

Health and Human Services

Budget Unit Name	BU No.	Page	Appropriation	Total
Alcohol, Drug and Mental Health		27		
Alcohol & Drug	505-6	31	\$1,704,921	
Mental Health Administration	505-1	32	\$11,254,631	
Mental Health Services Act (MHSA)	505-7	33	<u>\$7,618,667</u>	\$20,578,219
Employment and Social Services		35		
Administration, Assistance & Support Services	551-1	38	\$39,052,585	
Community Services Block Grant	565-0	39	\$360,435	
General Assistance	561-2	40	\$439,383	
TANF/CalWORKS/Foster Care	552-2	41	\$34,169,380	
Workforce Investment Act	562-1	42	<u>\$2,740,235</u>	\$76,762,018
Health		43		
Adult-Juvenile Detention Medical Services	501-4	46	\$3,314,702	
Children's Medical Services	501-9	47	\$1,958,317	
Community Health	501-1	48	\$3,990,621	
Elder Care (no page narrative)	502-3		\$20,000	
Emergency Medical Services	525-3	49	\$2,817,000	
Environmental Health	501-3	50	\$3,058,627	
Indigent Healthcare	502-3	51	\$11,000,000	
				\$26,159,267
		TOTAL	<u><u>\$123,499,504</u></u>	

Alcohol, Drug & Mental Health



Kim Suderman
Director

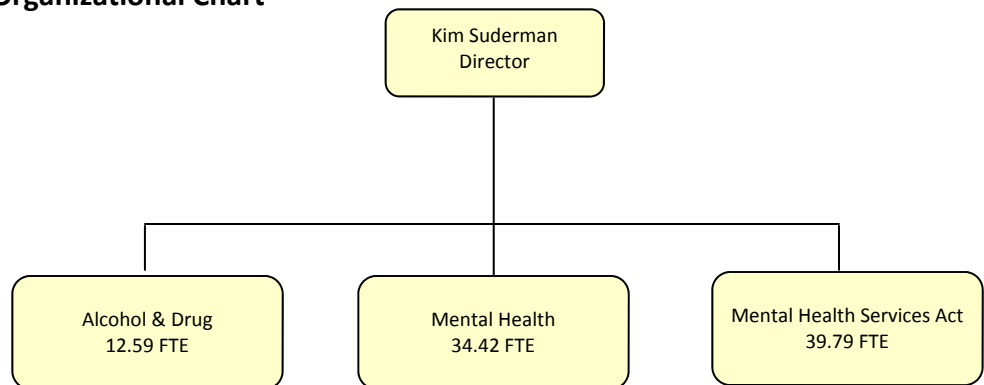
Mission Statement

To initiate, support, administer, and provide direct and contracted services that enhance the recovery from substance use disorders and the debilitating effects of serious mental illness and serious emotional disturbance; and to promote the emotional wellbeing, wellness and overall health of individuals and families in our community.

Goals

- Create, develop, and sustain the internal and external service delivery capacity to support the vision and mission of Yolo County ADMH.
- Develop, sustain, and implement programs and services which meet standards of best practice, evidenced-based practice (EBP's), and recovery and wellness oriented services to empower people and improve outcomes.
- Establish and implement a plan to build sustainable and diversified funding to ensure fiscal stability through periods of economic constraint and fluctuation.
- Reduce Medi-Cal claims denials and disallowances and risks from fiscal audits and program reviews.

Organizational Chart



Description of Major Services

The Department of Alcohol, Drug and Mental Health (ADMH) administers the county's substance use disorder and mental health programs through the provision of cost-effective and evidenced based services including prevention, recovery, outpatient, and inpatient services to children, youth and adults.

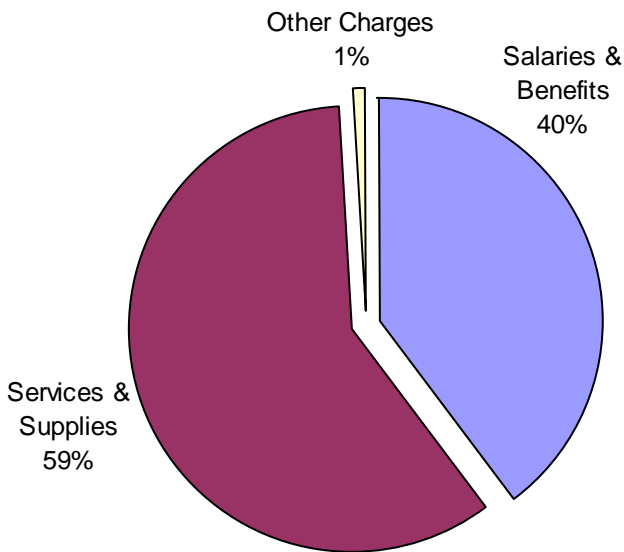
2011-12 Summary of Budget Units

	Appropriation	Revenue	General Fund	Staffing
Alcohol & Drug (BU 505-6)	1,704,921	1,680,121	24,800	13.0
Mental Health Services (BU 505-1)	11,254,631	10,877,267	377,364	35.0
Mental Health Services Act (BU 505-7)	7,618,668	7,618,668	0	40.0
Total	20,578,220	20,176,056	402,164	88.0

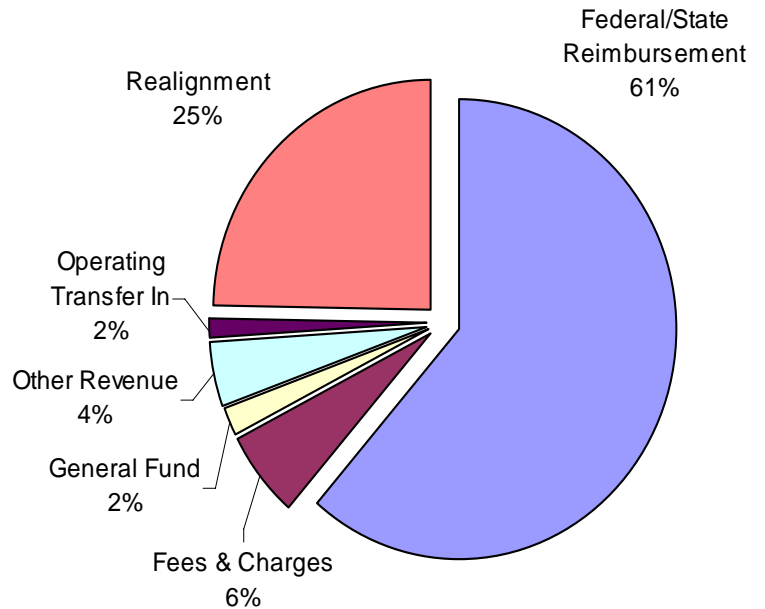
Summary of Alcohol, Drug and Mental Health 2011-12 budget

Budget Category	Actual 2009-2010	Budget 2010-11	Requested 2011-12	Recommended 2011-12	Change
Appropriations					
Salaries & Benefits	\$9,160,209	\$8,253,230	\$8,239,331	\$8,239,331	-\$13,899
Services & Supplies	\$11,506,486	\$12,049,308	\$12,331,060	\$12,331,060	\$281,752
Other Charges	\$185,540	\$179,400	\$148,819	\$148,819	-\$30,581
Interfund Transfer	-\$19,880	-\$98,443	-\$140,990	-\$140,990	-\$42,547
Total Appropriations:	\$20,832,355	\$20,383,495	\$20,578,220	\$20,578,220	\$194,725
Revenues					
Federal/State Reimbursement	\$11,845,561	\$13,066,518	\$12,660,504	\$12,660,504	-\$406,014
Fees & Charges	\$1,907,426	\$1,826,668	\$1,204,517	\$1,204,517	-\$622,151
General Fund	\$505,855	\$402,166	\$402,164	\$402,164	-\$2
Other Revenue	-\$8,111	\$266,992	\$921,748	\$921,748	\$654,756
Operating Transfer In	\$53,200	\$0	\$327,078	\$327,078	\$327,078
Realignment	\$4,952,100	\$4,821,151	\$5,062,209	\$5,062,209	\$241,058
Total Revenues:	\$19,256,031	\$20,383,495	\$20,578,220	\$20,578,220	\$194,725

Expenditures



Revenues



**Alcohol, Drug and
Mental Health
2010-11
Accomplishments**

*

Trained staff on documentation and billing requirements to maximize reimbursement while maintaining compliance with regulations; trained clinical staff in the use of electronic treatment plans using Avatar.

*

Created a Triage and Care Team to coordinate intensive services, including discharge planning from higher levels of care, day crisis services, urgent care clinic, intake assessments and referrals to community providers.

*

Implemented SB 785 by ensuring Yolo County children and youth placed outside of the county receive needed services, while also serving the children and youth meeting SB 785 criteria from other counties placed within Yolo County.

*

Dramatically reduced no-shows to intake assessment appointments by establishing a client orientation for new consumers that gathers required financial information, explains the mental health program, and sets client expectations.

Department Goals and Key Initiatives for 2011-12

Goal 1: Create, develop, and sustain the internal and external service delivery capacity to support the vision and mission of Yolo County ADMH.

Key Initiatives for 2011-12:

- Create and implement a plan that will hire and retain quality staff, provide quality training, and improve employee relations to promote recruitment and retention.
- Develop and implement a plan to engage contract providers who deliver cost-effective and quality programs and services.
- Develop and implement an active committee structure to enhance the effectiveness of the Local Mental Health Board in supporting ADMH programmatic and budgetary efforts.
- Establish and implement a long-term facilities plan.
- Review, revise, and implement a technology plan designed to support the needs of the organization and improve staff productivity, coordinated program planning and integrated service delivery.

Goal 2: Develop, sustain, and implement programs and services which meet standards of best practice, evidenced-based practices, and recovery and wellness oriented services to empower people and enhance quality of life, and improve outcomes.

Key Initiatives for 2011-12:

- Identify, research, and implement selected Evidence Based Practices to improve treatment outcomes and to evaluate cost-effectiveness.
- Develop and implement performance standards for all programs and services.
- Train county and contract providers to develop skill sets and competencies to serve culturally diverse clients with substance use, mental health, and co-occurring disorders.
- Track and report program and fiscal performance and outcomes regularly to the Local Mental Health Advisory Board, the County Board of Supervisors, and the community as appropriate.
- Implement screening and recovery tools like the Milestones of Recovery Scale to better allocate services and more effectively deploy resources.

Goal 3: Establish and implement a plan to build sustainable and diversified funding to ensure fiscal stability through periods of economic constraint and fluctuation.

Key Initiatives for 2011-12:

- Create and develop a baseline, comprehensive, multi-year financial forecast to help direct the budgetary (revenue, expenditure, and audit) decisions and direction of ADMH.
- Develop and implement a plan for ADMH and contract provider staff to increase revenues from Medi-Cal and other funding sources .
- Coordinate program planning and service delivery with budgeting and financial management.

Department Goals and Key Initiatives for 2011-12 (cont.)

Goal 4: Reduce Medi-Cal claims denials and disallowances and risks from fiscal audits and program reviews to ensure accountability and department sustainability.

Key Initiatives for 2011-12:

- Initiate planning for integrated data systems (GenLed and AVATAR data interface) to reduce audit risks and increase accountability.
- Establish, implement, and provide continuous oversight utilizing standard internal audit and cost-controls through automated and manual benchmarking of efficiencies and compliance with billing/cost-reporting requirements and fraud, waste, and abuse regulations.
- Create, develop, and implement automated financial reports for submitting mandated reports including the Annual Department of Mental Health and Department of Alcohol and Drug Programs Cost-Reports and SB90 Claiming.
- Develop and implement automated reporting system to track, monitor, and report on Medi-Cal claim denials and disallowances.

Goal 5: Redesign Adult Services to increase access to continuum of care and maximize efficiency of staff.

Key Initiatives for 2011-12:

- Establish the Adult Services Planning Team consisting of representation from line staff, supervisors, managers, deputy directors and the director.
- Establish new team structure for adult services that will better support physician services and provide more flexibility to consumers throughout the system.
- Redistribute staff resources and caseload assignments to match the new team structure to create the desired flexibility and efficiency.

Program Summary

Drug and alcohol programs, working in partnership with community partners and treatment providers, include the following:

- Adolescent Treatment: This program, operated via contract with CommuniCare Health Centers, provides individual and group therapy to youth through the age of eighteen.
- HIV Set Aside: Funding used to provide HIV early intervention services to individuals undergoing treatment for substance use disorders. This program is operated via Memorandum of Understanding between ADMH and the Health Department.
- Perinatal Treatment: This program is operated via contract with CommuniCare Health Centers. Provides comprehensive substance abuse treatment services to pregnant and parenting women with young children. The program works in conjunction with Child Welfare Services to assist family reunification and maintenance.
- Inmate Education: Via Memorandum of Understanding between the Sheriff and ADMH, provides an Alcohol/Drug Education Program to incarcerated men and women at Yolo Detention facilities.
- Felony Drug Court: The program places individuals in programs designed to eliminate drug use dependency, reduce recidivism, and improve the overall efficiency of the court system. This adult drug court is designed for defendants who have been convicted of felony charges and have a history of significant drug/alcohol abuse and mental health issues.
- PC1000 Drug Court: This is a deferred entry of judgment program in which defendants who have committed a qualifying offense have the judgment or disposition of their case deferred while they participate in a treatment program.
- Chemical Dependency Program (CDP): CDP provides a six-month program with program activity tapering over time. Treatment groups are two hours long and are a combination of didactic (education) and group processes.
- Prevention: Yolo County Prevention programs build partnerships that provide community members with programs and information that promote positive and healthy living free of alcohol and other drug abuse, tobacco use and violence, while engaging youth as active leaders and resources within their own communities.

Program Objective

Objective: Strive for excellence in delivering accessible, effective, efficient, culturally responsive, and quality mental health and substance use disorder recovery services and their constituent support services in our community.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Number of clients who received substance use disorder services	1,220	1,074	500	500
Number of students who received substance use disorder prevention services	1,372	717	325	325

ADMH

Alcohol & Drug

Budget Unit 505-6 Fund 107

Significant Items and/or Changes in 2011-12

There are a number of potential significant changes that might impact programs in this budget unit that will not be known until the state passes its budget.

Revenue Sources for 2011-12

General Fund	\$24,800
Public Safety	\$00
Realignment	\$00
Federal/State/ Other Govt	\$1,322,963
Fees	\$71,860
Grants/Other	\$285,298
TOTAL	\$1,704,921

Staffing History of unit

2009-10 Funded	21.2 FTE
2010-11 Funded	15.5 FTE
Authorized 2011-12	13.0 FTE
2011-12 Funded	13.0 FTE

Program Summary

This budget unit funds Mental Health's services to seriously mentally ill adults and seriously emotionally disturbed children and youth.

System Wide Services

- **Crisis Response/Intervention:** Crisis services are rendered for adults and children who are considered at imminent risk due to a mental disorder, with presentation of danger to self, danger to others, or grave disability.
- **Triage and Care:** Triage and care is the centralized point of access for Yolo County Alcohol, Drug and Mental Health services to the seriously mentally ill/seriously emotionally disturbed. Individuals are assessed for psychiatric symptoms associated with their diagnosis and significant functional impairment in at least two domains.

Children's Services

- **Outpatient:** Services for children and youth with serious emotional disturbances that include: assessment, individual, group and family therapy, case management, medication support, therapeutic behavioral services (TBS), and clinically appropriate support services.
- **Educationally Related Mental Health Services:** Under the federal Individuals with Disabilities Education Act (IDEA), services are provided as identified on Individual Education Plan (IEP).
- **BOS Juvenile:** The Board of Supervisors has supplied funds used by ADMH to provide additional clinical services in Juvenile Hall, which includes support for youths with Medi-Cal due to their temporary suspension of coverage while detained.

Adult Services

- **Outpatient:** Services for the seriously mentally ill adults include assessment, individual and group therapy, case management, medication support, and clinically appropriate support services.
- **Residential/24 Hour Care:** This program is designed to address residential placement needs, monitor and provide discharge planning for consumer adults placed in Residential/24 Hour Care by ADMH.
- **CalWORKs:** ADMH provides clinical services to assess the type and volume of mental health and/or substance use disorder treatment. Group sessions and short-term individual counseling are facilitated for participants.
- **Misdemeanant Incompetent to Stand Trial (§1370.01 of the Penal Code):** Adults found incompetent to stand trial on misdemeanor charges have their court cases suspended and are required to receive treatment with the goal of returning them to court as competent to stand trial. Services are provided in outpatient or inpatient settings depending upon the needs of the individual.
- **BOS Adult:** The Board of Supervisors has supplied funds used by ADMH to provide additional clinical services in the Jail. Services include assessments, therapy and counseling.

Program Objective

Objective: Strive for excellence in delivering accessible, effective, efficient, culturally responsive, and quality mental health and substance use disorder recovery services and their constituent support services in our community.

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Number of individual consumers who received Mental Health services	3,677	3,490	3,129	3,129
Number of Medi-Cal & Medi-Medi beneficiaries who received specialty mental health services	2,567	2,248	2,217	2,217

ADMH

Mental Health Administration

Budget Unit 505-1 Fund 196

Significant Items and/or Changes in 2011-12

Educationally Related Mental Health Services, EPSDT, and Managed Care have been realigned to the counties with the passage of AB100. At present, the amount of Yolo County's allocation for these programs is unknown.

Other potential changes related to the passage of the state budget are unknown.

Revenue Sources for 2011-12

General Fund	\$377,364
Public Safety	\$00
Realignment	\$5,062,209
Federal/State/ Other Govt	\$4,451,159
Fees	\$1,132,657
Grants/Other	\$231,242
TOTAL	\$11,254,631

Staffing History of unit

2009-10 Funded	47.5 FTE
2010-11 Funded	35.2 FTE
Authorized 2011-12	35.0 FTE
2011-12 Funded	35.0 FTE

Program Summary

Community Services and Supports (CSS)

- **Adult:** The Adult program integrates services in a partnership between ADMH staff and community providers. ADMH has a Full Service Partnership (FSP) case management team housed in Woodland with a contracted team in West Sacramento operated by (Telecare) Yolo Strides. Both teams are integrated with ADMH medication support services and housing support through Turning Point, Inc.
- **Children and Youth:** The CSS Children and Youth program provides needed mental health services to children/youth under age 18 (or until graduation) and their families who reside in or attend a school in the Esparto and Winters Unified School Districts. Services are offered by the MHP staff members at Rural Innovations in Social Economics, Inc. (R.I.S.E.).
- **Transitional Age Youth:** Transition Age Youth (TAY) with serious emotional disturbance or serious mental illness are at very high risk of homelessness, chronic substance abuse, suicide and criminal behavior. The risk is even higher for the targeted youth emancipating from foster care or juvenile hall. Services, therefore, target homeless youth and young adults with serious mental illness, many of whom may be emancipating from juvenile hall or foster care.
- **MHP Housing:** The Mental Health Services Act Housing Program (MHP Housing Program) offers permanent financing and capitalized operating reserve subsidies for the development of permanent supportive housing.

Prevention and Early Intervention (PEI)

- **Urban and Rural Children's Resiliency Programs:** Program targets underserved children and families within Yolo County. The program focuses on the priority populations of children, transitional age youth and families experiencing stress.
- **Senior Peer Counseling:** This program offers coordination, training and assistance to a group of Senior Peer Counselors who voluntarily provide supportive services to "at-risk" older adults in the Yolo County community.
- **Early Signs and Training Assistance:** The program offers mental health education and training for key community agents (teachers, school nurses, probation officers, senior center staff, faith leaders, etc.) as well as general community members.
- **Crisis Intervention Training:** The training provides information community partners, such as first responders, on how to respond appropriately and compassionately and to assist individuals and families in crisis that are experiencing mental illness to find appropriate care.

Program Objective

Objective: Strive for excellence in delivering accessible, effective, efficient, culturally responsive, and quality mental health and substance use disorder recovery services and their constituent support services in our community.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Number of Full Service Partners who received services under CSS programs.	169	144	141	141
Number of Full Service Partners who received Assertive Community Treatment Services through Yolo STRIDES.	66	59	55	55

ADMH

Mental Health

Services Act

Budget Unit 505-7 Fund 070

Significant Items and/or Changes in 2011-12

There is lack of clarity on the manner and process of receiving MHPA allocations for FY2011-12 due to the changes in operations at the state Department of Mental Health and the changes imposed by the passage of AB100.

Revenue Sources for 2011-12

General Fund	\$00
Public Safety	\$00
Realignment	\$00
Federal/State/ Other Govt	\$7,618,668
Fees	\$00
Grants/Other	
TOTAL	\$7,618,668

Staffing History of unit

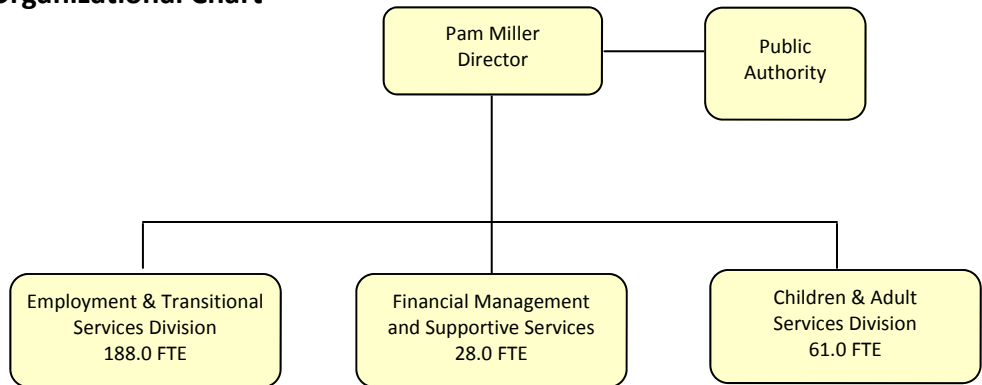
2009-10 Funded	45.9 FTE
2010-11 Funded	36.1 FTE
Authorized 2011-12	40.0 FTE
2011-12 Funded	40.0 FTE

Employment & Social Services



Pam Miller
Director

Organizational Chart



Mission Statement

The mission of the Department of Employment and Social Services is to work in partnership to develop the workforce, promote safe and stable families and individuals, and protect the vulnerable.

Goals

Continue a high level of customer service through more efficient processes which will allow us to fill the gap left from reduced staff resources.

Strengthen our service delivery and improve our outcomes.

Provide information to the general public regarding our programs and services and maintain adequate knowledge of community services to act as a referral source.

Description of Major Services

The Yolo County Department of Employment and Social Services provides the following services:

- Administration of Child Welfare Services (including 7-day/24-hour Emergency Response) including assisting community members who are interested in becoming licensed foster parents.
- Administration of Adult Protective Services (including 7-day/24-hour Emergency Response) and In-Home Supportive Services.
- Conducting eligibility determinations for Medi-Cal, CalFresh, General Assistance (GA), CalWORKs (California Work Opportunity and Responsibility to Kids), YCHIP (Yolo County Healthcare for Indigents Program), and Workforce Investment Act (WIA) programs.
- Providing aid payments to eligible persons.
- Operating One-Stop Career Centers for job seekers and employers.

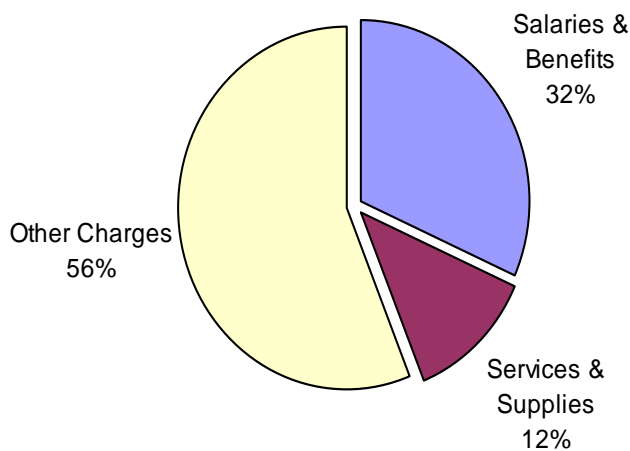
2011-12 Summary of Budget Units

	Appropriation	Revenue	General Fund	Staffing
Admin., Assistance, & Supportive Services (BU 551-1)	\$39,052,585	\$36,081,807	\$2,970,778	278.0
Community Services Block Grant (BU 565-0)	\$360,435	\$329,988	\$30,447	0.0
General Assistance (BU 561-2)	\$439,383	\$60,401	\$378,982	0.0
TANF/CalWORKS/Foster Care (BU 552-2)	\$34,169,380	\$31,571,841	\$2,597,538	0.0
Workforce Investment Act (BU 562-1)	\$2,740,235	\$2,740,235	\$0	0.0
TOTAL	\$76,762,018	\$70,784,272	\$5,977,745	278.0

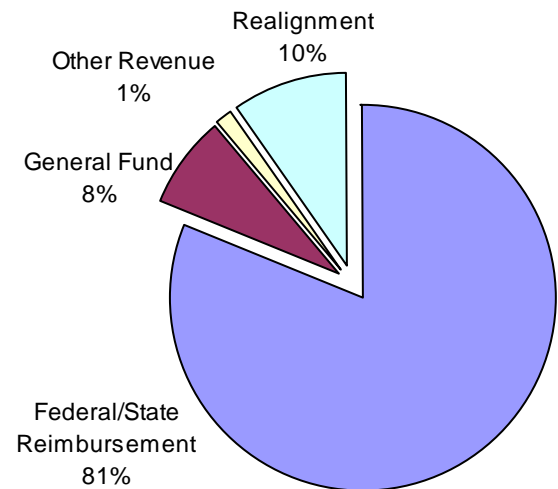
Summary of Employment & Social Services 2011-12 budget

Budget Category	Actual 2009-2010	Budget 2010-11	Requested 2011-12	Recommended 2011-12	Change
Appropriations					
Salaries & Benefits	\$23,637,158	\$22,244,297	\$24,261,061	\$24,261,061	\$2,016,764
Services & Supplies	\$9,543,685	\$9,511,457	\$9,256,987	\$9,256,987	-\$254,470
Fixed Assets	\$157,882	\$1,300,000	\$0	\$0	-\$1,300,000
Other Charges	\$37,581,546	\$41,935,112	\$42,947,777	\$42,947,777	\$1,012,665
Expense Reimbursement	-\$513,195	-\$53,717	-\$234,961	-\$234,961	-\$181,244
Interfund Transfer	\$420,108	\$25,347	\$310,978	\$310,978	\$285,631
Operating Transfers Out	\$404,077	\$1,321,745	\$220,176	\$220,176	-\$1,101,569
Total Appropriations:	\$71,231,261	\$76,284,241	\$76,762,018	\$76,762,018	\$477,777
Revenues					
Federal/State Reimbursement	\$62,717,896	\$62,751,472	\$62,157,404	\$62,157,404	-\$594,068
Fees & Charges	\$113,456	\$118,647	\$81,451	\$81,451	-\$37,196
General Fund	\$4,928,416	\$3,122,666	\$5,977,745	\$5,977,745	\$2,855,079
Other Revenue	\$913,322	\$824,719	\$649,815	\$649,815	-\$174,904
Realignment	\$6,169,469	\$7,166,431	\$7,524,753	\$7,524,753	\$358,322
Carry Forward	-\$3,611,298	\$2,300,306	\$370,850	\$370,850	-\$1,929,456
Total Revenues:	\$71,231,261	\$76,284,241	\$76,762,018	\$76,762,018	\$477,777

Expenditures



Revenues



**Employment &
Social Services
2010-11
Accomplishments**

- ◆ *Began implementation of document imaging project*
- ◆ *Rolled out Benefits CalWIN (on-line application for Medi-Cal and CalFresh) and ACCESS CalWIN (interactive voice response)*
- ◆ *Completed County Self Assessment and System Improvement Plan in Child Welfare Services*
- ◆ *Implementation of Structured Decision Making in Adult Protective Services*
- ◆ *Community Services Block Grant funding for 100 holiday food baskets*
- ◆ *Served 173 children and 20 families through holiday donations*

Department Goals and Key Initiatives for 2011-12

Goal 1: Continue a high level of customer service through more efficient processes which will allow us to fill the gap left from reduced staff resources.

Key Initiatives for 2011-12:

- Implement a call center for our public assistance programs.
- Begin conversion of cases in document imaging project.

Goal 2: Strengthen our service delivery and improve our outcomes.

Key Initiatives for 2011-12:

- Continue to build the Rapid Response program brought in-house in April 2011.
- Develop and implement coordinated team decision making in Child Welfare Services.
- Inclusion of our Child Abuse Prevention Council in the implementation of the System Improvement Plan in Child Welfare Services.
- Enhance CalFresh participation through outreach.

Goal 3: Provide information to the general public regarding our programs and services and maintain adequate knowledge of community services to act as a referral source.

Key Initiatives for 2011-12:

- Redesign the department's website.
- Continue to partner with the Library in development of the 211 system.

Program Summary

This is the department's primary operational budget unit which includes all staff costs. Principal programs include the following:

- Public Assistance Programs: Eligibility determination, case management and other services for clients in need of financial and other assistance through CalWORKs, CalFresh, Medi-Cal, Foster Care and YCHIP.
- Child Welfare Services: Protects abused, neglected, exploited and abandoned children; the program includes 24-hour emergency response, family maintenance, family reunification and permanency planning.
- Adult Protective Services: Protects vulnerable adults from abuse and neglect.
- In-Home Supportive Services: Provides household maintenance, personal care, transportation and other services to eligible aged or disabled persons to prevent institutionalization; the Yolo County Public Authority, a separate agency (not in this budget unit), is the employer of record for In-Home Supportive Services providers.
- Employment Services: Provides job search, skills training, assessment and workshops, support program and eligibility determinations for Workforce Investment Act, and YoloLINK (community services database and directory).

Program Objectives

- Objective A:** Determine eligibility within state and federal guidelines and timeframes.
- Objective B:** Provide full-scope child protective services, including foster care, within prescribed mandates.
- Objective C:** Provide adult protective services within prescribed mandates.
- Objective D:** Provide IHSS case management services to recipients deemed eligible for services.
- Objective E:** Provide customers with the skills to be marketable and competitive in the current labor market.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Timely Processing of Applications for Public Assistance Programs	Unavailable	Unavailable	94.7%	90%
Timely Face-to-Face Contacts with a Child	98.3%	97.9%	93.6%	98%
Immediate Response Times on Child Welfare Referrals	98%	99%	100%	100%
Adult Protective Services Cases Closed Timely	100%	100%	100%	100%
In-Home Supportive Services Timely Reassessment	96%	91%	92%	93%
Successful completion of employment workshops	Unavailable	Unavailable	636	636
Number of people beginning employment	308	265	278	278
Number of people the department helped find employment	4,754	4,436	4,658	4,658

DESS

Admin., Assistance, and Support Services

Budget Unit 551-1 Fund 111

Significant Changes in 2011-12

The department indicated an initial gap of \$370,850 related to higher costs in assistance payments; resulting from:

- A recent court decision increasing the rates paid in Foster Care 25%
- The loss of federal stimulus funds (FMAP and ARRA) revenues as compared to previous years
- Continued caseload growth due to economic downturn

Department has absorbed much of this loss by shifting costs whenever allowable to revenue sources that require less General Fund. The remaining gap was eliminated by reducing service and supply accounts.

Revenue Sources for 2011-12

General Fund	\$2,970,778
Public Safety	\$0
Realignment	\$4,676,260
Federal/State/Other Govt	\$31,239,683
Fees	\$81,451
Grants/Other	\$84,414
TOTAL	\$39,052,586

Staffing History of unit

2009-10 Funded	310.0 FTE
2010-11 Funded	275.0 FTE
Authorized 2011-12	278.0 FTE
2011-12 Funded	278.0 FTE

Program Summary

Community Service Block Grant (CSBG) funds, which are 100% federally funded, are generally used for programs aimed at addressing the root causes of poverty such as drug and alcohol addiction, poor employment history, lack of problem-solving skills and homelessness. These funds may also be used to secure food and shelter.

Currently CSBG funds programs for emergency shelter, transitional housing, Meals on Wheels, day shelters, the Food Bank, eviction prevention, first month rent program, and utility assistance. It is anticipated that increased demand for services will continue until economic conditions improve. Although CSBG is not the sole funding source for these agencies, it makes a significant contribution to the ongoing support of these programs.

Homeless Coordination Project/Cold Weather Shelter

The county is a partner in this project with the cities of Davis, West Sacramento, and Woodland. The project contracts for consultant services to research and evaluate the effectiveness of homeless services and to develop and maintain grants that support homeless services. This collaboration provides shelter for the homeless during the winter months.

DESS

Community Services Block Grant

Budget Unit 565-0 Fund 111

Significant Items and/or Changes in 2011-12

No significant changes are anticipated in this budget unit for fiscal year 2011-12.

Program Objectives

Objective A: To augment Safety Net Services.

Objective B: Monitor contract compliance in accordance with scope of work.

Performance Measurements - CSBG funding is per calendar year

Measurement	2010 Goal	2010 Actual	2011 Goal	2012 Projection
Deliver 200,000 pounds of food per year in rural Yolo County (Yolo County Food Bank)	90%	200,000 pounds delivered	90%	180,000 pounds delivered
Provide eviction prevention assistance to 96 adults per year via housing or utilities assistance (STEAC)	90%	96 adults assisted	90%	86 adults assisted
Serve 15 families per year with transitional housing services (Davis Community Meals)	90%	15 families served	90%	14 families served
Use 10,750 bed/nights at Yolo Wayfarer Center annually	95%	10,750 bed nights provided	95%	10,213 bed nights provided
Provide 38 homebound seniors with monthly hot meal delivery (Peoples Resources)	95%	38 seniors served	95%	36 seniors served
Serve 6,000 meals to the poor and homeless annually (United Christian Centers)	90%	6,000 meals served	90%	5,400 meals served
Provide 10,000 bed nights as temporary housing annually (United Christian Centers)	90%	10,000 bed nights provided	90%	9,000 bed nights provided

Revenue Sources for 2011-12

General Fund	\$30,447
Public Safety	\$00
Realignment	\$00
Federal/State/ Other Govt	\$329,988
Fees	\$00
Grants/Other	\$00
TOTAL	\$360,435

Staffing History of unit

2009-10 Funded	0.0 FTE
2010-11 Funded	0.0 FTE
Authorized 2011-12	0.0 FTE
2011-12 Funded	0.0 FTE

Program Summary

Each county adopts its own policies to provide state-mandated financial support to persons who do not qualify for other state or federal programs and who are not supported by friends or family. The goal is to provide temporary support to those who cannot work.

Staff positions for this budget unit are included in the public assistance and administration budget unit to improve flexibility of staffing and reduce administration of positions in various budget units. Costs for salaries and benefits are charged to this budget unit during the fiscal year.

Program Objectives

Objective A: To provide for the county's indigent population.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Number of people receiving general assistance payments each month	44	107	100	100

DESS

General Assistance

Budget Unit 565-0 Fund 111

Significant Items and/or Changes in 2011-12

No significant changes are anticipated in this budget unit for fiscal year 2011-12.

Revenue Sources for 2011-12

General Fund	\$378,982
Public Safety	\$00
Realignment	\$00
Federal/State/ Other Govt	\$0
Fees	\$00
Grants/Other	\$60,401
TOTAL	\$439,383

Staffing History of unit

2009-10 Funded	0.0 FTE
2010-11 Funded	0.0 FTE
Authorized 2011-12	0.0 FTE
2011-12 Funded	0.0 FTE

Program Summary

This budget unit finances payments made directly to families in the Temporary Assistance to Needy Families (TANF)/California Work Opportunity and Responsibility to Kids (CalWORKs) program, which provides financial assistance to eligible children and families. The unit also finances foster care payments for the care of dependent children, assistance for adoptions and also the Kinship-Guardianship Assistance Program (Kin-GAP).

TANF/CalWORKs

Provides financial assistance, job training, Medi-Cal, child care and other services to qualified families. Federal and state statutes set the eligibility criteria.

Foster Care

Provides financial support and Medi-Cal benefits for children who, due to neglect, abuse or abandonment, require 24-hour out-of-home care in family foster homes or institutions on a temporary or a long-term basis.

Adoption Assistance

Provides financial assistance for families to meet the special needs of adoptive children. Eligibility criteria and funding levels are set by the state. The goal is to find adoptive homes for children. Kin-GAP provides financial assistance to relatives who have become guardians of children who are no longer wards of the court.

DESS

TANF/CalWORKs/ Foster Care

Budget Unit 552-2 Fund 111

Significant Items and/or Changes in 2011-12

Foster care rates have increased by approximately 25% due to a recent court decision. (See note in Budget Unit 551-1)

Program Objectives

Objective A: Provide entitled benefits.

Objective B: All assistance payments will be made timely and in accordance with appropriate rate determinations.

Performance Measurements

Measurement		2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
People receiving CalWORKs cash aid per month	Children	4,156	4,188	4,237	4,237
	Adults	1,143	1,471	1,472	1,472
People receiving CalFresh benefits per month	Children	7,506	8,253	8,884	9,266
	Adults	4,939	5,708	6,376	6,650
People receiving Medi-Cal benefits per month	Children	14,797	15,237	15,475	16,249
	Adults	10,191	10,748	11,104	11,658
Children receiving Foster Care aid per month		364	317	288	300
Children receiving KinGAP aid per month		19	19	18	20
Number of children (cases) in foster care		333	323	300	300
Families receiving Adoption Assistance Payments per month		689	716	764	764
Number of children receiving Stage 1 Child Care		N/A	2,913	2,164	1,731

Revenue Sources for 2011-12

General Fund	\$2,597,538
Public Safety	\$00
Realignment	\$2,848,493
Federal/State/ Other Govt	\$27,847,498
Carry Forward	\$370,850
Grants/Other	\$505,000
TOTAL	\$34,169,380

Staffing History of unit

2009-10 Funded	0.0 FTE
2010-11 Funded	0.0 FTE
Authorized 2011-12	0.0 FTE
2011-12 Funded	0.0 FTE

Program Summary

The Workforce Investment Act (WIA) provides funding for universal employment and training services to adult job seekers and for services to individuals who have lost their jobs due to plant closures or mass layoffs. Funds are also provided for services that help economically disadvantaged youth who have dropped out of school to complete their education and develop basic job skills. Employers may receive services such as workforce recruitment, job referrals and occupational assessments.

These funds also support job search and employment activities at one-stop centers. One-stop centers must have partner agencies on-site or have their services readily available electronically. Services are available in both the Woodland and West Sacramento one-stop centers.

Program Objective

Objective A: Adult/Dislocated Worker program: Provide customers with the skills to be marketable and competitive in the current labor market.

Objective B: Youth: provide youth customers with the skills to be successful in post secondary education or employment.

Performance Measurements

Measurement	2008-09 Goal	2008-09 Actual	2009-10 Goal	2009-10 Actual	2010-11 Goal
Adults entering employment	75.5%	93.8%	70%	74.1%	Unknown until the state submits the information
Dislocated Workers entering employment	80.6%	100%	72%	77.3%	
Youth entering employment or education	65%	71%	69%	77.5%	

DESS

Workforce Investment Act (WIA)

Budget Unit 562-1 Fund 111

Significant Items and/or Changes in 2011-12

Changes in this budget unit will be primarily driven by changes made in the state budget, yet to be determined.

Revenue Sources for 2011-12

General Fund	\$00
Public Safety	\$00
Realignment	\$00
Federal/State/Other Govt	\$2,740,235
Fees	\$00
Grants/Other	\$00
TOTAL	\$2,740,235

Staffing History of unit

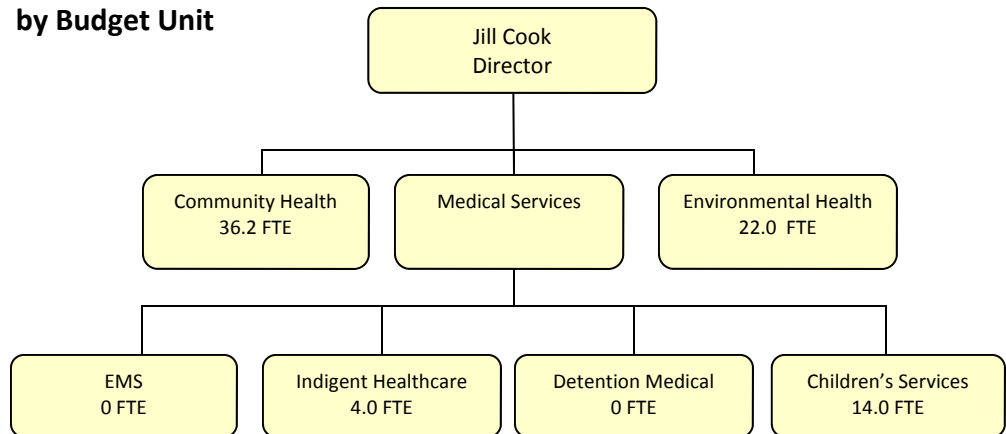
2009-10 Funded	0.0 FTE
2010-11 Funded	0.0 FTE
Authorized 2011-12	0.0 FTE
2011-12 Funded	0.0 FTE



**Jill Cook
Director**

Health

Organizational Chart by Budget Unit



Mission Statement

The mission of the Health Department is to protect and enhance the health and safety of the residents of Yolo County

Goals

The improvement of health and safety of Yolo County residents

Restructure fiscal framework to provide for long term funding stability

Delivery of high quality, local healthcare for all indigent Yolo county residents

Description of Major Services

The Health Department provides health services to county residents including:

- Programs for the medically indigent and detainees
- Protection of food, drinking water and ground water
- Waste and vector control
- Emergency preparedness and response
- Vital records
- Health education on nutrition, tobacco prevention and safety, and
- Public health nursing services, which includes communicable disease prevention and control

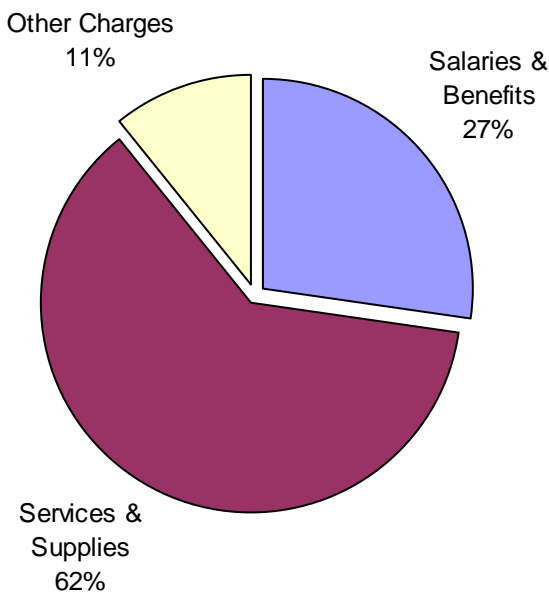
2011-12 Summary of Budget Units

	Appropriation	Revenue	General Fund	Staffing
Adult-Juvenile Detention Medical Services (BU 501-4)	\$3,314,702	\$0	\$3,314,702	0.0
Children's Medical Services (BU 501-9)	\$1,958,317	\$1,905,465	\$52,852	14.0
Community Health (BU 501-1)	\$3,990,621	\$3,209,210	\$781,411	36.2
Elder Care (BU 502-3)	\$20,000	\$20,000	\$0	0.0
Emergency Medical Services (BU 525-3)	\$2,817,000	\$2,817,000	\$0	0.0
Environmental Health (BU 501-3)	\$3,058,627	\$3,036,059	\$22,568	22.0
Indigent Healthcare (BU 502-3)	\$11,000,000	\$9,080,052	\$1,919,948	4.0
TOTAL	\$26,159,267	\$20,067,786	\$6,091,481	76.2

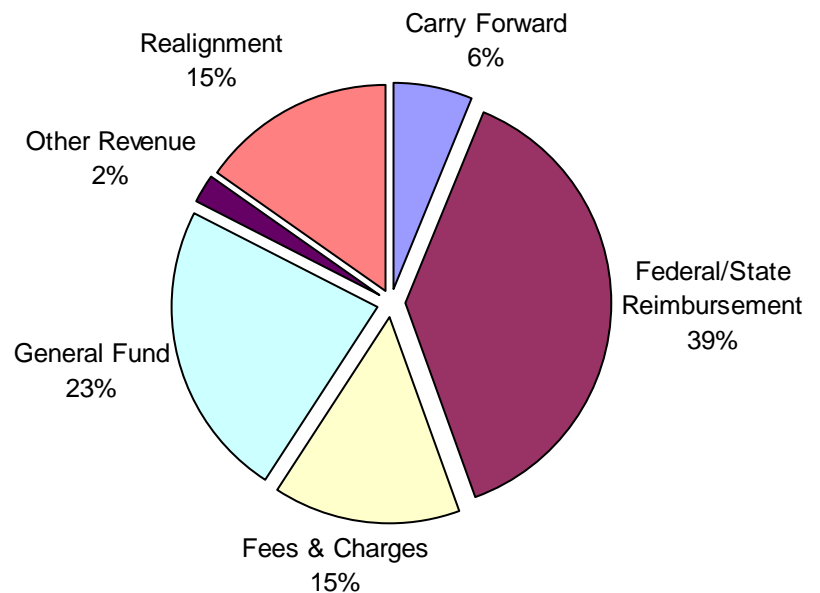
Summary of Health 2011-12 budget

Budget Category	Actual 2009-2010	Budget 2010-11	Requested 2011-12	Recommended 2011-12	Change
Appropriations					
Salaries & Benefits	\$8,571,937	\$7,313,683	\$7,252,978	\$7,252,978	-\$60,705
Services & Supplies	\$12,378,048	\$10,544,106	\$16,486,059	\$16,486,059	\$5,921,953
Fixed Assets	\$7,169	\$125,000	\$20,000	\$20,000	-\$105,000
Other Charges	\$1,281,754	\$1,370,026	\$2,925,164	\$2,925,164	\$1,555,138
Intrafund Transfers	-\$1,215,945	-\$315,660	-\$524,934	-\$524,934	-\$209,274
Total Appropriations:	\$21,022,963	\$19,037,155	\$26,159,267	\$26,159,267	\$7,102,112
Revenues					
Carry Forward	\$1,371	\$0	\$1,621,600	\$1,621,600	\$1,613,000
Federal/State Reimbursement	\$3,655,839	\$4,030,260	\$9,973,365	\$9,973,365	\$5,943,105
Fees & Charges	\$4,244,383	\$3,558,949	\$3,903,418	\$3,903,418	\$344,469
General Fund	\$3,811,259	\$5,539,622	\$6,091,481	\$6,091,481	\$551,859
Other Revenue	\$467,922	\$441,201	\$108,640	\$108,900	-\$343,701
Pomona Funds	\$875,000	\$1,760,339	\$0	\$0	-\$1,760,339
Realignment	\$4,910,360	\$3,839,757	\$4,023,116	\$4,023,116	\$183,359
Realignment - Social Services	\$130,315	\$150,000	\$150,000	\$150,000	\$0
Special Revenue Funds	\$1,220,191	\$404,333	\$287,387	\$287,387	-\$116,946
Total Revenues:	\$19,316,640	\$19,724,461	\$26,159,007	\$26,159,267	\$6,414,806

Expenditures



Revenues



**Health
2010-11
Accomplishments**

- ◆ *Updated and expanded communicable disease (CD) program, including Tuberculosis (TB) and influenza based services*
- ◆ *Expanded Emergency Preparedness (EP) vaccine and medication delivery process, to include both mass distribution sites in new arenas (PODS) and improved rural care delivery*
- ◆ *Adjusted and streamlined environmental health inspections to match the needs of the community, including updated inspection services and community response*
- ◆ *Developed a just in time and web-based health education service for the community. This includes the most relevant services of health education, including Pertussis, HIV, tobacco cessation and EP*
- ◆ *Created Low Income Health Plan (LIHP) advisory group that will provide guidance on program development and application process. This included the development of three subcommittees along with a charter and member expectations*
- ◆ *Improved delivery of California Children Services (CCS), including new location of the medical treatment unit and enhanced case management.*

Department Goals and Key Initiatives for 2011-12

Goal 1: The improvement of health and safety of Yolo County residents.

Key Initiatives for 2011-12:

- Provide expanded health education to the community through social media platforms to reach younger and special groups often missed in traditional research.
- Support an integrated communicable disease program by reaching out to providers in the community to begin education on emerging infectious diseases, followed by a program of early alerting by providers.
- Develop a food service delivery rating program to provide regular inspections of food service establishments in Yolo County, with intermittent required interventions.

Goal 2: Restructure fiscal framework to provide for long term funding stability.

Key Initiatives for 2011-12:

- Provide adequate indigent healthcare funding by participating in the LIHP with a 50% reimbursement for the Medi-Cal Coverage Expansion (MCE), and using intergovernmental transfers for expansion of medical services will insure a solid funding stream.
- Obtain increased federal and state support by 25% over the year to enhance our health delivery and education to the community.
- Reshape the health department structure. The current structure and organization is geared towards an older model and does not support the current cross discipline support needed to achieve these goals. The structure of the health department will be realigned to achieve these goals.

Goal 3: Delivery of high quality, local healthcare for all indigent Yolo county residents.

Key Initiatives for 2011-12:

- Improve provider services and financial support by participation in the LIHP expansion of Medi-Cal services under the MCE coverage expansion.
- The creation of a comprehensive, shared risk indigent care plan for Yolo County residents that provides a medical home to all participants.
- Provide effective program evaluation and follow up that will ensure adequate delivery of healthcare.

Program Summary

This program provides health care services that meet community standards of care to Yolo County detainees, both adult and juvenile. A five year agreement with California Medical Forensic Group (CFMG) to provide these mandated services to the County ends on June 30, 2011. A new contract with CFMG is being negotiated and will begin with the 2011-12 budget. The costs for this program will be closely monitored during the year. If actual costs exceed budget, staff will return to the Board of Supervisors to request additional funds from county contingencies.

Program Objectives

- Objective A:** Implement a new multi-year contract with CFMG for the provision of medical services in our county detention centers.
- Objective B:** Establish a shared risk policy for HIV treatment costs.
- Objective C:** Monitor contract provisions to assure the delivery of quality medical care.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Sick call visits provided	10,117	10,402	10,400	10,400
Medications administered to adult inmates	234,794	188,085	188,000	188,000
Medications administered to juvenile wards	17,760	19,785	19,000	19,000
Medical care cost per inmate (Assumes average population of 461)			\$6,452	\$6,452

Health

**Adult-Juvenile Detention
Medical Services
Budget Unit 501-4 Fund 117**

**Significant Items and/or
Changes in 2011-12**

A new five year contract with California Medical Forensic Group (CFMG) will begin with the 2011-12 budget. The Consumer Price Index increase scheduled for FY 11/12 has been deferred until years three through five of the extended contract resulting in an overall \$250,000 savings. CFMG's threshold of HIV/AIDS medication costs has been set at \$15,000 in aggregate per fiscal year.

Revenue Sources for 2011-12

General Fund	\$3,314,702
Public Safety	\$00
Realignment	\$00
Federal/State/ Other Govt	\$00
Fees	\$00
Grants/Other	\$00
TOTAL	\$3,314,702

Staffing History of unit

2009-10 Funded	0.0 FTE
2010-11 Funded	0.0 FTE
Authorized 2011-12	0.0 FTE
2011-12 Funded	0.0 FTE

Program Summary

Children's Medical Services include: Child Health and Disability Prevention Program (CHDP), a preventive program that provides care coordination to assist families with medical appointment scheduling, transportation, and access to diagnostic and treatment services; Health Care Program for Children in Foster Care (Foster Care), provides nursing expertise in meeting the medical, dental, and emotional needs of children in foster care.

California Children's Services (CCS), which provides diagnostic and treatment services, medical case management and physical therapy services to children under the age of 21 with eligible medical conditions; and Diagnosis, Treatment and Therapy (DTT), which also provides medical therapy services delivered at public schools.

Social Services realignment revenue provides \$150,000 in funding for this budget unit for diagnosis, treatment and therapy for children with chronic and disabling medical conditions.

Program Objectives

- Objective A:** 90% of children enrolled in CCS will have a documented medical home.
- Objective B:** All foster care children will have a documented medical/dental exam completed within 30 days of placement.
- Objective C:** To assure provision of quality care, CHDP conducts site reviews for 1/3 of its providers on an annual basis.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Clients provided case management on a monthly basis	600	595	595	700
Foster care medical screenings and evaluations completed	2124	1960	2566	2566
Hours of physical and occupational therapy provided	1900	1961	1900	1900

Health

Children's

Medical Services

Budget Unit 501-9 Fund 114

Significant Items and/or Changes in 2011-12

The 2011-12 budget includes the following:

- An increase in caseload resulting in additional Medi-Cal reimbursement for DTT services
- A new Medical Therapy Unit in Woodland provided by the Special Education Local Plan Area will allow for increased capacity and additional billable visits
- Utilization of Inter-Governmental Transfer (IGT) funds through a contract with Partnership Health Plan of California (PHC) to increase revenue by providing increased reimbursement rates for DTT services provided to (PHC) members.

Revenue Sources for 2011-12

General Fund	\$52,852
Public Safety	\$00
Realignment	\$359,331
Federal/State/ Other Govt	\$1,546,134
Fees	\$00
Grants/Other	\$00
TOTAL	\$1,958,317

Staffing History of unit

2009-10 Funded	15.0 FTE
2010-11 Funded	14.0 FTE
Authorized 2011-12	14.0 FTE
2011-12 Funded	14.0 FTE

Program Summary

Health Education: This program focuses on population-based prevention for wellness including: Women, Infants and Children (WIC) Supplemental Nutrition Program; tobacco prevention; HIV/STD education and prevention; car seat safety/vehicle injury prevention; and community-based advocacy efforts to improve health.

Emergency Preparedness: This function is lead for emergency preparedness and epidemiology by providing planning and training for bioterrorism, pandemic flu, cities and all hazards readiness, and epidemiology and data reporting; fiscal and operations provides fiscal and information technology support to aid managers and supervisors in responding to changes in demand for services and funding.

Public Health Nursing: This program includes communicable disease and tuberculosis case investigation and control; Maternal, Child and Adolescent Health programs; the immunization clinic and Immunization Assistance Program; YCHIP utilization review and case management, and Vital Records.

Public Health Lab: Public Health Laboratory provides laboratory tests to the department's programs and surrounding community.

Program Objectives

- Objective A:** Increase the knowledge of 300 high risk individuals about their HIV risk, and learn their HIV status through testing.
- Objective B:** Expand Public Health Laboratory services through molecular testing; staffing a fulltime Lab Chief, and researching additional service options.
- Objective C:** Prevention or reduction of incidence of communicable diseases, including sexually transmitted infections, TB and vaccine-preventable diseases.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Number of residents provided HIV/AIDS outreach and education	1,000	380	250	300
Residents provided nutrition education and exercise promotion	9,700	12,150	10,000	9,000
Youth and young adults reached through anti-tobacco prevention campaigns and projects	32,000	27,000	0	0
Laboratory tests completed	2,800	2,452	1,920	2,000
Number of WIC clients/month	4,975	5,475	5,725	5,725
Key personnel trained to use Strategic National Stockpile procedures and systems.	701	1,211	1,600	1,600

Health

Community Health

Budget Unit 501-1 Fund 114

Significant Items and/or Changes in 2011-12

- Work towards increasing State allocation for Nutrition Network
- Explore the provision of HIV Surveillance services for Solano County which may result in increased revenue and expenditure
- Loss of Emergency Preparedness Federal H1N1 Pandemic funds
- Increase in the amount of revenue from State WIC program for new Breast Feeding Peer Counselor program and caseload increase
- Assumes status quo laboratory budget, however an alternative option for the Board to consider during budget hearings is a regional option with cost savings of approximately \$100,000

Revenue Sources for 2011-12

General Fund	\$781,411
Public Safety	\$00
Realignment	\$183,733
Federal/State/Other Govt	\$2,782,663
Fees	\$208,231
Grants/Other	\$34,583
TOTAL	\$3,990,621

Staffing History of unit

2009-10 Funded	56.0 FTE
2010-11 Funded	35.5 FTE
Authorized 2011-12	42.0 FTE
2011-12 Funded	36.2 FTE

Program Summary

This budget unit processes provider claims, distributes funds and prepares State reports. Up to 10% of the total emergency medical services fund is used to administer the program. The remaining 90% is distributed as specified by Health and Safety code, as follows:

Uncompensated Physician Emergency Medical Services - (58%) This amount is budgeted to cover emergency room physician claims that are not reimbursed from any other source.

Hospital Trauma and Emergency Medical Care Services - (25%) This amount is budgeted for hospitals providing a disproportionate share of trauma and emergency medical care services. All of these funds are used to cover county indigents receiving trauma care at the University of California, Davis Medical Center.

Discretionary Emergency Medical Services - (17%) This amount is budgeted for discretionary emergency medical services funds. These funds partially cover the joint powers agreement and ambulance ordinance monitoring agreements with Sierra-Sacramento Valley Emergency Medical Services Agency with ambulance services provided.

Richie's Fund - Recent enacted legislation, (SB 1773, Alarcon) established an additional levy of \$2 for every \$10 collected from fines, penalties and forfeitures on specified criminal offenses. Fifteen percent is set aside for pediatric emergency and trauma services. The remaining funds are distributed according to the established formula.

Program Objectives

- Objective A:** Explore formation of a local Emergency Medical Services Agency (LEMSA).
- Objective B:** Obtain routine qualitative and quantitative data regarding response times to all areas in the county.
- Objective C:** Combine EMS leadership with Emergency Response to maximize resources and enhance cooperative efforts.

Yolo County (Response Time Standards)

American Medical Response (AMR)

City of Davis, UC Davis	8 minutes 90% of the time
Woodland	8 minutes 90% of the time
West Sacramento	8 minutes 90% of the time
West Plainfield, Willow Oak Fire, and Yolo Fire	15 minutes 90% of the time
Winters	18 minutes 90% of the time
Elkhorn Fire, Knights Landing, Madison, Zamora Fire, Esparto Fire, Dunnigan Fire and Clarksburg Fire	20 minutes 90% of the time
Capay Fire and Rumsey Rancheria Fire	25 minutes 90% of the time
Yolo County - Wilderness	As soon as possible

Health

Emergency

Medical Services (EMS)

Budget Unit 525-3 Fund 020

Significant Items and/or Changes in 2011-12

This budget includes a decrease in annual contract expenditures to Sierra-Sacramento Valley Emergency Medical Services Agency Joint Powers Agreement.

The 2011-12 budget is based on a loss of Maddy Funds in the amount of \$700,000. This represents a loss of \$80,000 for administrative costs in the department and the remainder is decreased funds to the provider network.

Revenue Sources for 2011-12

General Fund	\$00
Public Safety	\$00
Realignment	\$00
Federal/State/ Other Govt	\$00
Fees	\$00
Grants/Other	\$2,817,000
TOTAL	\$2,817,000

Staffing History of unit

2009-10 Funded	0.0 FTE
2010-11 Funded	0.0 FTE
Authorized 2011-12	0.0 FTE
2011-12 Funded	0.0 FTE

Program Summary

The mission of the Yolo County Environmental Health Division is to protect and enhance the quality of life of Yolo County residents by identifying, assessing, mitigating and preventing environmental hazards.

Consumer Protection: This program focuses on the protection of public health and prevention of disease through regulation of food establishments, recreational health facilities, schools, jails, body art facilities, and other facilities.

Hazardous Materials: This program focuses on the protection of the environment through regulation of a variety of hazardous materials and waste programs.

Land and Environmental Protection: This program focuses on protection of ground water and disease prevention through regulation of drinking water wells, sewage and solid waste, waste tires, and the land use approval and planning processes.

Program Objectives

Objective A: Assure that all food is safe for people to eat by inspecting food facilities once or twice a year based on risk, by educating food handlers, and by conducting appropriate enforcement.

Objective B: Protect drinking water supplies through the permitting and inspection of onsite sewage disposal systems, solid waste disposal facilities and well construction; and through review of proposed land use development.

Objective C: Protect the public health and safety, and the environment through regulatory oversight of hazardous materials and hazardous wastes; and respond to spills of hazardous materials.

Objective D: Provide assistance to the public in navigating the permitting and regulation process.

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Number of food facilities inspected	989	1078	1622	1680
Number of public pools inspected	339	294	690	692
Number of Septic Permits Issued (Standard and Non-Standard)	34	25	28	30
Number of Domestic Well Permits Issued	29	26	23	26
Number of Certified Unified Program Agency facilities and elements regulated	2,415	2,318	2,352	2,350
Number of hazardous material emergency responses	85	126	90	90

Health

Environmental Health

Budget Unit 501-3 Fund 114

Significant Items and/or Changes in 2011-12

The 2011-12 Environmental Health budget is based on a general fee increase of 9.8%; a significant increase in Workers Compensation Insurance costs, and additional revenues due to increases in grants and contracts.

Revenue Sources for 2011-12

General Fund	\$22,568
Public Safety	\$00
Realignment	\$50,000
Federal/State/Other Govt	\$234,068
Fees	\$2,751,991
Grants/Other	\$00
TOTAL	\$3,058,627

Staffing History of unit

2009-10 Funded	25.0 FTE
2010-11 Funded	22.0 FTE
Authorized 2011-12	24.0 FTE
2011-12 Projected	22.0 FTE

Program Summary

Yolo County is responsible for providing specified healthcare services to indigent residents of Yolo County as coverage mandated by State law (Welfare & Institutions code 17000). The Health Department is responsible for promoting health and wellness and prevention of communicable diseases in Yolo County. The county incorporates these principles in indigent healthcare through the provision of a "medical home" model. One of the strategies for ensuring comprehensive, quality healthcare for Yolo County medically indigent residents is establishing a "medical home" with primary care providers who will be able to address and manage their health issues/concerns. The Yolo County Healthcare for Indigents Program (YCHIP) identifies enrollees who are eligible residents and provides for reimbursement of covered and authorized services in the YCHIP program. The county has established relationships with community healthcare providers to treat and care for these YCHIP members, and reimbursement for those services.

This program provides for medically indigent healthcare services by contracting with the region's four major medical systems for inpatient and outpatient medical services, each of the associated medical groups for professional and diagnostic services, and each of the Community Health Centers (Federally Qualified Health Centers) within Yolo County to establish a medical home to include primary care services for the indigent population. Utilization management and authorization for care are accomplished by department staff. Claims processing and data retention are managed through a contractual relationship with Sutter Connect, a regional third party administrator. In addition, the Department contracts with a pharmacy benefit manager to process the pharmacy claims and oversee compliance of provider use of the formulary to manage pharmacy costs.

Health

Indigent Health

Budget Unit 502-3 Fund 114

Significant Items and/or Changes in 2011-12

Major changes will take place in the Indigent Health budget in 2011-12, including:

- Transition to State Low Income Health Program (LIHP) which will bring up to an additional \$5.5 million in revenue
- Utilization of the 340B Drug Pricing Program will achieve approximately \$125,000 in annual savings in pharmaceutical costs
- Establishment of Pharmacy Assistant Program which will provide additional savings in medication costs.

Revenue Sources for 2011-12

General Fund	\$1,919,948
Public Safety	\$00
Realignment	\$3,580,052
Federal/State/ Other Govt	\$5,500,000
Fees	\$00
Grants/Other	\$00
TOTAL	\$11,000,000

Staffing History of unit

2009-10 Funded	3.0 FTE
2010-11 Funded	4.0 FTE
Authorized 2011-12	4.0 FTE
2011-12 Funded	4.0 FTE

Program Objectives

- Objective A:** Restructure the program and transition to the State Low Income Health Program (LIHP) under the guidance of the LIHP Advisory Board and its subcommittees.
- Objective B:** Expand enrollment to additional eligible county residents.
- Objective C:** Decrease County costs with State reimbursement through the LIHP, and cost containment measures.
- Objective D:** Support the expansion and enhancement of the Safety Net health care delivery system

Performance Measurements

Measurement	2008-09 Actual	2009-10 Actual	2010-11 Estimate	2011-12 Projection
Months of medical coverage provided to adults and children	27,637	19,187	19,000	22,500
Individual clients served at least once during the year	3,343	2,468	2,444	2,894
Primary care visits during the year	15,000	8,400	8,318	9,850

