



# Mental Health Services Act (MHSA) Steering Committee Meeting & FY 2016-17 Annual Update

December 7, 2016



San Mateo County Health System Behavioral Health and Recovery Services  
[www.smchealth.org/bhrs/mhsa](http://www.smchealth.org/bhrs/mhsa)

# Agenda

- \* **MHSA Background**
- \* **Steering Committee Business**
  - \* MHSA Steering Committee Membership
  - \* MHSA Issue Resolution Process (IRP)
  - \* INN Evaluation & WET Impact Summary
  - \* Upcoming Three-Year Planning Process
- \* **Annual Update**

# Background

- \* Proposition 63 (2004)
  - \* 1% tax on personal income in excess of \$1 mill
  - \* Fundable activities are grouped into **Components** each one with its own set of guidelines and rules.
  - \* Principles include community collaboration, health equity, consumer and family driven services, focus on wellness, recovery and resiliency, integrated experience
  - \* San Mateo County took an integrated approach

## Handouts:

- MHSA One-Pager
- MHSA Funded Program List by Component

# Funding Components

Component	Annual Funding Allocation	Reversion Period
Community Services and Supports (CSS)	75–80%	3 years
Prevention and Early Intervention (PEI )	15–20%	3 years
Innovations (INN)	5%	3 years
Workforce Education and Training (WET )	One Time Funding FY 06/07 and FY 07/08	10 years
Capital Facilities and Information Technology (CF/IT)	One Time Funding FY 07/08 and FY 08/09	10 years (expended)
Housing	One Time Funding FY 07/08 Unencumbered Funds FY 15/16	3 years*

\*new reversion period for AB1929 Housing funds released to Counties

# Planning & Reporting Requirements

- \* Community Program Planning (CPP) Process
  - \* Steering Committee
  - \* MHSARC
  - \* CSA Community Planning Committees
  - \* BHRS Blog, Wellness Matters e-newsletter, MHSA website and subscriber list
- \* Three-Year Plan & Annual Updates
  - \* Current 3-Year Plan: July 1, 2014 - June 30, 2017
  - \* Next 3-Year Planning Phase: Jan – March 2017
  - \* 30 day public review period followed by public hearing

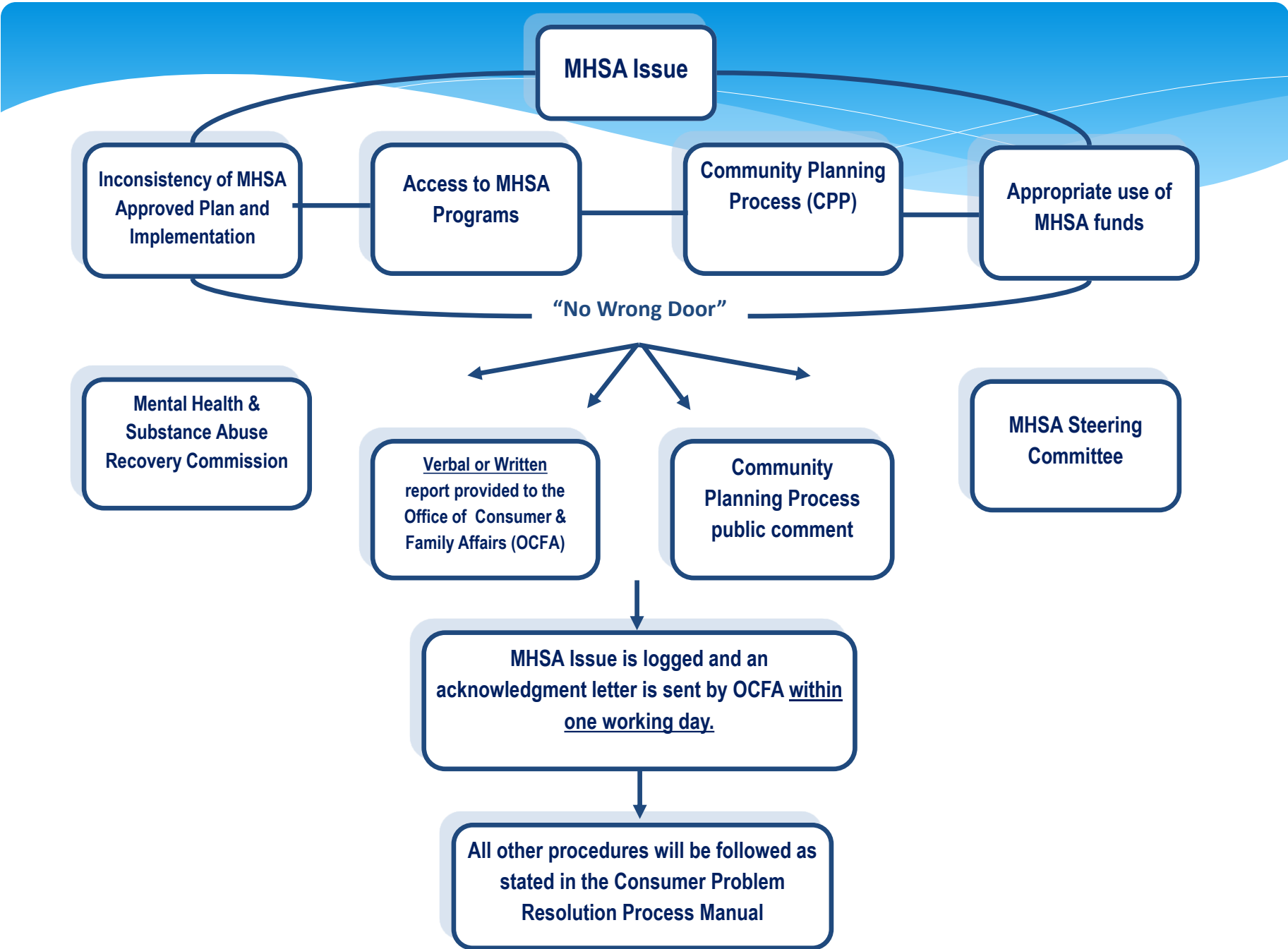
# New MHSA Steering Committee Membership Guidelines

## \* Key components

- \* MHSARC members are steering committee members
- \* Minimum 1-2 seats on defined stakeholders
- \* At least 50% of Steering Committee members will represent clients/consumers and families
- \* At least 50% of ALL positions will include individuals from diverse cultural and ethnic groups
- \* Membership Selection Group review applications 2x/yr
- \* May reopen filled seats if members miss 2 meetings/year

# New Issue Resolution Process

- \* The Office of Consumer and Family Affairs (OCFA) manages grievances.
- \* The MHSA IRP adds the following:
  - \* Any MHSA planning, implementation and stakeholder engagement issues will be reported to OCFA for appropriate logging, acknowledgement and other procedures as appropriate.
  - \* OCFA will check off any service/treatment grievances related to MHSA-funded programs.



**MHA Issue**

**Inconsistency of MHA Approved Plan and Implementation**

**Access to MHA Programs**

**Community Planning Process (CPP)**

**Appropriate use of MHA funds**

**"No Wrong Door"**

**Mental Health & Substance Abuse Recovery Commission**

Verbal or Written report provided to the Office of Consumer & Family Affairs (OCFA)

**Community Planning Process public comment**

**MHA Steering Committee**

**MHA Issue is logged and an acknowledgment letter is sent by OCFA within one working day.**

**All other procedures will be followed as stated in the Consumer Problem Resolution Process Manual**



# INN Evaluation & WET Impact

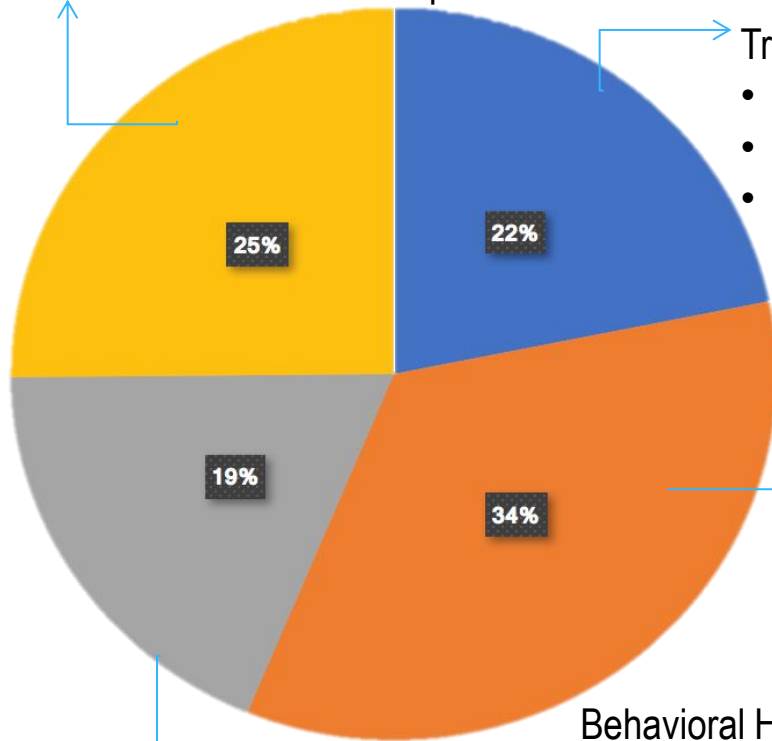
## Upcoming Opportunities for Input

- \* All INN projects will involve an extensive participatory evaluation process
  - \* Steering Committee will be a venue for vetting next steps and decisions related to continuation of INN projects
- \* WET Impact report
  - \* Survey to determine priorities, needs, gaps
  - \* Qualitative follow up with Lived Experience Academy members, cultural stipend interns, trainers and other stakeholders

# WET Investment 2014-17

## Financial Incentives Program

- Cultural stipend internship program
- Mental health loan assumption



## Training by/for Consumers and Family Members

- Lived Experience Academy (LEA) and Training
- Wellness Recovery Action Plan
- Recovery 101, Peer Support 101 , Peer and Family Partners

## Training for System Transformation

- Cultural Humility, HEI trainings for specific populations
- Evidence-based, community and promising practices

## Behavioral Health Career Pathways Program

- Intern/Trainee Program
- LEA Speaker's Bureau, support for Commissions and Committees
- Jefferson Union High School District Behavioral Health Career Pathways

# Upcoming 3-Year CPP Process

## Phase 1. Needs Analysis

- \* Experiences with MHSAs funded programs (what's working well, gaps, improvements needed)
- \* Review of evaluation and impact reports
- \* Recommendation developed for Phase 2

## Phase 2. Strategy Development

- \* Review Phase 1 findings and recommendations
- \* Make further recommendations on programs to continue, discontinue, expansion priorities, etc.

## Phase 3. Plan Development

- \* Presentation to MHSARC
- \* Public Comment
- \* Public Hearing
- \* BoS adoption

Dec - Feb

Feb - Apr

May - June

- \* February: Steering Committee review of phase 1 findings
- \* March: Stakeholder CPP training and Strategy Development Input Session

# Key Considerations

(from 2014 evaluation of MHPA CPP processes statewide)

- \* Outreach – use of social media, announcements at community meetings
- \* Incentives – stipends, childcare
- \* Use of surveys/questionnaires
- \* Use less jargon, provide language services
- \* Training pre CPP activities
  - \* Provide materials, expectations, background information beforehand

# Annual Update

F/Y 14-15

# Annual Update Agenda

- \* Program Outcomes (FY 14/15)
- \* Program Highlights
  - \* Prevention and Recovery in Early Psychosis (PREP)
  - \* Older Adult System of Integrated Services (OASIS)
- \* Fiscal Report
- \* New Program Updates
- \* Next Steps

# Program Outcomes

Community Service and Supports

F/Y 14-15

# CSS - Clients Served

## Full Service Partnerships\*

06/07:	161
07/08:	281
08/09:	336
09/10:	350
10/11:	428
11/12:	426
<b>12/13:</b>	<b>491</b>
<b>13/14:</b>	<b>482</b>
<b>14/15:</b>	<b>477</b>

## Outreach and Engagement

06/07:	314
07/08:	1,905
08/09:	4,707
09/10:	5,471
10/11:	9,996
11/12:	9,121
<b>12/13:</b>	<b>6,235</b>
<b>13/14:</b>	<b>7,751</b>
<b>14/15:</b>	<b>6,328</b>

## System Development

06/07:	1,846
07/08:	3,896
08/09:	3,684
09/10:	4,159
10/11:	4,089
11/12:	4,585
<b>12/13:</b>	<b>2,765</b>
<b>13/14:</b>	<b>2,571</b>
<b>14/15:</b>	<b>2,523</b>

\* there are 392 available FSP slots across all age groups



# FSP Outcomes

- \* **Hospitalizations** improved significantly after first year of FSP enrollment, ranging from a 100% improvement for children to 29% for older adults.
- \* **Psychiatric Emergency Services (PES) visits** improved significantly for all age groups ranging from 93% for child clients to 42% for older adults.

## Percent IMPROVEMENT in Outcomes by Age Group Year before FSP Compared with First Year with FSP

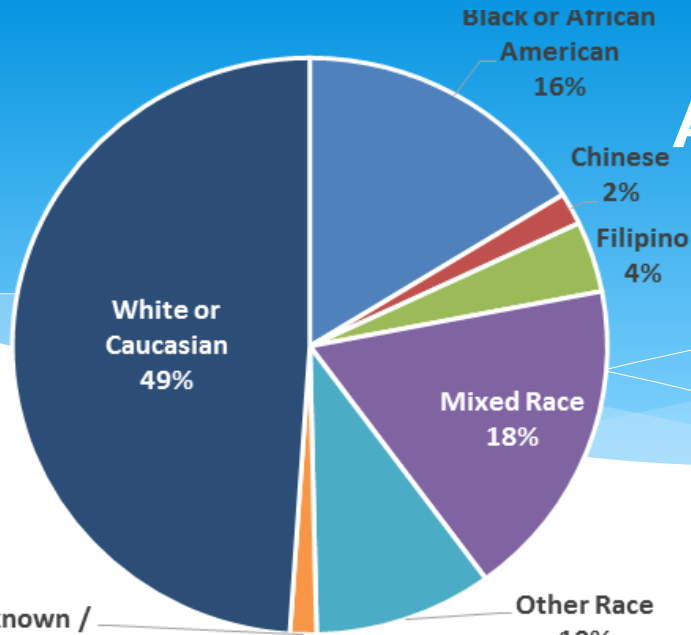
Self-reported Outcomes*	Child (n = 136)	TAY (n = 182)	Adult (n = 298)	Older adult (n = 53)
Homelessness	44%	0%	21%	*
Detention or Incarceration	-16%	17%	21%	*
Arrests	64%	70%	86%	*
Mental Health Emergencies	93%	68%	53%	42%
Physical Health Emergencies	100%	85%	64%	29%
School Suspensions	5%	-1%	*	*
Attendance Ratings	41%	76%	*	*
Grade Ratings	6%	6%	*	*
Employment	*	*	38%	*

\* Not Reported

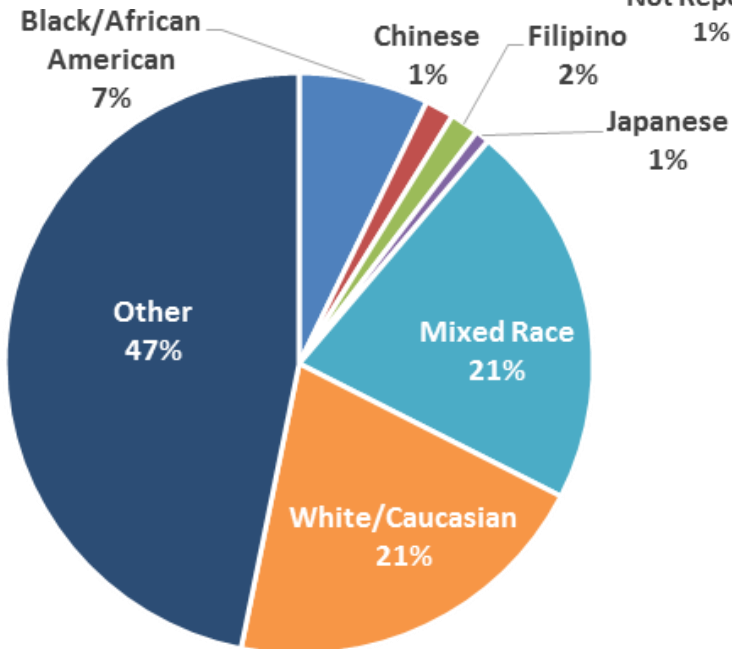
Data is through December 30, 2015

# Ethnicity of FSP clients

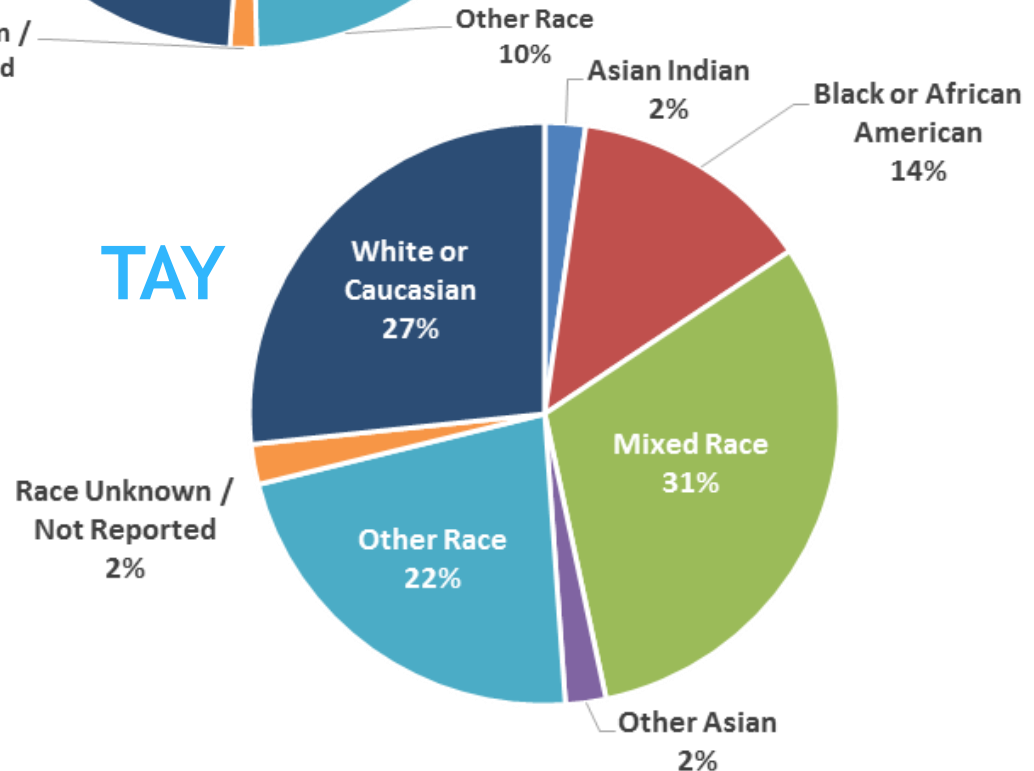
## Adult



## C/Y



## TAY



# Program Highlight

Older Adult System of Integrated Services (OASIS)

# TARGET POPULATION

- \* Age 60+
- \* San Mateo County Resident
- \* Serious Mental Illness
- \* Insured by Health Plan of San Mateo

# OASIS CLIENT PROFILE

- \* Serious mental illness
- \* Multiple, complex medical conditions
- \* Cognitive impairment
- \* Functional limitations
- \* Co-occurring Substance Use

# OASIS FIELD-BASED SERVICES

- \* Psychiatric medication evaluation/monitoring
- \* Intensive case management
- \* Counseling/therapy
- \* Escort and transport to medical appointments (this only to client under psychiatric care)
- \* All services are voluntary

# OASIS DEMOGRAPHICS

- ❖ Average age is 74
- 1 under 50
- 2.7% of clients are in 50s
- 29.7% of clients are in 60s
- 45.4% of clients are in 70s
- 17.3% of clients are in 80s
- 3.8% of clients are in 90s
- 1 is over 100 (102)



# OASIS DEMOGRAPHICS

- \* In FY 2015-2016(06/10/16) total served 301 clients (50 new open & 48 discharged)
- \* In FY 2015-2016 total served 36 Spanish speaking clients (19%), and served 31 Cantonese/ Mandarin speaking clients (17%)
- \* Other languages clients speaks: Tagalog, Farsi, Hmong, Korean and Russian.
- \* In FY 2016-2017 (12/07/16) total served 227 clients (23 new open & 19 discharged)

# REFERRAL PROCESS

- \* CALL OD LINE (573-3689) & LEAVE MESSAGE.
- \* OD Return call to gather client's information & screen for OASIS eligibility.(will discuss in staff meeting)
- \* If eligible for OASIS then a psychiatrist and case manager will be assigned within a week. (Unless case is urgent.)

# BOARD AND CARE

- \* 17 supplemented board and care homes, housing 153 clients
- \* 8 older adult supplemented homes, housing 81 older adult clients
- \* 40 supplemented beds providing enhanced level services for more medically complex and functionally impaired adults/older adults

# Program Outcomes

Prevention & Early Intervention

F/Y 14-15

# PEI Programs

	Ages 0-25	Adults and Older Adults	All Age Groups	Early Onset of Psychotic Disorders
FY 12-13	420	771	3,786	35
FY 13-14	414	1,245	3,601	46
FY 14-15	299	2,090	3,445	60

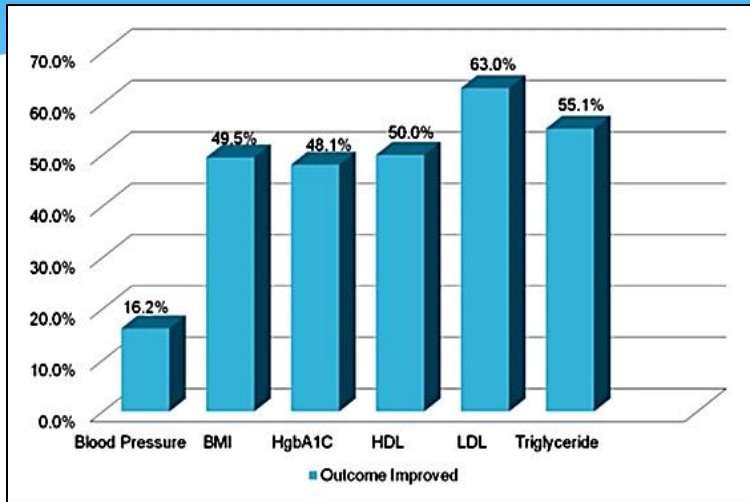
# INN - Total Wellness Update

- \* In FY 14-15 Total Wellness completed its final year as an MHSA Innovation project and has since secured funding for continuation through the Health Plan of San Mateo
- \* Services include: nurse care coordination with primary care services; peer wellness coaching; peer led wellness groups such as smoking cessation and well body; health education; nutrition classes and physical activities; TW WRAP group, among others

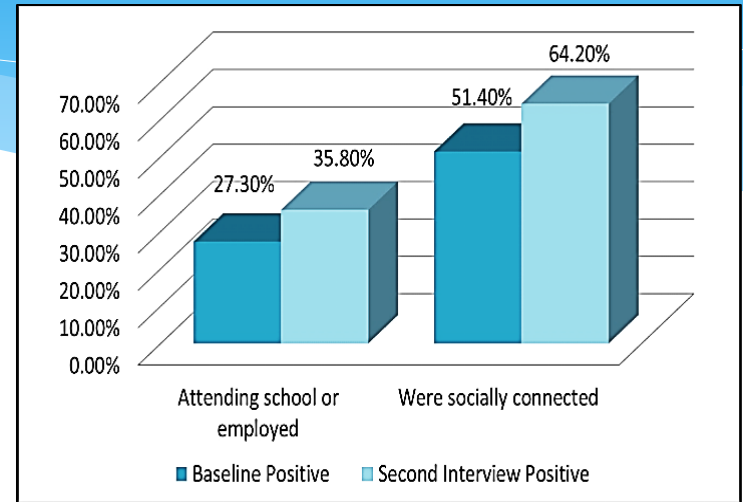
*By the end of FY 14-15, Total Wellness served 601 clients since it's inception in 2011*

# Positive Outcomes of Total Wellness Clients

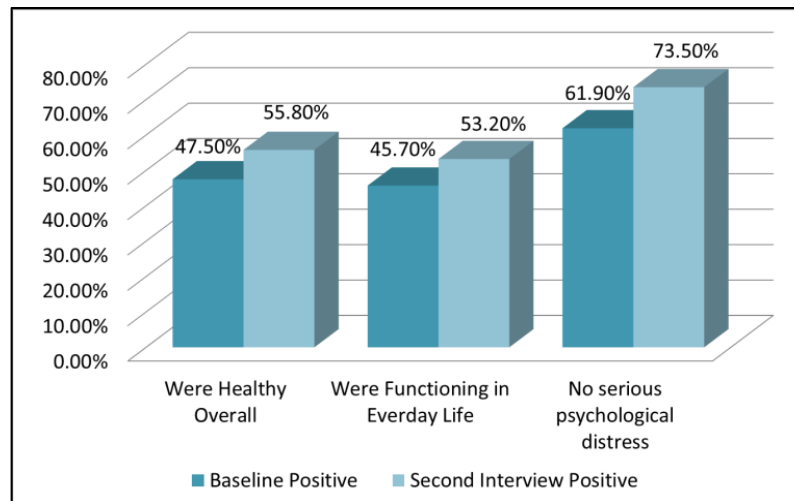
## Physical Health Indicators



## Positive Engagement Indicators



## Other Positive Health Indicators



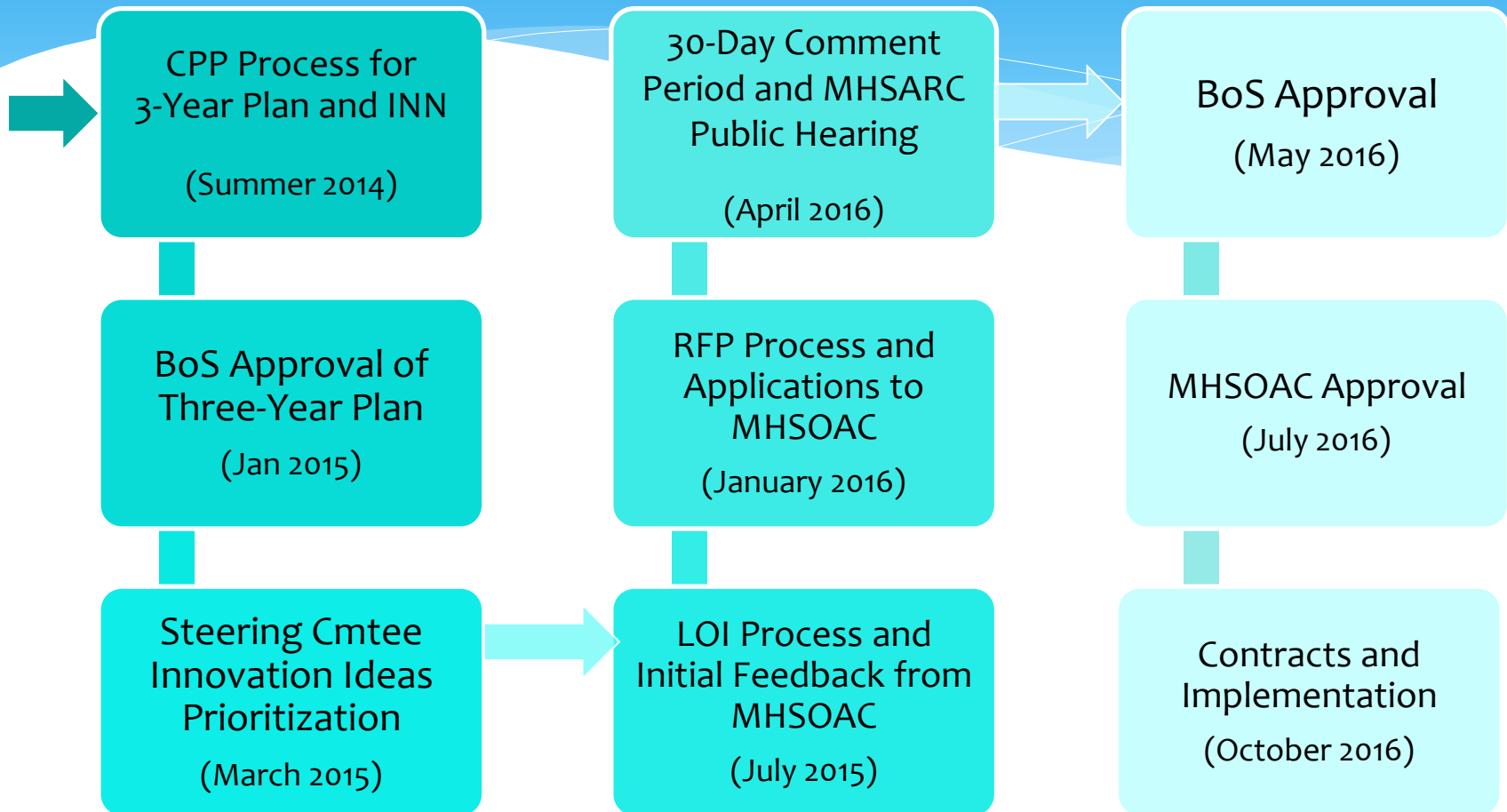
# New INN Programs



- \* Health Ambassador Program – Youth
- \* LGBTQ Coordinated Behavioral Health Services Center
- \* NMT within an Adult Service System



# Community Program Planning (CPP) Process



CPP – Community Program Planning

BoS – Board of Supervisors

LOI – Letter of Interest

RFP – Request for Proposal

MHSARC – Mental Health Substance Abuse and Recovery Commission

MHSOAC – Mental Health Services Oversight and Accountability Commission

# Housing

\* **One-time Allocation: \$ 6,762,000**

Development	Year	Units	MHSA Amount
<b>Cedar Street Apartments</b> MHA in Redwood City	2009	5 MHSA units/ 14 total units	\$524,150
<b>El Camino Apartments</b> MidPen in South San Francisco	2010	20 MHSA units/ 106 total units	\$2,163,200
<b>Delaware Pacific Apartments</b> MidPen in San Mateo	2011	10 MHSA units/ 60 total units	\$1,081,600
<b>Waverly Place Apartments</b> MHA in North Fair Oaks	2015	15 MHSA units/ 16 total units	\$1,973,895
<b>TOTALS</b>		<b>50 MHSA units</b>	<b>\$5,742,845</b>

\* **AB 1929 – Release of unencumbered funds \$1,073,038**

# WET Update

## WET continued to implement the prioritized trainings

- \* Training and Technical Assistance
  - \* Targeted Training for and by Consumers and Family Members
  - \* Trainings to Support Wellness and Recovery
  - \* Cultural Competence Training
  - \* Evidenced-Based Practices Training for System Transformation
- \* Behavioral Health Career Pathways Programs
- \* Financial Incentive Program
- \* Workforce Development and Retention

# New programs/updates for FY 16-17

- \* Three-Year Plan CPP to begin early 2017
- \* New INN programs
- \* Evaluations for CSS- Outreach & Engagement, Health Equity Initiatives and INN programs
- \* WET sustainability planning and impact report
- \* Unencumbered housing funds
- \* MHSA Steering Committee Membership
- \* MHSA Issue Resolution Process

# Program Highlight

Prevention and Recovery in Early Psychosis (PREP)



**PREP & BEAM**  
of SAN MATEO

**innovation in social services**

# Fiscal Report

# Allocations Per Year

	FY 06/07	FY 07/08	FY 08/09	FY 09/10	FY 10/11	FY 11/12	FY 12/13	FY 13/14	FY 14/15	FY 15/16* (estimate)
<b>CSS</b>	\$5,022,392	\$8,321,100	\$10,472,300	\$14,546,300	\$12,665,000	\$11,976,500	\$18,508,727	\$16,467,542	\$18,142,137	\$16,560,239
<b>PEI</b>	-	\$1,989,300	\$3,997,100	\$5,588,900	\$3,661,600	\$3,136,600	\$ 4,935,660	\$4,391,344	\$4,837,903	\$4,416,064
<b>INN</b>	-	-	\$1,163,000	\$1,163,000	\$1,953,100	\$794,700	\$ 1,233,915	\$1,097,837	\$1,209,476	\$1,104,016
<b>WET</b>	\$1,685,900	\$1,751,700	-	-	-	-	-	-	-	-
<b>CF/IT</b>	-	\$5,539,300	\$1,740,400	-	-	-	-	-	-	-
<b>HOUS- ING</b>	-	\$6,762,000	-	-	-	-	-	-	-	-
<b>TOTAL</b>	<b>\$6,708,292</b>	<b>\$24,363,400</b>	<b>\$17,372,800</b>	<b>\$21,298,200</b>	<b>\$18,279,700</b>	<b>\$15,907,800</b>	<b>\$24,678,302</b>	<b>\$21,956,723</b>	<b>\$24,189,516</b>	<b>\$22,080,319</b>

# Fiscal Considerations

- \* AB 100, on July 1, 2012, monthly MHSA allocations based on actual accrual of tax revenue.
- \* One time allocations in FY 13-14 and FY 14-15, due to change in tax laws
- \* Unspent funds, increased FY16-17 projections, and savings from INN program allowed for priority expansions
- \* “No Place Like Home” \$2 billion bond - \$2million impact to San Mateo off the top and potential impact on expansions
- \* Prudent reserve remains at \$600K



# Priority expansions

Component	Updated Priority Expansions FY 14-17	Implemented	FY
CSS, FSP	Support and assistance program to connect MI with vocational, social and other services	YES California Clubhouse	FY 14/15
	Drop-in Center(DIC) in South County	YES Edgewood DIC	FY 15/16
	FSP slots for transition age youth with housing	YES Edgewood FSP	FY 15/16
	FSP slots for older adults	NO	
CSS, Non-FSP	Expansion of supports for transition age youth		FY 15/16
	Expansion of supports for older adults	NO	
PEI	Culturally aligned and community-defined outreach with a focus on emerging communities and outcome-based practices	NO	Expected FY 16/17
	Expansion of Stigma Free San Mateo, Suicide Prevention and Student Mental Health efforts	NO	Expected FY 16/17

# Next Steps

- \* 30 day public comment
- \* Public Hearing at the MHSARC
  - \* January 4, 2017, 3-5pm
  - \* SMC Health System, 225 37<sup>th</sup> Ave. Rm 100, San Mateo
- \* Presentation to the Board for adoption of the plan
- \* Controller to certify expenditures
- \* Submit to the State MHSOAC for approval Contact:



# Questions, Comments?

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