Yolo County Health & Human Services Agency

Mental Health Director's Report

September 28, 2020 (6-8pm)

- a. MHSA 3-year plan BOS August 18th- finalized(link) RFP timeline. MHSA & MHSA Documents
- b. COVID 19 In addition to the Yolo County information we have had outbreaks in several facilities where we have Public Guardian clients. The number of positive COVID-19 cases has steadily gone down over the past several weeks. At the current rate, the County will likely be able to move into the next tier (red tier) for reopening of business and activities for limited indoor services. Recent data continues to emphasize and the support the importance of mask wearing to prevent the spread of the virus across the county. Despite the decrease in cases, the virus is still widespread throughout the community, and therefore, the best action people can take is to continue with social distancing practices, wash hands frequently and wear a face covering whenever in public.
- c. <u>Racial Equity Board Presentation</u> (Presentation in Link) RFQ the County has released an RFQ for County workforce focus groups and follow up trainings as indicated. HHSA is providing MHSA resources on top of a grant obtained by the County inclusion and diversity workgroup.
- d. Board Strategic Planning session (See attached presentation)
- e. Budget- September adopted budget- The new MHSA 3-year plan aggressively budgets to spend down accumulated fund balance as demanded by the community stakeholder groups and includes \$7.4 million in Salaries &Benefits in FY20/21 with no new positions, an increase of \$2.3 million over FY19/20. "No new positions" means BH staff will perform more MHSA services and less CMH services. Combined with some changes to how CMH payroll is allocated to SUD, this translates to CMH payroll being reduced from \$8.9 million to \$5.3 million, a decrease of \$3.6 million with no layoffs. The decrease in payroll combined with the new revenue resolves the CMH deficit that would have existed absent these efforts and satisfies the concerns of the stakeholder groups. (See attached Budget Handout)
- f. Full Service Partnership services- (See Board memo and letter to clients attached)
- g. **Pine Tree Gardens** NVBH contract The county is in negotiations with NVBH for operations at both Pine Tree Gardens homes. We expect the contract to come to the Board in October All projects below are either entirely or partially funded by other partners, leveraging mental health resources
- h. Project Roomkey/Homekey HHSA is working with each jurisdiction to give weekly updates on the number of individuals moved out of Project Roomkey motels into permanent housing options in order to update the interested parties, and initial reports are that more than 40 individuals served have moved into permanent housing from Project Roomkey. That is more than 10% of our 2019 unsheltered count that we've been able to find permanent housing for during this effort! Below is a current snapshot of Project Roomkey numbers and longer-term plans/projects that each jurisdiction is working on.

#### Project Roomkey/Short term (through December):

Total Rooms under lease: 156 Davis: 39 West Sacramento: 64 Woodland: 53

Total clients currently in rooms: 168 Davis: 30 West Sacramento: 93 Woodland: 45

Over the next several weeks, the County will begin having discussions about what the project may look like past December knowing that the current CARES funding must be expended by December 31st and knowing we will not be through the COVID-19 response efforts by then.

#### Long Term/Project Homekey

**Davis:** has put together a proposal for the Davis Emergency Shelter project where they will be leasing 25 2-bedroom units for a minimum of 6 months beginning in October. Their plan is to move the most vulnerable individuals currently in Project Roomkey rooms into the apartment units and backfill their 39 leases PRK.

**West Sacramento:** submitted 4 applications for Project Homekey, looking to purchase several motels and have services attached for 5 years. They are actively working with HCD on their applications and figuring out various resources they may be able to dedicate to the project to ensure it meets all of HCD's requirements and desired components of the project. If awarded, the Project Homekey motels would serve as a transition location for individuals currently in West Sacramento PRK rooms.

**Woodland:** continues to push forward on their 102/Beamer project's first phase, the construction of a 100-bed emergency shelter which will be able to house up to 70 individuals during COVID-19 following CDC guidelines for congregate shelter settings.

HHSA is working with each jurisdiction to give weekly updates on the number of individuals moved out of PRK motels into permanent housing options in order to update the interested parties and can share that information in the next update to you all.

i. Data Driven Recovery Project- HHSA is 1 year and 3 months into the 2-year DDRP with the Mental Health Services Oversight and Accountability Commission (MSOAC). This project seeks to identify ways to overcome barriers and increase data linkages across the criminal justice and behavioral health systems. Data integration for Yolo County HHSA behavioral health, probation and the jail has been completed. This information will be used to help make data driven decisions and to better serve individuals with mental illness in the criminal justice system. The work of DDRP is also being completed in Nevada, Sacramento, San Bernardino and Plumas counties. The MSOAC recently authorized a second round of DDRP (Cohort 2) for Fiscal Years 20/21-21/22, and Yolo County will continue to serve as the lead entity. Cohort 2 of DDRP includes El Dorado, Calaveras, Lassen and Marin counties. Concurrently, another component of DDRP (Cohort 1), is to improve our trauma informed system of care via Adverse Childhood Experience Screenings (ACES), cognitive

assessments, targeted therapeutic treatment and additional staff training. ACES and cognitive assessments are currently being conducted with individuals on probation in Yolo County. We plan to begin conducting these screening and assessments on individuals as soon as COVID-19 restrictions allow.

Additionally, to utilize Kevin O'Connell's experience and maximize the benefit of the DDRP, Kevin will be getting access to the Homeless Management Information System (HMIS). This will allow data integration of the homeless system with the behavioral health, probation, and jail data that has already been compiled which will provide a more comprehensive picture of the population and needs in Yolo. There are also two criminal justice grants that Yolo is implementing, one to expand Mental Health Court capacity and one to provide wraparound care for felony incompetent to stand trial clients in the community, which both require a significant amount of data. Without the work of the DDRP, Yolo would not be positioned nearly as well to compile and analyze this data as needed for the grants.

#### j. <u>Crisis Now-https://crisisnow.com/</u> https://theactionalliance.org/sites/default/files/crisisnow.pdf

- k. Co-Responder Program- Yolo HHSA, in partnership with Woodland, West Sacramento, and Davis Police Departments (PD), as well as the Yolo County Sheriff and Probation Offices, will have embedded Crisis Response Clinicians working in the community. Similar to an earlier HHSA project managed by a contract provider in 2014 through 2017, each law enforcement agency will have at least one trained Crisis Clinician who will co-respond to behavioral health crises in the community with law enforcement officers. The goals of this Countywide program include de-escalation of individuals in crisis and the avoidance of unnecessary and/or unfortunately outcomes for the community when interacting with law enforcement. Other important goals are more effective service and resource linkage for individuals in crisis and avoidance of local emergency rooms, if possible. To support this program, each law enforcement agency will contribute \$60,000 annually towards the cost of each HHSA Clinician. Collaboratively, detailed program outcomes to more effectively gauge success for all involved are being developed. Woodland PD's Co-Responder Clinician has been in place since July 2020, and West Sac PD's first of two Clinicians will be in place very soon. The Davis PD and joint Yolo County Sheriff and Probation Clinicians will follow.
- I. Woodland Community College- HHSA is finalizing this RFP for release. The College Partnerships program aims to partner with local colleges and community based organizations to provide engagement, access and linkage services for college students who are either at-risk of, beginning to, or currently experiencing mental health problems with the goal of promoting recovery, resiliency, and connection to mental health services for those who need it. Additionally, the program intends to prevent the development of mental health challenges through early identification, resources, and increased capacity to support student wellness on school campuses. The program intends to promote health and well-being for college students through the provision of physical and behavioral health services. This new program builds off of the successes of the college-based Wellness Center program developed in the previous three-year plan and expands to more robust college-based behavioral health program providing a broad array of engagement, prevention, early intervention, and both physical and behavioral health intervention services and support available on college campuses. (\$150,000/year)

- m. **K-12 Partnerships Program** The K-12 School Partnerships program will partner with school districts and community-based organizations to embed clinical staff at schools throughout the county to provide a wide array of services including universal screening, assessment, referral, and treatment for children and youth ages 6-18. This partnership program will help identify children and youth who need mental health services and will expand the current service model to provide direct services and supports to students and the school system. The K-12 School Partnerships programs will provide evidence-based, culturally responsive services and offer promising practices in outreach and engagement for at-risk children and youth that build their resiliency and help to mitigate and/or support their mental health experience to enhance service access, delivery, and recovery. The focus of the newly designed K-12 School Partnerships program will leverage MHSA and EPSDT funds and local control (LCAP/LCFF) funds from school districts to expand the array of mental health services and supports available on school campuses. (\$1,100,000/year)
- n. Mental Health Student Services Act (MHSSA) Grant Award/K-12 services-The Mental Health Student Services Act (MHSSA) grant will augment the K-12 Partnerships Program (which is funded by Mental Health Service Act funds). The goal of the MHSSA grant is for counties and school districts to develop effective partnerships to leverage funding from multiple sources to ensure that children, youth, and families can access and/or receive mental health services in locations that are familiar and comfortable to them: schools. Local behavioral health and school district stakeholders met on September 16 to discuss implementation of the grant, which includes developing and maintaining a governance structure to oversee grant activities. The governance structure includes three levels of oversight: a steering committee, the project implementation workgroup, and four regional committees; these groups should all be meeting within the next month. In the meantime, HHSA is working towards finalizing the contract with the Mental Health Services Oversight and Accountability Commission (MHSOAC) and will be developing a request for proposal to locate a contracted provider to implement the grant activities.
- o. Suicide Prevention Crisis Line data- (See attached board resolution)



## Board Strategic Planning Session

### September 15, 2020





## Welcome!



Patrick Blacklock Yolo County Administrator



## 2020-2024 Strategic Plan Overview



## Background: Development

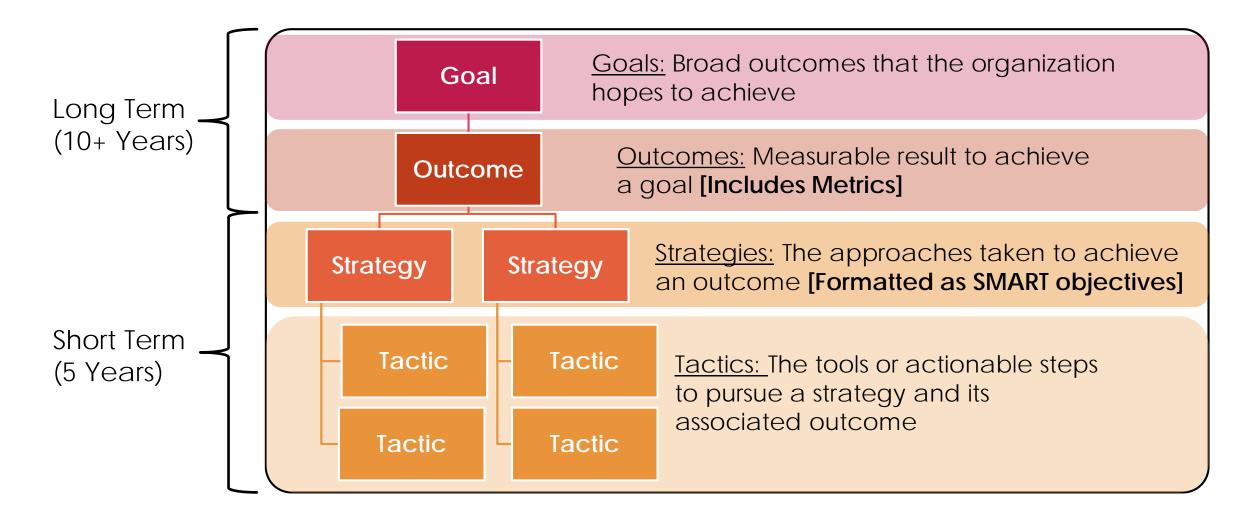


- 2 Surveys: Public and to Advisory Bodies, Committees, & Special Districts
- Meetings: Public meetings and/or Participation in Community Events
- BOS Workshops: Conducted # workshops based on topics of interest from engagement efforts
- Drafted Outcomes and Strategies: Based on Board feedback and staff subject matter experts
- Implementation Prep: Goal Coordinators and Outcome Leads established.
- Plan Approved: December 2019

## Background: Goals



## Background: Terminology



# Background: Implementation

### Implementation (Jan-Feb) Dashboard (TBD)

- Goal coordinators
- Outcome leads
- Tactical Plans (Quarterly)
- Annual Priorities

### Marketing Plan (Jan-June)

- Summary report and poster
- External: Press release, webpage
- Internal: Internal webpage, staff meeting presentations

### **Reporting and Evaluation** (Jan-Dec)

Thriving Residents

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- Quarterly updates (Board, Sept 15)
- Staff report template alignment
- Annual accomplishments summary

www.yolocounty.org/2020-Strategic-Plan



Safe Communities

Econom

## Dashboard and Data

- Each outcome has at least one metric to help measure progress
- Plan is to gather baseline data and display on a public dashboard
- Workgroup was formed for this purpose with Summer 2020 target
- Due to delays, this is now estimated for Spring 2021



Outcome: Ensure a balanced water portfolio Metric: Use of surface groundwater does not exceed supply (# of acre feet)

Outcome: Increase the preservation of agricultural land Metric: # of acres permanently protected



**Outcome**: Reduce barriers related to the development of affordable housing units. **Metric**: % increase in affordable housing units



## Accomplishments

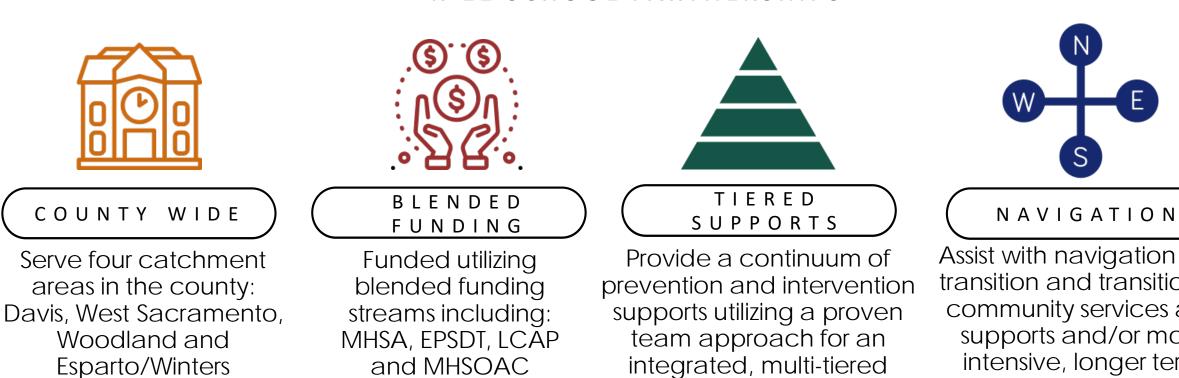
Behavioral Health Partnerships in Schools (Jakowski)

Homelessness (Evans)

Rural Communities (Sabatini & Gerney)

### Behavioral Health Partnerships in Schools

Goal: Thriving Residents **Outcome:** Reduce economic and educational disparities while building resiliency for vulnerable children, youth, and their families.



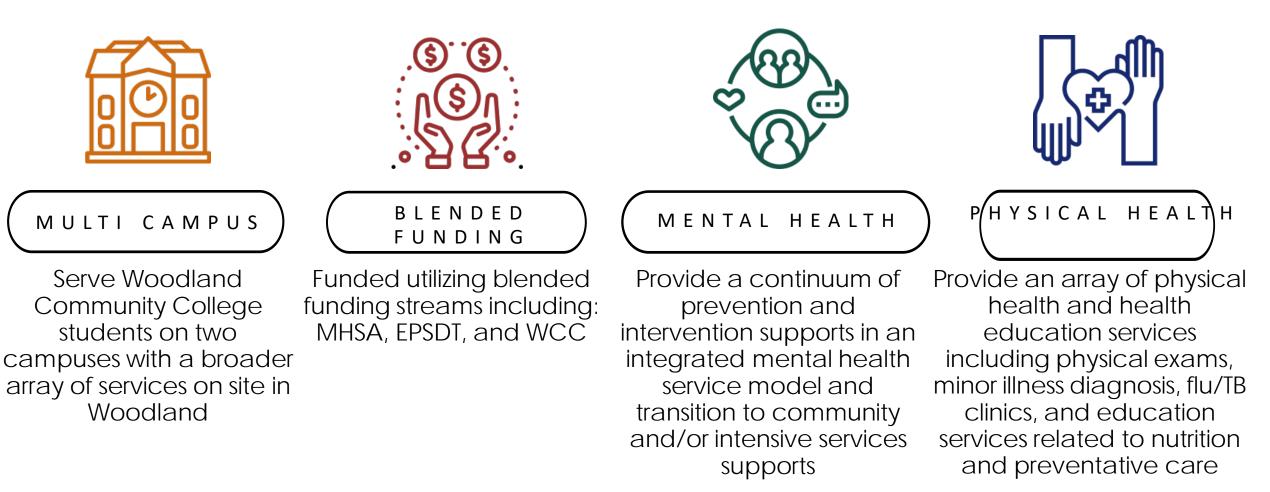
**K-12 SCHOOL PARTNERSHIPS** 

mental health service model

Assist with navigation and transition and transition to community services and supports and/or more intensive, longer term services and supports

### Behavioral Health Partnerships in Schools (Cont.)

#### WOOLAND COMMUNITY COLLEGE PARTNERSHIP



### Homelessness

Goal: Thriving Residents Outcome: Achieve "functional zero" in homelessness with a demonstrated reduction in people experiencing homelessness countywide.

### Metrics:

- # of permanent housing units available in Yolo County, minus the # of people experiencing homelessness
  - Permanent Housing Units in Yolo County: 204 units
  - 2019 Point In Time (PIT) Count: 655 Total Homeless, 397 Unsheltered
  - -451 current difference
- # of people experiencing homelessness on any given night in Yolo County
  - Estimated 200-300 on any given night

### Homelessness (Cont.)

### Accomplishments

- Reviewed Technical Assistance Consultant (TAC) report with elected officials and HPAC – Completed December 2019
- Formed Executive Commission on Homeless – Completed March 2020
- Launched Project Roomkey Began March 17, 2020
  - Currently 141 individuals in motel rooms receiving shelter and services
- HPAC voted to approved a new governance structure - Voted August 2020
- Grants since January 2020



### Homelessness (Cont.)

### On the Horizon

- 102/Beamer Emergency Shelter (100 beds, 70 during COVID) – Anticipated December 2020
- ▶ No Place Like Home Projects
  - Woodland 60 units (29 No Place Like Home) Anticipated April 2021
  - West Sacramento 85 units (41 No Place Like Home) Anticipated September 2021
- Davis 25 2-bedroom apartments for 40 high risk individuals beginning October 1, at least 6 months of placement – Anticipated October 2020
- Project Homekey West Sacramento Pending State Approval

102/Beamer Emergency Shelter Construction





### Homelessness (Cont.)

### Longer Term

- Mutual Housing at 5<sup>th</sup> Street Davis 38 apartments total Anticipated early 2022
- Blue Mountain Terrace Senior Apartments Winters 63 units Anticipated Spring 2021
- Paul's Place Davis 18 permanent supportive housing units Construction to begin in 2020



### **Rural Communities**

**Goal:** Robust Economy **Outcome:** Expand rural community support.



URAL INFRASTRUCTUR

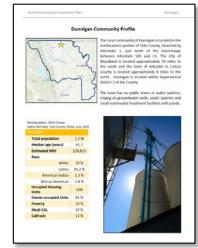
INVESTMENT PLAN



Prepared for FY 19/20

Not Reviewed or Approved by the Board of Supervisors

- Rural Infrastructure Investment Plan
  - Community based input
  - Community profiles created
  - Catalogue existing deficiencies



### Rural Communities (Cont.)

**Goal:** Flourishing Agriculture **Outcome:** Reduce flood insurance rates for properties within flood zones.

- Community Rating System Analysis
  - Scoring criteria and categories matrix
  - Ensure all earned credit is awarded
  - Next: ID of gaps in County activities





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### **Rural Communities**

**Goal:** Safe Communities **Outcome:** Enhance infrastructure and reduce flood risk in the unincorporated areas of Yolo County



- Nearly 40 discreet projects implemented
- \$350,000 grant funding for project development

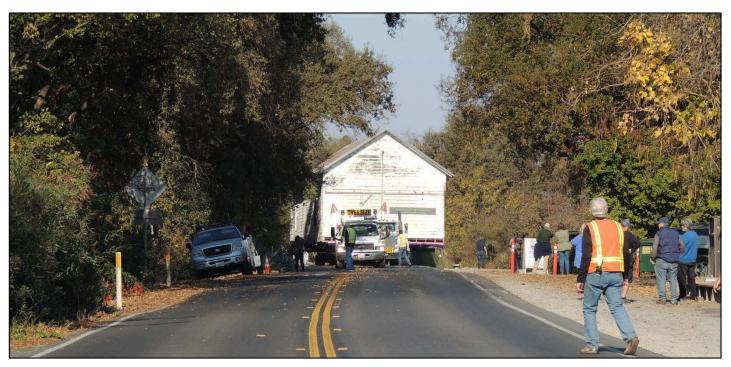


### **Rural Communities**

Goal: Safe Communities Outcome: Enhance infrastructure and reduce flood risk in the unincorporated areas of Yolo County

### Clarksburg Schoolhouse

- Clarksburg Schoolhouse funded!
- 1883 historic structure
- \$1M from Delta Conservancy (Prop. 68) to create permanent visitors center



### Rural Communities

Goal: Safe Communities Outcome: Enhance infrastructure and reduce flood risk in the unincorporated areas of Yolo County

### Expand Broadband

- RFI released for Landfill tower (Strategic Plan Strategy)
- Madison Migrant Center operational
- Davis Migrant Center in progress
- Clarksburg Library in progress (Strategic Plan Strategy)





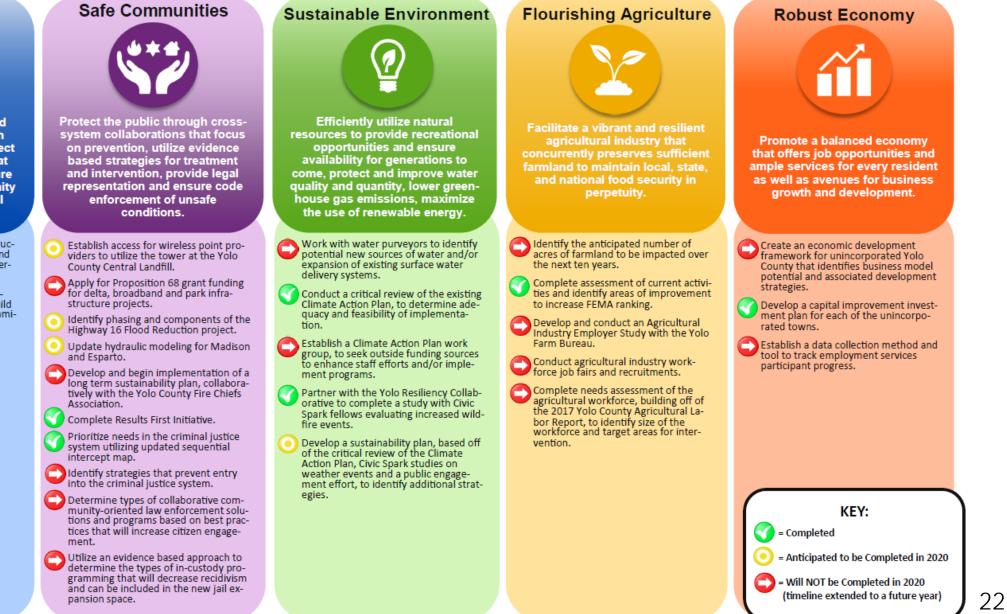


## 2020-2024 Strategic Plan Overview (Continued)





### YOLO COUNTY 2020-2024 STRATEGIC PLAN 2020 PRIORITIES



Support social, economic and physical environments which promote good health and protect vulnerable populations so that community members and future generations have the opportunity to learn and grow to their full potential.

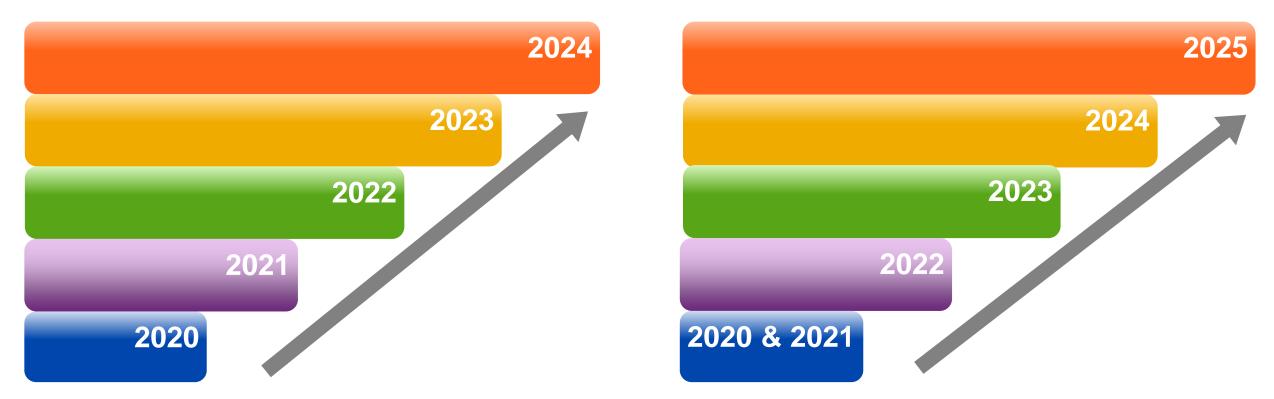
- Examine the current governance structure of the local homeless system and identify options for improved partnership.
- Increase the availability of evidence-based home visiting programs to build resiliency for children, youth, and families.

**Priority Strategies** 

## Proposed Changes: Timeline

### Pre-COVID-19

### **Proposal Post-COVID-19**



Each year of the Strategic Plan builds off the work of the prior year.

## Proposed Changes: Metric & Strategies

### Key Changes

### Metrics:

- New metrics: 5 (including replacement of 2 metrics)
- Altered Language: 2 metrics

### Strategies:

- New Strategies: 8
- Date Extensions: 28
- Altered Language: 2

#### 2020-2024 Yolo County Strategic Plan Thriving Residents Support social, economic and physical env Ith and protect vulnerable populations so that con unity members and future generations have the opportunity learn and grow to their full potential. Outcom Topic Strategies (& Metric) (SMART Objectives: Specific, Measurable, Achievable, Realistic, & Time-Bound) Reduce disparities in health outcomes through upstream prevention by Health Equity Establish commitment to Health in all Policies within County and at least two local jurisdictions by June addressing root cause social determinants of health (education, income 30.2021 neighborhood, and housing) Develop internal and external policies solidifying the County's organizational commitment to inclusio and diversity by December 31, 2021 Conduct an upwards mobility assessment, partnering with community members and local organization Comparison of Human Development Index (HDI) across local communities to identify key findings and recommendations, by December 31, 2021. and population group Modernize public health work towards population focused policy, systems, and environmental approaches to community health improvement and focus efforts on low HDI communities and populations by June 30, 2022 Provide Health in all Policies trainings and Health Impact Assessment support to policy makers in the County and at least two local jurisdictions by June 30, 2023. Achieve Public Health Re-Accreditation by June 30, 2023 Form a County supported Accountable Community of Health (ACH) initiative, which provides a comprehensive action-oriented model for cross-sector collaboration to address complex health issues and implement at least one health improvement initiative using an ACH by June 30, 2024. Achieve "functional zero" in homelessness with a demonstrated Homelessness Examine the current governance structure of the local homeless system and identify options for reduction in people experiencing homelessness countywide. improved partnership by June 30, 2020. December 31, 2020. (Functional zero is the point at which the number of individuals experiencing a housing crisis in our community is equal to or fewer than Strengthen the homeless crisis response system by securing new funding sources for prevention the number of permanent housing units available to them) services by June 30, 2022. June 30, 2024. Secure permanent supportive housing units for 70 of the most vulnerable homeles individuals in Yolo County by June 30, 2024 # of permanent housing units available in Yolo County, minus the # of people experiencing homelessness # of people experiencing homelessness on any given night in Yolo County

## **Proposed Changes: Metrics**

#### Goal (Outcome Topic) Metric Change

Thriving Residents (Children)



**Remove:** # of resource families for children and youth with intensive needs who have experienced maltreatment and have been placed in out of home care in the region

Add: % of Yolo County Child Welfare dependents who are placed within the county and the % who are placed within the region

**Remove:** Flood protection rating (flood interval years) for the communities in the Yolo Basin

Safe Communities (Infrastructure)

- Add:
  - \$ County and external funding committed to flood protection efforts
  - # of projects in development and # of projects implemented for incremental increased flood protection
- # of acres and # of residences provided incremental increased flood protection

Robust Economy (Housing)



Add: # of accessory dwelling units

## Proposed Changes: Strategies

Metric Change

Goal (Outcome Topic)

Robust

Economy

(Housing)

Thriving Residents (Health Equity)



(Discussed during second half of presentation)

### Add:

- Expedite qualifying development projects and identify potential parcel or infill opportunities for housing in urbanized areas of unincorporated towns by December 31, 2020.
- Identify opportunities for the development of affordable housing projects on unused county property by December 31, 2020.
- Streamline the application process for accessory dwelling units (ADU) and explore amnesty opportunities for existing unpermitted ADUs, including junior ADU's in urbanized areas, by July 31, 2023.
- Review the onsite sewage disposal ordinance to identify opportunities to reduce barriers for housing developments served by onsite sewage disposal by July 31, 2023.
- Identify other barriers (e.g. impact fees, mitigation requirements, development standards, inclusionary housing requirements, etc.) to affordable housing by March 31, 2021.



### YOLO COUNTY 2020-2025 STRATEGIC PLAN DRAFT 2021 PRIORITIES

Goals

Support social, economic and physical environments which promote good health and protect vulnerable populations so that community members and future generations have the opportunity to learn and grow to their full potential.

- Establish commitment to Health in all Policies within County and at least two local jurisdictions.
- Increase the availability of evidencebased home visiting programs to build resiliency for children, youth, and families.
- Support efforts of the Yolo County Commission on Aging and Adult Services in advancing emergency response readiness for aging adults.
- Develop options for cross-system communication among criminal justice and behavioral health partners.

providers to diagnose and refer per-

Strategies Train at least five community health Priority

tions.

sons with tuberculosis in a timely manner. · Implement rapid syphilis testing and treatment with vulnerable popula-

#### Safe Communities

Protect the public through crosssystem collaborations that focus on prevention, utilize evidence based strategies for treatment and intervention, provide legal representation and ensure code enforcement of unsafe conditions.

- Release a minimum of 25 online training products for both public and responders.
- Have 100% of the Yolo County Board of Supervisors complete the Policy Group training course.
- Connect the Clarksburg Library to higher speed internet.
- · Explore ongoing financing mechanism for road and bridge maintenance.
- Identify strategies that prevent entry into the criminal justice system. Establish outcomes and best (or innova-tive) practice alignment in all CCP-funded programs.
- Determine types of collaborative commu-nity-oriented law enforcement solutions and programs based on best practices that will increase citizen engagement.
- Utilize an evidence based approach to determine the types of in-custody pro-gramming that will decrease recidivism and can be included in the new jail expansion space.
- Implement processes for Quality Assur-ance (QA) and Continuous Quality Improvement (CQI) to assess program fidelity and efficacy.
- Expand restorative justice and diversion programs for appropriate offenders.
- Develop and begin implementation of a ٠ long term sustainability plan, collabora-tively with the Yolo County Fire Chiefs Association.

#### Sustainable Environment



Efficiently utilize natural resources to provide recreational opportunities and ensure availability for generations to come, protect and improve water quality and quantity, lower greenhouse gas emissions, maximize the use of renewable energy.

- Develop actionable conjunctive use plan that uses flood/storm water for water supply resilience to ensure that all locally developed flood projects provide conjunctive use benefits (i.e. detention, groundwater recharge, or habitat creation).
- Establish a Climate Action Plan work group, to seek outside funding sources to enhance staff efforts and/or implement programs.

#### **Flourishing Agriculture**



Facilitate a vibrant and resilient agricultural industry that concurrently preserves sufficient farmland to maintain local, state, and national food security in perpetuity.

- Identify the anticipated number of acres of farmland to be impacted over the next ten years.
- Conduct outreach, to identify landowners willing to sell easements.
- Create an agricultural mitigation bank to ensure the continued protection of farmland.
- Conduct agricultural industry workforce job fairs and recruitments.

#### **Robust Economy**



Promote a balanced economy that offers job opportunities and ample services for every resident as well as avenues for business growth and development.

- Identify other barriers (e.g. impact fees, mitigation requirements, development standards, inclusionary housing requirements, etc.) to affordable housing.
- Create an economic development framework for unincorporated Yolo County that identifies business model potential and associated development strategies.
- Identify and cost the improvements and zoning changes necessary to increase the development potential of freeway commercial corridors.
- Amend the County's Right to Farm ordinance to ensure adequate protections for agricultural land.
- Establish a data collection method and tool to track employment services participant progress.
- Assess opportunities to maximize the public benefit and operational potential of the Yolo County Airport.
- Explore the establishment of concession agreements to increase recreational service opportunities related to Countyowned parks and open spaces.
- Identify and categorize CSD deferred maintenance needs and facilitate solutions by providing technical and grant writing support.



## Next Steps

- October 6: Board Approval of Strategic Plan Updates and 2021 Strategic Priorities
- December 2020: Update Strategic Plan Booklet with Accomplishments
- Spring 2021: Gather Baseline Data and Complete Data Dashboard







## Public Comment & Board Discussion



## Break!



## 2020-2024 Strategic Plan: Key Topics

# Health Equity and Racial Disparities

**Introduction by Patrick Blacklock** 

### Health & Racial Equity

### **Goal: Thriving Residents**

**Outcome:** Reduce disparities in health outcomes through upstream prevention by addressing root cause social determinants of health (education, income, neighborhood, and housing).

### Strategic Alignment

- Health in all Policies systemwide concept
- Health equity is crucial to racial equity and upward mobility
- Racial equity offers a different lens to view health equity



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## Inclusion and Diversity Work Group

Vision: Yolo County has a vision of a region that includes thriving residents, safe communities, a sustainable environment, flourishing agriculture, and a robust economy. To help achieve this vision, Yolo County acknowledges, respects and incorporates diversity and inclusion in our operational plan.

### **Vision Statement Definitions**

**Diversity:** To Yolo County, diversity is rooted in the recognition of the vast differences among human beings. Embracing diversity is a building block for inclusion.

Inclusion: To Yolo County, inclusion is actively and intentionally valuing the thoughts, ideas and perspectives of all human beings so community members and employees of all identities – whether visible or not – are able to be authentic as well as feel safe and respected.



## Inclusion and Diversity Work Group

The County issued an RFSQ to seek responses for experts in the areas of equity, diversity, inclusion (EDI) and the elimination of racism in the workplace. RFSQ Responses due Monday, September 14, 2020, and Work to Commence in October 2020

The EDI program for employees may include some or all of the following components:

- 1. Development and administration of a Countywide employee survey
- 2. Organization and facilitation of employee focus groups
- 3. Organization and facilitation of listening sessions
- 4. Policy development
- 5. Development of employee training modules
- 6. Administering initial employee training
- 7. Providing the County of Yolo with a framework to carry forward this work



## Inclusion and Diversity Work Group

## **Next Steps**

- 1. Explore membership in the Government Alliance on Race and Equity (GARE)
- 2. Potential enrollment in a year-long GARE Cohort
- 3. Select a service provider for our EDI work
- 4. Work with service provider to design, implement, analyze employee online survey
- 5. Work with service provider to design, implement, analyze employee focus group feedback

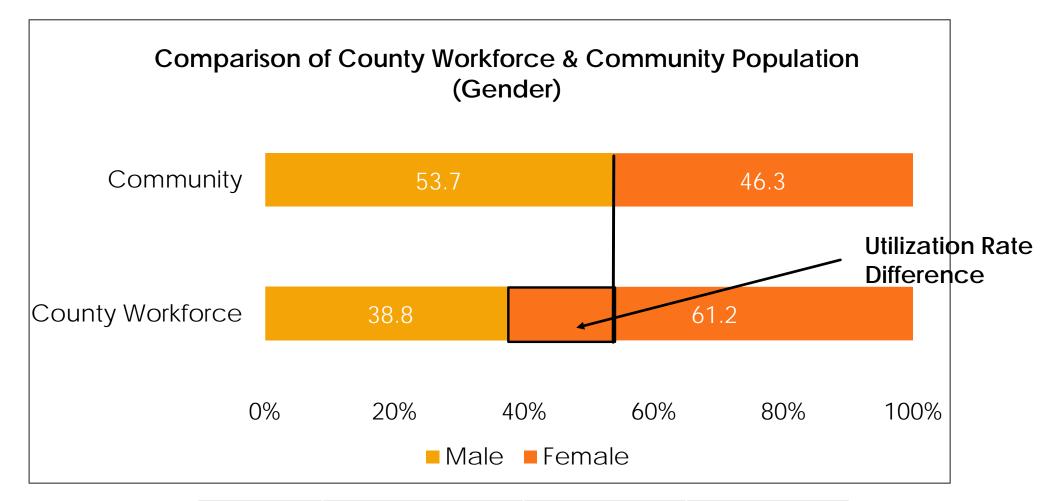
6. Based on results and service provider recommendations, develop initial training for county employees

7. Explore further work to expand EDI efforts internally and externally

# July 21st Board Workshop Data Update

Request	Department
Race/ethnicity data trends and breakdown by age	CAO
City of residence in-care and substantiated; factors identified with disproportionality of black children in CWS	CWS
City/County of residence for active adult supervised population; Pre- Trial Risk Assessment	Probation
Detail on Non-Yolo offenders booked into the jail	Sheriff
IHSS cases by race/ethnicity and compared to county population; race/ethnicity for service center programs	HHSA
County Workforce Statistics*	HR

## Yolo County Workforce - Gender Statistics



	County of Yolo	Community	Utilization %
Male	38.8%	53.7%	-15%
Female	61.2%	46.3%	15%

## Yolo County Workforce - Ethnicity Statistics

	County of Yolo	Community	Utilization %
White	51.5%	54.2%	-2.7%
Hispanic or Latino	33.4%	24.8%	8.6%
Black or African American	5.1%	3.1%	1.9%
American Indian or Alaska Native	0.8%	0.5%	0.2%
Asian	8.0%	13.9%	-5.9%
Native Hawaiian or Pacific Islander	0.2%	0.9%	-0.7%
Two or More Races	1.1%	1.6%	-0.5%
Other	0.0%	1.0%	-1.0%

# Strategy Recommendations

## **Goal: Thriving Residents**

**Outcome:** Reduce disparities in health outcomes through upstream prevention by addressing root cause social determinants of health (education, income, neighborhood, and housing).

- Develop internal and external policies solidifying the County's organizational commitment to inclusion and diversity by December 31, 2021.
- Conduct an upwards mobility assessment, partnering with community members and local organizations to identify key findings and recommendations, by December 31, 2021.
- Develop action plan in collaboration with criminal justice departments to implement changes to reduce racial disparities in the criminal justice system by June 30, 2021\*

# Criminal Justice Action Plan/Timeline

## **Key Concepts**

- Raise visibility of data and projects and list staff contacts for public comments/questions
- Support local, state, and federal initiatives that advanced social justice and combat racism
- Continue law enforcement implicit bias/racial profile training and evaluate community response team innovations (homeless outreach/mental health to assist deputies)





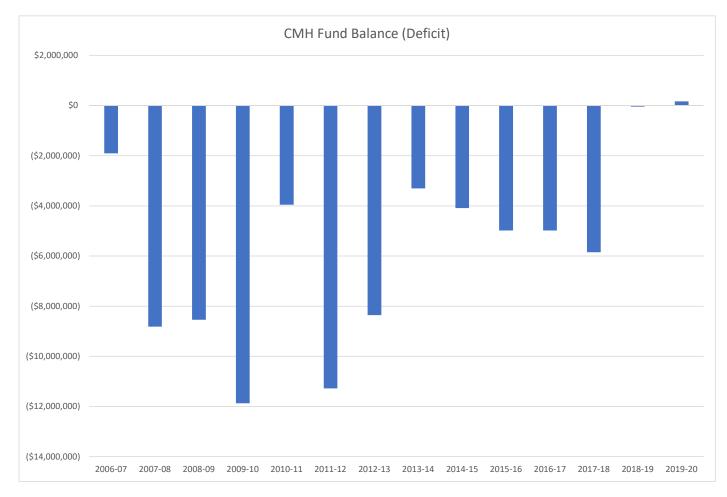
# Public Comment & Board Discussion



# Closing

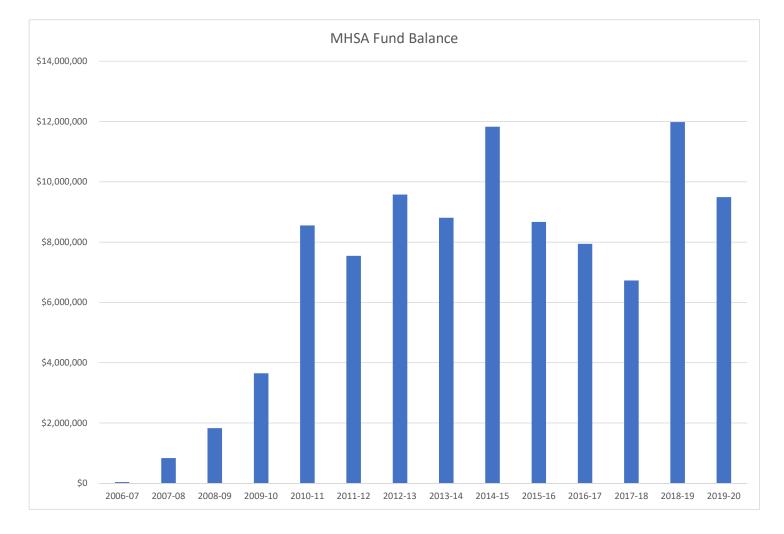
Patrick Blacklock

2006-072007-082008-092009-102010-112011-122012-132013-142014-152015-162016-172017-182018-192019-20(\$1,905,436)(\$8,818,607)(\$8,542,743)(\$11,876,793)(\$3,954,456)(\$11,276,662)(\$8,358,656)(\$3,306,890)(\$4,089,941)(\$4,984,750)(\$4,984,750)(\$5,851,157)(\$45,280)\$162,562



CMH

2006-072007-082008-092009-102010-112011-122012-132013-142014-152015-162016-172017-182018-192019-20\$43,020\$838,100\$1,831,984\$3,649,561\$8,554,544\$7,546,143\$9,577,526\$8,808,628\$11,831,447\$8,668,776\$7,943,847\$6,729,035\$11,981,051\$9,493,479



MHSA

### Steps taken to close CMH FY2019/20

After all expenditures and outside revenue, the CMH operating fund had a county share of costs of \$16,512,634.

- HHSA received \$5,476,015 of current year MH 91R
- HHSA received \$3,539,951 of current year MH 2011R
- Transfer in \$678,073 budgeted amount of IGT
- Transfer in \$377,364 of CGF (the normal static annual amount)
- Transfer in \$159,408 of CARES Act

Remaining operating deficit of \$6,281,823 was funded as follows:

- Transfer in \$3,532,507 of SS 2011R
- Transfer in \$2,330,133 of IGT
- Transfer in \$419,183 of PH 91R (maximum allowed by WIC)
- Result: balanced with no layoffs and no increased County General Fund

### Adopted budget for FY2020/21

The new MHSA 3-year plan aggressively budgets to spend down accumulated fund balance as demanded by the community stakeholder groups and includes \$7,442,081 in S&B in FY20/21 with no new positions, an increase of \$2,331,544 over FY19/20. "No new positions" means BH staff will perform more MHSA services and less CMH services. Combined with some changes to how CMH S&B is allocated to SUD, this translates to CMH S&B being reduced from \$8,928,581 to \$5,343,416, a decrease of \$3,585,165 with no layoffs. This # does not include the effects of TAY being contracted out because that number is not yet known by Fiscal staff.

- Budget year revenue receipts of \$5,475,889 of MH 91R
- Budget year revenue receipts of \$3,901,656 of MH 2011R
- Budget for new revenue of \$1,010,000 DDRP (data driven recovery project)
- Budget for new revenue of \$714,000 MHSSA (mental health student services)
- Budget for \$640,195 of Realignment Backfill from the State
- Transfer in \$491,121 of IGT
- Transfer in \$351,967 of PH 91R (maximum allowed by WIC)
- Transfer in \$377,364 of CGF (the normal static annual amount)
- Transfer in \$250,000 of CARES Act
- Transfer in \$0 of SS 2011R because SS needs it
- Result: balanced with no layoffs and no increased County General Fund



### COUNTY OF YOLO

Health and Human Services Agency

Karen Larsen, LMFT Director

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

September 18, 2020

To all Full Service Partnership Clients -

Yolo County has made the difficult decision to change our model of providing Full Service Partnership services for Transition Aged Youth, Adults, and Older Adults. Currently, we employ staff within the Yolo County Health and Human Services Agency to provide these services, but in the new model we are preparing to implement we will offer these services through a local contracted service provider. Services are not being terminated or ended but instead are being transitioned to a new community based provider. This is not a decision we took lightly, nor one we intend to minimize, as we know this decision will result in impacts to our clients. This decision is necessary due to several issues, primarily financial in nature.

We are committed to ensuring that the transition from County staffed services to a community based provider is as seamless as possible. Our treatment teams are working closely together to determine the best course of treatment for each individual client. Each client will be supported by Peer Support Workers throughout the transition, as well as virtual group supports and a warm hand off from our team to the new provider.

We expect this transition to begin within the next 8 weeks and to be finalized within 6 months. We are committed to a timeline that allows for all clients to feel supported and comfortable with the transition.

We have attached some frequently asked questions and responses, a flyer regarding wellness center groups, and contacts for program specific matters.

Respectfully,

Karen Larsen, LMFT Director, Yolo County Health and Human Services Agency

Davis 600 A Street Davis, CA 95616 Mental Health (530) 757-5530 West Sacramento 500 Jefferson Boulevard West Sacramento, CA95605 Service Center (916) 375-6320 Mental Health (916) 375-6330 Public Health (916) 375-6380 Winters 111 East Grant Avenue Winters, CA 95694 Service Center (530) 406-4444 **Woodland** 25 & 137 N. Cottonwood Street Woodland, CA 95695 Service Center (530) 661-2750 Mental Health (530) 666-8645 Public Health (530) 666-8645

### Frequently Asked Questions

I heard that the Transition Age Youth (TAY), Adult, and Older Adult programs were being shut down. Is this true?

• This is not true. What <u>is</u> happening is that the full-service partnership (FSP) components of these programs are going to move from being provided by county staff to a contracted provider. Even though only the FSP services will be contracted out, the teams that are providing the services are going to be reassigned to other units in Health and Human Services. This means that you will likely be transitioning to a new provider.

#### Why is this happening?

- There are several reasons that this is happening:
  - It is a requirement for all FSP programs to have someone known to the client available to respond during a crisis 24 hours per day, seven days per week. Currently, the County FSP program team doesn't provide the required 24/7 service in order to maintain fidelity of the FSP model.
  - Mental health services are challenging to adequately fund and the COVID-19 pandemic has created additional financial challenges for the county.
  - Contracting out FSP services will allow for cost savings that will ensure that the county does not have to lay off employees and ensures that FSP services will continue to be provided.

#### When is this going to happen?

- We anticipate client transitions will begin within the next 8 weeks and be finalized within 6 months.
- The county is working on developing a request for proposals (RFP) for potential providers to apply to be the contracted provider. The RFP will be released in October or November. Once a contractor is chosen, the County will then negotiate a contract which can also take several weeks.
- We expect a new contract to be in place by Spring 2021.

What will happen next?

- Your therapist and/or case manager will meet with you to discuss options to transition to another
  provider. If you are not an FSP client, you may transition to a contracted provider or a different unit in
  behavioral health. Your team will work with you to ensure that you have a smooth transition to the new
  provider.
- Our team is working to ensure a plan for continuity of care throughout this process which will allow for you to continue to receive some level of services/support and ensure a warm hand off with your new provider.

Who do I contact if I have any concerns about this transition?

- You may file a Grievance if dissatisfied with mental health services at the Yolo County Mental Health Plan (MHP) office, or Appeal a decision when services are denied, terminated, suspended, or reduced, by calling (888) 965-6647 or completing a Grievance/Appeal form. Grievance/Appeal forms are available at all MHP Offices and Contract Provider locations. You may also contact Quality Improvement staff at (530) 666-8542 to discuss the Grievance and Appeal processes.
- If you are a TAY client, you may also contact Clinical Manager Tony Kildare at (530) 661-2929
- If you are an Adult or Older Adult client, you may also contact Clinical Manager Julie Freitas at (530) 666-8517

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**COUNTY OF YOLO** 

Health and Human Services Agency

Karen Larsen, LMFT Director

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

September 21, 2020

Members of the Board,

This letter comes to inform you about HHSA's proposed strategy to contract out some of our Full Service Partnership (FSP) services. I know that the Board has received letters and emails, and I want to ensure that you have accurate information with which to respond to concerned community members.

HHSA has made the difficult decision to change our model of providing FSP services for Transition Aged Youth, Adults, and Older Adults. Currently, we employ staff within HHSA to provide these services, but in the new model we are preparing to implement, we will offer these services through a local contracted service provider. Services are not being terminated or ended, but instead are being transitioned to a new community based provider. This is not a decision we took lightly, nor one we intend to minimize, as we know this decision impacts our clients.

I will attempt to address the concerns as I understand them as well as to provide the Board with context regarding why this decision was made and all of the steps we are taking to protect our clients and ensure they are cared for.

Within Yolo County we currently have 175 FSP clients. We are proposing to contract out 100 of those (25 older adults, 25 transition aged youth, and 50 adults). In the new MHSA 3 year plan we will be increasing these slots to support the No Place Like Home Developments and to meet increasing need. As we began looking at issuing this RFP we realized that we could achieve cost efficiencies by having larger FSP teams and by relying on community based organizations to provide services rather than County staff.

**Financial Considerations**: As the Board will remember, we have a significant operating deficit in mental health, and had to borrow several million dollars from other sources just to close the 19/20 fiscal year. This deficit is a direct result of underfunding from the State and Federal government, our low County General Fund amount, and ever increasing needs and mandates. In light of the current economic situation and the fact that we have now depleted our other reserves, we are looking at ways we can minimize costs. The decision to contract out FSP services allows us to reduce costs by several hundred thousand dollars. Additionally, due to our agency's integrated structure, we are able to absorb the 19 employees whose jobs have been impacted into other positions within the agency, so no lay-offs are required.

**Davis** 600 A Street Davis, CA 95616 Mental Health (530) 757-5530 West Sacramento 500 Jefferson Boulevard West Sacramento, CA95605 Service Center (916) 375-6200 Mental Health (916) 375-6350 Public Health (916) 375-6380 Winters 111 East Grant Avenue Winters, CA 95694 Service Center (530) 406-4444

### Woodland

25 & 137 N. Cottonwood Street Woodland, CA 95695 Service Center (530) 661-2750 Mental Health (530) 666-8630 Public Health (530) 666-8645 **Program Considerations**: Another contributing factor to this decision was the fact that our internal FSP teams are not maintaining fidelity to the FSP model. It is a requirement for all FSP programs to have someone known to the client available to respond during a crisis 24 hours per day, seven days per week. Currently, the County FSP program team doesn't provide this required 24/7 service. This will be a requirement of the new vendor.

**Outcomes**: Below is a table summarizing outcomes for FSP clients (Fiscal Year 19/20). Outcomes look at three key metrics for clients 12 months before enrolling in services and compares that to 12 months in services. Of note, Turning Point Community Programs had many new clients in this fiscal year and many of our highest acuity clients as they provide 24/7 crisis response impacting their overall outcomes. We will be issuing and RFP for a service provider and requiring regular outcome reports.

Program	Psychiatric Hospitalization	Days Incarcerated	Days Homeless
Transition Aged Youth (HHSA) (25 clients)	80% decrease	99% decrease	69% decrease
Older Adult (HHSA) (25 clients)	90% decrease	99% decrease	83% decrease
Adult (HHSA) (50 clients)	77% decrease	82% decrease	23% decrease
Forensic (HHSA) (15 clients)	57% decrease	63% decrease	88% decrease
Turning Point Community Programs (50	54% decrease	78% decrease	58% decrease
clients)			

**Continuity Plan**: We are committed to ensuring that the transition from County staffed services to a community-based provider is as seamless as possible. Our treatment teams are working closely together to determine the best course of treatment for each individual client. Each of the clients will be supported by Peer Support Workers throughout the transition, as well as virtual group supports and a warm hand off from our team to the new provider.

**Timeline**: We expect this transition to begin within the next 8 weeks and to be finalized within six months. We will be issuing an RFP to allow for a competitive process and entering into a contract with the new provider. We are committed to a timeline that allows for the clients to feel supported and comfortable with the transition.

We strongly believe that this plan is the right path. It allows us to cut costs while maintaining jobs and services (or expanding in the case of 24/7 coverage). This is a far cry from laying off 40% of our staff which is what happened in our last economic downturn. As always, I am happy to have individual conversations with Board members and answer any questions or concerns you may have Sincerely.

Haren Jars

Karen Larsen, LMFT Director Yolo County Health & Human Services Agency

### Yolo County Board of Supervisors

### **Resolution No. 20-99**

### Declaring September 2020 as Suicide Prevention Month

**WHEREAS**, September is National Suicide Prevention Month, all month, mental health advocates, prevention organizations, survivors, allies, and community members unite to promote suicide prevention awareness; and

**WHEREAS,** according to data from the Centers for Disease Control and Prevention (CDC), in the United States there are approximately 132 suicides per day and suicide is the 10<sup>th</sup> leading cause of death. In California, suicide is the 2<sup>nd</sup> leading cause of death for ages 15-24 and the 3<sup>rd</sup> leading cause of death for ages 25-34; and

**WHEREAS**, in Yolo County for the past 54 years, Suicide Prevention of Yolo County, a private, nonprofit organization, has been providing crisis services, support, and dedication to local citizens; and

**WHEREAS**, Suicide Prevention was founded on the spirit of volunteerism and continues in this tradition through the 24-hour crisis lines that are staffed by trained volunteers who responded to more than 8,800 calls from Northern California counties, July 1, 2019 through June 30, 2020; and

WHEREAS, Suicide Prevention will also operate the North Valley Suicide Prevention Hotline with specialized support and outreach provided to (but not limited to) the following contributing counties: Yolo, Butte, El Dorado, Humboldt, Nevada, Sacramento, Shasta, Solano, and Sutter-Yuba to provide crisis line support for callers that reach out for help; and

**WHEREAS**, the risk of human self-destruction can be reduced through awareness, education, intervention, and treatment; and

WHEREAS, Suicide Prevention of Yolo County provides a 24-hour ASK crisis line for Yolo County's adolescents as part of its "SOS - Signs of Suicide®" school education and prevention program targeted to the junior and senior high schools throughout the county; and a 24-hour school safety and violence crisis line where students can anonymously report concerns about school safety; and

**WHEREAS**, #BeThe1To is the National Suicide Prevention Lifeline's message for National Suicide Prevention Month and beyond, which helps spread the word about actions we can all take to prevent suicide. These actions include asking others how they are doing and following up after intervention or care; and

**WHEREAS**, research shows people who are having thoughts of suicide feel relief when someone asks after them in a caring way. Findings suggest acknowledging and talking about suicide may reduce rather than increase suicidal ideation; and

**WHEREAS,** studies have also shown that brief, low cost intervention and supportive, ongoing contact may be an important part of suicide prevention, especially for individuals after they have been discharged from hospitals or care services; and

WHEREAS, in September and all year long everyone can do their part to prevent suicide. For further support, contact the Yolo Crisis Line at (888) 233-0228 or the National Suicide Prevention Line at 1-800-273-TALK (8255).

**NOW, THEREFORE, BE IT RESOLVED** that the Yolo County Board of Supervisors hereby declares September 2020 as Suicide Prevention Month.

**PASSED AND ADOPTED** this 29th day of September, 2020 by the following vote:

**AYES:** Provenza, Chamberlain, Villegas, Saylor, Sandy.