	\$2,343,650	\$382,283	\$22,441,830
FUND BALANCE	\$2,705,136	\$13,100,134	\$8,293,447	\$6,463,399	\$438,502	\$31,000,618

MEASURE O EXPENDITURES BY SUBCATEGORY

BEHAVIORAL HEALTH FACILITIES

Residential Care Facilities	\$3,826,194
Psychiatric Hospital Facility and Operations	\$3,517,434
Transitional Housing For Individuals Discharging From Crisis Services	\$320,790
CA Admin Fee*	\$122,954
Total Expenditures	\$7,787,371

EMERGENCY PSYCHIATRIC/CRISIS SERVICES

Mobile Support Team Expansion/Crisis, Assessment, Prevention and Education	\$941,445
Inpatient Hospital Services–Adult	\$1,873,101
Crisis Stabilization Unit	\$5,515,040
Residential Crisis Services	\$424,346
CA Admin Fee*	\$245,907
Total Expenditures	\$8,999,838

MENTAL HEALTH & SUBSTANCE USE DISORDER OUTPATIENT SERVICES

Mental Health Services and Children’s Shelters	\$84,309
Substance Use Disorder Services Expansion	\$375,516
Services to Support Residential Care Facilities, Permanent Supportive Housing, and other Housing	\$1,610,270
Mental Health Services for Children and Youth	\$741,028
Program Support	\$16,968
CA Admin Fee*	\$100,598
Total Expenditures	\$2,928,688

HOMELESS BEHAVIORAL HEALTH/CARE COORDINATION

Behavioral Health Services for Individuals Who Are Homeless	\$1,479,681
Care Coordination for High Needs Homeless	\$774,812
Program Support	\$10,914
CA Admin Fee*	\$78,243
Total Expenditures	\$2,343,650

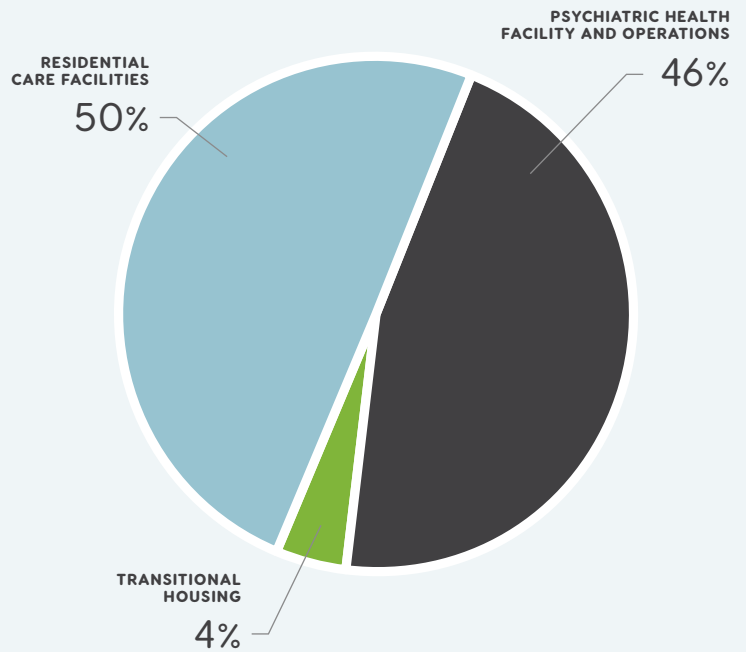
TRANSITIONAL & PERMANENT SUPPORTIVE HOUSING

Supportive Housing Pool/Transitional & Permanent Supportive Housing	\$371,105
CA Admin Fee*	\$11,178
Total Expenditures	\$382,283
Total Expenditures in all Categories	\$22,441,830

*CA Admin Fee is charged by the California Department of Tax and Fee Administration for assessing and collecting a tax.

BEHAVIORAL HEALTH FACILITIES

\$7,664,417



MEASURE O FUNDING

Residential Care Facilities. **\$3,826,194 (50%)**

Residential Care Facilities provide housing with three meals per day, medication distribution, 24-hour staffing, and various services to adults with Severe Mental Illness (SMI) who need additional social and behavioral health support to live in the community. The goal is to facilitate clients moving to the least restrictive and most independent level of care, so for many staying in an RCF is temporary, whereas for others they may need long-term stays in an environment with a lot of support.

MEASURE O IMPLEMENTATION. The Department of Health Services (DHS) contracts with approximately 18 Residential Care Facilities in and out of Sonoma County. Measure O funding allows clients to remain in this level of care as long as they need it. Without this funding, DHS would have to choose between clients losing their placement and cutting other services.

319
PEOPLE
HOUSED

FOR AN AVERAGE STAY OF

247
DAYS

SUCCESS SPOTLIGHT

“The funding that Measure O provides to the Sonoma County Mental Health population is profound. The opportunities for housing, case management, therapies, drug and alcohol treatments, psychiatric emergency services, and crisis assistance have improved since the implementation of Measure O. I have been a licensed administrator for a long-term mental health facility for 25 years. Services are crucial and I look forward to the future of continued and improved support for our residents.”

Heather Deghi, Country Gardens Residential Care Facility





Psychiatric Health Facility



MEASURE O FUNDING

Psychiatric Health Facility and Operations . . . \$3,517,434 (46%)

A Psychiatric Health Facility (PHF) is a 24-hour inpatient facility that provides short-term hospitalization for adults 18 years of age and older with emergency psychiatric needs. Services offered within the PHF are at a more intensive level of care than what is available in an outpatient or urgent/crisis clinic setting.

MEASURE O IMPLEMENTATION. The Sonoma County Healing Center is a 16-bed PHF operated by Crestwood Behavioral Health and is one of only nine county-run PHFs in the state. The PHF allows clients to remain in the county rather than being placed elsewhere, which also reduces hospitalization costs and works directly with the Crisis Stabilization Unit (CSU).



Transitional Housing for Individuals Discharging from Crisis Services

MEASURE O FUNDING

\$320,790 (4%)

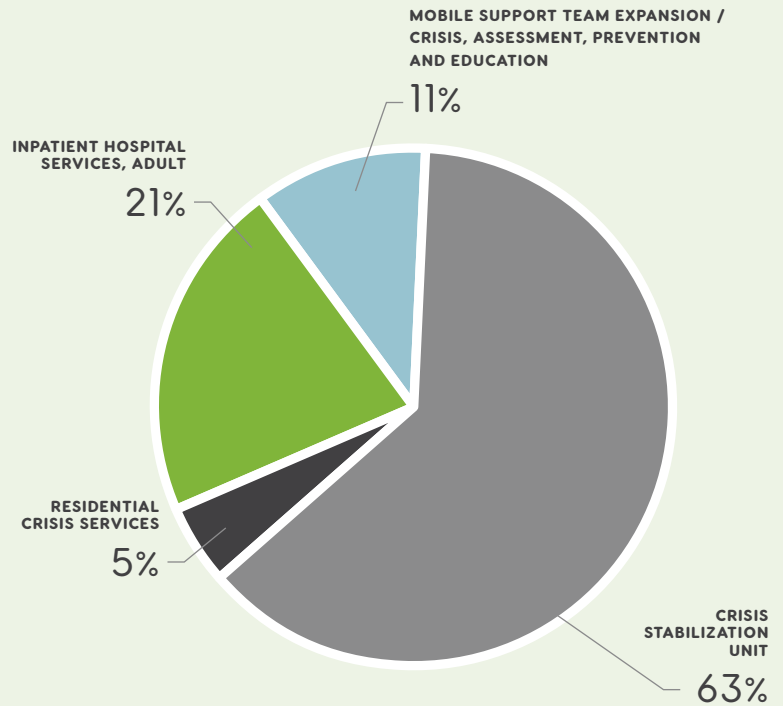
Transitional Housing helps individuals with mental health and/or Substance Use Disorder (SUD) needs who require in-home and community-based services to live successfully in the community. These services support permanent supportive housing, which interrupts the cycle of homelessness.

MEASURE O IMPLEMENTATION. Provides for a full-time Housing Coordinator within the Sonoma County Behavioral Health division. This position supports 35 Case Managers in helping their clients get housed including locating room in shelters, getting signed up for housing vouchers, and finding apartments.



EMERGENCY PSYCHIATRIC & CRISIS SERVICES

\$8,753,931



MEASURE O FUNDING

Crisis Stabilization Unit \$5,515,040 (63%)

Crisis Stabilization Units (CSU) serve individuals in a mental health crisis whose needs cannot be met safely in residential service settings. CSUs admit individuals on a voluntary or involuntary basis when the person needs a safe, secure environment that is less restrictive than a hospital. The goal is try to stabilize the person and get him or her back into the community quickly.

1,101
INDIVIDUALS SERVED

MEASURE O IMPLEMENTATION. The Sonoma County Crisis Stabilization Unit (CSU) is open 24 hours/day, 365 days/year for individuals having a mental health crisis and to keep them (either voluntary or involuntary) for up to 23 hours and 59 minutes. Staffing includes licensed behavioral health clinicians, nurses, psychiatrists, and peer support specialists. Services include crisis assessment, crisis stabilization, medication support, peer services, connection to resources, and referrals. The CSU has three separate units: A locked, adult unit for individuals at serious risk, an unlocked unit for those in crisis who are willing to accept support and can safely be around others, and a locked unit for youth.

MEASURE O FUNDING

Inpatient Hospital Services, Adult \$1,873,101 (21%)

Inpatient Hospital Services provide treatment in a therapeutic environment for those in acute psychiatric crisis. Treatment teams provide 24-hour monitoring, treatment, and stabilization for patients suffering from severe mental illness. Once stabilized, patients receive discharge planning for the next level of follow-up care and support.

1,218
TOTAL BED DAYS

207
INDIVIDUALS SERVED

MEASURE O IMPLEMENTATION. Santa Rosa Behavioral Healthcare Hospital is contracted by the county to provide inpatient psychiatric care to Medi-Cal beneficiaries and Sonoma County residents who are without insurance or who are on involuntary holds or otherwise in need of intensive psychiatric services. Utilization of beds here helps keep clients in our county, close to home, and in their community. Without Measure O funds, high hospitalization costs cause a reduction in available funding to be able to provide preventive, outpatient services.



Staff and clients at Harstead House, a Crisis Residential facility (above), and staff of the Crisis Stabilization Unit (upper right).



Mobile Support Team Expansion, Crisis, Assessment, Prevention & Education \$941,445 (11%)

MEASURE O FUNDING

Mobile Crisis Teams provide rapid response, individual assessment and community-based stabilization to individuals experiencing a behavioral health crisis. Mobile crisis services utilize de-escalation and stabilization techniques to reduce the immediate risk of danger and subsequent harm, avoid unnecessary emergency department care, psychiatric inpatient hospitalizations and law enforcement involvement.

OVER
\$2.4M
AWARDED TO SAFE AND INRESPONSE

MEASURE O IMPLEMENTATION. In addition to the County **Mobile Support Team**, the Sonoma County Department of Health Services partners with the cities of Santa Rosa, Petaluma, Rohnert Park, and Cotati to expand access to mobile crisis services for individuals experiencing behavioral health crises, including crises related to mental health, substance use, or homelessness through the **inRESPONSE** Team in Santa Rosa and the **Specialized Assistance for Everyone (SAFE)** teams (Petaluma, Rohnert Park, Cotati, and the Sonoma State University campus).

The Behavioral Health School Partnership is a new Measure O-funded program to provide schools a direct linkage to Behavioral Health staff. The program offers training for school staff in identifying students who may be experiencing behavioral health symptoms and would benefit from a referral to services, provides consultation with schools on students experiencing urgent behavioral health issues, and re-institutes in-person response to students experiencing a behavioral health crisis. The Behavioral Health Division has hired the Program Manager and is actively recruiting for clinical staff. Services will be available in West County and Sonoma Valley initially and move to the rest of county as staffing comes on board.

Residential Crisis Services \$424,346 (5%)

MEASURE O FUNDING

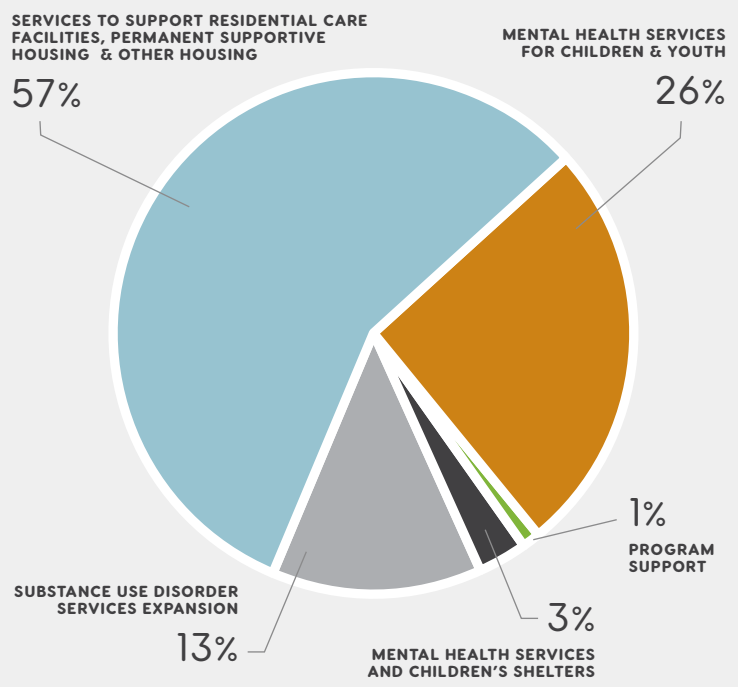
Crisis Residential Treatment Facilities provide housing and mental health services to adults who require longer-term services to stabilize and do not require a locked setting. Clients can stay for up to 30 days and are provided medications, rehab services, social events, connection to treatment, housing, and a safe discharge plan all in a trauma-informed, recovery-oriented, homelike setting. This type of setting prevents hospitalization, resolves client issues in their own community, reduces recidivism into crisis services, and connects clients to treatment at a lower cost, and less restrictive setting than a psychiatric hospital. It is also extremely cost-effective as each placement is 80-92% less expensive than the inpatient alternative.

324
INDIVIDUALS SERVED

MEASURE O IMPLEMENTATION. Supports two 10-bed facilities for individuals in crisis and allows the county to keep these settings operational without diverting funds from outpatient treatment services.

MENTAL HEALTH & SUBSTANCE USE DISORDER OUTPATIENT SERVICES

\$2,828,090



MEASURE O FUNDING

Peer & Family Permanent Supportive Housing. . . \$1,610,270 (57%)

Residential Substance Use Disorder (SUD) Treatment is non-institutional, non-medical, residential programs that provide rehabilitation services to clients with SUD diagnoses. Each client lives on the premises and is supported in their efforts to restore, maintain and apply interpersonal and independent living skills and access community support systems. These services also support individuals with permanent supportive housing, which interrupts the cycle of homelessness.

MEASURE O IMPLEMENTATION. Telecare Sonoma ACT (Assertive Community Treatment) is an intensive community outreach program contracted with Sonoma County Behavioral Health to provide culturally-competent mental health services to adults who have serious mental illness (SMI). Sonoma County Behavioral Health contracted with Telecare Corporation in 2006 to provide intensive community-based services to clients in order to stay out of the hospital, out of jail, out of long-term care, or who were at risk of being homeless. The desired outcomes of Sonoma ACT are to reduce the need for acute hospitalizations, the number of jail days, the harm to clients from substance abuse, and discharges to long-term care institutions, while increasing housing stability and the number of clients who work or attend school.

324
INDIVIDUALS SERVED

Mental Health Services for Children and Youth . . . \$741,028 (26%)

MEASURE O FUNDING

Youth and Family Services provides outpatient mental health services to children and youth ages 0 – 20, including therapy, case management, rehabilitation, and medication support.

MEASURE O IMPLEMENTATION. Student Health Services at Santa Rosa Junior College (SRJC) provides counseling services imbedded with medical services, enabling easy warm handoffs in both directions. Measure O funds psychology trainees, a Spanish speaking full-time permanent therapist and outreach worker, and a nurse practitioner experienced in prescribing psychotropic medications. The Mental Wellness Program at SRJC uses a comprehensive approach to promote mental health and reduce stigma on campus.

“ Thank you for the community of healing you are adding to the campus—the healing circles are amazing.”

—A student working with new Latinx-focused Therapy and Outreach



Sonoma County Behavioral Health staff, a child's room at Valley of the Moon Children's Shelter, Counseling offices at Santa Rosa Junior College



MEASURE O FUNDING

Mental Health Services and Children's Shelters . . . \$84,309 (3%)

DHS provides on-site mental health services to children who have experienced trauma who are living in the county's Children's Shelter.

Valley of the Moon Temporary Shelter Care Facility (TSCF) is a 24-hour facility that provides no more than 10 calendar days of residential care and supervision for children and youth who have been removed from their homes as a result of abuse or neglect.

3

**CLINICAL
POSITIONS
FUNDED**

BH Clinician, Psychiatric
Nurse, Licensed
Vocational Nurse II

MEASURE O FUNDING

Substance Use Disorder Services Expansion . . . \$375,516 (13%)

The county is expanding outpatient and residential treatment services to individuals with substance use disorders through the Drug Medi-Cal Organized Delivery System (DMC-ODS), which provides a continuum of care modeled after the American Society of Addiction Medicine Criteria for substance use disorder treatment services.

MEASURE O IMPLEMENTATION. The county is participating in the California Department of Health Care Services 5-year demonstration project designed to establish how organized substance use disorder care can increase the success of individuals. This includes:

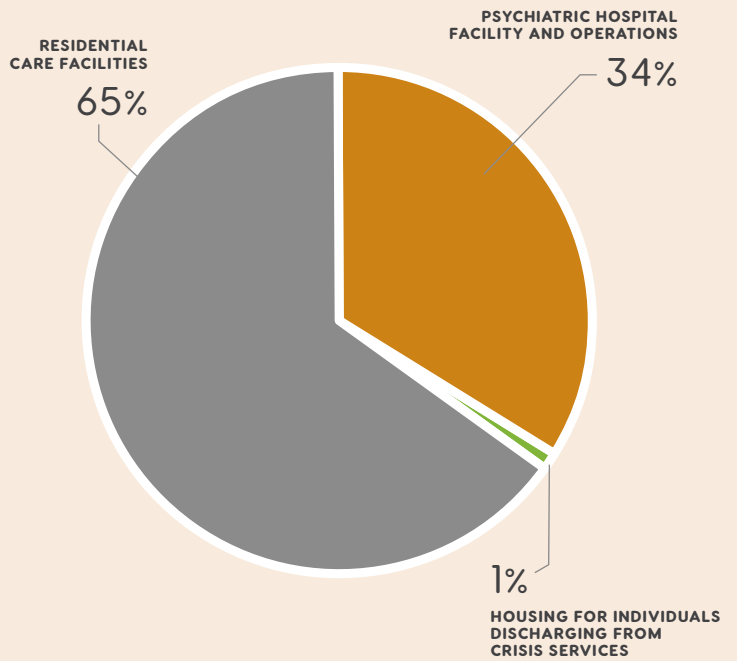
Contingency Management. An evidence-based treatment that provides incentives to reduce the use of stimulants. It recognizes and reinforces individual positive behavioral change, as evidenced by negative drug tests.

Peer Support Specialists. Provide culturally responsive services that promote recovery, engagement, socialization, self-sufficiency, self-advocacy, development of natural supports, and identification of strengths. These services aim to prevent relapse, empower enrollees through strength-based coaching, support linkages to community resources, and educate enrollees and their families about their conditions and the process of recovery.

Drug Medi-Cal Organized Delivery System Services for Short-Term Residents of Institutions for Mental Disease. While community-based services are the preferred way to deliver behavioral health care, in some cases short-term residential treatment is necessary. The state secured a renewal of California's groundbreaking Medi-Cal waiver to permit services to be delivered for short-term residential treatment stays which includes individuals who have some of the most complex health care needs.

HOMELESS BEHAVIORAL HEALTH CARE COORDINATION

\$2,265,407



Behavioral Health Services for Individuals who are Homeless/Care Coordination for High Needs Homeless

MEASURE O FUNDING
\$2,265,407 (100%)

Care Coordination provides multi-disciplinary case management and other services to enable individuals who have been homeless to live successfully in permanent supportive housing in the community.

MEASURE O IMPLEMENTATION. The Interdepartmental Multi-Disciplinary SOUL

Team (IMDT) is a model of care coordination that involves frontline staff from different county departments, agencies and community service providers who work together to address the holistic needs of vulnerable residents. It consists of one to three staff members from each department or agency, who meet weekly to develop integrated care plans for ACCESS (Accessing Coordinated Care and Empowering Self Sufficiency) participants. The IMDT can adapt to different target populations by adding different health, social service, and justice system programs and services. The IMDT serves as the blueprint for how the department case manages various populations in need of collaborative care management.

The Homeless Encampment Access & Resource Team (HEART) focuses on sheltering Sonoma County’s homeless population. This cohort was established to engage with the homeless population on the Joe Rodota Trail, the largest encampment in the county’s history. It was expanded in March of 2020 to outreach and provide coordinated care to individuals living in encampments in the unincorporated parts of the county and the cities of Sebastopol, Cotati, Rohnert Park, Sonoma, Healdsburg, Cloverdale, and the Town of Windsor. The cohort provides integrated care management services to individuals with higher needs through IMDT.

310

INDIVIDUALS SERVED

74

PLACED IN HOUSING

SUCCESS SPOTLIGHT

“I want to thank you for all the time and effort you’ve done for me and my cause regardless of job description and duties, it really means a lot to me. You have gone above and beyond any expectation I ever had, so I want to acknowledge that with a really big sloppy kiss (LOL) THANK YOU SO VERY MUCH. I NOW HAVE A HOME THAT IS PEACEFUL.”

Client served by HEART Team’s Housing Navigator whose role is to prepare clients for housing, assessing needs and resources, financial literacy planning, connecting with other services in the county, securing housing and following up for at least three months.

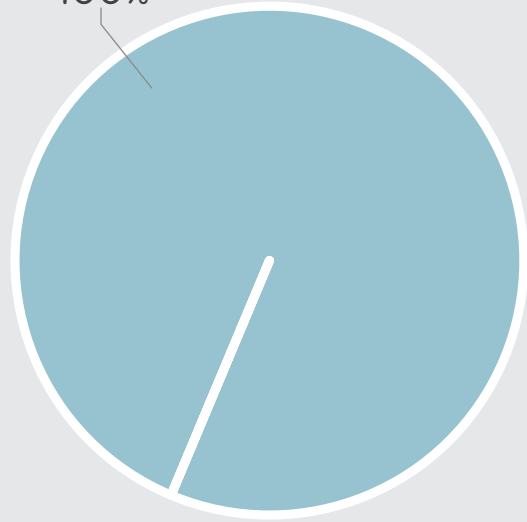


TRANSITIONAL & PERMANENT SUPPORTIVE HOUSING

\$371,105

SUPPORTIVE HOUSING POOL/
TRANSITIONAL & PERMANENT
SUPPORTIVE HOUSING

100%



Transitional & Permanent Supportive Housing

MEASURE O FUNDING

\$371,105 (100%)

Transitional housing is a space for adults or youth to live while searching for a more permanent home. Transitional housing may include support for addictions, mental health, or other issues. These accommodations are meant to bridge the gap from homelessness to permanent housing by offering supervision, life skills, support services and/or education and training.

Permanent Supportive Housing (PSH) is a housing intervention whereby persons who are chronically homeless (homeless at least a year and with one disabling condition) receive housing combined with supportive services to help them maintain housing successfully. The services are designed to build independent living and tenancy skills and connect people with community-based health care, treatment and employment services.

MEASURE O IMPLEMENTATION. The George’s Hideaway project is a Permanent Supportive Housing (PSH) site near Monte Rio, about 2 miles west of Guerneville. West County Community Services will provide the staffing and supportive care including therapy, substance use disorder care, benefit navigation, job training, life skills, and more. Physical health needs will be addressed by West County Health Center. Placements will be made through Coordinated Entry (meaning the next most vulnerable person on the list is prioritized for housing).

22

UNITS OF PERMANENT SUPPORTIVE HOUSING (PSH)

will be built using a prefabricated method, with each separate small unit having its own kitchen and bathroom.

SUCCESS SPOTLIGHT

Michael’s Long Journey to Find a Place to Live

Though Michael saved his dog and car in the 2019 Kincade fire, he lost his home. After living in his car and various temporary housing programs for nearly four years, Michael, with the help of the Sonoma County Continuum of Care and Coordinated Entry System, was awarded a housing voucher and settled into a remodeled cottage where he lives today!





Sketches of plans for George's Hideaway Permanent Supportive Housing project



ANNUAL POINT-IN-TIME COUNT SHOWS 22 PERCENT DECREASE IN HOMELESSNESS

Measure O contributed to numerous housing programs that came online in 2022-2023 including:

In January 2023, DHS conducted a Point-in-Time (PIT) count of the Sonoma County homeless population. The PIT count is based on visual observations of unsheltered individuals and groups, as well as a census of people in shelters, and provides a snapshot of homelessness at a single point in time. The reduction in unsheltered individuals reflects an overall increase in the number of beds available at new housing projects in the county. The count found:

- + 22% overall decrease in individuals experiencing some form of homelessness last year (2,893 to 2,266)—the largest decrease since 2015
- + 24% decline in those identified as being chronically homeless
- + 55% decrease of homeless individuals in unsheltered* circumstances (2,088 in 2022 to 1,291 in 2023.) because of an overall increase in the number of beds available at new housing projects in the county.
- + 21% increase of individuals in sheltered* circumstance (805 in 2022 to 975 in 2023).

New Interim or Non-Congregate Shelters (NCS)

- + Horizon Shine, a safe parking location in Sebastopol that shelters 18 persons.
- + Petaluma People's Village, an NCS shelter in Petaluma (25 units).
- + The Roberts Lake managed encampment, an NCS location in Rohnert Park (up to 60 persons sheltered at one time).
- + Santa Rosa's safe parking location at its city field office (up to 50 RV or car spaces)

Project Homekey

- + L&M Village in Healdsburg with 22 units, which opened in November 2022 as an interim housing site.
- + Labath Landing in Rohnert Park with 60 units, which opened in October 2022 as an interim housing site.
- + Caritas Center in Santa Rosa began accepting clients in October 2022, including 40 units of interim housing

**"Unsheltered" individuals are defined as those who live in a place not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings. "Sheltered" homelessness pertains to those who live in an emergency shelter or transitional housing.*



ANGELINE'S LONG JOURNEY TO FIND A PLACE TO LIVE

Angeline provided those in need with in-home support services for over two decades before finding herself in need of help. She began to work with the Interdepartmental Multi-Disciplinary Team that coordinated care and helped Angeline meet her goal of moving into a rental in Santa Rosa!



*Caritas Center (left)
Labath Landing (below right),
and L&M Village (bottom)*



SONOMA COUNTY SUPERVISORS APPROVE \$250,500 IN MENTAL HEALTH FUNDING FOR STUDENTS

ADDITIONAL FUNDING SET TO BE APPROVED LATER

On April 18, 2023, the Sonoma County Board of Supervisors approved \$250,500 of Measure O funding to provide behavioral health services in schools in partnership with the Sonoma County Office of Education.

"After years of school disruptions for wildfires and the isolation of the pandemic, students in Sonoma County report feeling stress and anxiety with nowhere to go for mental health help," said Supervisor Chris Coursey, chair of the Sonoma County Board of Supervisors. "Thanks to Measure O, we are able to provide mental health services directly to the students who have the most need."



After years of school disruptions for wildfires and the isolation of the pandemic, students in Sonoma County report feeling stress and anxiety with nowhere to go for mental health help. Thanks to Measure O, we are able to provide mental health services directly to the students who have the most need."

-SUPERVISOR CHRIS COURSEY, *Chair of the Sonoma County Board of Supervisors*



The behavioral health school partnership will fund four new county positions for the initial phase. Over the long term, the program will provide school-based behavioral health support and interventions to schools in Sonoma County. Aspects of the program include:

- + **Providing schools direct access to county behavioral health staff to expedite referrals**
- + **Creating four mental health teams, strategically located around the county while providing consultation service by phone for school districts not in those service areas**
- + **Offering training for school staff in identifying students who may be experiencing behavioral health symptoms**
- + **Providing consultation with schools regarding students experiencing urgent behavioral health issues**
- + **Reinstituting in-person response to students experiencing a behavioral health crisis**
- + **Linking to substance use disorder treatment services for youth and young adults**

A program to address youth substance use disorder is also being developed with assistance from \$2.4 million in Measure O funds. Additional funding for mental health support for students is expected to be approved later during a supplemental budgetary process.

MEASURE O SPONSORS A COMMUNITY FORUM ON MENTAL HEALTH

On May 2, 2023, Measure O was a proud sponsor of the Community Forum on Mental Health, put on by the Sonoma County Department of Health Services and the Sonoma County Board of Supervisors. The forum brought together service providers from across the county for a community conversation discussing crisis services, suicide prevention, substance use disorder treatment services, workforce development and more. The forum brought nearly 300 people together to discuss the current state of mental health and addiction in Sonoma County in four sessions, each moderated by a County Supervisor.

The forum yielded insights into many key areas:

The Devastating Effects Of COVID-19. “There was so much loneliness [during the pandemic],” said Sonoma County Department of Health Services Director Tina Rivera. “That’s one of the things we’re learning here in these panels, is the impacts of loneliness and isolation that we saw, that had such impacts on our mental health.”

The Mental Health Of Children And Youth. “The Centers for Disease Control has said that young people are experiencing more sadness and hopelessness than they’ve ever seen before,” said mental health consultant Jasmin Flores. “But most people are, like, well, why is that happening?” Flores

“

Education is the best prevention. People need to be educated on services available.”

—FORUM PARTICIPANT

Panel of community members and Supervisor James Gore at the Community Forum on Mental Health event.





Attendees watching May Mental Health Forum event.

said the pandemic interrupted normal social development by forcing kids to communicate with each other electronically. “When you’re behind the screen, you almost become a little bit automated,” said Flores. “You don’t have to have interactions and discussions with people the way you do when you’re actually in front of someone.”

The Corrosive Effects Of Social Media. Supervisor Chris Coursey, chair of the Board of Supervisors, said internet communication has ramped up social anger, giving anyone and everyone a political megaphone. “Is all this communication literally driving us crazy? Um, it’s a good question,” said Coursey. “I don’t think that it’s driving us crazy, but it’s making people more anxious. It’s making people feel differently about themselves and about the world.”

Workforce Challenges. Staffing shortages play a huge role in our response to, and the state of our mental health crisis, and Sonoma County service providers are feeling the loss of staff every day. “In the midst of this pandemic and the multiple disasters and the increases in all of these areas, we began to see professionals say, ‘I’m done, you know, I can’t do this anymore,’” Rivera said.

Participants were able to provide a myriad of creative solutions to address concerns about the availability and connectivity of services in the county. In this fiscal year, Measure O will be soliciting several proposals incorporating this valuable input.

SONOMA COUNTY SUPERVISORS APPROVE \$1.5 MILLION OF MEASURE O FUNDING FOR MOBILE CRISIS RESPONSE

On May 16, 2023, the Sonoma County Board of Supervisors approved an additional \$1.5 million of Measure O funds for mobile crisis teams, which respond to emergency calls for behavioral health crises that do not require law enforcement. The Board also directed the Department of Health Services to expand the program countywide.

Mobile crisis teams operate in Santa Rosa, Petaluma, Rohnert Park, Cotati, and the unincorporated county. The Board approved \$514,000 of Measure O dollars for Santa Rosa's inRESPONSE team, \$500,000 for Petaluma's SAFE program, and an additional \$500,000 for the SAFE team in Rohnert Park, Sonoma State University campus and Cotati.

"When someone is experiencing a mental health crisis, they need a specialist who understands the situation," said Supervisor Chris Coursey, chair of the Sonoma County Board of Supervisors. "A dedicated team of behavioral health first responders is vital in these situations, and we are proud to support these services."

The SAFE team responds to nearly 450 calls per month. Their goal is to avoid a law enforcement response while assisting individuals to access community support. The inRESPONSE program had more than 2,300 calls for service in 2022. Santa Rosa Police Department has seen a 16 percent decrease in mental health calls since implementing the program.

The state is requiring that counties provide a 24/7 community-based mobile crisis intervention service to eligible Medi-Cal beneficiaries experiencing a behavioral health crisis by the end of 2023. The county has been working to expand the Mobile Support Team (MST) and create a regional model for the past several years. MST will operate a Crisis Hotline Call Center at 1-800-746-8181. This number has been used by the public to access the Crisis Stabilization Unit for many years and is known to the community to use for crisis supports.



We've reduced the frequency of ER visits ...the duration of the visits...the frequency of arrests for some people who are frequent police contacts, and ... helped to repair relationships between clients and existing service providers."

-MANNING WALKER, SAFE PROGRAM MANAGER



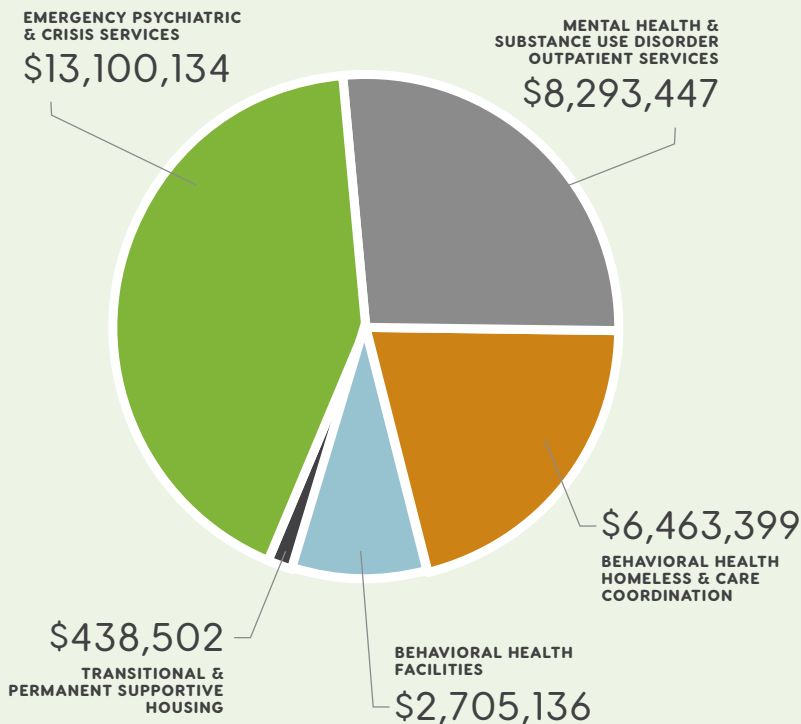
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InRESPONSE saw me when I was in my dark spot, and they were patient and compassionate and helped me calm down instead of picking me up off the street and throwing me in the back of a police car. The extra effort that they provided... helped me get over the ladder between the chasm and the cliff.”

—INDIVIDUAL SERVED
BY INRESPONSE

*inRESPONSE van (above),
SAFE team member (left).*

FUND BALANCE



In addition to the programs already up and running with Measure O funds, DHS is in the process of developing additional projects to further support the residents of Sonoma County. These new programs are paid for by the fund balance in each of the five areas covered by Measure O.

What is Fund Balance?

Fund balance is an accumulation of revenues minus expenditures. Any surplus revenues in excess of expenditures at the end of a fiscal year go into a fund within each category (Behavioral Health Facilities, etc.) included in the budget for the next fiscal year.

How is Fund Balance Used?

Fund balance is used only in the programs established by Measure O and cannot be transferred to the General Fund or used for any other purpose. Expenditures for each fund are authorized through the annual budget. Funds in excess of budgeted expenses may be spent on other projects in that fiscal year that meet the criteria for that category, transferred to other Measure O categories, or set aside for multiyear special projects.

LOOKING AHEAD

Upcoming projects to be funded in 2023-24:

Behavioral Health Facilities

- + \$3M Additional funding for Psychiatric Health Facility (PHF)

Emergency Psychiatric & Crisis Services

- + \$4.2M Expansion of Behavioral Health School Partnership
- + \$9M Expansion of Mobile Support Team (MST) (staffing, IT Infrastructure, dispatch build-out, etc.)
- + \$1.5M Emergency Shelter Transition (ESS)—one-time infrastructure spending

Mental Health & Substance Use Disorder Outpatient Services

- + \$1.65M Valley of the Moon-Short Term Residential Therapeutic Program (STRTP)
- + \$2.4M Youth Alcohol & Drug Services
- + \$3M Innovative Behavioral Solutions

Behavioral Health Homeless & Care Coordination

- + \$3M FY22/23 Continuum of Care (CoC)
- + \$2M Innovative Behavioral Solutions

Transitional & Permanent Supportive Housing

- + \$1.4M George's Hideaway
- + \$400K Homeless Action Sonoma
- + \$200K Sonoma Applied Village Services (SAVS)



Valley of the Moon Children's Shelter;
Staff at Harstead House (below)



FOR QUESTIONS OR TO SIGN UP FOR OUR QUARTERLY NEWSLETTER, EMAIL:
MeasureO@sonoma-county.org

FOR MORE INFORMATION ABOUT MEASURE O, PLEASE VISIT:
<https://sonomacounty.ca.gov/health-and-humanservices/health-services/divisions/behavioral-health/about-us/measure-o>



sonoma county
DEPARTMENT OF HEALTH SERVICES