Mental Health Director's Report

September 25, 2017

West Sacramento Support- As I'm sure you have all heard, there was a horrible tragedy in West Sacramento week before last. Our staff attended the vigil along with CIP and we have been sending staff on a daily basis during drop off and pick up time at the school to support children and families. We have also been reaching out to our first responders to provider whatever support we can. Additionally, we have been meeting with city staff about mental health services and supports in general. They would like to host a forum of some sort to discuss mental health and resources available locally. We would love to have LMHB participate.

CIP/SB82 update- At the last Mental Health Services Oversight and Accountability Commission (MHSOAC) meeting, the Commission voted on new priorities for SB82 funding as follows:

- 1. No less than 50% of the funds will be issued to programs for 21 and younger
- 2. Balance can include programs targeted specific to TAY
- 3. Rural priority
- 4. Not previously funded priority
- 5. Leverage other funds priority (Medi-Cal, CHFFA)
- 6. Sustainability strategies with analysis of gaps to be included
- 7. Implementation plan to be included
- 8. Peer emphasis, both consumers and family members
- 9. Evaluation set aside at state level
- 10. May build in longer time, no additional funds

In response to these changes, Turning Point has downsized their staffing dramatically. We have meetings scheduled with our hospital partners and first responders to strategize about response and how to fill the gaps created.

Public Guardian update – The entire PG team is attending the California Association of PA/PG/PC next week for training toward the required PG/PC certification for all of the newly deputized staff.

The PG staff are finding it very useful and collaborative to be a part of HHSA. It seems to have improved communication and discussion regarding shared clients and service provision. Over the past 8 months we've been able to put our heads together with APS, Older Adult Services, MH, CIP, the Medi-Cal team, and IHSS to collaboratively resolve tricky situations and urgent service needs for our conservatees.

MHSA update- For almost two decades, Joan Beesley has been an incredible advocate for mental health services in Yolo County, by gathering Mental Health Services Act (MHSA) stakeholders, stewarding MHSA plans, and reminding us all of the various components of MHSA and their intent. We all knew the day would come when Joan would need to leave us to retire and enjoy her family, and that day has come. Joan will be retiring from HHSA and her role as our MHSA Coordinator at the end of this month, with her last day on September 29th. There is no doubt that losing Joan will leave a huge void within HHSA, but she has also done an amazing job of setting us up for success. Having just completed our 3 year plan for MHSA, many of the programs are up and running (or well on their way). Additionally, Joan has spent countless hours educating many of us on our responsibilities as laid out in the legislation governing MHSA. While Joan will be missed, I feel confident that our system is strong enough to carry on the plan and see to fruition all that Joan has started. Our immediate transition plan is to hire a HHSA

Program Coordinator position to oversee MHSA plan implementation and updates. This person will directly report to Samantha Fusselman. Additionally, we plan to hire an Accountant II to oversee MHSA finances. Please join me in congratulating Joan on her retirement and feel free to let us know if you know anyone who would be interested in, and qualified for, either of these positions.

Public Health Accreditation- On September 11 and 12, HHSA's Community Health Branch participated in the final step in achieving accreditation status by the Public Health Accreditation Board (PHAB). The branch sought accreditation to strengthen its ability to improve and protect the health of all Yolo County residents. As a part of the journey, HHSA and branch leadership worked to engage staff members, community partners and stakeholders to develop a strategic plan, a community health assessment and a community health improvement plan. To receive accreditation, a health department must undergo a rigorous, multi-faceted, peer-reviewed assessment process to ensure it meets or exceeds a set of public health quality standards and measures. During the 2-day site visit, a team from PHAB interviewed numerous staff, community partners, other county departments and Supervisor Saylor on each Domain. To date, 9 out of 61 local health departments in California are accredited. Receiving accreditation will demonstrate that the Yolo County HHSA Community Health Branch provides the highest quality of services to the 215,000 people it serves. From the start of this process, the goal of improving the public's health has been at the forefront. Even more exciting is that becoming accredited means we have an ongoing commitment to maintaining performance management and quality improvement standards to improve the health of Yolo County in the years to come. The site visit team acknowledged Yolo County's strong partnerships and governance, as well as its excellence in performance management, which they noted exists across the entire county organization, and not just the Community Health Branch. The Public Health Accreditation Board will meet in early November to make their decision regarding Yolo County. A big thank you goes out to Dr. Ron Chapman, Accreditation Coordinator Emily Vaden, and all of the staff, partners and board members who all played a role in this colossal effort.

Stepping Up/CBHDA/COMIO- In line with the County Strategic Plan item focusing on reducing the number of mentally ill individuals in custody, I have begun participating in several statewide initiatives. I participated in a work group with several statewide partners, including Parole, BSCC, Sheriff's Association, Council of State Governments, and many others, to develop a working definition of Serious Mental Illness to be used by Stepping Up Counties statewide. Additionally, I have been asked to co-chair CBHDA's Criminal Justice sub-committee and I presented last week to the Council of Mentally Ill offenders regarding our local efforts.

Facilities – There were many items in our MHSA 3 year plan intended to build our continuum of care for persons struggling with mental health crisis and symptoms. Sandra Sigrist is actively working on finding locations for an Adult residential facility, Navigation Center, and Mental Health Urgent Care. We will keep you apprised of our progress with these facilities. Additionally, the housing project continues to progress, with frames being erected. Completion is expected within 12 months.

Homeless system update- Last week we announced some significant staffing changes that will occur within our local homeless system over the next few months. Tracey Dickinson (Countywide Homeless Coordinator) and Ginger Hashimoto (Homeless Analyst) are both preparing to move on to new positions. Tracey will be moving into a full-time role within the Health and Human Services Agency focusing on communications, strategic planning and strengthening our integration. Additionally, Ginger has accepted a new role with the City of Davis where she will get to participate in a broader range of policy issues. As we begin to plan for how we will fill these positions, I think it is valuable to first reflect on the progress we have made.

Two years ago, in August of 2015, the Yolo County Health and Human Services Agency assumed responsibility for the countywide homeless coordinator position and functions. As a result of this change, the Yolo community transitioned from having a part-time contracted position to a full-time Homeless Program Coordinator (Tracey) employed by the County. Shortly thereafter, the County added an analyst (Ginger) to the homeless coordination team to lend additional support to these important efforts. In addition, the County has added dozens of new internal and external service delivery focused positions to the homeless continuum via a variety of funding streams.

Our dynamic duo, alongside our entire homeless team and all of our providers, have successfully grown the funding and services available within the local homeless system while working diligently to ensure that the system is aligned with national best practices. The result of all this work is something we can be proud of. Despite public perception, and the seemingly increased visibility of homelessness in our communities, we have held our homeless counts steady over the past two years, and have even seen a small decrease in some jurisdictions. This is in stark contrast to most of our neighboring communities, such as Sacramento- which saw a 30 percent increase in homelessness during the same period. In addition to holding our numbers steady, we have celebrated many other successes in the homeless system over the past two years....

- We made significant progress towards developing a strong and reliable Homeless Management Information System (HMIS). HMIS is a local information technology system used to collect client-level data on people experiencing homelessness, as well as data on the provision of housing and services. Two years ago the system had numerous capacity challenges that needed to be addressed to meet the evolving data reporting needs of our local community. Since then, we have successfully opened the HMIS system so that client information can be shared across providers for improved case coordination, adopted HMIS Policies and Procedures to provide guidance on security and data quality issues within the system, and improved the overall availability of local data on homelessness in our community.
- We implemented use of a standard assessment tool (the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT)) to prioritize services for our most vulnerable residents experiencing homelessness. The VI-SPDAT is an evidence informed tool that combines both medical and social science research to quantify the vulnerability of people experiencing homelessness with a numeric score. The score allows workers to link clients with appropriate services and housing, and also assists with prioritization of limited homeless resources based upon the acuity of a person's needs. The ultimate goal is to have all people experiencing homelessness

in Yolo County assessed and scored using the VI-SPDAT. During our first year using the VI-SPDAT, local providers in Yolo County completed 477 assessments, including 411 individuals and 66 families.

- We increased funding for homeless services by millions of dollars, from a diverse range of private, local, state and federal funding sources. Just within the County budget, we have more than doubled our spending on homeless services from \$2.9 million in FY 14-15 to more than \$6 million in FY 16/17. Additionally, Tracey and Ginger have worked with local partners to submit numerous grant applications, which resulted in more than \$9 million dollars of new funding entering our homeless system in FYs 15/16 and 16/17. We haven't submitted a single grant application that wasn't funded, in large part due to our successful performance measurement system and our emphasis on best practices.
- We significantly improved the score on our local Continuum of Care (CoC) funding application. Our 2013/14 application received only 59.7% of the available points, while our 2016 application received 80.5% of the available points (and landed above the mean score for other applicants).
- We have worked in tandem with each of our local cities as they have grown their homeless response efforts. Each of our cities is developing an individualized approach, but all have moved towards strong partnerships between first responders and services providers that result in improved outcomes for our residents experiencing homelessness and mitigate the impacts of homelessness on our communities.
- We have virtually ended unsheltered family homelessness in our community. Through the County's CalWORKs Housing Support Program, all CalWORKs eligible households are offered immediate temporary housing (in motels), intensive case management, employment placement assistance, and support with housing search. When families secure housing, grant funds are used to cover move in costs and pay rent until the family becomes self-sufficient. As a result of the program, unsheltered homelessness for families is uncommon, and we successfully placed 200 families in permanent housing during FY 15-16 (103 families) and FY 16-17 (97 families). During our last point in time count, only 1 family with children (of 5 people) was unsheltered, constituting less than 1% of our homeless population.
- We have added many new programs and services that have permanently housed hundreds of
 individuals and families and kept them housed with all the supports necessary to help them be
 successful in our community. These programs have all been designed to utilize best practices with
 an emphasis on improving the housing stability and overall well-being of those living homeless in
 our communities.

Tracey and Ginger have contributed significantly to this success, but they haven't done it alone. Our entire community has been a part of this transformation. As we move into the next phase of our development as a homeless system, we will be recruiting new staff to carry on the homeless coordination role. We know change is hard and that losing these two is a big hit to our system. We are committed to a slow transition with Tracey's replacement, and she will continue to support the homeless system throughout the process. We will be including our critical partners in the hiring of these new team members, and will ensure that we get input regarding what we have done well in the past two years and any areas for improvement. We still have a lot of exciting opportunities ahead of us, as we prepare to implement a local coordinated entry system, adopt a new Strategic Plan to End Homelessness, and develop new housing projects in each of our local communities.

RFP updates

Program	Projected Contract Date	Awarded To
Housing and Supportive Services	10/1/2017	Turning Point
Latino Outreach/MH Promotores	10/1/2017	CommuniCare & RISE
Access & Linkage School Rural El School Mentorship - Scope #1 Strengths Rural - Scope #2	10/1/2017	YFSA & RISE
Navigation Center	12/1/2017	Communicare
Peer Family-Led Support Services- Scope #1 TAY Speakers Bureau - Scope #2	11/1/2017	NAMI / Pending