Mental Health Services Act (MHSA)

MHSA Draft Three-Year Program & Expenditure Plan FY 2023-2026 Public Comments

Karleen Jakowski – Mental Health Director Brian Vaughn, MPH – Public Health Director Yolo County Health and Human Services Agency







The Five Components of MHSA

Services/Activities Funded by the MHSA

- 1. Community Services and Supports (CSS) 76% (51% FSP)
- 2. Prevention and Early Intervention (PEI) 19% (<25@51%)
- 3. Workforce Education and Training (WET)
- 4. Capital Facilities and Technology (CFTN)
- 5. Innovation (INN) 5%

*No Place Like Home (7%)- A program funded by MHSA.

MHSA funds cannot supplant existing services









The Community Engagement Process

- 5-month process from November 2022-March 2023
- 32 focus groups with 516 participants, their family and friends, people on the front lines, emergency responders, adults, parents, youth, LGBTQ+ people, diverse racial and cultural communities, and many more
- 5 key informant interviews with HHSA Leadership and County Supervisors
- 2 Community Engagement Workgroup Meetings (CEWG; Fall 2022), and two MHSA financial update presentations to the Local Mental Health Board and the Board of Supervisors in May.
- Draft Plan Publicly Posted June 22, 2023 July 21, 2023 (MHSA website <u>www.yolocounty.org/mhsa</u>)
- MHSA Draft Plan presentations to CEWG and county leadership (June/July)

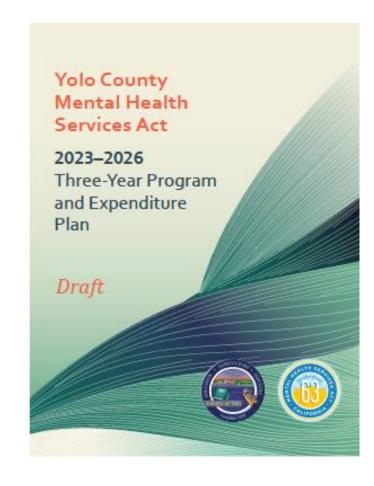






Key Priority Areas

- This plan seeks to address several <u>key strategic priorities</u> over the next several years, which include:
 - Investing in infrastructure, service planning, and fiscal sustainability efforts to expand Yolo County's behavioral health crisis response system
 - Sustaining critical programming within the current array of services
 - Increasing capacity in Full-Service Partnership (FSP) programs
 - Expanding access to critical early childhood screening, support, and referral services
 - Advancing cultural competence and diversity, equity, and inclusion efforts
 - Supporting our clients, partners, and community aligned with core MHSA values.









Timeline and Public Notice

- Draft Plan Publicly Posted June 22, 2023 July 21, 2023 (MHSA website)
- Notifications disseminated
 - Community stakeholder, general public, Community Engagement Work Group, MHSA listserv, service providers, consumers and family members, Board of Supervisors, Local Mental Health Board, county staff, and requested and encouraged partners and community stakeholders to promote the draft and share with others.
- Public notices posted in the Davis Enterprise and Daily Democrat newspapers and on county Facebook page(s).
- Public notices posted and paper copies made available at HHSA locations (West Sacramento, Woodland, Winters, Davis).
- Public comment forms also made available online for submission.
- Public comments/responses provided to LMHB



COUNTY OF YOLO

Health and Human Services Agency

MENTAL HEALTH SERVICES ACT (MHSA): NOTICE OF 30-DAY PUBLIC COMMENT PERIOD and NOTICE OF PUBLIC HEARING

MHSA Three-Year Program & Expenditure Plan FY 2023-2026

To all interested stakeholders, Yolo County Health and Human Services Agency (HHSA), in accordance with the Mental Health Services Act (MHSA), is publishing this Notice of 30-Day Public Comment Period and Notice of Public Hearing regarding the above-entitled document.

- THE PUBLIC REVIEW AND COMMENT PERIOD begins Thursday June 22, 2023 and ends at 5:00 p.m. on Friday July 21, 2023. Interested persons may provide comments during this timeline either online https://forms.office.com/g/bTntqdr9Kr or by mail. Written comments should be addressed to HHSA, Attn: MHSA Coordinator, 25 N. Cottonwood Street, Courier #16CH, Woodland, CA 95695. Please use the Public comment form provided for the MHSA Three Year Plan FY 2023-2026.
- II. A PUBLIC HEARING will be held by the Yolo County Local Mental Health Board on Monday, July 24, 2023, at 6:00 PM. Information will be published in advance of the meeting and listed on the Local Mental Health Board event listing found here.
- III. To review the MHSA Draft Plan for FY 2023-2026, or other MHSA documents via Internet, follow this link to the Yolo County website: http://www.yolocounty.org/mhsa.
- IV. Printed copies of the MHSA Plan Draft for FY 2023-2026, are available. To obtain copies by mail, or to request an accommodation or translation of the document into other languages or formats, call HHSA's MHSA Office at (530) 666-8536 or email mhsa@yolocounty.org by Friday July 7, 2023.







Title 9 California Code of Regulations § 3315

Local Review Process

- (a) Prior to submitting the Three-Year Program and Expenditure Plans or annual updates to the Department, the County shall conduct a local review process that includes:
 - (1) A 30-day public comment period.
 - (2) Documentation that a public hearing was held by the local mental health board/commission, including the date of the hearing.
 - (3) A summary and analysis of any substantive recommendations.
 - (4) A description of any substantive changes made to the proposed Three-Year Program and Expenditure Plan or annual update that was circulated.



Vice-Chair

Vacant Secretary District 1

Oscar Villegas

Maria Sima

District 2 (Lucas Frerichs

Nicki King

Inesita Arc

District 3 (Gary Sandy)

Sue Jones John Archulet Warren Hawley

District 4

(Jim Provenza Vacant Chris Bulkeley

Ionathan Rave

District 5

(Angel Barajas

Brad Anderson

Robin Rainwat

Board of

Oscar Villegas

COUNTY OF YOLO

Health and Human Services Agency

137 N. Cottonwood Street • Woodland, CA 9569: (530) 666-8940 • www.yolocounty.org

Local Mental Health Board and Health Council Joint Meeting and Public Hearing

Monday, July 24, 2023, 6:00 PM-8:00 PM 25 N Cottonwood Street, Woodland Location: Community Room

All items on this agenda may be considered for action

ИНВ CALL TO ORDER----

Public Comment
 Approval of Agenda

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Approval of minutes from <u>June 26, 2023</u>

Chair Report-Jonathan Raven

Recommendation to BOS on Crisis Intervention Training

6. Nominating Committee Report and New Officer Selection

Member Announcements

8 Correspondence

HEALTH COUNCIL CALL TO ORDER

9. Welcome and Introductions - Anthony Volkar, Chair

Roll Call – Nilufar Ceyhan, Health Council Secretary

JBLIC HEARING ------6:30 PM = 7:30 PN

MHSA Three-Year Program and Expenditure Plan FY 2023-2026

Review Public Comment

LMHB/Health Council Response to Plan

Public Response to Plan

 Discussion Opportunities for Collaboration Between the LMHB and Health Council -Brian Vaughn, Public Health Director

Adjournment of Public Hearing







Title 9 California Code of Regulations § 3315

Individual	Public Comment & HHSA Response
1.Kyle Parker,	Program Funding-"we would like to better understand if there is anything we can do on our end to extend our funding after FY 23/24."
Services Provider	HHSA Response: HHSA greatly appreciates the relationship that has been developed with ClipDart and the partnership to support these services in the community. Given current available PEI funding, we are open to reconsidering, within the next Annual Update community planning process, the continuation of this program.







2.NAMI Yolo County

Donna Neville, President

Community Planning Process-acknowledgement, support, collaboration

HHSA Response: Thank you for your participation and recognition of the work, relationships, and collective stakeholder efforts undertaken between the county and the Yolo community to engage in this important MHSA planning process. HHSA acknowledges the NAMI Yolo County support.

Crisis Now-"We request that identifying a suitable location and provider for the receiving chairs be made a top priority."

<u>HHSA Response:</u> HHSA is working diligently to identify a suitable location and to develop the architectural design plans for the identified space. It is our intent to identify a provider to oversee the operations of the receiving center through a Request for Proposal process per County procurement policies.

WET partnership and MH Workforce-"we are hopeful that additional funds will be directed towards these efforts in the first annual update to this plan"

HHSA Response: HHSA is committed to re-evaluating funding for our workforce support during the annual update process and recognize that supporting and growing our workforce is critical to ensuring that our community has adequate access to behavioral health services in Yolo County.

3.Melanie Klinkamon

Family Member; Member of Mental Health Advocacy Groups CARE Court implementation-"At these meetings Senators state it's time to treat our SMI humanely and stop stepping over them as we walk by; billions are being provided for CARE Court implementation. Is Yolo County aiming at acquiring some of these funds?"

HHSA Response: Yolo County will be required to implement the CARE Act by December 2024, as part of cohort 2. Thus far, Yolo County has received a \$250,000 allocation for specific activities related to CARE Act program development. Additional funding for CARE Act implementation is anticipated but the amount of funding Yolo County will receive is not yet known. Yolo County HHSA recently applied for Behavioral Health Bridge Housing (BHBH) funding that is intended to support short-term housing needs related to CARE Act implementation. HHSA was recently notified that we will be awarded our full allocation for BHBH which is just over \$4 million dollars. More information about CARE Act implementation can be found here: https://www.chhs.ca.gov/wp-

content/uploads/2023/07/CAREActQuarterlyImplementationUpdate_Jul23_web.pdf More information about the Behavioral Health Bridge Housing (BHBH) Program can be found here: https://bridgehousing.buildingcalhhs.com

Create a hub/drop-in center in West Sac, more beds-"PLEASE do something more to serve our most vulnerable! Provide more beds! Create a hub/drop-in center in West Sac where the non-referred 5150 SMI can go to shelter, shower, eat and drink (away from family service centers/children) with peer support workers who can get to know them and provide support. A place where first responders/law enforcement can take them."

HHSA Response: Yolo County HHSA is working with RI International to support the development and implementation of our local plan for the Crisis Now model. RI International uses a robust system to recommend the appropriate number of mobile crisis teams, receiving chairs and crisis residential beds for jurisdictions based on local data. We are committed to ensuring that there is adequate access to these critical services. As a point of clarification, HHSA intends to pay to hold six crisis residential beds at any given time but has access to more than 12 crisis residential beds which meets the anticipated need for Yolo County. Currently, those beds go largely unoccupied. We are hopeful that Crisis Now will assist in ensuring that the individuals who needs these services are able to access them seamlessly, beginning with a mobile crisis response and stabilization efforts. While the pilot receiving chairs program is being developed in Woodland, we are concurrently exploring a secondary receiving chairs program in close geographic proximity to West Sacramento to increase access to receiving chair and stabilization services that are more easily accessible for our West Sacramento residents. Yolo County HHSA recently provided a Crisis Now 2.0 Update to the County Board of Supervisors which outlined the planned approach to this project moving forward. You can access that presentation here: http://yolocountyca.swagit.com/play/05242023-690/#0

4.Anna LaMoureaux

Family Member

Access to beds and receiving chairs-"Please do something NOW. We need access to beds and receiving chairs sufficient to address the magnitude of this problem."

HHSA Response: Thank you for sharing your personal experience and for taking the time to review and provide feedback on the 2023-2026 Draft MHSA Plan for Yolo County. HHSA is committed to listening to those with lived experience to inform our efforts to continuously improve the mental health system of care for Yolo County residents. HHSA is receiving technical assistance from RI International to support the development and implementation of our local plan for the Crisis Now model. RI International uses a robust system to recommend the appropriate number of mobile crisis teams, receiving chairs and crisis residential beds for jurisdictions based on local data. We are committed to ensuring that there is adequate access to these critical services. Yolo County HHSA recently provided a Crisis Now 2.0 Update to the County Board of Supervisors which outlined the planned approach to this project moving forward. You can access that presentation here: http://yolocountyca.swagit.com/play/05242023-690/#0 While we do not currently have crisis receiving chairs in Yolo County and agree that this is a critical gap in our crisis continuum, HHSA currently pays to hold six crisis residential beds at any given time but has access to more than 12 crisis residential beds which meets the anticipated need for Yolo County with Crisis Now implementation. Currently, those beds go largely unoccupied. We are hopeful that Crisis Now will assist in ensuring that the individuals who needs these services are able to access them seamlessly, beginning with a mobile crisis response and stabilization efforts.

5.Anonymous;

Family Member

Confusion trying to get assistance-" I am new to having to advocate for mental health services and can't express enough the confusion and run around I've experienced trying to get him help."

HHSA Response: Thank you for taking the time to review this draft plan and to provide your feedback. We appreciate your openness in sharing how challenging it has been to navigate the broader mental health system of care.

Partner with local facilities to create more resources." My son has Medi-Cal and although Dignity Health accepts Medi-Cal for a primary care physician - who referred him to Dignity Health Behavioral Services-who does not accept Medi-Cal for any behavior health services. It's a big loop and no one know where we are supposed to go. Partner with these local facilities to create more resources."

HHSA Response: HHSA is committed to deepening the partnerships we have created with health and behavioral health providers throughout our community and to working collaboratively to improve navigation of and access to behavioral health services. Our access and crisis line is available 24 hours a day, 7 days a week and is the central access point for County Behavioral Health Services for individuals with Medi-Cal. Our 24/7 Access and Crisis Line can be reached by calling (888) 965-6647.

Crisis Now chairs-" I also wanted to express frustration in the lack of urgency to provide the Crisis Now chairs. This is where I should be able to take my sons for resources. As I read through the 2023-2026 Three Yr. Plan I was shocked that this service had not been implemented during the previous 2020-2023 plan. There was a 10 month study done in 2020-21 and it's still being talk about. Put the plan in action and provide the 10-12 chair that were originally proposed."

HHSA Response: HHSA acknowledges and shares in the frustration with the delays in the development and implementation of the Crisis Now model. We are committed to ensuring that this critical programming is available to the residents of Yolo County, particularly the receiving chairs as soon as possible. HHSA has experienced several significant challenges that have delayed the development and implementation of this project. Yolo County HHSA recently provided a Crisis Now 2.0 Update to the County Board of Supervisors which outlined the planned approach to this project moving forward. You can access that presentation here: http://yolocountyca.swagit.com/play/05242023-690/#0

6.Anonymous;

Seeking Services; Tax Payer Low-barrier access to behavioral health services (West Sacramento)-"We deserve low-barrier access to behavioral health services. Family members have nowhere to go in West Sacramento, and have no one to call for actual mental health crisis de-escalation assistance with loved ones."

HHSA Response: Thank you for taking the time to review and provide feedback on the draft MHSA plan. In response to community feedback, we are proposing to add least one co-responder clinician to our partnership with the West Sacramento Police Department, bringing the total number of co-responder clinicians in West Sacramento to three. Additionally, HHSA is working to implement 24/7 mobile crisis for Medi-Cal beneficiaries by December 2023. This will expand access to mobile crisis services throughout the county, including West Sacramento. Lastly, in addition to our mobile crisis services, HHSA offers walk in crisis services at our West Sacramento location Monday-Friday. More information about those services can be found here: https://www.yolocounty.org/government/general-government-departments/health-human-services/mental-health/mental-health-services

Yolo County HHSA should collect more data from Law Enforcement Agencies-"Yolo County HHSA should collect more data from Law Enforcement Agencies to understand how many calls for service with a mentally ill person actually end up just like my loved one. Out of the 450 individuals which co-responders could contact in the County, 436 did not end up in jail. THIS IS THE GAP. We need more stage 2 stabilization and prevention services, including peer support workers and co-responder social workers to prevent mass incarceration, overcrowded jails, and ill-treatment of the mentally disabled left isolated in a jail cell."

HHSA Response: Regarding program evaluation and data, HHSA acknowledges we can improve our evaluation of MHSA program outcomes. This is not unique to Yolo county and is a statewide issue, as counties have prioritized service delivery over additional administrative support costs. Nonetheless, HHSA understands the importance of investing in program evaluation and quality improvement, and therefore has already begun implementing Results Based Accountability (RBA) measures for all MHSA contracts and funded programs and will continue to do so with the new plan. HHSA does collect data from our co-responder program to assess impact. This data is shared through a program dashboard. We are working with our local law enforcement partners to assess local data regarding calls for service and dispatched responses related to mental health issues and crisis situations.

Individual Comment/Personal Statement

7.Karen

Greetings. Many of you have heard my story and that of my adult son. I'm asking each of you to put yourselves in my shoes, for just a moment, and try to imagine what you might do...or want done...to your loved one, if presented with the same scenario. Nicholas Davila is his name and he is now 28 years old. He is the youngest of my four children. He was an absolute angel growing up...I never had issues with him, his schoolwork, his behavior nor his attitude. Things began to change when he was in high school. He became withdrawn and distant, focusing on video games to pass the time, and eventually I couldn't even get him to attend his junior year. I was also dealing with aging, disabled parents at the time besides working a full time job as a single mother. I had no clue as to what the future was holding for my son's mental health. His behavior became more bizarre with each passing day, to the point where I was afraid of him, my own flesh and blood. One night, very late, he was playing music incredibly loud and I pleaded with him to turn it down. Eventually, I unplugged his stereo and he grabbed a knife and held it to my throat. My baby...the sweetest kid...did that to me. He was arrested and I swore I wouldn't bail him out. But he called me crying after a week, telling me that they stripped him naked and had him in a padded cell for three days. I bailed him out that afternoon. That took place in Solano County. Nicholas was finally diagnosed with Schizoaffective Disorder BiPolar Type. I hadn't even heard of that. He became more unpredictable and violent...holes in the walls, drilling holes in the furniture, talking to himself in a language only he knew. He had been 51/50'd too many times to count. We eventually relocated to Woodland. At least I was in my own home instead of a rented condo and he could scream all he wanted, right? Wrong. He became more erratic, and beat me and one of my other children to the point that we both required medical care. My other son got a restraining order the next morning. Nicholas then became homeless. I fed him every day, provided him with blankets, pillows, etc. It was truly heartbreaking. In July of 2022, he demanded to use the restroom at the Bel Air gas station and was told no. He was in a complete psychosis at that point and picked up an object (I believe it was a large rock or chunk of concrete) and threw it at the plexiglass window. He was arrested and spent the next EIGHT MONTHS in the Yolo County jail, receiving absolutely no medical or mental health care (100% unmedicated). Finally, in March 2023, he was released and Hope Cooperative placed him in a home, then a few others, and now he is housed at the tiny home village behind the homeless shelter on Beamer Street. Thank God. But I'm not sure how long he can hold it together.

I tell you my story, and his story, because he should have never gone to jail in the first place. He should have been picked up, assessed, and given the mental health care that he so desperately needed (and still does). And you don't feel that a 24- hour crisis team in each city is necessary? WE, AS A COMMUNITY, REQUIRE MORE MENTAL HEALTH SERVICES. How many other people's sons, daughters, brothers, sisters, etc are going to end up incarcerated before this crisis is addressed? I sure don't have all of the answers, but you, as a committee, have been entrusted to make the necessary changes needed...and those changes need to happen NOW.

Feel free to contact me with any questions you may have.

Sincerely, Karen Olson 707.389.6849

Individual | Comment/Personal Statement

8.Anonymous

My comment regarding the 2023-2026 Yolo County MHSA Plan: I am a community member and UC Davis alumni who has primarily lived in this county since 2013. In that time, especially in the last two years, I have had extensive interaction with the crisis mental health system here in Davis. I live with significant mental health issues which put me at risk for self-harm and suicide. I have experienced almost a dozen 5150 holds spanning many California counties, eight different psychiatric hospitals, and countless law enforcement/mobile crisis interactions. I tell you this so that the board knows that I have context regarding Yolo County's MHSA plan, especially perspective regarding the emergency mental health system. Through my extensive lived experience, I have had positive and negative interactions with existing crisis resources. I am thoroughly familiar with the existing standard of care. Given this, I would like to share some thoughts regarding the posted MHSA plan.

First of all, thoughtful implementation of the Crisis Now model is absolutely needed to improve the mental health system in Yolo County. The emergency room is an inappropriate place for most psychiatric patients. Crisis Stabilization Units (psych ERs) are a much more effective method of support and treatment. Marin Health's Crisis Stabilization Unit should be considered a model system. With a dedicated psych ER, consumers can experience a more appropriate environment, quicker treatment/evaluation, and more compassionate care.

In reading the proposed MHSA plan, I noted some concerns with its implementation concerning 988. From my personal experience I've found that even clinicians aren't aware of the existing issues within the 988 system. When Suicide Prevention of Yolo County (SPYC) closed its crisis lines in February 2023, Yolo County lost its only local crisis line. Now when calling the general number of 988, callers are directed to call centers based on their area code, not on their location. In a county where there is a significant population of college students with area codes from other counties, this disconnect between locations constitutes a major safety issue. In addition, 988 volunteers are NOT trained to the level of clinicians or dispatchers. 988 is not a substitute for the existing mental health system of 5150s, mobile crisis, or police interaction- it's a doorway into it. The proposed MHSA plan mentioned creation of a call center proposed Winter 2023, combining 24/7 access and crisis, 988, and Crisis Now Mobile Dispatch. This call center needs to be crafted in a thoughtful, effective way, not just relying on the existing 988 resource, but thoroughly supplementing and improving it.

Additionally, I would like to reiterate that the co-responder program and CIT training should be considered essential parts of the crisis mental health system. 24/7 mobile crisis can complement but not replace this. I noticed a significant difference between how I was treated 8 years ago vs. now during welfare checks in Davis. I attribute this to improved awareness and training, and especially to the presence of a crisis clinician.

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Individual	Comment/Personal Statement
8.Anonymous	Comment/Personal Statement Continued- The Davis Police Department and Chrystal Baisley (former crisis clinician) have been instrumental in ensuring my safety. Due to my mental health issues, I have had a wide range of interactions with law enforcement over the years, some of it positive, some of it traumatic. From my experience, the way that responders/providers treat "5150s" like me is truly a test of character. I can't tell you how many times I have been treated badly within the mental health system because the clinician/nurse/cop knew I wouldn't be believed. However, in the last two years, DPD has been consistently patient, respectful, and understanding. Their effort and compassionate attitude has had a positive effect on my life. I trust their judgement and know that they will evaluate me fairly every time. They have been a major factor in keeping me safe and alive these last two years, and for that I am very grateful. As someone with lived experience with the existing mental health system in this county, I hope that the Local Mental Health Board will take my perspective into consideration. The proposed MHSA plan has many potentially effective proposals. I hope that these concepts can be successfully put into practice, especially concerning the Crisis Now model of mobile crisis, co-responders, and intermediate levels of care.

MHSA 3 Year Plan

Additional Public Comment?







MHSA Budget Overview

Totals	FY 2023-2024	FY 2024-2025	FY 2025-2026	FY 2023-2026
Estimated New FY MHSA Funding	\$26,349,349	\$17,601,595	\$17,357,279	\$61,308,223
Estimated FY MHSA Expenditures	\$24,784,323	\$25,542,936	\$27,372,150	\$77,699,409

MHSA Component vs Expenditure (FY)

FY 2023/24	CSS	PEI	INN	WET	CFTN	Prudent Reserve	Total
Estimated New FY 2023/24 MHSA Funding	\$20,019,813	\$5,010,860	\$1,318,676	\$0	\$0	\$0	\$26,349,349
Estimated FY 2023/24 MHSA Expenditure	\$17,185,734	\$5,079,014	\$791,250	\$207,053	\$1,521,272	\$0	\$24,784,323

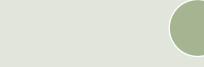
FY 2024/25	CSS	PEI	INN	WET	CFTN	Prudent Reserve	Total
Estimated New FY 2024/25 MHSA Funding	\$13,356,682	\$3,361,402	\$883,511	\$0	\$0	\$0	\$17,601,595
Estimated FY 2024/25 MHSA Expenditure	\$17,911,781	\$4,940,244	\$950,571	\$200,610	\$1,539,730	\$0	\$25,542,936

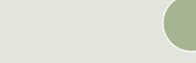
FY 2025/26	CSS	PEI	INN	WET	CFTN	Prudent Reserve	Total
Estimated New FY 2025/26 MHSA Funding	\$13,174,703	\$3,312,601	\$869,975	\$0	\$0	\$0	\$17,357,279
Estimated FY 2025/26 MHSA Expenditure	\$18,947,578	\$4,957,724	\$1,671,384	\$201,872	\$1,593,592	\$0	\$27,372,150

Estimated FY 2025/26 Unspent Fund Balance CSS		PEI	INN	WET	CFTN	Total
	\$363,490	\$19,178	\$2,179,080	\$422,488	\$1,089,337	\$4,073,573

Next Steps for MHSA in Yolo County

Draft Plan Posted for Public Comment June 22nd-July 21st LMHB to Hold Public Hearing July 24th







Preview Draft
Spend Plan and
Priorities with
LMHB, CEWG,
BOS
(June/July)

BOS Approval of Final MHSA Plan August 29th





