

COUNTY OF YOLO

Health and Human Services Agency

Karen Larsen, LMFT Director

137 N. Cottonwood Street • Woodland, CA 95695 (530) 666-8940 • www.yolocounty.org

Local Mental Health Board

Regular Meeting: Monday, September 24, 2018, 7:00 PM - 9:00 PM

Mary L. Stephens Library, Blanchard Community Conference Room 135 East 14th Street Davis, CA 95616

All items on this agenda may be considered for action.

James Glica-Hernandez Chair

> Nicki King Vice-Chair

Reed Walker Secretary

District 1 (Oscar Villegas)

Bret Bandley Martha Guerrero Sally Mandujan

District 2 (Don Saylor)

Serena Durand Nicki King Antonia Tsobanoudis

District 3 (Matt Rexroad)

Richard Bellows Laurie Ferns Iames Glica-Hernandez

District 4 (Jim Provenza)

Ben Rose Robert Schelen Ajay Singh

District 5 (Duane

Chamberlain) **Brad Anderson** Reed Walker Vacant

Board of **Supervisors** Liaison Don Saylor

Alternate Jim Provenza

CALL TO ORDER --

-----7:00 PM - 7:10 PM

- 1. Welcome and Introductions
- 2. **Public Comment**
- 3. Approval of Agenda
- Approval of Minutes from August 27, 2018 4.
- 5. Member Announcements
- 6. Correspondence
 - a. CALBHBC Dues

TIME SET AGENDA------7:10 PM - 7:40 PM

7. Mental Health Services Act Annual Update Presentation - Anthony Taula-Lieras Project Coordinator, Mental Health Services Act (MHSA)

CONSENT AGENDA ------7:40 PM – 8:10 PM

- Mental Health Director's Report Karen Larsen 8.
 - a. Pine Tree Gardens Update
 - b. Pacifico Update Navigation and Adult Residential Facility
 - c. Crisis Staffing Update
 - d. Children's Access and Crisis Response

- e. Homeless Funding Update
- f. **Hospital Intercept Mapping**
- **Medical Respite**

REGULAR AGENDA ------

-----8:10 PM - 8:45 PM

- 9. Board of Supervisors Report - Supervisor Don Saylor
- 10. Chair Report - James Glica-Hernandez

PLANNING AND ADJOURNMENT------8:45 PM - 9:00 PM

- 11. Future Meeting Planning and Adjournment – James Glica-Hernandez
 - Current Ad-Hoc Committees and Members / Reports
 - b. Long Range Planning Calendar Discussion and Review

If requested, this agenda can be made available in appropriate alternative formats to persons with a disability, as required by Section 202 of the American with Disabilities Act of 1990 and the Federal Rules and regulations adopted implementation thereof. Persons seeking an alternative format should contact the Local Mental Health Board Staff Support Liaison at the Yolo County Health and Human Services Agency, LMHB@yolocounty.org or 137 N. Cottonwood Street, Woodland, CA 95695 or 530-666-8516. In addition, a person with a disability who requires a modification or accommodation, including auxiliary aids of services, in order to participate in a public meeting should contact the Staff Support Liaison as soon as possible and preferably at least twenty-four hours prior to the meeting.

 c. Next Meeting Date and Location – October 22nd 2018, from 7:00pm - 9:00pm. AFT Library, Community Meeting Room, 1212 Merkley Ave. West Sacramento, CA 95691.

I certify that the foregoing was posted on the bulletin board at 625 Court Street, Woodland CA 95695 on or before Friday, September 21, 2018.

Iulia Bodeanu

Local Mental Health Board Administrative Support Liaison Yolo County Health and Human Services Agency

Item 4. Approval of Minutes from August 27, 2018



COUNTY OF YOLO

Health and Human Services Agency

Karen Larsen, LMFT
Director

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Local Mental Health Board Meeting Minutes

Monday, August 27, 2018, 7:00 – 9:00 PM Health & Human Services, Bauer Building, Walker Room 137 N. Cottonwood St. Woodland, CA 95695

Members Present: Bret Bandley, Martha Guerrero, Nicki King, Antonia Tsobanoudis,

Richard Bellows, Robert Schelen, Ajay Singh, Brad Anderson, Reed

Walker, Don Saylor

Members Excused: Sally Mandujan, Serena Durand, Laurie Ferns, James Glica-

Hernandez, Ben Rose

Staff Present: Samantha Fusselman, Deputy Mental Health Director and Manager

of Quality Management Services, HHSA

Amy Leino, HHSA

Leigh Harrington, Behavioral Health Medical Director, HHSA

Ashley Logins-Miller, Administrative Assistant, HHSA

CALL TO ORDER

1. Welcome and Introductions: The August 27, 2018 meeting of the Local Mental Health Board was called to order at 7:07 PM. Introductions were made.

2. Public Comment: None at this time.

3. Approval of Agenda

Motion to approve: Martha Guerrero Second: Bret Bandley Vote: Unanimous

Abstentions: None

4. Approval of Minutes from June 25, 2018

Motion to approve: Martha Guerrero Second: Richard Bellows Vote: Unanimous

Abstentions: None

5. Member Announcements: None

6. Correspondence: None

TIME SET AGENDA

7. <u>Consumer Perception Survey Presentation</u> by Samantha Fusselman, Deputy Mental Health Director and Manager of Quality Management Services, HHSA

A discussion around availability of data showing how individuals are doing overtime. Discussion included scheduling focus groups and implementing other assessments such as CANS, ANSA, and LOCUS. It was recommended that a review of those assessments is added to the LMHB long range planning calendar.

CONSENT AGENDA

- 8. Mental Health Director Report by Karen Larsen, Mental Health Director, HHSA
 - a. Substance Use Disorder Continuum Martha Guerrero received information from firefighters that they would like to have the ability to refer. Karen will follow up to identify the appropriate materials for the firefighters, as they might be able to utilize the same materials that law enforcement uses. As a reminder, anyone is able to call (888) 965-6647 for mental health and substance abuse services.
 - b. Children's Mental Health Martha asked for additional information regarding children's mental health services. When Yolo Family Service Agency went out of business, the County contracted with two new EPSDT providers; Victor Community Support Services and Stanford Youth Solutions. Further questions about increased outreach, specifically in schools was discussed. It was recommended that a presentation from the school districts regarding their mental health services be scheduled.
 - c. Mental Health Urgent Care Antonia Tsobanoudis would like an update on the success of the Mental Health Urgent Care, as there is still some contention that people are not being referred correctly. Karen Larsen shared that the Mental Health Urgent care continues to see an increase in client walk-ins as well as police systems utilizing the Urgent Care.
 - e. West Sacramento 2x2 There was a discussion around the purpose of a 2x2 and the role of the Board at those meetings.
 - f. Pine Tree Gardens Antonia Tsobanoudis gave an update on fundraising efforts for Pine Tree Gardens. Karen shared that she meets regularly with Supervisor Provenza and Supervisor Saylor about the needs of Pine Tree Gardens and the clients served there.
 - j. CBHDA Report Martha Guerrero provided updates on some of the bills:
 - 1. AB1971 bill died
 - 2. SB1004 moving forward
 - 3. AB931 still alive, both sides have brought a lot of resources to the house.

REGULAR AGENDA

- 9. Board of Supervisors Report Supervisor Don Saylor
 - None
- 10. Rural Mental Health Video
- 11. Chair Report James Glica Hernandez
 - None

12. 2019 Calendar Review

- It was recommended that the presentation on jails be moved to January or February.
- April 22nd is typically Spring Break.

Motion to move April 22nd meeting to April 29th: Richard Bellows Second: Robert Schelen Vote: Unanimous Abstentions: None

• There was a discussion around conflicts for the May 20th meeting.

Motion to move the May 20th meeting to May 28th: Richard Bellows Second: Brad Bandley Vote: unanimous Abstentions: none

 Karen will follow up on why meetings are no longer occurring at the Woodland Public Library.

13. Annual Report Review

PLANNING AND ADJOURNMENT

- 14. Future Meeting Planning and Adjournment: James Glica-Hernandez
 - a. Current Ad-Hock Committees and Members/Reports: None
 - b. Long Range Planning Calendar
 - c. Next Meeting Date and Location

September 24th 2018, from 7:00pm - 9:00pm. Mary L. Stephens Library, Blanchard Community Conference Room, 135 East 14th Street Davis, CA 95616.

Item 6. Correspondence CALBHBC Dues



INVOICE

September 10, 2018

Karen Larsen Behavioral Health Director County of Yolo

RE: Invoice – Annual Dues – From California Association of Local Behavioral Health Boards and Commissions

Dear Ms. Larsen:

Page two of this letter includes the dues invoice for your local mental health/behavioral health board/commission. The 2018-2019 Dues Schedule shows the dues amount for all 59 members of the California Association of Local Behavioral Health Boards and Commissions (CALBHB/C). See https://www.calbhbc.com/dues.html.

Your board or commission is an important part of CALBHB/C. Your involvement with CALBHB/C makes our two organizations better able to achieve a common objective: to provide effective mental/behavioral health resources in local communities throughout California.

To accomplish this objective, we depend on revenue from dues to help underwrite the following tasks:

- 1. Enables CALBHB/C to better provide outreach, support, resources, and facilitate ongoing training and organized advocacy among California's 59 local mental/behavioral health boards and commissions.
- 2. Covers travel and accommodations for at least one member of your board (or commission) to attend a regional and a statewide meeting.
- 3. Provide high-quality training materials and resources at no charge on our website.

We also appreciate the work you do to support your local board or commission.

If you have any questions, please do not hesitate to contact me at <u>Jerry.Jeffe@calbhbc.com</u> or call me at (916) 916-917-5444 (CALBHB/C Office) or 916-502-7734 (Cell).

Sincerely,

Jerry Jeffe Executive Director

INVOICE CALIFORNIA ASSOCIATION OF LOCAL BEHAVIORAL HEALTH BOARDS AND COMMISSIONS

BILL TO: Karen Larsen FOR: Annual Membership Dues of CALBHBC

Behavioral Health Director

County of Yolo

DATE OF INVOICE: September 10, 2018

TOTAL DUES: \$1,000

Please send remittance to: CALBHB/C, 717 K Street, Suite 427, Sacramento, CA 95814.

Checks are made payable to: CALBHB/C.

Federal Taxpayer ID Number: 33-0581682 W-9 Form Will Be Sent To You Upon Request

Item 7. Mental Health Services Act Annual Update Presentation

YOLO COUNTY: MHSA ANNUAL UPDATE 2018-2019 COMMUNITY MEETINGS

September 24, 2018



Anthony Taula-Lieras - Mental Health Services Act Coordinator

Tessa Smith - Outreach Specialist & Family Advocate

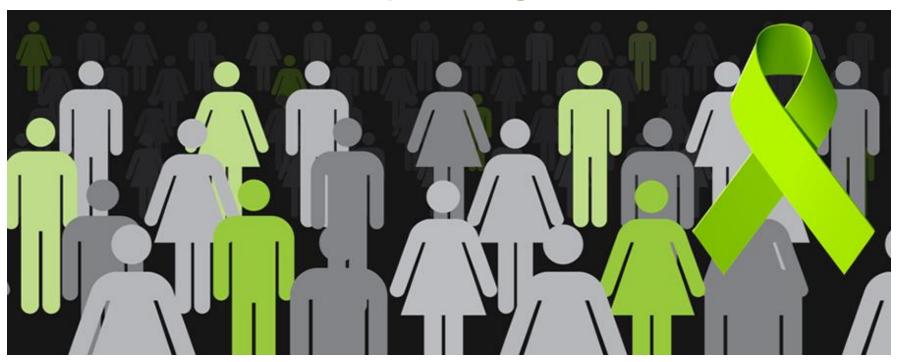
PURPOSE FOR TODAY

Objectives

- 1. Share information about MHSA
- 2. Why have a planning process
- 3. Hear from you
- 4. Next steps

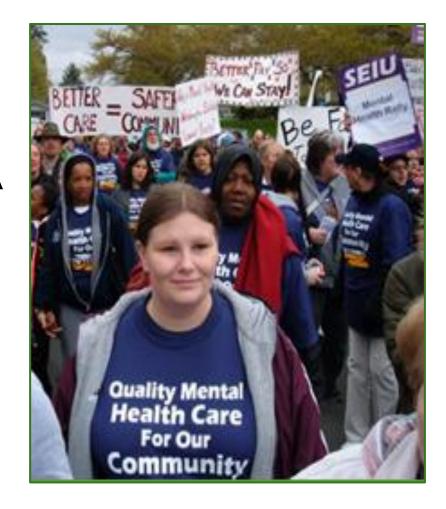
MENTAL HEALTH SERVICES ACT HISTORY & COMMUNITY PLANNING PROCESS

What is the MHSA? Why does it exist and why is there a Community Planning Process?



What is the Mental Health Services Act?

- Historically, California's mental health system has been underfunded and inadequate for those with serious mental health needs.
- Advocates campaigned for better mental health services, and in 2004 California Voters passed MHSA (Prop 63).
- MHSA taxes those who make over \$1 million
 - Funds programs to expand and transform the mental health system to address the needs of the underserved.
- Why does that matter to communities?
 - Communities receive additional funding specifically targeted to the unserved, underserved and inappropriately served.



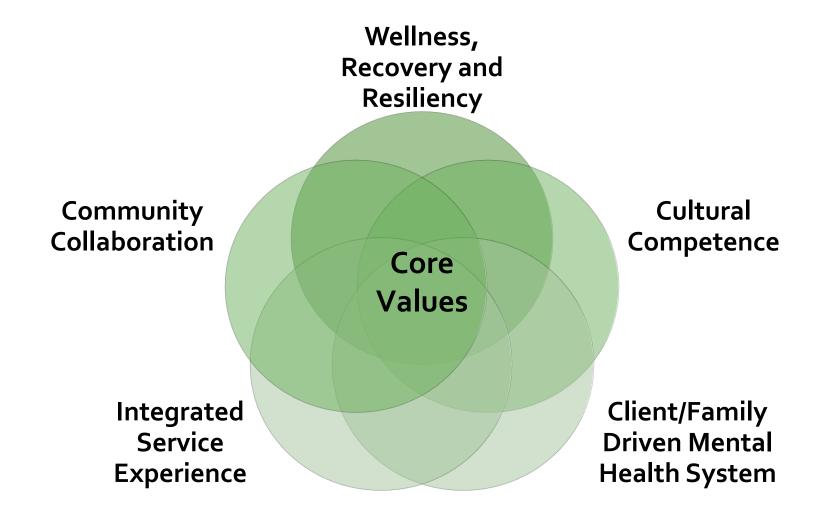
Community Planning Process

The MHSA intends that stakeholders meaningfully contribute to the **planning, design, implementation, and evaluation** of MHSA-funded programs.

- Adults and seniors with severe mental illness
- Families of children, adults, and seniors with severe mental illness
- Providers of mental health services
- Law enforcement agencies
- Education agencies

- Social services agencies
- Veterans and representatives from veterans organizations
- Providers of alcohol and drug services
- Health care organizations
- Other important interests

MHSA Core Values



MHSA Components

WET: Workforce Education &

CSS: Community Services & Supports

 Outreach and direct services for the most serious mental health needs

facilities

CFTN: Capital Facilities &

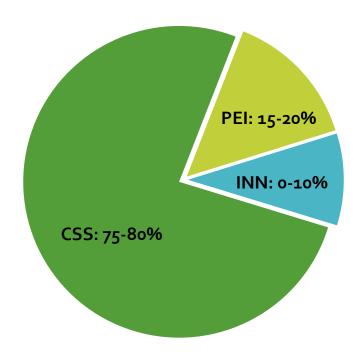
PEI: Prevention & **Early Intervention**

- Prevention to promote wellness and reduce the impact of mental health problems
- Early intervention to address emerging mental health needs

INN: Innovation

 Funding to test new approaches to improve access, collaboration, and/or service outcomes

MHSA County Funding*



Technology Needs Training Infrastructure development to Support to build, retain, and train a support electronic health records and competent public mental health workforce

*Counties received 10-year allocations for WET and CFTN activities

MHSA Annual Update Process

Draft and post plan for 30 day review

Synthesize needs and ideas

Gather

community

feedback

Convene program planning summit

summit fe
ar
Su

Obtain public comment,
Local Mental
Health Board feedback,
and Board of
Supervisors'
approval

What is currently funded for Children and Youth?

	Program	Program Description
PEI	Early Childhood Access & Linkage to Service Program	Implements universal screening and service linkage. Strengthens identification and linkage to services for children and identifies the appropriate level of care.
PEI	School and Community- based Mentorship program	Provides school-based educational presentations about mental health. Creates afterschool mentorship and activity-based resiliency programming.
CSS	Children's Mental Health Services	Outreach and Engagement to connect children/families to services.
		System Development: Services for children with mild to moderate needs.
		Full Service Partnership: Services for children with the highest level of mental health need.

	Program	Program Description
PEI	School-based Access & Linkage to Service	Strengthens identification and linkage to services for youth and young adults and identifies the appropriate level of care.
	TAY Wellness Center	Provides activity-based, socialization, and recovery-focused services
PEI TAY Early Intervention Program		Services for youth that are beginning to develop mood or anxiety-related serious mental illness.
		*UC Davis will serve youth experiencing a First Episode Psychosis/First break outside of MHSA funding.
PEI	TAY Speaker's Bureau	Reduces stigma and discrimination through creation of a TAY Speaker's Bureau.
CSS	Pathways to Independence	Outreach and Engagement at the TAY Wellness Centers to connect to services.
		System Development: Services for TAY with mild to moderate needs.
		Full Service Partnership: Services for TAY with the highest level of need.

What is currently funded for Adults and Older Adults?

	Program	Program Description
PEI and CSS	Community Based Drop in Navigation Centers	Community-based drop-in centers provide recovery-based socialization, activity-based programming, and case management.
CSS	Adult Wellness: Alternatives SD/FSP	Current adult full service partnership (FSP) program which includes the Wellness Centers with expanded service hours and more formalized programming based in evidence based practices (EBPs).
	ACT/AOT	This refers to the contracted ACT team that serves the highest level of FSP as well as consumers enrolled in AOT.

	Program	Program Description
PEI	Wellness Project: Senior Peer Counselor Volunteers	Peer support for older adults at risk of losing their independence.
CSS	Older Adult Outreach and Assessment	Outreach and Engagement: Strategy to help identify and adult and older consumers in need of services.
		System Development (SD): Services for older adults with a mild to moderate mental health need.
		Full Service Partnership (FSP): Services for older adults with the highest level of mental health need.

How is MHSA Supporting your Workforce?

Program	Program Description
Cultural Competency/ LGBT+ Initiative	Targeted support to improve cultural competency mental health service provision across the system.
Peer Workforce Development Workgroup	Workgroup inclusive of peer staff that strengthens the onboarding, training, and supervision to peer support staff and considers EBPs in peer support model, and works to increase inclusion of peer workforce across the agency.
Mental Health Professional Development	Provides training on emerging and best practices, will expand to include new training for DSM-V, trauma-informed care, motivational interviewing, CBT, and include Gallup's Strengths Finder.
Perinatal Mental Health Services Training	Training for providers across the healthcare system targeted at understanding perinatal mental health needs like postpartum depression.
Psychiatry Residency Program Development	Through partnership with UC medical schools, this program trains psychiatric residents and encourage them to enter the public mental health workforce.
Clinical Internship Program	Initiatives to develop a more robust intern training program for master's level clinical staff and continued commitment to developing the psychiatric residency program with UCD.

What Programs are available across the Lifespan?

Program Name	Program Description
Early Signs Project: Crisis Intervention Team (CIT) Training	Trains law enforcement and other first responders to recognize the signs of mental illness when responding to a person experiencing a mental health crisis.
Early Signs Training and Assistance	Trains individuals who have the knowledge and skills to respond to or prevent a mental health crisis in the community.
Integrated Behavioral Health Services for Latino Community and Families	Provides culturally responsive services to Latino/Hispanic residents with health issues, mental health illnesses, and/or substance use issues and includes primary care and full-scope behavioral health services to consumers, focused on engaging the family system and strategies for engaging men.
Early Signs Project: Crisis Intervention Program	This program pairs community-based behavioral health providers with law enforcement to respond to community mental health crisis.
Peer and Family Led Support Services	Assists peers and families to understand the signs and symptoms of mental health, promote awareness of mental health resources, develop ways to support an individual or loved one to access needed services, and receive support to cope with the impact of mental health for an individual or within the family.

What is currently funded for technology and facilities?

Program Name	Program Description
Adult Wellness Centers	Wellness centers with a variety of rehabilitative services, skill building groups, and computer labs with internet access.
Adult Residential Treatment Program	Facility that provides a community-based residential treatment alternative for adults at risk of falling back into Mental Health Rehabilitation Center (MHCs.)
Tele Psychiatry	Provides psychiatric services to clients through live, interactive audio videoconferencing during which Yolo HHSA staff facilitate the consultation between the client and the psychiatrist, taking special care in ensuring the privacy, confidentiality, and informed consent of the client.
Electronic Health Record and Data Upgrades	Updating information systems and software systems, standardizing data collection, improving the electronic documentation system, and strengthening analytic and reporting process.
LGBT+ Data Collection	This initiate focuses on data collection across the county on the LGBT+ community to provide culturally responsive outreach, quality mental health services/programs, and ultimately improve outcomes among this population.
Social Medial Initiative	This program explores social media and mobile applications that includes social media management tools that can run automatic analytics.

We want to hear from you!

Needs Assessment

- Year in review
 - What have we accomplished?
 - What programs and services stand out?
 - What programs and/or services might not be working as well?
- Remaining Needs
 - Who isn't getting services?
 - What types of programs and services are missing?

Program Planning

- What programs and services should we continue as they are?
- What programs and services should we consider changing?
- What programs and services do we not need?
- What new programs might benefit the community?

Next Steps

HHSA Presents to Local Mental Health Board: September 24, 2018

All Day-Program Planning Summit: October 16, 2018

Develop update: November- December 2018

Post for public comment: December 20-21, 2018

Public Hearing: January 21, 2019

Submit update to Board of Supervisors: February 2019

Item 8. Mental Health Director's Report

Yolo County Mental & Behavioral Health Board Director's Report September 24, 2018

Pine Tree Gardens Update – On September 19th, County staff met with staff from Turning Point Community Programs, and Yolo Housing Authority to strategize about Pine Tree Gardens. The County and TPCP are committed to supporting the current residents of Pine Tree while finding a sustainable model that maintains the residential designation of the homes.

Pacifico Update- Navigation and Adult Residential Facility — HHSA, Yolo County Housing, CommuniCare Health Centers and North Valley Behavioral Health held two project input discussions during the last week of August. The first gathering was specific to current residents of Pacifico, and the second was an open invitation to residents living in south Davis near the Pacifico location. Supervisors Provenza and Saylor attended the community-wide meeting. The meetings included brief presentations, question and answer periods, and an overview of next steps. Plans for both projects, along with overview from the input discussions, will move forward to the Davis Planning Commission for next steps.

Crisis Staffing Update-A new Access & Crisis Services Manager, Mila Green, has been hired! We are excited about the skills and experience Mila brings to HHSA's crisis services expansion. Mila comes to HHSA with significant behavioral health experience, both local and statewide, as well as a passion for providing quality services to the Medi-Cal and indigent populations seeking mental health care. Central to Mila's role will be coordinating HHSA's crisis response services, including crisis staff in the Bauer Mental Health clinic; a community-based crisis response team for requests from hospitals, law enforcement and community; and the 24/7 Access & Crisis Line contracted services with Heritage Oaks. In addition, HHSA has interviews scheduled for a Crisis Services Supervisor, who will base out of the West Sacramento Urgent Care, and play a central role in coordinating the teams in Mila's purview.

Children's Access and Crisis Response – Beginning October 1st, Yolo County will have an Access and Crisis Clinician specifically for Children and Youth 0-21 who are in crisis or at risk of being in crisis. (see attached flyer)

Homeless staffing update – Over the past four years, since assuming the Homeless Coordination role for the County, HHSA has increased staffing countywide by dozens of positions and has increased County positions from none to 8.5. Currently, HHSA has 2 open recruitments for 3 positions currently for the homeless services system of care. 1 full time clinician, 1 full time case manager, and 1 extra help case manager specifically serving the TAY population. In addition, an offer has been made to a senior analyst to join the team. Once all positions are on board the team will consist of a program manager, a program coordinator, a senior administrative service analyst, an associate administrative services analyst, a clinician and 2 case managers. Attached is an organizational chart for this growing team. (see attached homeless services org chart)

Homeless Funding Update – Over the past four years, since assuming the Homeless Coordination role for the County, HHSA has grown the local funding from \$2million annually to over \$6million annually. This year, more than ever before, we have seen many funding opportunities coming out for housing. HHSA has been working closely with HPAC and the Cities around several funding opportunities for homeless services and housing. (see attached funding overviews)

Hospital Intercept Mapping – HHSA, in conjunction with the CAO's office, is providing technical assistance to our local hospital partners, Woodland Memorial and Sutter Davis, to complete an intercept mapping project which will identify service gaps/needs as they relate to homeless clients being served by either hospital. Ian Evans from HHSA and Carolyn Jhajj from the CAO's office, who previously conducted a similar process for the criminal justice continuum of care, are facilitating this process in the hopes that there can be improved outcomes for our homeless clients who make contact with the hospital system for physical, mental, or substance use service needs.

Medical Respite – County staff have been meeting with our local hospital partners to develop a concept for a medical respite program locally. We have been speaking with other medical respite programs, pulling local data, and are planning to visit some of the regional respite programs over the next few months to determine what a local version may look like.



COUNTY OF YOLO

Health and Human Services Agency

Karen Larsen, LMFT
Director

Jennie Pettet, M.S. Director, Child, Youth & Family Branch MAILING ADDRESS

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Coming October 1st in Yolo County

Children's Access and Crisis Response

The Access and Crisis Clinician position was created to overcome barriers to access and linkage with mental health service, to decrease reliance on emergency resources, to reduce out of home placement, and to address opportunities to increase the mental health understanding in the community. The target population is Children and Youth age 0-21 who are in crisis or at risk of being in crisis.

The goals of this position are:

- I. Crisis: police interventions or child welfare interventions that may result in a removal (detainment)
 - a. Crisis clinician will support Child Welfare Social Workers to assess immediate mental health need (crises) and determine if involuntary hospitalization is appropriate. (emergent)
 - b. Crisis clinician will foster linkage with outpatient treatment and planned services.
 (urgent)

II. Access:

- a. Clinician will support systems continuity of care by following crisis mental health referrals from initial point of contact to linkage with community mental health agency. Clinician will be accountable to consumers for support with navigating the process.
- b. Clinician will provide trainings for community partners to increase access knowledge.
- c. Clinician will participate in multidisciplinary team meetings to support ongoing improvement in our service delivery system.

III. Education to reduce barriers:

- a. Clinician will participate in community health events to support de-stigmatization of mental health and disseminate information on how to access treatment and services.
- b. Clinician will provide education on trauma informed care across professional and community settings by partnering with community organizations.
- c. Clinician will collaborate with external agencies to strengthen service delivery system through problem identification, program evaluation, and consumer feedback.

Access and Crisis Line (888) 965-6647



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Director, Child, Youth & Family Branch

MAILING ADDRESS

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Goal	Outcome	Measurement		
Connect C&Y in crisis to ongoing services	Improve linkage to services	Number of C&Y connected to services		
Provide crisis services and follow-up to ensure C&Y engage in services	Increase utilization of planned mental health services that promote recovery and decrease risk of crisis	Service usage among C&Y to access triage services		
Provide C&Y with crisis de-escalation services before reliance on emergency services	Decreased reliance on emergency resources	Reduction in 911 calls; Reduction in amount of time law enforcement spends on crises for C&Y		
Provide C&Y with crisis de-escalation services to avoid unnecessary hospitalization services	Reduce avoidable hospitalizations	Reduction in the number of hospitalizations for C&Y		
Provide C&Y with crisis de-escalation services before behaviors escalate and result in avoidable incarceration	Reduce avoidable incarceration	Reduction in the number of incarcerations for C&Y		

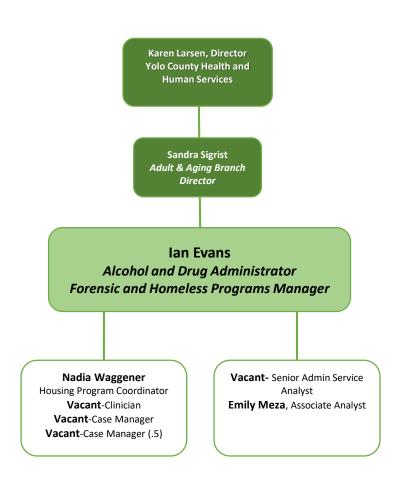
The assessment aims to determine level of crisis and safety concerns by determining the following:

- •Can the child or youth be stabilized over the phone and return for an appointment to connect to ongoing services?
- •Can the child or youth come to the mental health urgent care now for immediate services?
- •Does the child or youth need immediate assistance in the environment they are in?
- •Is it safe for the triage staff to travel to the youth or is a police accompaniment necessary?
- •Is the youth at risk of harming themselves or others?

Depending on the results of the phone assessment, the triage staff person may provide individualized and a variety of responses:

- •Staff may provide crisis intervention services over the phone to stabilize the child or youth and schedule a follow-up appointment.
- •Staff may request the child or youth meet at the MHUC for in-person services.
- Staff may meet the child or youth onsite at their home, a community setting, a hospital, or any other setting as needed and deemed safe and appropriate.
- •Staff may conduct a joint crisis response with law enforcement, if needed.

Yolo County Health and Human Services Agency Homeless Services Organizational Chart



Rev. 09/17/18 Total Positions:9 Vacant Positions:3.5

Yolo County Homeless Spending Inventory FY 17/18

					Prog	ram Uses:	
Program	Description	Funding Period	Annual Cost	Funding Source	Ĭ	VI-SPDAT	County Dept.
COUNTY COORDINATED - E	XTERNALLY CONTRACTED						
Partnership Health Plan	Project is to expand housing opportunities in the Cities of Davis - Paul's Place (\$750,313.28), Woodland (\$679,971.41) and West Sacramento (\$914,444.31).	FY 17/18	\$2,344,729 (not included in total spending)	Partnership Health Plan of California - HHSA facilitated the grant proposal process of bringing these entities together and helping to bring these monies into the	Y	Y	N/A
INTERNAL COUNTY PROGR	AMS						
Bringing Families Home**	Provides rental assistance to families in the Child Welfare System when family reunification is prevented due to the parents' homelessness.	FY 17/18	\$95,000	State of California - Department of Social Services - Bringing Families Home Program (AB1603) Yolo County Matching Funds	Y	Υ	HHSA
CalWORKs Homeless Assistance	Provides homeless assistance to CalWORKs families experiencing homelessness, including: 1) 16 day hotel voucher (can only be accessed once a year); 2) Last monthss rent and security deposit for housing (families are only eligible if the rent is less than 80% of their monthly income)	FY 16/17	Unlimited In FY 16-17 we spent: \$197,503	CalWORKS Funding the County can access is unlimited, but can only be spent within specific guidelines as specified by CalWORKs	N	N	ннѕа
CalWORKs Housing Support Program	Provides assistance to CalWORKs families experiencing homelessness, including rental assistance for up to 6 months, move in costs, utility assistance, furniture, and assistance with any other barriers to housing	FY 17/18	\$1,800,000	State of California - CalWORKs Housing Support Program (SB 855)	Y	Y	HHSA
Homeless Neighborhood Court (H- NHC)*	Program that allows people experiencing homelessness with low level criminal offenses to be diverted from the court system pre-charging, and participate in a restorative community process to avoid charging.	FY 17/18	\$131,073	Bureau of Justice Edward Byrne Memorial Justice Assistance Grant	Y	Y	DA/HHSA
COUNTY CONTRACTS							
Bridge to Health and Housing*	Projects aims to improve the health and well-being of people experiencing homelessness in Yolo County who are medically vulnerable. Project operates through two contracts, including: 1) Housing navigation services with Yolo Community Care Continuum- \$55,716.43; 2) Outreach and case management services with Fourth and Hope- \$202,662.55	FY 17/18	\$258,379 (excludes HHSA personnel)	Partnership HealthPlan of California 2-year local innovation grant	Y	Y	ннѕа
Cold Weather Shelter	Provides 120 nights of shelter at 4th and Hope during the winter	FY 17/18	\$38,300	City of West Sacramento- \$10,000 City of Woodland- \$10,000 County of Yolo- \$18,300	Υ	Υ	HHSA
Community Services Block Grant (CSBG) *	Program aimed at addressing the root causes of poverty such as drug and alcohol addiction, poor employment history, and homelessness, including the following services: 1) Transitional Housing at Davis Community Meals- \$40,000 2) Food to residents of rural Yolo through the Food Bank of Yolo County- \$50,000 3) Meals on Wheels assistance with People's Resources- \$20,000	CY 2018	\$232,000	CSBG Block Grant Federal funding for projects that address the root causes of poverty	N	N	ннѕа
	4) Emergency shelter with 4th and Hope- \$50,000 5) Housing Navigation with Yolo County Children's Alliance- \$50,000 5) Homeless Services with HHSA- \$22,000						
Extended Hope	Program funds two contracts: 1) Fourth & Hope - \$644,324.27 - provides intensive wraparound care to people experiencing homelessness with co-occurring mental health and substance use disorders. 2) Sacramento Steps Forward - \$62,725.30 - provides HMIS system support and	FY 17/18	\$707,050 (Excludes HHSA	SAMSHA- CABHI Grant	Υ	Υ	ннѕа
	infrastructure development.		personnel)				

KEY:

^{* =} Program that has increased funding since previous FY.

^{** =} New program that has been added since previous FY.

Yolo County Homeless Spending Inventory FY 17/18

General Assistance Homeless Shelter*	Contract with 4th and Hope to purchase emergency shelter beds for homeless General Assistance clients	FY 17/18	\$44,497	County General Fund	Υ	Υ	HHSA
Housing and Disability Advocacy Program**	Contract with Communicare Health Centers to provide disability benefit advocacy in cooperation with the HHSA General Assistance program.	FY 17/18	\$29,006	State of California - Department of Social Services - Housing and Disability Advocacy Program (AB1603), 2 1/2 year grant totalling \$190,483	Υ	Y	HHSA
Indigent Substance Abuse Treatment*	Provides funding for residential substance abuse treatment for individuals experiencing homelessness and struggling with substance dependence	FY 17/18	\$117,325	Substance Abuse Treatment Block Grant	N	N	HHSA
Homeless Interventions**	Landlord incentives and household start up funding.	FY 17/18	\$75,000	Intergovernmental Transfer (IGT) Funds	N	N	HHSA
Mental Health Block Grant	Funds Mental Health services for the indigent uninsured population within Yolo County Funding is used for contracted housing support services with Davis Community Meals and Yolo Community Care Continuum	FY 17/18	\$77,311	SAMHSA- Mental Health Services Community Block Grant	N	N	HHSA
MHSA Housing and Supportive Services*	Program contracts with Turning Point Community Programs to provide housing and support to mental health clients.	FY 17/18	\$505,762	Mental Health Services Act	N	N	HHSA
New Pathways Short-Term Supported Housing	Project provides temporary housing and supportive services to the most vulnerable and chronically homeless individuals in Davis, with the goal of placing them in permanent housing.	FY 17/18	\$65,200	Yolo County Pomona Funds - This program is also supported by the City of Davis with an additional \$65,200 in funding for FY 2017/2018.	Υ	Υ	ннѕа
Projects for Assistance in Transition from Homelessness (PATH)*	Provides services to people with serious mental illness, including those with co- occuring substance use disorders, who are experiencing homelessness or are at imminent risk of becoming homeless, including: 1) Contracts with 4th and Hope to provide outreach and case managment services at the emergency shelter to people with mental illness who are homeless- \$9,482; 2) Contracts with Davis Community Meals to provide outreach and supportive services to the mentally ill and homeless- \$19,440; 3) County costs for administering funds- \$3,212	FY 17/18	\$32,401	SAMHSA- PATH	Y	N	HHSA
Steps to Success Program**	Empower Yolo provides the Housing Assistance Services component of the Steps to Success Program with the goal of providing housing assistance services to participants linked with the program to reduce recidivism, and increase program completion by increasing permanent housing placements and decreasing homelessness. Empower Yolo will provide 1 FTE Housing Specialist who will assist participants in searching for and acquiring permanent housing, along with offering rental subsidies and any housing related financial assistance to participants.	FY 17/18	\$132,711	State of California - Board of State and Community Corections - Steps to Success Program (AB1603) 2 1/2 year grant totaling \$1,267,065	Y	Y	ннѕа
Transitional Housing for Probationers*	Provides housing, food and sober living oversight to probationers who would otherwise likely be homeless. Contracts with 4th and Hope and Cache Creek Lodge to provide services.	FY 17/18	\$180,000	AB 109	N	N	Probation
Yolo County Step-Down Housing**	Contract with Yolo County Housing to purchase a facility that provides safe, stable shelter, to individuals on probation. The Yolo County Probation Department provides onsite daily case management services.	FY 17/18	\$300,000	Intergovernmental Transfer (IGT) Funds	N	N	HHSA
COUNTY STAFF							
Homeless Services Team	Homeless Services is responsible for strengthening the infrastructure for homeless service providers within the County of Yolo. 1) Associate Administrative Services Analyst 2) Housing Coordinator 3) Clinical Supervisor	FY 17/18	\$539,498	SAMHSA/MHBG B2HH/CABHI/CSBG/Mental Health/ MHSA/CalWORKs/City Revenues/HHSA Admin.	-	-	HHSA
	4) Homeless Services Manager						

KEY:

^{* =} Program that has increased funding since previous FY.

^{** =} New program that has been added since previous FY.

CALIFORNIA EMERGENCY SOLUTIONS AND HOUSING PROGRAM SUMMARY

Background

Senate Bill (SB) 850, approved on June 27, 2018, establishes the California Emergency Solutions and Housing (CESH) Program and designates the Department of Housing and Community Development (HCD) to administer the program.

Purpose

Implement activities that address the needs of homeless individuals and families and assist them to regain stability in permanent housing as quickly as possible.

Target Population

Individuals living homeless or at risk of homelessness. Assistance should be prioritized to homeless households over households at risk of homelessness.

Eligible Applicants

Applicant must be an Administrative Entity (AE) designated by the Continuum of Care (CoC) to administer Program funds. The administrative entity will then transfer funds to qualified sub-recipients. The sub-recipient project selection process must be documented and must avoid conflicts of interest.

An Administrative Entity must be one of the following:

- A local government entity;
- A nonprofit organization that has previously administered Continuum of Care funds as the collaborative applicant; or
- A unified funding agency.

Administrative Entities may contract with sub-recipients that are:

- Units of local government;
- Private non-profits;
- For-profit organizations; and
- Qualified to carry out the eligible activities

Funds Available

According to SB 850, 50% of the funds collected from SB 2 (on and after January 1, 2018 and before December 30, 2018), must be spent on the California Emergency Solutions and Housing Program. The first year breakdown of funds includes \$57.5 million for the program.

Each CoC will receive a non-competitive allocation of the available funds. Funds will be released in two rounds, each round will constitute a single issuance of funds to be spent over a 5-year grant period. Round 1 of funding includes SB 2 revenue (Quarters 1 & 2) and leftover funds from the California State Emergency Solutions Grant program. Round 2 will only include SB 2 Revenue (Quarters 3 & 4), as a result, County allocation amounts are expected to be lower in Round 2 than in Round 1. Yolo County's allocation in Round 1 is \$863,524.

Eligible Uses

- Rental assistance and housing relocation and stabilization services.
- Operating subsidies in the form of 15-year capitalized operating reserves for new and existing affordable permanent housing units for homeless individuals and families.
- Flexible housing subsidy funds for local programs that establish or support the provision of rental subsidies in permanent housing to assist homeless individuals.
- Operating support for emergency housing intervention (limited to no more than 40% of funds) as described below:
 - o Navigation centers that provide temporary room and board and case managers;

CALIFORNIA EMERGENCY SOLUTIONS AND HOUSING PROGRAM SUMMARY

- Street outreach services; and/or
- o Shelter diversion, including, but not limited to, homeless prevention activities.
- Systems support for activities necessary to maintain a comprehensive services and housing delivery system, including coordinated entry, data collection, HMIS, and homelessness planning activities.

Application Requirements

- Activities must be carried out within the relevant CoC service area.
- Recipients are required to commit to using a Housing First model.
- Documentation that applicant is an AE designated in writing by the CoC to administer Program Funds and meets one of the following criteria must be provided:
 - Has prior experience administering eligible activities, or
 - Has partnered with one or more local governments or other entities within CoC service area that have the necessary prior experience to administer the requested funds.
- Administrative entities must document that the CoC has a functioning coordinated entry system and a functioning Homeless Management Information System (HMIS).
 - If a CoC's coordinated entry system and/or HMIS do not meet the minimum standards of the Department of Housing and Urban Development (HUD), a minimum of 20% of funds must be used to bring these systems up to standard.
- Documentation or description of the local program or project selection process anticipated to be utilized to allocate CESH funds must be provided.
- Identify estimated amounts to be used for the specific eligible activities described in the application.
- Identify numerical goals and performance measures (listed under Reporting).
- Include most current Homeless Plan.
 - o If the Homeless Plan is not current, CESH funds must be utilized to create and/or update the plan.
- The AE must issue award letters to any sub-recipients within 12 months of an award letter from HCD.

Timeframes

Funding Round 1		
August 15, 2018	Round 1 NOFA released.	
September 27, 2018 Application due date to receive award in November 2018		
October 15, 2018 Final Application Deadline for Round 1		
November-December, 2018 Award announcements issued on rolling basis.		
December, 2018 Standard agreements mailed out on rolling basis.		
Funding Round 2 – dates TBD		

Reporting

At a minimum AE's will report the following information annually:

- Program/project selection process was performed in collaboration with CoC
- Amounts awarded to sub-recipients with the activities identified
- Projected performance measures (defined below)
- Contracted expenditures
- Expenditures and activities of any sub-recipients for each year of the contract with HCD until all funds awarded expended
- Funds do not have to be spent evenly over the 5-year grant period.

Performance Measures

- Number of homeless persons served;
- Number of unsheltered homeless persons served, and the average length of time spent as homeless before entry into the project;
- Number of homeless persons exiting the project to permanent housing; and
- Number of persons that return to homelessness after exiting the project.

2 8/28/2018

HOMELESSMENTALLY ILL OUTREACH AND TREATMENT PROGRAM (HMIOT) SUMMARY

Background

On July 31, 2018, the Department of Health Care Services (DHCS) released the application and funding allocations for one-time Homeless and Mentally III Outreach and Treatment (HMIOT) Program funds authorized as part of the State's fiscal year 2018-19 Budget Act.

Purpose

The Program is designed to provide flexible one-time funding for county activities involving individuals with serious mental illness and who are homeless or at risk of homelessness.

Target Population

The Program's target population is persons who:

- Have a serious mental illness; and
- Are living homeless or are at risk of homelessness.

Counties are encouraged to leverage this funding with other initiatives, including efforts to address mental illness among populations with a high likelihood of homeless, such as those with recent involvement in the criminal justice system or release from incarceration.

Eligible Applicants

Counties are eligible to receive this funding.

Leverage and/or Match Requirements

Counties are encouraged to leverage this funding with other funding sources and initiatives, such as local mental health funding and federal matching funds.

Funds Available

Yolo County will receive an allocation of \$213,000. Funding for this Program is allocated based on guidelines in the 2018-19 Budget Act, as described below:

- Rural counties with a population under 200,000 were provided with a minimum of \$100,000.
- Rural counties with a population under 200,000 whose percentage of homeless comprises 4.5% or more of their total population were provided with a minimum of \$200,000.
- Los Angeles County will receive \$15 million.
- Remaining counties will divide \$31.1 million based on percentage of homeless using 2017 Point-In-Time Count data.

Eligible Uses

Funds are flexible and may be used to for any purpose related to serving the target population.

Requirements

- In order to receive these funds, counties must:
 - o Provide DHCS a letter of interest and a Board of Supervisors resolution
- Funds shall not be used to supplant other funds.
 - Counties must designate a single organization that will serve as the primary contact for the County.
 - Letter of Interest must indicate that the County intends to use the funds for the purpose outlined in Senate Bill (SB) 840.
 - Letter should also include a Board of Supervisors resolution as an attachment.

HOMELESSMENTALLY ILL OUTREACH AND TREATMENT PROGRAM (HMIOT) SUMMARY

Date	Action
July 31, 2018	DCHS releases application for one-time funds
September 25, 2018	Counties must submit a letter of intent and Board resolution affirming participation
October 2, 2018	DHCS notifies applicants of the selection decisions
October 9, 2018	Written formal acceptance is submitted to DHCS
December 31, 2018	Funding is fully processed and released to applicants
90 Days After Full Expenditure	Evaluation and summary report due to DHCS
June 30, 2020	Final date for spending funds

County will be required to submit a report within 90 days after the full expenditure of funding. The report shall include:

- Disposition of funds;
- Services provided; and
- Number of individuals who received services.

Background

On August 15, 2018, the Department of Housing and Community Development (HCD) released the Notice of Funding Availability (NOFA) for the Noncompetitive Allocation of the No Place Like Home (NPLH) Program. The NOFA for the first round of the Competitive Allocation is yet to be released and is expected in Fall 2018. All NPLH funding is conditional and dependent upon voter approval of the No Place Like Home Act of 2018, which will appear as Proposition 2 on the November 2018 statewide ballot. Assuming its passage, the Program will provide \$2 billion in funding for the development of permanent supportive housing.

Purpose

Loans underwritten by HCD will be used to acquire, design, construct, rehabilitate, or preserve permanent supportive housing. Projects under this Program are referred to as "Rental Housing Developments" consisting of a multifamily structure or set of structures, which provide supportive housing and have the same financing, ownership, and property management.

Target Population

The Program's target population is persons who are:

- 1. Chronically homeless, homeless, or at-risk of being chronically homeless, and
- 2. Have a serious mental illness.

Eligible Applicants

Counties may apply as a single County or as a joint County partnership and are considered the "Development Sponsor" by the NPLH Program.

Funds Available

The Program offers funds to Counties in two primary ways:

- Noncompetitive Allocations not to exceed \$200 million in total; awarded to Counties
 proportionately based on population size groups and Point-in-Time (PIT) Counts of
 individuals living homeless.
 - a. Yolo County's Noncompetitive Allocation is \$625,048.
- Alternative Process Allocations and Competitive Allocations not to exceed \$1.8 billion combined total.
 - a. **Alternative Process Allocations** only available to Counties with at least 5% of the State's overall homeless population, they are:
 - i. Los Angeles County,
 - ii. San Diego County,
 - iii. San Francisco County, and
 - iv. Santa Clara County.
 - b. **Competitive Allocations** \$1.8 billion <u>minus</u> funds that are issued as Alternative Process Allocations
 - i. The amount of funds available to individual Counties will be determined by the County Group in which the individual Counties fall.
 - ii. County Groups are determined by County population size and are defined as Small (less than 200,000), Medium (200,000 to 750,000), and Large

(greater than 750,000).

- iii. Total funds for each County Group will be determined based on the aggregate Point-In-Time (PIT) Counts as compared to the State's total homeless population, and the proportion of Extremely Low-Income renter households (paying more than 50% of their income for rent).
- iv. Yolo County is considered a Medium-sized county and, will compete against other Medium-sized counties.

Eligible Uses

Funds may be used to:

- Finance capital costs of Assisted Units in Rental Housing Developments, including but not limited to, the acquisition, design, construction, rehabilitation, or preservation of said Assisted Units,
- 2. Capitalize operating subsidy reserves <u>only</u> when no other funding assistance is available pursuant to Section 209 of the NOFA, and
- 3. Rehabilitate existing affordable housing projects.

Noncompetitive Allocation – Project Threshold Requirements

- 1. Eligible Project applications submitted under the **Noncompetitive** NOFA must be multifamily rental projects of five or more units.
- 2. The County must complete the following within 12 months of the initial NOFA:
 - a. Submit a Board of Supervisors resolution that the County will submit 1 or more Noncompetitive applications within 30 months of the initial NOFA,
 - b. Submit certification that the project will meet all requirements under Article II, III, or IV of the NOFA, and
 - c. Submit a County plan with goals, strategies, and activities (both in progress or future) to prevent and/or reduce homelessness, that:
 - i. Must have been created through a collaborative process including all stakeholders, and
 - ii. Must be less than 5 years old at the time of application submission.
- 3. Must **prioritize mental health services** for persons living homeless, chronically homeless, or at-risk of being chronically homeless.
- 4. **Financial Feasibility** must meet requirements in Sections 206 & 207 of NOFA and prove Fiscal Integrity
- 5. **Experience** the minimum experience requirements of the Project team include:
 - a. Development, ownership, or operation of Permanent Supportive Housing (PSH) within the last 10 years, where at least one unit meets the Target Population.
 - b. Lead Service Provider (may be County) must have <u>three or more years</u> of experience serving the Target Population, if not through PSH, such experience must include helping people overcome barriers to housing.
 - c. Property Manager must have <u>at least three years</u> of experience serving the Target Population.
- 6. **Site Control** the Development Sponsor must have "site control" of the Rental Housing Development pursuant to Uniform Multifamily Regulations (UMR), 25 CCR Section 8303.
- 7. Integration the Target Population must be integrated with the general public.
 - a. Assisted Units cannot be isolated to specific floors or areas of the building,

- b. For Projects of more than 20 units, HCD will fund <u>no more</u> than 49% of total units as NPLH Assisted Units,
- c. Community building activities <u>or</u> architecture that encourages tenant interaction, and
- d. Service Plan and Property Management Plan must include Policies and Procedures that promote community participation and do not restrict Assisted Unit households any more than the general public.
- 8. Scattered Site Housing allowed with the following conditions:
 - a. Single owner and single property manager for all sites,
 - b. Single set of NPLH Policies and Procedures with consistent service standards,
 - c. If the Rental Housing Development has a Capitalized Operating Subsidy Reserve (COSR), there will only be one for all sites,
 - d. One lender for all sites with payments senior to HCD's loan,
 - e. Single audit and annual report,
 - f. Development Sponsor's obligations secured for all sites, and
 - g. HCD must be named on the insurance policies for all sites.
- 9. **Relocation** the Development Sponsor is <u>solely responsible</u> for the displacement of tenants due to demolition and construction.
 - a. All tenants displaced are eligible to relocation benefits and assistance, and
 - b. The Development Sponsor must develop relocation plans (subject to review and approval by HCD prior to construction).
- 10. **Applications** must include:
 - a. Board of Supervisors resolution to provide at least <u>20 years of mental health</u> <u>supportive services</u> to project participants,
 - b. An initial plan for providing supportive services,
 - A Property Management Plan that utilizes a <u>low-barrier</u>, <u>housing-first approach</u> and includes Policies and Procedures to prevent evictions and facilitate reasonable accommodations, and
 - d. The County's plan to combat homelessness.
- 11. **Supportive Services Plan** collaborative agreement between County, Project Sponsors, Service Providers, and Property Manager that must follow these guidelines:
 - a. NPLH tenant participation is <u>voluntary</u> and housing availability <u>may not</u> be dependent on participation,
 - b. <u>Required</u> mental health services to be provided by the County or a subcontractor for a minimum of 20 years:
 - i. Case management,
 - ii. Peer support,
 - iii. Mental health care,
 - iv. Substance use treatment,
 - v. Support linkages to physical health care,
 - vi. Benefits counselling and advocacy, and
 - vii. Housing retention skills.
 - c. <u>Encouraged</u> supportive services:
 - i. Co-occurring disorder specific services,
 - ii. Recreational or social activities,
 - iii. Educational support,

- iv. Employment support, and,
- v. Access to other services such as legal assistance, food, and clothing.
- d. Draft written agreements or memoranda of understanding (MOUs) must be provided which identify the roles and responsibilities of the County, the project owner, other services providers, and the property manager.

Shared Housing Option

Counties may choose to implement a Shared Housing program with some or all of their **Noncompetitive Allocations**; Competitive Allocations may not fund Shared Housing.

- 1. Shared Housing Projects may be comprised of no more than one to four units.
- 2. Up to 10% of the Noncompetitive Allocation (for Shared Housing) may be used to cover administrative costs associated with Shared Housing
- 3. The County commits to:
 - a. Project underwriting (not HCD),
 - b. Monitoring of all work performed,
 - c. Loan servicing,
 - d. Provision of mental health services, and
 - e. Long-term monitoring.
- 4. Shared Housing may be used for predevelopment, construction, or post-construction financing. However, if predevelopment or construction financing is used, it must convert to post-construction financing.

Timeframes

and the second s					
	Noncompetitive Allocation				
June 27, 2018	HCD releases the Designation Forms for the Noncompetitive				
	Shared Housing Allocation				
August 15, 2018 – (Month Zero)	HCD released initial Noncompetitive NPLH NOFA.				
August 15, 2019 – (12 months)	County submits:				
	 Resolution committing to submit proposed project application(s) within 30 months of initial NOFA release, Certification that project(s) will meet program requirements, and 				
	3. Plan to Combat Homelessness.				
August 27, 2019	Optional Shared Housing Designation forms due to HCD.				
February 15, 2020 – (18 months)	HCD awards Noncompetitive Allocations to Counties based on				
	approval of documents submitted.				
February 15, 2021 – (30 months)	County submits:				
	1. Multifamily application(s) to HCD complying with NPLH				
	Program requirements.				
	2. Shared Housing project applications must be submitted				
	to the County and not HCD.				
August 15, 2023 – (60 months)	County must expend Noncompetitive Allocation Funds.				
	Competitive Allocation				
Fall, 2018	First Round Competitive NOFA expected to be released.				
Winter, 2018-2019	First Round Competitive Applications expected to be due.				

Background

Assembly Bill (AB) 74, approved on October 14, 2017, requires the **Department of Housing and Community Development (HCD)** to establish the Housing for a Healthy California (HCC) Program on or before January 1, 2019. Funding for the program is made available through Senate Bill (SB) 850.

Purpose

The HCC Program is intended to address the high costs incurred by health systems for homeless persons while living on the streets.

Target Population

This program is intended to promote housing for persons who meet all of the following requirements:

- Is chronically homeless or is homeless and a high-cost health user upon initial eligibility;
- Is a Medi-Cal beneficiary;
- Is eligible for Supplemental Security Income;
- Is eligible to receive services under a program providing services promoting housing stability, including, but not limited to, the following:
 - Whole Person Care pilot program;
 - o Health Home Program; or
 - o A locally controlled services program funding or providing services in supportive housing.
- Is likely to improve his or her health conditions with supportive housing.

Eligible Applicants

Counties are the eligible applicants for these funds.

Funds Available

According to SB 850, 50% of the funds collected from SB 2 (on and after January 1, 2018 and before December 30, 2018), must be spent on the HCC Program. The first year breakdown of funds includes \$57.5 million for the program.

Eligible Uses

Counties shall use grants awarded from the HCC Program for all of the following:

- Acquisition funding, new construction, or reconstruction and rehabilitation.
- Project based operating assistance, which may include:
 - Long-term rental assistance for period of up to five years, subject to renewal grants.
 - A capitalized operating reserve for at least 15 years to pay for operating costs of an apartment or apartments receiving capital funding to provide supportive housing to people experiencing homelessness.
- A county's administrative costs, as determined by the department, of at least 5 percent of the total grant award.

HOUSING FOR A HEALTHY CALIFORNIA SUMMARY

Requirements

- HCC Program funds must be used to implement a solution to homelessness for people living on the streets that ties rental subsidies to health care service funds.
- In order to be eligible, counties must:
 - o Identify a source of funding for providing intensive services promoting housing stability. Funding for these services may include, but is not limited to:
 - County general funds;
 - Whole Person Care pilot programs;
 - The Health Home Program;
 - Other County controlled funding.
 - Agree to contribute funding for projects assisted through federal Housing Trust Fund grants.
 This assistance may include preferences of set-asides for federally funded, locally administered rental subsidies.
 - Designate a process for administering grant funds through agencies administering housing programs.
 - o Agree to collect and report data to HCD as described in the "Reporting" section below.

imeframes	
Date	Action
December 2018	HCD expects to release program guidelines.
Spring 2019	HCD will release the Notice of Funding Availability (NOFA).

Reporting

- HCD shall work with the Department of Health Care Services (DHCS) to match program participant data to Medi-Cal data to identify outcomes among participants.
- County shall at annual and midyear intervals report:
 - Data specified by HCD necessary to measure the costs and outcomes of the program;
 - Number of participants and the type of interventions offered;
 - Number of participants living in supportive housing or other permanent housing; and
 - To the extent feasible, data on the impact of the program of participants' use of corrections systems and law enforcement resources.

HOMELESS EMERGENCY AID PROGRAM (HEAP) SUMMARY

Background

The Homeless Emergency Aid Program was established by State statute and will provide \$500 million in one-time funding to enable local governments to respond to homelessness. The program will be administered by the California Business, Consumer Services and Housing Agency (BCSH).

Purpose

HEAP is intended to provide localities with flexible block grant funds to address their immediate homelessness challenges.

Target Population

Specific guidance has not been provided regarding the target population. Generally, the program is intended to serve people who are living homeless.

Eligible Applicants

- Cities, county or joint powers authorities (JPA) who have declared an emergency shelter crisis will be the recipients of this funding, but must apply to the local Continuum of Care (CoC).
- Funding will be allocated directly to the local CoC. In Yolo County, this is the Homeless and Poverty
 Action Coalition (HPAC). Once HPAC receives the allocation, the HPAC body must decide how to
 distribute the funds between eligible entities. HPAC may design its own selection process.
- See "Requirements" section below for information regarding a possible emergency shelter crisis waiver process for Yolo jurisdictions.

Leverage and/or Match Requirements

Guidance has not been provided regarding any leverage or match requirements.

Funds Available

HEAP includes three pots of funding:

- \$250 million will be distributed to Continuums of Care divided into nine "groupings" based on their 2017 Point-in-Time (PIT) count. **Yolo will receive \$1,000,000**.
- \$100 million will be distributed to each CoC based solely on their 2017 PIT count. Yolo will receive \$341,828.
- \$150 million will be distributed to large cities. Yolo will not receive any of these funds.

In total, Yolo communities are eligible to receive \$1,341,828.

Eligible Uses

- Emergency housing vouchers;
- Rapid rehousing;
- Emergency shelter construction; and
- Use of armories to provide temporary shelters, among other activities.

Requirements

- Cities and counties must declare a shelter crisis to receive funds. However, smaller cities and counties (with a 2017 PIT count of fewer than 1,000 individuals) may be eligible to waive this requirement on approval of BCSH.
- CoC must demonstrate collaboration with other city, county, or nonprofit partners.

1 8/28/2018

HOMELESS EMERGENCY AID PROGRAM (HEAP) SUMMARY

- Entities must use at least 5% of their total award to establish or expand services to homeless youth or youth at risk of homelessness.
- Administrative costs are limited to 5%, and overhead costs or planning activities cannot be classified as administrative costs.

Timeframes

Round 1					
September 5, 2018	BCSH will release the Notice of Funding Availability (NOFA) for Round 1.				
Beginning September, 2018	Applications begin to be reviewed and awarded on rolling basis by BCSH.				
Late October, 2018	Distribution of Round 1 funds to CoC begins.				
December 31, 2018 Round 1 Final Application Deadline					
January 31, 2019 All Round 1 applications to be awarded by this date.					
Round 2					
February 15, 2019	BCSH will release the Notice of Funding Availability (NOFA) for Round 2.				
Beginning February, 2019	Applications begin to be reviewed and awarded on rolling basis by BCSH.				
Late March, 2019	Distribution of Round 2 funds to CoC begins.				
April 30, 2019	Round 2 Final Application Deadline				
May 31, 2019	All Round 2 applications to be awarded by this date.				
	All Rounds				
January 1, 2020	50% of funding must be contractually obligated.				
June 30, 2021	100% funds must be spent.				

Reporting

Entities must report their contract expenditures, the number of person served, and any progress towards state or local goals to the Agency by January 2020.

2 8/28/2018

Item 11.a. Current Ad-Hoc Committees and Members / Reports

Current Ad-Hoc Committees and Members / Reports

Meeting	Participants	Last Date Met
Data Metrics Ad-Hoc	Samantha Fusselman, James Glica- Hernandez, Nicki King, Richard Bellows	February 20, 2018
Pine Tree Gardens	James Glica-Hernandez, Martha Guerrero, Brad Anderson, Sally	March 19, 2018 May 21, 2018
Ad-Hoc/Task Force	Mandujan, Antonia Tsobanoudis	·
West Sac Engagement Ad-Hoc	Sally Mandujan, Martha Guerrero, Robert Schelen	April 10, 2018
Site Visit Ad- Hoc	James Glica-Hernandez, Ajay Singh, Ben Rose	April 16, 2018
Budget and Finance	Nicki King, Bob Schelen, Richard Bellows	April 25, 2018

Item 11.b. Long Range Planning Calendar

Yolo County Local Mental Health Board Long Range Planning Calendar 2018

Meeting	Agenda Item	Agency/Presenter	Туре	Timing
1/29/18	5150 Process Presentation	Harjit Singh Gill, Samantha Fusselman	Presentation	Past
2/26/18	MHSA 3-year Plan Update	Resource Development Associates (RDA)	Presentation	Past
2/26/18	Homeless Presentation	Aurora William, HHSA Homeless Services Manager	Presentation	Past
3/26/18	CCP Presentation	Carolyn West, CAO Senior Management Analyst	Presentation	Past
4/30/18	Annual Report Approval	Executive Committee	Recommendation	Past
4/30/18	Behavioral Health Services Budget Presentation	Connie Cessna-Smith, HHSA Fiscal Administrative Officer	Presentation	Past
5/21/18	Public Guardian Presentation	Laurie Haas, HHSA Chief Deputy Public Guardian	Presentation	Past
5/21/18	Annual Election of Officers	All	Adoption	Past
6/25/18	Maternal Suicide and Depression Presentation	Anna Sutton, HHSA	Presentation	Past
6/25/18	By-Law Review	All	Recommendation	Past
8/27/18	Consumer Perception Survey Data Presentation	Samantha Fusselman, Deputy Mental Health Director and Manager of Quality Management Services, HHSA	Presentation	Past
9/24/18	MHSA Annual Update Presentation	Anthony Taula-Lieras, Project Coordinator, Mental Health Services Act (MHSA)	Presentation	Past
10/22/18	SUD Presentation	Ian Evans, Alcohol and Drug Administrator	Presentation	Upcoming
12/3/18	2018 LMHB Meeting Calendar Approval	All	Adoption	Upcoming
1/28/19	Assessment Presentation	TBD	Presentation	Upcoming
2/25/19	School District Mental Health Services	TBD	Presentation	Upcoming

Item 11.c. Next Meeting Date and Location

2018

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Yolo County Local Mental Health Board

JANUARY 29, 2018 - DAVIS

Mary L. Stephens Library, Blachard Community Conference Room, 315 East 14th Street,
Davis, CA 95616 7:00 – 9:00 PM Meeting

FEBRUARY 26, 2018 - WEST SACRAMENTO

AFT Library, Community Meeting Room, 1212 Merkley Ave. West Sacramento, CA 95691 7:00 – 9:00 PM Meeting

MARCH 19, 2018 - WOODLAND

Woodland Public Library, Leake Room, 250 1St Street, Woodland, CA 95695 7:00 – 9:00 PM Meeting

APRIL 30, 2018 - DAVIS

Mary L. Stephens Library, Blachard Community Conference Room, 315 East 14th Street,
Davis, CA 95616 7:00 – 9:00 PM Meeting

MAY 21, 2018 - WINTERS

Putah Creek Conference Room, 111 East Grant Ave. Winters, CA 95694 7:00 – 9:00 PM Meeting

JUNE 25, 2018 - WEST SACRMANTO

AFT Library, Community Meeting Room, 1212 Merkley Ave. West Sacramento, CA, 95691 7:00 – 8:00 PM Meeting

JULY - BOARD RECESS

AUGUST 27, 2018 - WOODLAND

Bauer Building, Thomson Conference Room, 137 N. Cottonwood St. Woodland, CA 95695 7:00 – 8:00 PM Meeting

SEPTEMBER 24, 2018 - DAVIS

Mary L. Stephens Library, Blachard Community Conference Room, 315 East 14th Street,
Davis, CA 95616 7:00 – 9:00 PM Meeting

OCTOBER 22, 2018 - WEST SACRAMENTO

AFT Library, Community Meeting Room, 1212 Merkley Ave. West Sacramento, CA, 95691 7:00 – 9:00 PM Meeting

DECEMBER 3, 2018 - WOODLAND

Bauer Building, Thomson Conference Room, 137 N. Cottonwood St. Woodland, CA 95695 7:00 – 9:00 PM Meeting