



**San Mateo County Health System
Behavioral Health and Recovery Services Division**

MHSA Steering Committee

March 6th, 2013 - 3 to 5:00 p.m.

Health System Building – 225 37th Avenue, Room 100 - San Mateo

AGENDA

- 1. Welcome and introductions** 3:15 to 3:20
Dave Pine, Supervisor District 1, Co-Chair
Cameron Johnson, MHSARC Chair, Co-Chair
 - Call to order and action to release plan for public comment

- 2. MHSA 101** 3:20 to 3:30
Sandra Santana-Mora, BHRS Manager of Strategic Operations

- 3. MHSA-funded programs - Presentations** 3:30 to 4:15
 - Prevention and Referral in Early Psychosis *Kate Hardy, Clinical Psychologist, UCSF*
 - Total Wellness *Chris Esquerra, BHRS Deputy Medical Director*
 - OASIS *Diane Dworkin, BHRS Manager for Older Adults*

- 4. MHSA progress report (past year)** 4:15 to 4:25
 - Report per component *Sandra Santana-Mora with
Kristin Dempsey, BHRS Workforce Development Director,
Paul Sorbo, BHRS Deputy Director, Children & Youth, and
Judy Davila, BHRS Deputy Director, Adults*

- 5. FY 13/14 Annual Update** 4:25 to 4:40
Stephen Kaplan, BHRS Director

- 6. Public Comment** 4:40 to 4:55
Cameron Johnson (Facilitator)

- 7. Next steps and closing remarks** 4:55 to 5:00
 - Public comment period ends May 1st, 2013 with a public hearing to be hosted by the MHSARC *Supervisor Pine*

PUBLIC COMMENT PERIOD: March 6th, 2013 – May 1st, 2013

**PUBLIC HEARING: May 1st, 2013 – 3 to 5 p.m.
225 37th Avenue, Room 100, San Mateo, CA 94606**



MENTAL HEALTH SERVICES ACT

STEERING COMMITTEE MEETING

March 6, 2013

PROGRESS REPORT and ANNUAL UPDATE FY 13/14

San Mateo County Health System
Behavioral Health and Recovery Services Division



OUR AGENDA FOR TODAY

- MHTSA 101
- PROGRAMS PRESENTATIONS
- PROGRESS REPORT (previous year)
- PLAN FOR FY 13/14

MENTAL HEALTH SERVICES ACT

101

PROPOSITION 63

- Passed in November of 2004
- 1% tax on personal income > \$1M
- Funds mental health services
 - Co-occurring OK
- No supplant rule
- 3-year reversion cycle for most components



PRINCIPLES AND FUNDING BOUNDARIES

- Wellness, recovery and resilience
- Cultural competence
- Consumer/family driven services
- Integrated service experience
- Community collaboration

Fundable activities are grouped into 'components', each one with its own set of guidelines and rules.

FUNDING CATEGORIES



BEHAVIORAL HEALTH AND RECOVERY SERVICES



STRATEGIC INITIATIVES

PROGRAM PRESENTATION

PREP

**PREVENTION & REFERRAL
IN EARLY PSYCHOSIS**

PROGRAM PRESENTATION

TOTAL

WELLNESS

PROGRAM PRESENTATION

OASIS

OLDER ADULTS

SYSTEM OF INTEGRATED SERVICES

PROGRESS REPORT

MHSA AT A GLANCE – CLIENTS SERVED

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

system development initiatives

06/07:	1,846
07/08:	3,896
08/09:	3,684
09/10:	4,159
10/11:	4,089
11/12:	4,585

full service partnerships

06/07:	161
07/08:	281
08/09:	336
09/10:	350
10/11:	428
11/12:	426

OC

Build
Organizational
Capacity

L&I

Cultivate
Learning &
Improvement

S&S

Enhance Systems
& Supports

C&F

Empower
Clients & Families

W&E

Welcome
and Engage

D&E

Promote
Diversity & Equity

CLIENTS SERVED

PROGRAM	06/07	07/08	08/09	09/10	10/11	11/12
Full Service Partnership (Adults/Older Adults)	41 A 33 OA	85 A 57 OA	125 A 103 OA	129 A 78 OA	169 A 81 OA	172 A 89 OA
Full Service Partnership (Children/Youth/TAY)	87 C/Y/TAY	67 C/Y 55 TAY	60 C/Y 48 TAY	89 C/Y 54 TAY	135 C/Y 43 TAY	125 C/Y 40 TAY
Primary Care-Based Behavioral Health Services	128	665	852	866	845	796
Outreach East Palo Alto	N/A	1,250	2,978	3,250	3,839	4,076
Outreach North County Collaborative	N/A	N/A	430	1,242	5,285	4,928
Older Adults System of Integrated Services	100	187	259	280	280	247
Total Wellness	N/A	N/A	N/A	N/A	88	290

CLIENTS SERVED

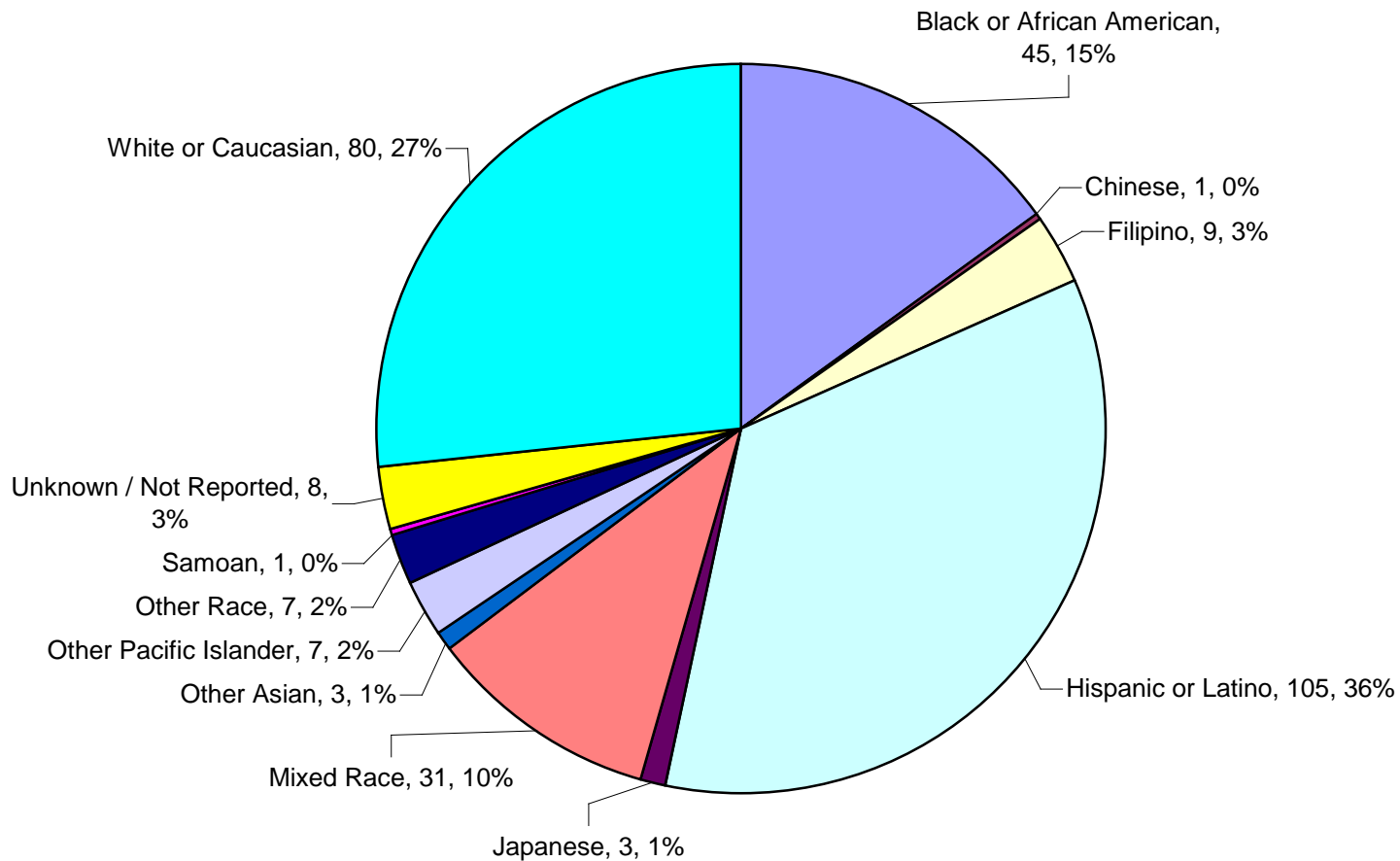
PROGRAM	06/07	07/08	08/09	09/10	10/11	11/12
Crisis Hotline	168	539	677	728	728	760
Pathways	56	181	185	123	143	166
Consumer / family partners	595	842	764	932	904	1,525
EBP expansion (youth/adults)	948	2,192	2,125	2,076	2,223	2,395
Puente DD clinic	N/A	N/A	69	117	144	148
Interns	135	131	224	368	350	564

FULL SERVICE PARTNERSHIPS OUTCOMES

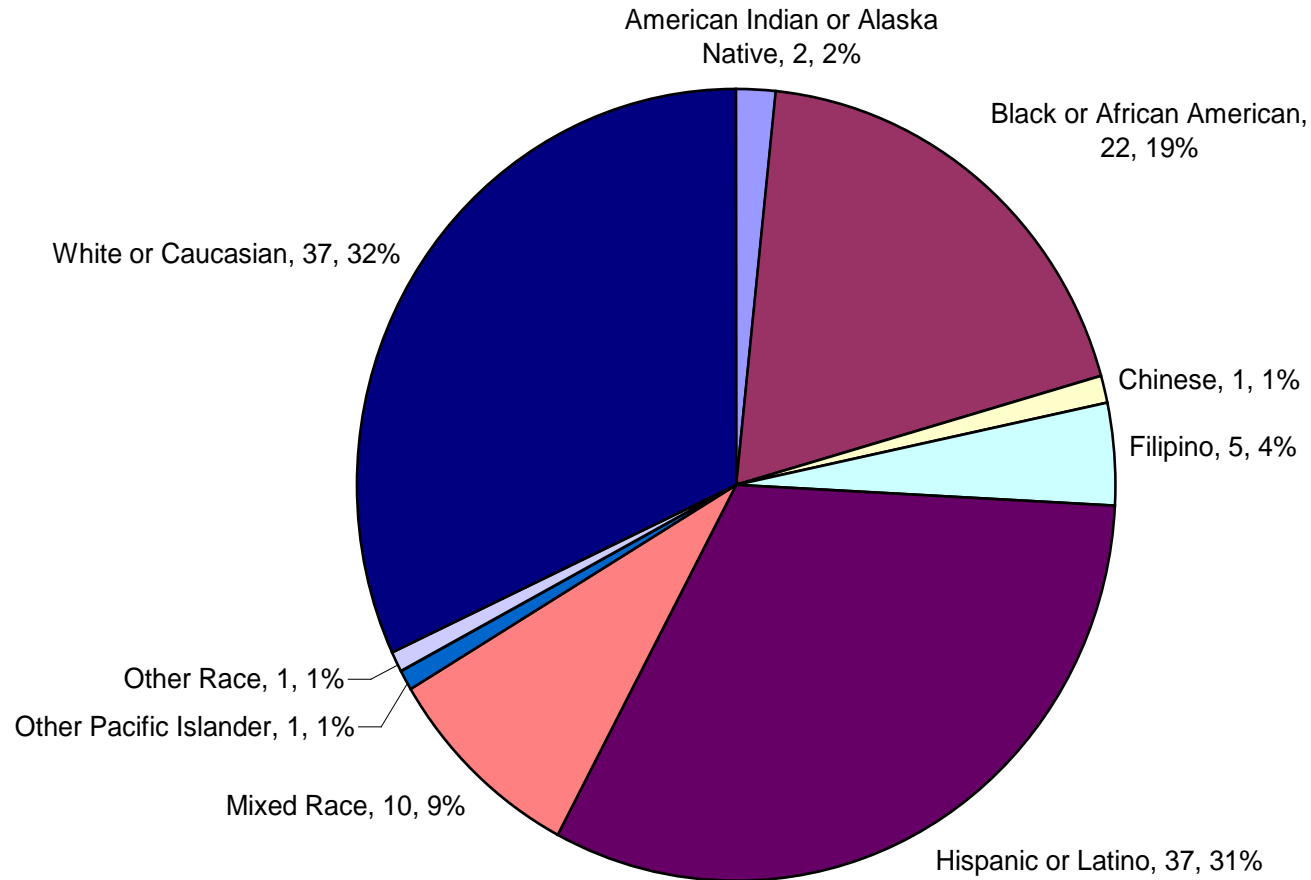
OUTCOMES	CHILDREN & YOUTH	TRANSITION AGE YOUTH (TAY)
Decreased Psychiatric Emergency Services Visit	67%	59%
Decreased Hospitalization	57%	65%

Percentage of program participants showing decreased rates of hospitalization and visits to Psychiatric Emergency Services and hospitalizations.

FULL SERVICE PARTNERSHIPS ETHNIC BREAKDOWN (Children and Youth)



FULL SERVICE PARTNERSHIPS ETHNIC BREAKDOWN (Transition Age Youth)

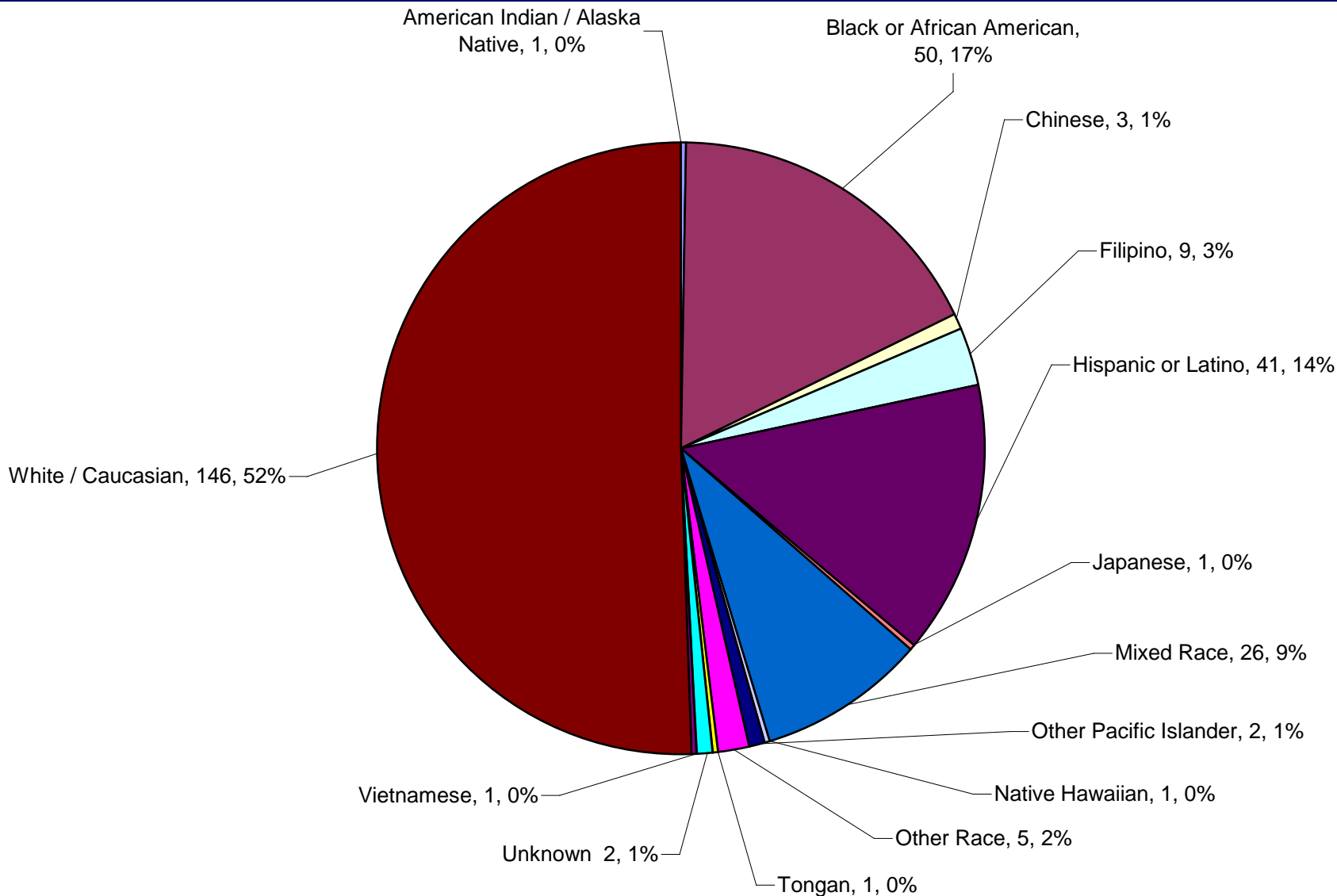


FULL SERVICE PARTNERSHIPS OUTCOMES

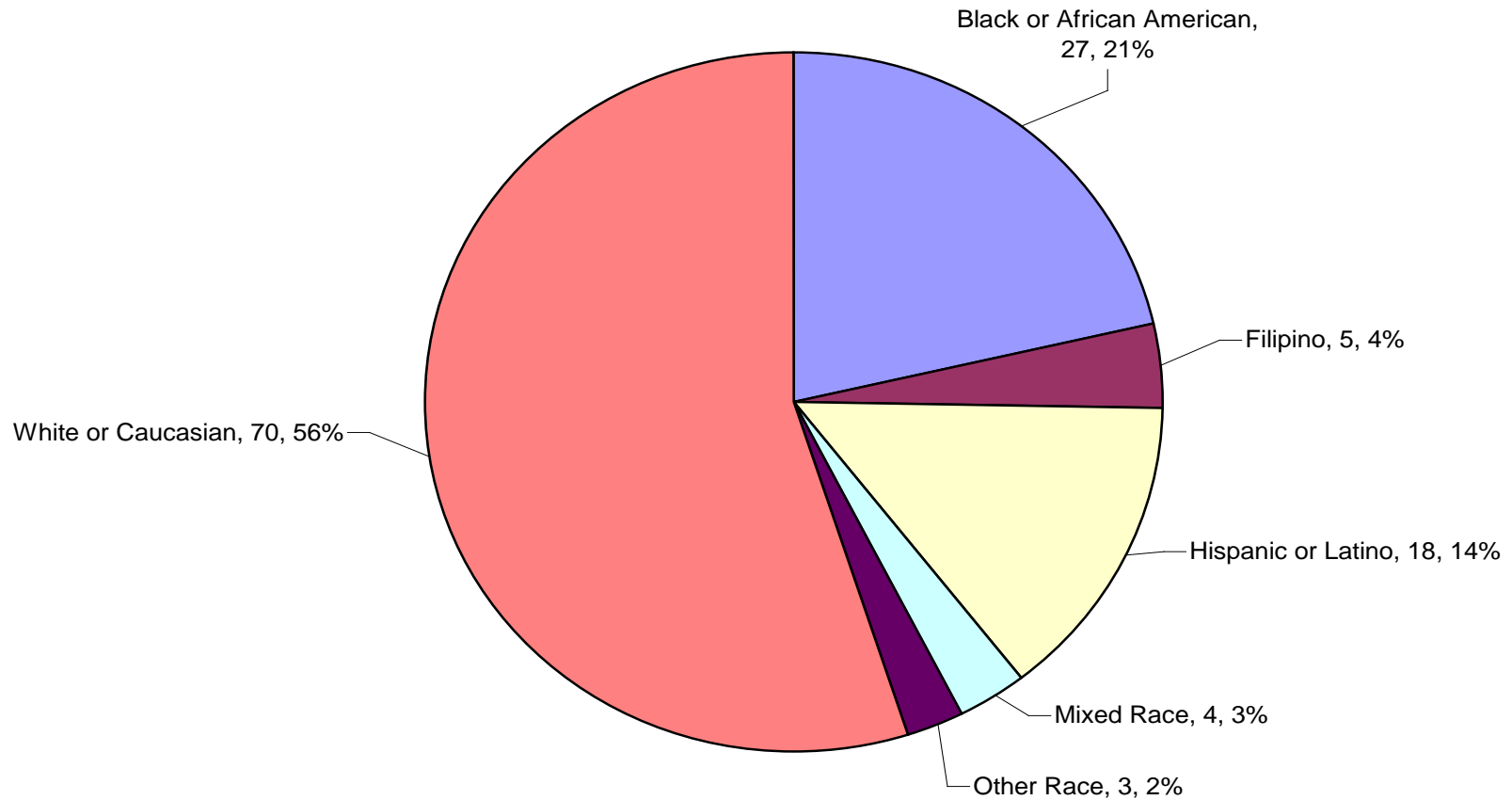
OUTCOMES	ADULTS	OLDER ADULTS
Decreased Psych Emergency Services Visit	57%	65%
Decreased Hospitalization	72%	72%

Percentage of program participants showing decreased rates of hospitalization and visits to Psychiatric Emergency Services and hospitalizations.

FULL SERVICE PARTNERSHIPS ETHNIC BREAKDOWN (Adults)



FULL SERVICE PARTNERSHIPS ETHNIC BREAKDOWN (Older Adults)



HOUSING – KEY ELEMENTS

- Construct or acquire housing units for seriously mentally ill adults, older adults, families with severely emotionally disturbed children and transitional aged youth
- Funds for both construction and operation
- \$121,665 per unit not to exceed one third cost of unit; and up to \$121,665 per unit for unit operating costs
- **BHRS responsible for services through Full Service Partnerships**



HOUSING PROJECTS

Pictures of the completed project



Cedar Street Apartments - Approved in 2009 (14 units) - Original Sketch



HOUSING PROJECTS

El Camino Apartments - Approved in 2010 (20 units) - Original Sketch



In progress



Completed project



HOUSING PROJECTS



Delaware Street Apartment - Approved in 2011 (10 units) – Original Sketch

HOUSING – FUNDING BREAKDOWN

ONE-TIME ALLOCATION:		\$ 6,762,000
■ Cedar Street	\$ 524,150	
■ S. El Camino	\$ 2,163,200	
■ Delaware Street	<u>\$ 1,124,860</u>	
TOTAL COMMITTED	\$ 3,812,210	
Remainder:		\$ 2,949,790 (interest)



PREVENTION AND EARLY INTERVENTION

- Early Childhood Community Team – Targets the 0 to 5 population, parents and child care service providers
 - Numbers have increased dramatically with program in full operation in 11/12, currently providing MH consultation services to 130 children and 25 staff, and parent groups in the Coast. Also serving 8 families in Daly City.

PEI

Advance
Prevention &
Early Intervention

W&E

Welcome
and Engage

TW

Foster Total
Wellness

D&E

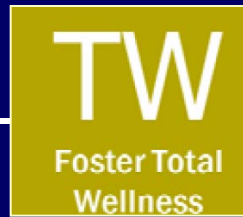
Promote
Diversity & Equity

C&F

Empower
Clients & Families

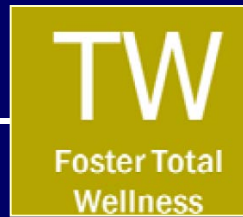
PREVENTION AND EARLY INTERVENTION

- Office of Diversity and Equity Highlights:
 - Mental Health First Aid – 4 12-hr trainings provided with blended MHSA funding (WET and PEI)
 - Parent Project – Trained 4 new facilitators from different ethnicities and held a Latino and a Pacific Islander Parent Project training that reached more than 30 parents.
 - Photovoice / Digital Storytelling
 - Various trainings hosted by the health equity initiatives
 - African American Community ; Chinese Health Initiative; Pacific Islander Initiative; Filipino Mental Health Initiative; Latino Collaborative; PRIDE Initiative; Spirituality Initiative



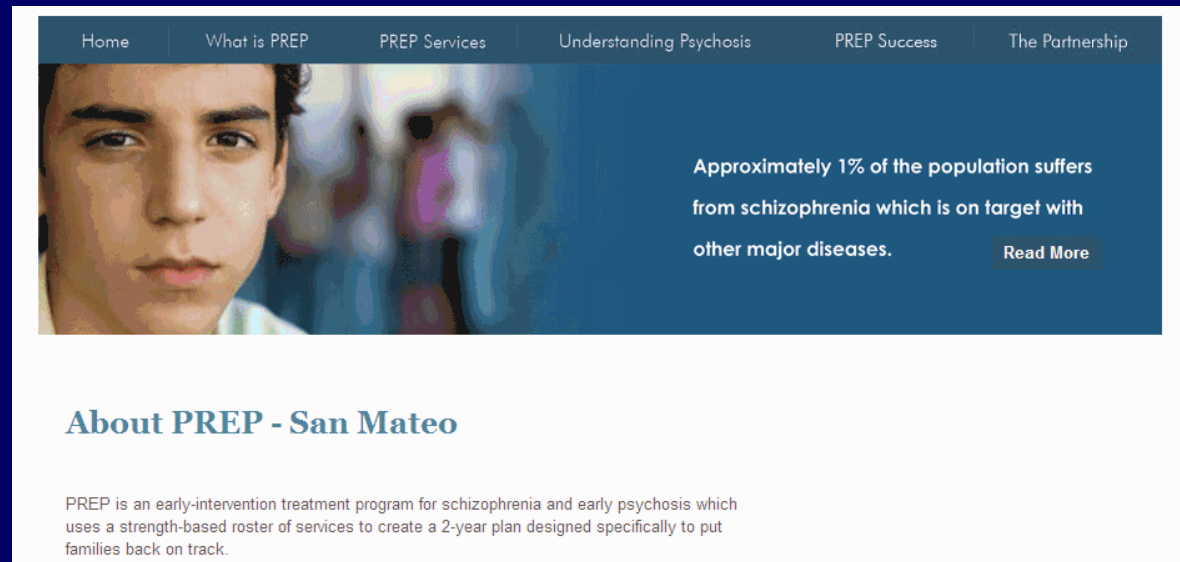
PREVENTION AND EARLY INTERVENTION

- Community Interventions for School and Transition Age Youth:
 - Teaching Pro-social Skills served 40 students in 6 schools (January through June 2011)
 - Seeking Safety, served 141 youth in 510 group sessions in FY 11/12 waiting for EI Centro numbers
 - Project SUCCESS: 15 clients served in 1 quarter of programming
 - Middle school initiative served 53 students in FY 10/11



PREVENTION AND EARLY INTERVENTION

- PREP, Prevention and Recovery in Early Psychosis, targets individuals ages 14 to 35 with first onset schizophrenia and other psychotic disorders.



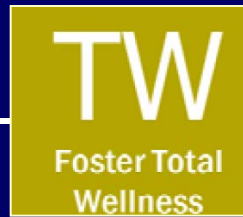
Home | What is PREP | PREP Services | Understanding Psychosis | PREP Success | The Partnership

Approximately 1% of the population suffers from schizophrenia which is on target with other major diseases. [Read More](#)

About PREP - San Mateo

PREP is an early-intervention treatment program for schizophrenia and early psychosis which uses a strength-based roster of services to create a 2-year plan designed specifically to put families back on track.

PREP referral line is 650.504.3374



WORKFORCE EDUCATION AND TRAINING

- BHRS Staff Mentoring Pilot (40 mentors and mentees; 50 workshops attendees)
- Mental Health Loan Assumption Awardees (42)
- Lived Experience Academy (34 graduates)
- Ongoing implementation of evidence based practices including Seeking Safety, Motivational interviewing, WRAP, Strength-Based Case Management, trauma-informed care, mindfulness based cognitive therapies (1,100)
- Continued recruitment of interns and distribution of stipends with increased collaboration with ODE (20 stipends, 65 interns)
- High School Career Pathways – Students and East Palo Alto Academy and Terra Nova High School taught about behavioral healthcare and behavioral health care careers – (140 students)

OC

Build
Organizational
Capacity

L&I

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S&S

Enhance Systems
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INNOVATION

- The mission of Total Wellness is to ensure a coordinated and holistic, wellness-based approach for our clients with serious and persistent behavioral health issues
- 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
- A total of 349 individuals have been enrolled and served since the program went live in February 2011

TW

Foster Total
Wellness

INNOVATION

- Based on current TW interventions, enrollees are improving in terms of health outcomes
- Between baseline and 6-month reassessment, 50% improvement shown in HgbA1c, 47.60% in Triglycerides, 42.90% in BMI, and 21.50% in blood pressure
- 73.50% of enrollees indicated no serious psychological distress at 6-month versus 61.90% baseline; and 64.20% feeling socially connected versus 51.40% baseline
- Increase in medical outpatient service utilization and a decrease in acute/inpatient service utilization by these enrollees when comparing their utilization rates of 2010-11 and 2011-12

TW

Foster Total
Wellness

TECHNOLOGY

- Upgraded infrastructure to accommodate more than 600 users including use by San Mateo Medical Center Psychiatric Emergency Services and Psychiatric Inpatient
- Upgraded software to comply with Meaningful Use requirements.
- Employed a person to support contracted Community Based Organizations to enhance their use of Avatar
- Paid 40% of the salary of a trainer to create online Electronic Health Records trainings and keep our training/support documentation up to date



CURRENT

CONTEXT

MHSA LANDSCAPE

- More local flexibility
 - Contradictory instructions still in the books
- Monthly influx of tax dollars on an accrual basis
 - Great for cash flow, not so great for planning
 - First disbursement to San Mateo on September 2012, monthly after that.
 - Will know allocation for FY 12/13 at the end of FY 12/13.
 - Uncertainty in terms of revenue: hard to predict how much money we will have at the end of the year

MHSA LANDSCAPE

- Oversight and Accountability to “receive” plans to support evaluation
 - Ongoing FSP evaluation and PEI evaluation in the works
- County Board of Supervisors to approve plans
- County Controller to certify expenditures
- Increased demands on the dollars, with several emerging legislative proposals that would affect the use of MHSA dollars
 - Two years ago the State “borrowed” more than 800 million two years ago. Last year, 60 million were redirected to the statewide Disparities Reduction project

MHSA LANDSCAPE

- **SB 585 (Steinberg)**: Bill would clarify that services provided under Laura's Law may be provided pursuant to the procedures specified in the Mental Health Services Act.
- **AB 1367 (Mansoor)**: Would declare that Laura's Law is consistent with and furthers the intent of the MHSA. Would clarify that services provided under Laura's Law may be provided pursuant to the MHSA. Would provide that outreach under Prevention and Early Intervention programs may include the provision of funds to school districts, county offices of education, and charter schools for the purposes of obtaining and providing training to identify students with mental health issues that may result in a threat to themselves or others.

MHSA LANDSCAPE

- **SB 664 (Yee):** Laura's Law regulates designated assisted outpatient treatment services, which a county may choose to provide for its residents. To implement the program, the county Board of Supervisors is required to, by resolution, authorize the program and make a finding that no voluntary mental health program serving adults, and no children's mental health program, may be reduced as a result of the program's implementation. This bill would no longer require a county to authorize the program by resolution and make these findings to implement the program.

REVENUE EVOLUTION

	FISCAL YEAR						
	ACTUAL (millions)					ESTIMATED	
	07/08	08/09	09/10	10/11	11/12	12/13	13/14
CSS	518	650	900	784	741	1,005	884
PEI	115	233	330	216	185	251	221
INN	-	71	71	120	49	66	58
TOTAL	633	954	1,301	1,120	975	1,322	1,163



REVENUE EVOLUTION

	FISCAL YEAR						
	ACTUAL (millions)					ESTIMATED	
	07/08	08/09	09/10	10/11	11/12	12/13	13/14
CSS	518	650	900	784	741	1,005	884
PEI	115	233	330	216	185	251	221
INN	-	71	71	120	49	66	58
TOTAL	633	954	1,301	1,120	975	1,322	1,163

+36.4

-16.2

-14.9

+35.6

-13.7




FISCAL YEAR 13/14

PLAN



EXPENDITURE vs. REVENUE

FYs 11/12 and 12/13

	ACTUAL EXPENDITURES FY11/12	ACTUAL ALLOCATION FY11/12	PROJECTED EXPENDITURES FY12/13	ACTUAL ALLOCATION FY12/13
CSS	\$13,077,905	\$11,976,500	\$14,118,447	
PEI	\$5,942,713	\$3,136,600	\$5,708,136	

San Mateo's strategy of using higher revenue years to carry us through lower revenue years has paid off, allowing us to maintain the expenditure level using previous years unspent, encumbered dollars.

PROJECTED EXPANSION

CATEGORY	ITEM	# UNITS	COST PER UNIT	TOTAL ANNUAL COST
CSS FSP	Slots for psychiatric emergency services and 3AB (TAY and Adults) 	10	\$22,193	\$221,930
CSS FSP	Slots for TAY, with housing	5	\$46,000	\$230,000
CSS FSP	Expansion of integrated FSPs to Central (Adults)	5	\$8,733	\$43,665
CSS FSP	Expansion of Wraparound services for children and youth	5	\$36,000	\$180,000
CSS FSP	Additional housing for existing FSP Adults	25	\$5,774	\$144,350
CSS FSP TOTAL				\$819,945
CSS NON- FSP	Pre-crisis response services 	80	\$3,125	\$250,000
CSS NON- FSP	Expansion of supports for youth transitioning to adulthood	1	\$135,000	\$135,000
CSS NON- FSP	Expansion of assessment, supported employment, and financial empowerment for clients	1	\$100,000	\$100,000
CSS NON-FSP TOTAL				\$485,000
TOTALS				\$1,304,945

PROJECTED EXPANSION

PEI 0 TO 25	Expansion of Teaching Pro-social Skills	1	\$200,000	\$200,000
PEI OTHER	Expansion of Parent Project	1	\$20,000	\$20,000
PEI TOTAL				\$220,000

- ❖ Our known unspent dollars (previous year) are already committed for ongoing programming
- ❖ Our expansion dollars are committed for agreed upon funding priorities in process of being implemented up to \$1.3M for CSS and 220K for PEI
- ❖ We expect a revenue decline in the following year
- ❖ Pressures on MHSA dollars continue to mount at the State level

OUR RECOMMENDATION FOR MOVING FORWARD

- Flat plan (no additional expansions until revenue for FY 12/13 is known – July 2013)
- Continue implementing identified priorities, which have not changed
- Revisit plan if needed once new revenue projection for FY 13/14 is known
- Continue monitoring State developments

DISCUSSION



NEXT STEPS

- Public comment period opens today, closes on May 1st, 2013
- Public hearing to be held on May 1st, 2013, at 225 37th Avenue, San Mateo, from 3 to 5 pm
- Board of Supervisors to hear plan in early May
- Controller to certify expenditures before the end of the current fiscal year
- Plan sent to the Oversight and Accountability Commission as soon as all previous steps are finalized
- Continue the work!

THANK

YOU

Summary of Laura's Law Legislation for CMDHA Review - (As of March 4, 2013)

[AB 1265 \(Conway\) Mental health: Assisted outpatient treatment.](#)

- **SUMMARY:** This bill would extend the initial period of court-ordered treatment under "Laura's Law" from six months to up to one year. This bill would provide that, upon the release of a person from intensive treatment or postcertification treatment under WIC 5150, the professional staff of the agency or facility that provided the treatment shall evaluate whether the person meets the criteria for assisted outpatient treatment. This bill would authorize the professional staff to request the county mental health director to file a petition in the superior court for assisted outpatient treatment if that person meets the criteria. This bill would provide that these provisions apply only in a county that elects to implement Laura's Law.
- *Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.*

[AB 1367 \(Mansoor\) Mental health: Mental Health Services Fund.](#)

- **SUMMARY:** This bill would clarify that services provided under Laura's Law may be provided pursuant to the Mental Health Services Act. This bill would provide that outreach under prevention and early intervention programs may include the provision of funds to school districts, county offices of education, and charter schools for the purposes of obtaining and providing training to identify students with mental health issues that may result in a threat to themselves or others. By allocating moneys in the Mental Health Services Fund for new purposes, this bill would make an appropriation.
- *Because the bill would amend Proposition 63, it would require a 2/3 vote of the Legislature.*
- *Vote: 2/3. Appropriation: yes. Fiscal committee: yes. State-mandated local program: no.*

[SB 664 \(Yee\) Mental health: Laura's Law: Mental Health Services Fund.](#)

- **SUMMARY:** This bill would remove two provisions in current law: the requirement a county to authorize the Assisted Outpatient Treatment (AOT) program through Board of Supervisors resolution, and to make findings that no voluntary mental health program serving adults and not children's mental health program would be reduced as a result of implementing AOT. The bill authorizes a county to limit the number of persons to whom it provides AOT services. This bill would make an appropriation by clarifying that mental health services provided under Laura's Law may be provided pursuant to the procedures established by the Mental Health Services Act. This bill would make other conforming changes and delete obsolete provisions.
- *Vote: majority. Appropriation: yes. Fiscal committee: yes. State-mandated local program: no.*

[SB 585 \(Steinberg\) Mental health: Mental Health Services Fund.](#)

- **SUMMARY:** This bill would amend the Mental Health Services Act's requirement that counties be provided funding sufficient to provide supportive services set for in treatment plans, by including treatment plans that are developed pursuant to Laura's Law. This bill would clarify that services provided under Laura's Law may be provided pursuant to the procedures specified in the Mental Health Services Act, thereby making an appropriation.
- *Because the bill would clarify the procedures and terms of Proposition 63, it would require a majority vote of the Legislature.*
- *Vote: majority. Appropriation: yes. Fiscal committee: yes. State-mandated local program: no.*



**San Mateo County Health System
Behavioral Health and Recovery Services
Mental Health Services Act
P u b l i c C o m m e n t F o r m**

Personal information (OPTIONAL)

Name: _____ Agency/Organization: _____

Phone Number: _____ Email address: _____

Mailing address: _____

Stakeholder group you identify with:

MH Client/Consumer AOD Client/Consumer Family Member

Education Law Enforcement/Criminal Justice Probation

Social Services Service Provider Other (specify) _____

Your comments here (please use as many pages as you need):

Please turn over →

You may also send your comments via letter or email to Michelle Patterson, mipatterson@smcgov.org

225 37th Avenue, 3rd Floor, San Mateo, CA 94403 – 650.372.8511

Comments: