

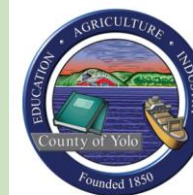
# Mental Health Services Act (MHSA)

## Community Engagement Work Group

Karleen Jakowski-Mental Health Director  
Dustin Anderson- Project Manager, EVALCORP

### Yolo County Health and Human Services Agency

January 16, 2024  
3:30-5pm via Zoom



WELLNESS • RECOVERY • RESILIENCE

# Agenda

- Introduce and explain the Mental Health Services Act (MHSA)
- Introduce the Community Engagement Work Group (CEWG)
- Learn about MHSA General Standards and how you can participate as a stakeholder
- MHSA Components and Proposed Changes
- Annual Update FY 24-25-Community Program Planning Process
- Next Steps



# INTRODUCTIONS



- Who is here today?
  - Please share:
    - Name
    - Organization (if you represent one)
    - Population you are representing or advocating for  
(i.e. children, transitional aged youth, adults, older adults, other group)
  - What would you like to see in the process?



# MENTAL HEALTH SERVICES ACT (MHSA)

## What is it?



- Approved in 2004 through the passage of Proposition 63 and enacted in 2005
- Placed a 1% tax on income over \$1 million.
- Expanded county mental health programs for all populations
- Provides a wide range of prevention, early intervention, and treatment services, including the necessary infrastructure, technology, and enhancement of the mental health workforce to support it.
- Goal is “to transform the mental health system while improving the quality of life for Californians living with a mental illness.”



# COMMUNITY ENGAGEMENT WORK GROUP (CEWG)

## What is it?



- The Community Engagement Work Group (CEWG) is an ongoing engagement work group to support Mental Health Services Act Planning.
- The group is open to any stakeholder in Yolo County who wants to participate.
- Your attendance and participation is essential and appreciated. Thank you!



# WHAT IS A STAKEHOLDER?

**Individuals or entities with an interest in mental health services in California, including but not limited to:**

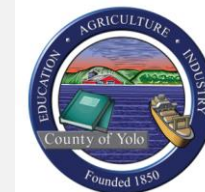
Providers of mental health and/or related services

Individuals with serious mental illness and/or serious emotional disturbance and/or their families

Educators and/or representatives of education

Any other organization that represents the interests of individuals with serious mental illness/ and/or serious emotional disturbance and/or their families

Representatives of law enforcement



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# MHSA GENERAL STANDARDS (9 CCR 3320)

1. Community Collaboration
2. Cultural Competence
3. Client-Driven
4. Family-Driven
5. Wellness, Recovery, and Resiliency
6. Integrated Service Experience



# 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.

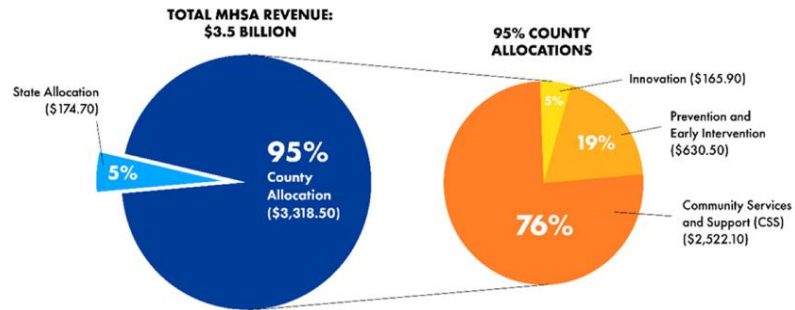
- MHSA funds cannot supplant existing services
- Services must be in a voluntary setting



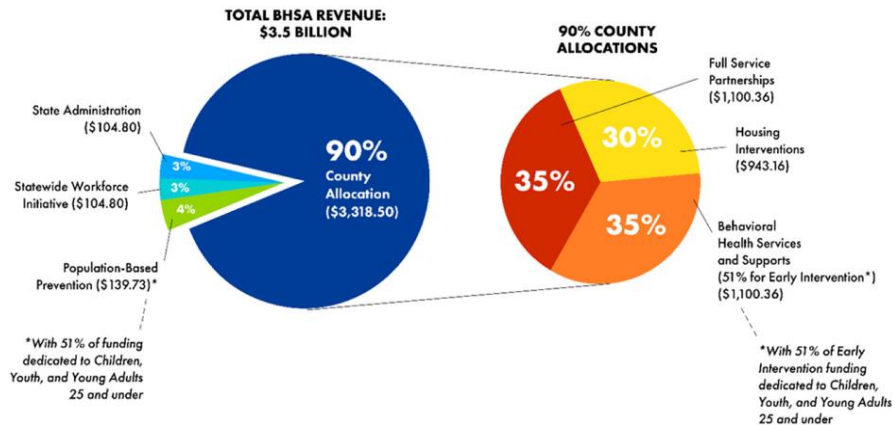


# PROPOSED CHANGES TO MHSA

## CURRENT ALLOCATION



## PROPOSED ALLOCATION

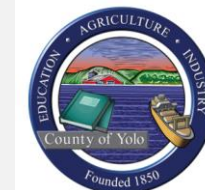


## SB326 (Eggman) - Behavioral Health Services Act

- Expanded target population
- Mandated housing expenditure category
- Proposed allocations include:
  - Housing (30%)
  - FSP (35%)
  - Behavioral Health Services and Supports (30%)
    - Flexible (17.15%)
    - Early Intervention Children (9.15%)
    - Early Intervention All Ages (8.75%)
- Changes to local mental health boards
- Substantial changes to planning and reporting processes

## AB531 (Irwin) - Housing Bond

- Proposes \$6.3 billion bond to build behavioral health treatment, residential care settings, and permanent supportive housing.
- Dedicates a portion funding to housing for veterans at risk of, or experiencing, homelessness.



# Annual Update FY 24-25 MHSA Community Program Planning Process (CPPP)



# Community Program Planning Process

01

Facilitate community meetings and receive stakeholder and community feedback regarding strengths, needs, and priorities – **Needs Assessment**

02

30-day Public Notice & Comment Period

03

Present needs assessment, findings, and plans to Yolo County Mental Health Board during an official Public Hearing.

04

Present needs assessment, findings, and plans to Yolo County Board of Supervisors (BOS)

05

Submit report(s) to Mental Health Services and Oversight and Accountability Commission & Department of Health Care Services within 30 days of receiving BOS approval.

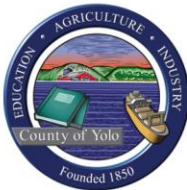
# Needs Assessment Goals



Identify needs of residents



Understand gaps in available service provision



# Community Engagement Plan



# Needs Assessment Engagement and Data Collection Activities

## Community Survey

Yolo County residents will be invited to participate in the survey

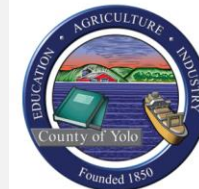


West Sacramento, Woodland, Davis, and 2 rural Yolo County locations to be determined with CPPP workgroup members

## Community Planning Listening Sessions

## Interviews

Key Stakeholders will engage in in-depth interviews



# Key Steps

## Community Survey

- Develop Community Health Survey
- Distribute survey
- Adapt distribution strategy to maximize inclusion of diverse perspectives

## Listening Sessions

- Develop Listening Session Protocol
- Schedule regional Listening Sessions
- Facilitate Listening Sessions

## Stakeholder Interviews

- Identify key system partners for mental health services
- Engage partners annually for unique perspectives
- Align provider/stakeholder engagement with community needs

# COMMUNITY HEALTH SURVEY QUESTIONS' OVERVIEW

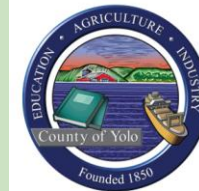
- What mental health issues matter most in the community?
- How accessible are support services in the area?
- What barriers exist in accessing mental health services?
- What barriers exist in accessing stable housing?
- What recommendations do you have for enhancing community support?



# LISTENING SESSION QUESTIONS

1. How would you describe how people in your community are feeling mentally and emotionally?
2. Do you think there are any misunderstandings or stereotypes about mental health and substance use in your community?
3. What do you see as the most important mental health challenges/issues in your community?
4. Are there specific groups in the community with unique mental health needs we should pay attention to?
5. How easy is it for people in the community to get the mental health and/or substance use support they need? Are there obstacles/barriers they face when trying to get help?
6. What recommendations do you have to make it easier for people in the community to access the help they need for mental health and substance use?
7. Are there things the county should consider making sure mental health and substance use support is respectful and understanding of everyone's (cultural) backgrounds?
8. If you had the money to spend on mental health and substance use issues, how would you spend it? Where do you think it would be most helpful?
9. Is there anything else you want to share, or do you have any other thoughts on how mental health and substance use services in the community can be improved?

# What questions do you have?



# THANK YOU!

## Contact Information

- Yolo County MHSA  
MHSA@yolocounty.org
- EvalCorp - Mariana de Santibañes, PhD  
mdesantibanes@evalcorp.com



# ACRONYMS

Acronym	Meaning
AOT	Assisted Outpatient Treatment
BOS	Board of Supervisors
CEWG	Community Engagement Workgroup
CFTN	Capital Facilities and Technology
CHOC	Community Housing Opportunities Corporation
CREO	Creando Recursos y Enlaces Para Oportunidades
CSS	Community Services and Supports
DHCS	California Dept. of Healthcare Services
FSP	Full-Service Partnerships
GSD	General Systems Development

Acronym	Meaning
HHS	Health and Human Services Agency
IHSS	In-Home Supportive Services
INN	Innovations
LMHB	Local Mental Health Board
MHSA	Mental Health Services Act
NVBH	North Valley Behavioral Health
PEI	Prevention and Early Intervention
PTG	Pine Tree Gardens
SMI	Severe Mental Illness
SUD	Substance Use Disorder
WET	Workforce Education and Training Programs
YCCC	Yolo Community Care Continuum

