



Mental Health Services Act (MHSA)


Three-Year Plan, Fiscal Year 2020-23

Mental Health and Substance Use Recovery Commission
April 29, 2020



SAN MATEO COUNTY HEALTH
**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

MHSA Overview

76%  **Community Services & Supports (CSS)**
Direct treatment and recovery services for serious mental illness or serious emotional disturbance

19%  **Prevention & Early Intervention (PEI)**
Interventions prior to the onset of mental illness and early onset of psychotic disorders

5%  **Innovation (INN)**
New approaches and community-driven best practices

Workforce Education and Training (WET)



Education, training and workforce development to increase capacity and diversity of the mental health workforce



Capital Facilities and Technology Needs (CFTN)

Buildings and technology used for the delivery of MHSA services to individuals and their families.

1% tax on personal income over \$1 million

San Mateo County: \$29.7M annual 5-year average through FY 18-19

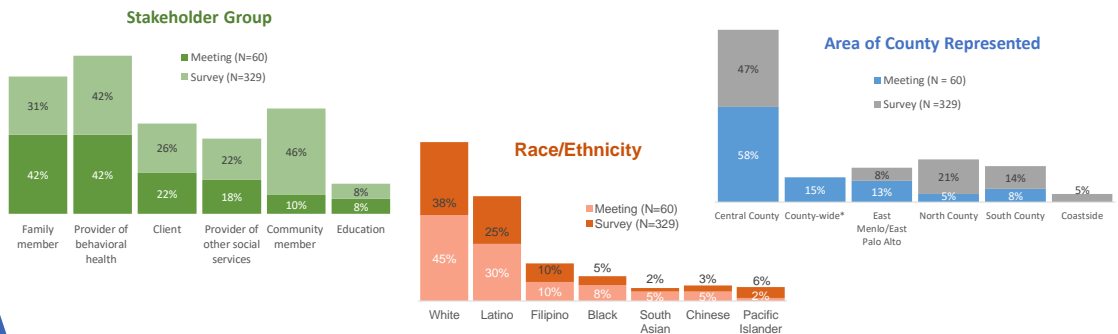
What's in a Three-Year Plan

1. Community Program Planning (CPP)
2. Revenue and Expenditure Projections
3. Ongoing Program Commitments
4. Strategic Priorities



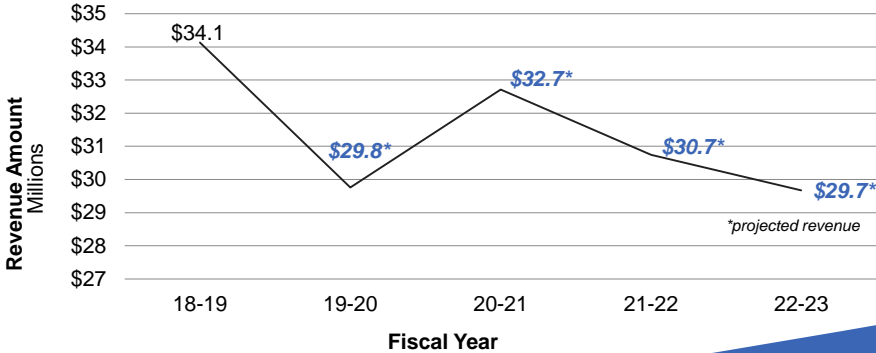
Community Program Planning

- 400+ individuals engaged via survey, input sessions and meetings
- Demographics collected for survey and April 29th meeting
 - 28 targeted and geographically-based input sessions conducted (not represented in the data)
 - 57 stipends to clients and family members were provided



Revenue Projections

- San Mateo County's MHSO Ongoing Expenditure Projection is \$29,986,179



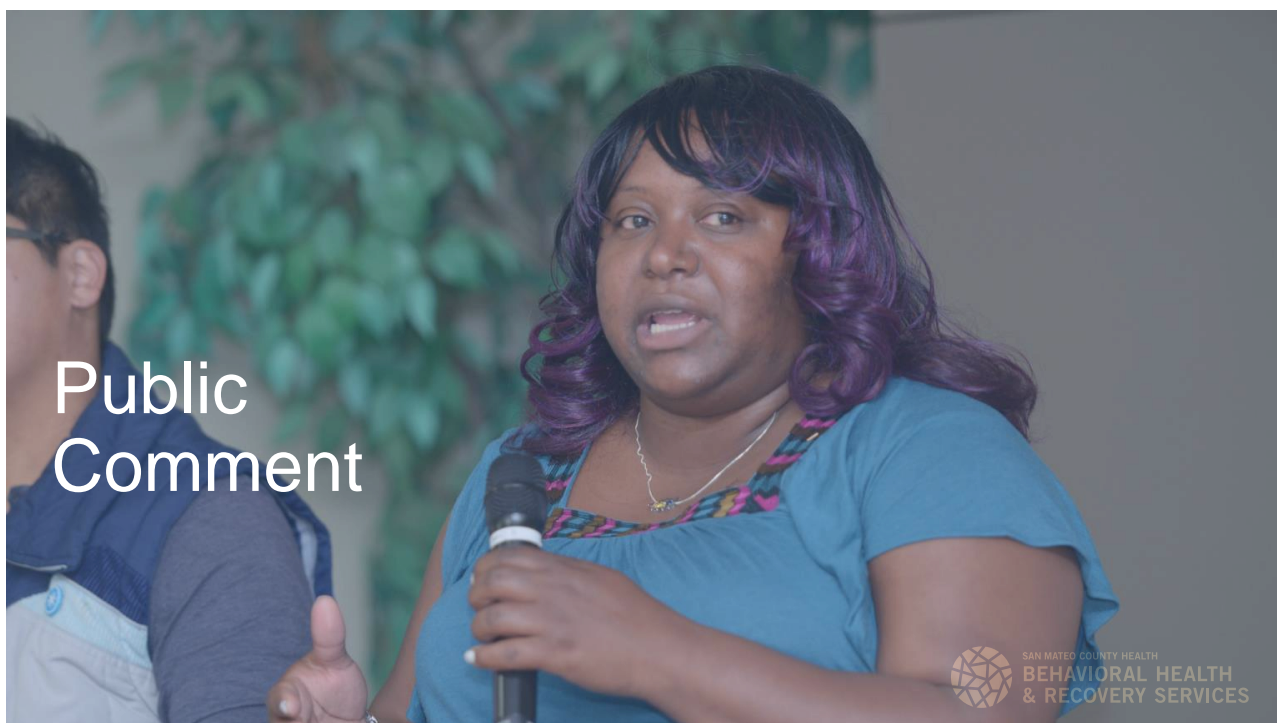
Expenditure Projections

- Current fiscal priorities
 - Ongoing: \$30M
 - One-Time: \$12.5M
 - Operational Reserve Goal: \$17M
- New fiscal considerations (one-time)
 - \$5M unspent from FY 2018-19 allocated to COVID-19 related impacts
 - - \$2M from operational reserve in FY 22-23.
 - \$5M in new MHSO Innovation programs (pending approval)



Plan to Spend \$5M One-Time (COVID)

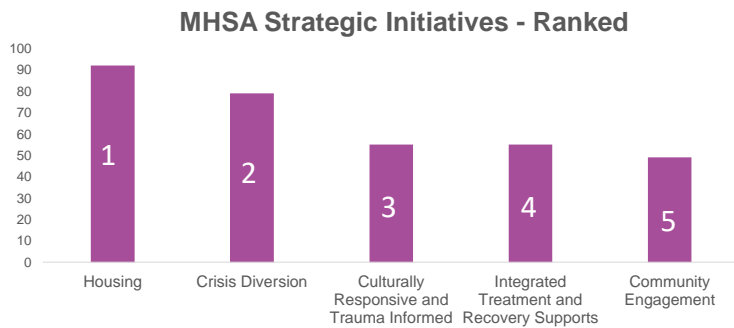
Priority	Item	Total Annual Cost	Notes
Technology Supports	Phones + Data Plan for BHRS Clients	\$108,000	Cost is for data plan + free phones for BHRS clients (\$360/unit; 300 units)
	Phones + Data Plan for Contractors	\$270,000	Cost is for data plan + free phones for MHSA contractors (\$360/unit; 750 units)
	Tablets + Data Plan	\$46,000	Cost is for tablets + data plan for residential sites/B&C; for telehealth, staff, etc.(\$460/unit; 100 units)
Technology Total		\$424,000	\$424,000
Workforce Needs	Workspace assessment and safety	\$200,000	Safety assessment + measures (pexi glass, cubicle reconfiguration, other spaces, PPE)
Workforce Needs Total		\$200,000	\$200,000
Clients supports	Client activities/needs	\$50,000	For residential sites; card games, apps, food, supports
	Alternative Care Sites	\$100,000	For residential clients that are COVID-19 positive and need to be quarantined
	Hotels for homeless	\$200,000	Mass jail releases and reduction of shelter beds due to COVID
	Co-occurring detox facility	\$200,000	Reduced beds due to physical distancing
	COVID Testing Program for high risk clients	\$96,000	Regular 2x/week testing at Palm Ave Detox (25 tests/wk) will allow clients to enter tx immediately and CYOC as needed; will allow MediCal billing
Client Supports Total		\$846,000	\$846,000
Stop Gaps (ongoing programs)	Primary Care Interface	\$1,337,972	
	Resource Management	\$2,192,028	
Stop Gaps Total		\$3,530,000	\$3,530,000
TOTAL		\$5,000,000	\$5,000,000



Prioritization Results



Strategic Priorities



Top 2 strategies for Housing Initiative

Strategy Recommendation	Priority Weighted Avg
Mental health workers providing on the field, mobile mental health assessments and treatment for homeless individuals and linkages to housing.	1.73
Trained/certified peers providing housing navigation, support services (e.g. independent living skills, accessing housing subsidies) to clients and training on the issue of homelessness to service providers (primary care physicians, mental health staff, police/first responders, etc.).	2.0

MHSARC Motion

1. Vote to open a 30-day Public Comment Period for the Mental Health Services Act (MSHA) Three-Year Program and Expenditure Plan FY 20/21 through FY 22/23 & Annual Update FY 20/21
2. Vote to open a 30-day Public Comment Period for the MSHA Plan to Spend \$5 Million in One-Time Funds for COVID-19 related impacts

Next Steps

3. MHSA Three-Year Plan Development

- MHSARC Public Hearing July 1st + vote to close 30-day public comment period
- Board of Supervisors Adoption



Thank you!



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