

County of Napa



A Tradition of Stewardship
A Commitment to Service

State Legislative & Policy Platform 2020

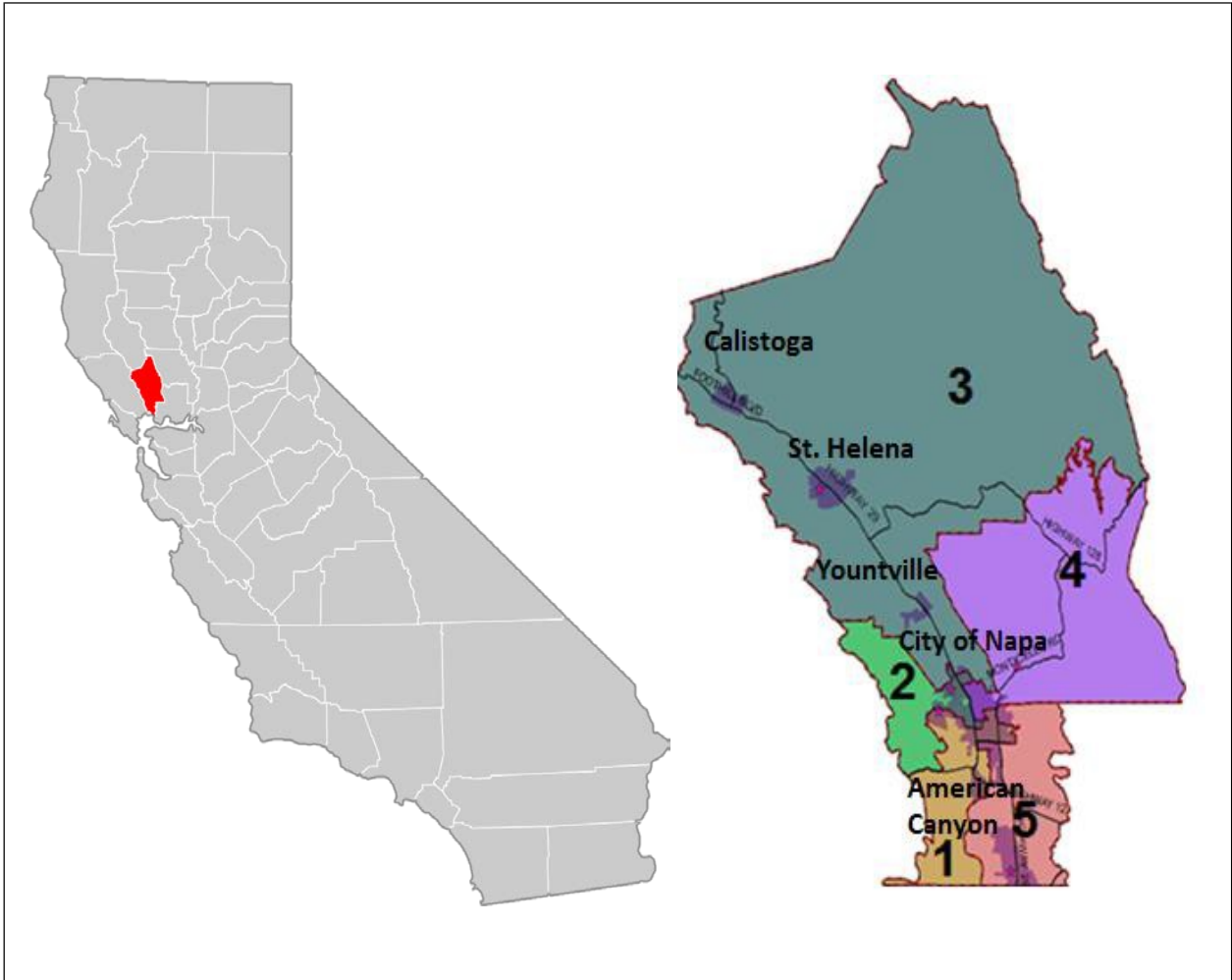
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A Tradition of Stewardship
A Commitment to Service

PRIORITY 1

The Board of Supervisors unanimously endorses the following top priority items specific to Napa County

- **DISASTER RECOVERY AND PREPAREDNESS:** Support efforts to enact legislation, regulations and executive orders that ease the burden of and promote rapid recovery and preparedness for future incidents.
- **PUBLIC SAFETY POWER SHUTOFF (PSPS):** Support efforts to increase oversight and regulations of investor owned utilities, including enhancing communications, training, transparency, and plans around vulnerable populations.
- **INVASIVE SPECIES PROGRAM FUNDING:** Ensure continued funding for Napa County's efforts to protect the viticulture industry from grapevine pests.
- **LAKE BERRYESSA WASTEWATER FACILITIES:** Secure funds to upgrade septic systems for Lake Berryessa area residents to improve water quality at the lake.
- **NAPA STATE HOSPITAL:** Support legislation and administrative measures that ensure the State pays its fair share of costs to the County stemming from operating the Napa State Hospital in the host County of Napa.
- **STATE-OWNED LAND IN NAPA COUNTY FOR HOUSING:** Work with state to develop workforce and affordable housing on State owned land in Yountville (Veteran's Home property) and Napa (Napa State Hospital property).
- **DEVELOPMENT OF WORKFORCE HOUSING:** Commence discussions with the State of California to modernize existing employee housing laws and ease employers' ability to construct employee housing.
- **LOCAL AGENCY SERVICES:** Support legislation that extends the Local Agency Formation pilot program for Napa County.

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LEGISLATIVE PRINCIPLES & GOALS

Legislative Principles

The primary goal of the County's elected representatives and employees is to serve and support the County's social and economic well-being and the health and safety of its citizens. Therefore, the Napa County Board of Supervisors has adopted the following principles:

- The County of Napa will encourage, seek and support legislation and policies that protect the County's quality of life, its diverse natural resources and preserve the County's essence, history and agricultural heritage.
- The County of Napa will encourage, seek and support legislation and policies that facilitate orderly economic expansion and growth, oppose unfunded and/or unnecessary State mandates, and increase the opportunity for discretionary revenues and programmatic and financial flexibility.

Legislative Goals

Sustainable Growth

The Board of Supervisors seeks to preserve Napa County's agricultural heritage and economy by locating appropriate housing and development in the urban areas of the County. The Board supports State housing needs assessment reforms that provide flexibility and acknowledge the differences between rural and urban counties. The Board also supports legislation that would allow for the transfer of mandated County housing allocations to the incorporated areas within the County at any time during the housing cycle in exchange for the expenditure of County housing funds or the provision of County land. Rural counties lack adequate infrastructure and services necessary to support housing in less developed unincorporated areas.

Preserving the Agricultural Economy

In 1968, the Napa County Board of Supervisors had the forethought to preserve open space and prevent future overdevelopment by creating the nation's first Agricultural Preserve. This designation has ensured that Napa Valley's limited resources are preserved for agriculture first and foremost. Napa County opposes efforts that would exempt real property, such as tribal land, from local land use regulations, including provisions regulating the Agricultural Preserve, which ultimately could upset Napa County's vital agricultural economy.

PRIORITY 1

Napa County Specific

DISASTER RECOVERY AND PREPAREDNESS

Issue:

In October 2017, Napa County suffered its most devastating wildfires in its history. According to the Insurance Information Institute, a national industry trade group that compiles claims data, the Napa-Sonoma wildfires are the costliest in United States history in terms of property loss. The wildfires covered nearly a quarter of a million acres, destroyed nearly 8,800 personal and commercial structures, and forced 100,000 people to evacuate. Forty-three individuals lost their lives. Wildfires are becoming more frequent for areas of high fire risk like Napa County and surrounding areas.

Action:

1. Support efforts to enact legislation, regulations and executive orders that ease the burden and promote rapid recovery and preparedness for future incidents.

PUBLIC SAFETY POWER SHUTOFF (PSPS)

Issue:

PSPS. Since October 2018, Napa County has experienced 10 proactive power shutoffs or PSPS by PG&E. PSPS are efforts by investor owned utilities (IOUs) to de-energize an electrical line or circuit in order to prevent the line from igniting on fire during certain conditions, especially high wind forecasts in areas that experience high wildfire threat. PSPS are intended to be temporary but potentially continue for multiple days, as the power is not restored until conditions that triggered the shutoff have subsided and the electric lines are visually inspected to ensure there is no damage to the line that can spark a fire. These events can occur multiple times in a short time period, which can also result in extended outages, as power may not be restored from one incident before another incident begins. In some instances, like the City of Calistoga in 2018, the line itself may not pose a fire risk, but if it is fed by lines that do, then customers receiving power from downstream lines can also lose power.

Oversight. PG&E, like all IOUs, is regulated by the California Utilities Commission. Because the CPUC oversees investor owned utilities, Napa County has been proactive in providing input during CPUC proceedings. More power could be given to the CPUC to address some of the forthcoming issues the County has experienced since PG&E began PSPS.

Communication & Notices. Shutting off electricity affects the County's critical infrastructure, such as radio tower communications, water and fuel pumps, hospitals, and camera networks. De-energization also impacts resources and communication channels for first responders, tactical situational awareness, and the Counties' ability to effectively communicate with residents through alerts and warning systems. The length of a PSPS event will almost always exceed the battery backup capabilities of cell towers and generators, which increases public safety risks for both residents and first responders.

Training. PG&E and local emergency experts have struggled to communicate effectively because PG&E is not trained in the incident command system that is required of local government agencies. As local government, public safety, and PG&E staff rotate out and new staff come in, maintaining institutional knowledge and proficiency will be challenging due to the fact that de-energization events generally occur on only a few occasions during a certain time of year. Annual updates to the PSPS protocols, combined with training, will help maintain a sufficient level of knowledge and experience.

Vulnerable Populations. PG&E does not have an adequate list of vulnerable customers or an understanding of their needs. PG&E's use of their Medical Baseline registry does not capture nearly enough people who should be receiving special attention because of their reliance on electricity for medical purposes. For example, during the winter 2018 PSPS events, according to PG&E there were only 146 medically vulnerable residents in the county; the County's own In Home Supportive Services records identified over 900 medically vulnerable residents. PG&E also views "master meters" to be one customer so a mobile home park or apartment complex with a master meter that services multiple residents, would only get one notification from PG&E.

Costs. Because of the many issues associated with PG&E's PSPS, the County has had to activate its Emergency Operations Center to respond to issues that arise from powered-energizing the electrical grid. The activation of the EOC costs money and takes County employees out of normal business to respond effectively delaying services to County residents.

Action:

1. Support legislation that increases oversight of investor owned utilities and oppose legislation that decreases any regulatory oversight.
2. Support legislation that requires investor owned utilities to adopt a Standardized Emergency Management System (SEMS) model for communication with local governments relating to de-energization events and train their staff in this system
3. Support regulatory efforts to:
 - a. Increase transparency to local governments into IOUs de-energization decisionmaking.
 - b. Requires IOUs to provide accurate and detailed information about the areas that will be affected by the PSPS event, as well as maps of the circuits that will be shut off, with as much advance notice as possible.
 - c. Require IOUs to work with local public health officials to better understand who are medically vulnerable and need special attention. Require IOUs to communicate beyond the registered master meter for purposes of communicating with customers during PSPS, especially vulnerable populations; Require IOUs to establish a communication protocol for master metering.

INVASIVE SPECIES PROGRAM FUNDING

Issue:

A number of significant species are routinely introduced and detected in California that threaten agriculture and the environment. Continued funding of Pest Exclusion, Pest

Detection Trapping, and Survey Activities, Rapid Response, Pest Management and Eradication (if feasible), and Public Education Outreach Programs is critical in protecting California's resources.

Action:

1. Protect existing revenue sources and enhance state and federal funding of Pest Prevention Program activities.
2. Provide full cost recovery for new programs.
3. Maintain or enhance funding for current programs.
4. Support all reasonable efforts by the California Department of Food & Agriculture, County Agricultural Commissioners, and the agricultural industry to acquire funding and to prevent the introduction and potential spread of invasive pests in California.
5. Support legislation and/or programs that provide for effective pest management and eradication activities.
6. Provide local flexibility to enhance the abilities of Agricultural Commissioners to respond to pest emergencies and high priority local pest exclusion pathways.
7. Support budgetary efforts to restore and maintain funding for agricultural border stations.
8. Support research on invasive species pathways as well as funding mechanism to close potential pathways.

LAKE BERRYESSA WASTEWATER FACILITIES

Issue:

Two communities at Lake Berryessa are struggling to upgrade their water and wastewater facilities to stay in compliance with State Water Resources Control Board (SWRCB) regulations. However, the two community systems are far apart from each other and are also distant from other public services. Additionally, while one community is eligible to meet the SWRCB's definition of a "disadvantaged community," the other is not. This disparity precludes the ineligible community from benefitting from several existing resources to meet the SWRCB's new standard.

Action:

1. Initiate conversations at the State Water Resources Control Board to determine the ability of the SWRCB to adapt loan and grant criteria so both Lake Berryessa communities can draw upon State assistance to fund the upgrades.
2. Coordinate with Napa County's State legislators on legislation relating to the dispersal of Proposition 1 funds and/or any legislation that may benefit wastewater system upgrades at Lake Berryessa.

NAPA STATE HOSPITAL

Issue:

Napa County is one of five California counties that hosts a Department of State Hospital's (DSH) forensic facility, Napa State Hospital (NSH) has gradually transformed from a large, single-purpose, mental health hospital for civil commitments to a multi-use campus of mental health, criminal confinement, and local programs and facilities.

Napa County, and all counties that are geographic hosts for State hospitals, experience a unique demand on local resources when a State Hospital patient is charged with committing a crime while in residence at the State hospital. In these instances of crimes being committed on NSH grounds, the crimes are being committed by patients who have already been deemed incompetent to stand trial and are there on commitment. The transfer of the patient from NSH to Napa County Department of Corrections always adversely affects jail housing. The jail is frequently at capacity, and these individuals require single cell housing for their safety and the safety of others. Further, their transfer to the jail affects the patient's mental health, as most refuse to be medication compliance while in custody and their mental health begins to deteriorate while in custody of the jail.

Crimes committed at NSH have other implications, which affect local resources as well. First, our local criminal justice system is required to serve a non-local population because these individuals have been brought to the State Hospital from other counties. Second, this population has higher mental health needs than the general criminal justice population, thus costing more to provide required services, such as: public defender, prosecution, jail services, mental health and medical services, and supervised transportation to and from court and other treatment facilities.

Napa County is concerned not only with the disproportionate costs it incurs as a host county to a State Hospital, but also with ensuring that the medical and mental health of patients accused of committing crimes receive appropriate treatment while they are involved with the justice system in Napa County. Napa County has a small jail, severely damaged in the 2014 earthquake, and the jail is not equipped to provide care and housing for the profoundly mentally ill. While Napa County must bear the cost of expensive services for out-of-county patients, DSH does not accept defendants within lawful time frames who have been committed to DSH by the Napa Superior Court after being found incompetent to stand trial or determined to be not guilty by reason of insanity.

A small county jail cannot be expected to provide the same level of medical and mental health care and programming services that is available at a State Hospital. Napa County has committed both General Fund and 2011 Public Safety Realignment funding towards caring for the mental health of its inmates, but should not be expected to bear the additional burden of providing criminal justice and mental health services to individuals from the State Hospital, just because such hospital is in our County.

Compounding this local challenge, State mental hospital patient capacity is inadequate to accommodate the combined referrals of the civil commitment process under the Lanterman-Petris-Short Act, and the placement of inmates from throughout the State that are in need of mental health hospitalization. This results in long waiting lists at certain State hospitals, costly transportation of civil commitments to distant and more costly facilities, and extended stays in county jails and other inappropriate settings for those requiring mental health services, often after a court order has directed the individual to a State Hospital. Further, NSH will no longer provide transportation from the jail back to NSH, causing an enormous strain on jail resources, essentially creating an unfunded state mandate. This causes risk to the persons awaiting transfer, staff and inmates in local mental health receiving centers and jails, and significant local costs incurred while providing housing, supervision and interim care for these persons.

Action:

1. Support legislation providing safety improvements at NSH, thereby reducing the need and reliance on Napa County's jail and health systems for hospital patients.
2. Sponsor legislation that allows patients that have been deemed incompetent to stand trial by a court to remain unconditionally housed at NSH when new crimes are committed at NSH, and NSH provide transportation to court appearances.
3. Support measures to increase the ability of State Hospitals or other non-County agencies to retain patients who commit offenses while in residence, rather than transfer them to the local jurisdiction.
4. Support measures to assure continuity of mental health care for patients who are transferred between State Hospitals and local jails.
5. Support legislation promoting (and oppose legislation that might impair) regular and open access to, and communication among, county departments and agencies, the DSH and the State Hospitals.
6. Support legislation expediting the transfer process of inmates in local jails to the DSH.
7. Support legislation empowering the California Mental Health Services Authority (CalMHSA) joint powers authority to act on behalf of counties in negotiating with the DSH or the California Department of Health Care Services.
8. Monitor any legislation what would shorten the sentence to 18 months for any person who is found incompetent to stand trial, and cannot be restored to competency.
9. Sponsor legislation, seek administrative resolution, and seek collaboration with other geographical-host counties for full reimbursement of costs incurred by hosting State Hospitals, including: jail services (when State Hospital patients become inmates in the

local correctional facility); patient transportation; public defender; medical services; mental health services; crisis care; and evaluation, or other potential issues arising from the State Hospital.

STATE-OWNED LAND IN NAPA COUNTY FOR HOUSING

Issue:

The State owns a significant amount of undeveloped land adjacent to existing institutions that could potentially be utilized to develop much-needed housing in Napa County. Specifically, unutilized land at the Napa State Hospital and the Yountville Veterans' Home present a promising opportunity to site and construct housing.

Action:

1. Commence discussions with the State to establish possible agreement on the development of state-owned land to develop housing at prices affordable to Napa County's workforce.
2. Develop criteria that ensures that critical open space, especially Skyline Park, remain in use for the public's enjoyment as open space, while pursuing the use of unused land for housing. Consistent with the County's General Plan and Zoning, no State land currently designated as a park or Agricultural, Watershed & Open Space shall considered for housing development.

DEVELOPMENT OF WORKFORCE HOUSING

Issue:

Napa County is a world-renowned visitor destination, which results in the continued development of hotels, wineries, tasting rooms, restaurants and other businesses geared to serve visitors. This has contributed to an increase in the cost of living and housing costs in Napa County. In recent years, tourist-serving developments and businesses have indicated an interest in partnering with local jurisdictions to provide housing that is affordable to Napa County's workforce or to include housing for their workforce in their development plans. While state law allows for the construction of employee housing by businesses, cities, counties and school districts under certain circumstances, the creation of workforce housing for employees of a specific industry or for specific classes of employees (with the exception of farmworkers) conflicts with "source of income" language in California's Fair Employment and Housing Act.

Action:

1. Support legislation to modernize existing employee housing laws to ease employers' ability to construct employee housing.

2. Support legislation to amend “source of income” laws to allow specific industries to develop and restrict workforce housing to those employed by the specific industry.
3. Support legislation to allow public funding to be used for the creation of affordable units within a workforce housing unit developed by an employer or industry.

LOCAL AGENCY SERVICES

Issue:

In 2015, the Legislature approved AB 402 (Dodd) which created a pilot program for Napa and San Bernardino Local Agency Formation Commissions (LAFCO) to authorize city or districts to provide new or extended services outside both its jurisdictional boundaries and its sphere of influence under specified circumstances beyond health and safety. Circumstances include: a) the extension of a service when a service deficiency was identified and evaluated in a Municipal Service Review; b) the extension of a service will not result in either adverse impacts on open space or agricultural lands, or growth inducing impacts and, c) a sphere of influence change is not feasible, or desired based on the adopted policies of LAFCO. The two counties are expected to submit a report to the Legislature by January 1, 2020.

Action:

1. Support legislation that extends the LAFCO pilot program for an additional five years while the legislature studies the impact of the program.

PRIORITY 2 General/Statewide

COUNTY REVENUE SOURCES/STATE PAYMENTS

Issue:

Oppose efforts to decrease, restrict, eliminate, seize, divert, supplant or otherwise restrict local autonomy of local revenues. Oppose any efforts at the State level to eliminate or redirect revenues currently dedicated to local government for State purposes to other agencies and/or districts.

Advocate for timely, full state funding and reimbursement for SB 90 claims, payment in lieu of taxes, and State programs operated by the County, which include appropriate cost of living increases, as well as costs associated with increases in population and caseload growth.

Support timely payments for county managed State contracts and allocations. Often, there

are substantial delays between the time the County must initiate expenditures and when the contract is received and then finalized, causing cash flow problems for counties, especially with regard to public health allocations.

Action:

1. Support legislation and policies that preserve historical State funding to local governments and programmatic flexibility and ensure timely, full payment from county- operated State programs.
2. Support legislative actions that ensure the timely repayment of amounts owed by the State to Napa County for prior SB 90 mandate claims (for unfunded State mandates), including additional and significant payments to counties for what is already owed. Oppose budget action to postpone the repayment of SB 90 mandate claims to later budget years.
Oppose State efforts to suspend or de-fund the mandate related to sexually violent predators. This mandate represents about \$150,000 in costs annually to Napa County to secure expert witnesses and fund related requirements necessary to properly adjudicate these cases.
3. Support legislation that streamlines administrative processes for funding local programs, reduces processing times for execution of agreements or consolidates multiple funding sources where appropriate.
4. Support legislation that allows counties to opt into a system that consolidates revenue agreements with State funding agencies or otherwise simplifies systems for the delivery of revenues from the State to counties or supports the goal of health care integration.

COUNTY CONTRACTING AUTHORITY

Issue:

County authority to provide services in the most efficient and effective way has been threatened in recent years by potential legislative action. Napa County has opposed efforts that have created a de facto ban on service contracts between counties and non-profits, community based organizations, and private provider partners.

Action:

1. Oppose legislation that limits the ability of local jurisdictions to seek and award service contracts for service areas including, but not limited to: health care, behavioral health, public safety, housing, environmental stewardship and county administration.

AGRICULTURE ECONOMY

Issue:

Napa County will oppose measures harming the agricultural industry that forms the backbone of our economy, essence and heritage. We will oppose selective taxes and other measures that disadvantage agricultural growers and producers in local, regional, state, national, and international markets.

In 1968, the Napa County Board of Supervisors had the forethought to preserve open space and prevent future overdevelopment by creating the nation's first Agricultural Preserve. This designation has ensured that Napa Valley's limited resources are preserved for agriculture first and foremost. Napa County opposes efforts that would exempt real property, such as tribal land, from local land use regulations, including provisions regulating the Agricultural Preserve, which ultimately could upset Napa County's vital agricultural economy.

Napa County and its agricultural industry have fought hard to protect Napa Valley's world-renowned name and brand. In 1981, Napa Valley was declared California's first American Viticultural Area or AVA. Within this AVA, there are 16 recognized sub- or nested AVAs, each possessing unique characteristics. This careful stewardship of name protection helps generate a large annual economic impact that includes millions of dollars in State tax revenues. Napa County opposes any measure resulting in the harming or diluting of Napa Valley's world- renowned name and brand.

Action:

1. Oppose legislative and administrative efforts that would disadvantage Napa County's agricultural industry in the marketplace, erode the preservation of agricultural land, and harm or dilute Napa Valley's world-renowned name and brand.

AFFORDABLE HOUSING FUNDING

Issue:

The Legislature has achieved recent success on developing permanent sources of funding for affordable housing. In 2018 and 2019, the Legislature focused on innovative ways to spur housing development. Napa County works with cities, developers and other community partners to create affordable housing opportunities.

The County has initiated a worker proximity housing program. This program provides financial support for newly purchased housing to individuals at or below 120% of median income that are working in Napa County and purchasing a home in Napa County.

Additionally, the County recently launched a Junior Accessory Dwelling Unit loan program to incentivize property owners in the unincorporated area to develop accessory dwelling unit options and rent to lower income households.

Action:

1. Support legislation that streamlines the development of housing that is affordable, especially in locations that are close to transit, schools and other public services.
2. Support legislation or actions to expand eligibility for state funding so it may be used to enhance programs such as the Napa County's Worker Proximity Program and Accessory Dwelling Unit Loan programs.
3. Support legislation to provide additional funding for farmworker housing and for rehabilitation and preservation of existing affordable housing.
4. Support legislation that maintains or increases flexible funding sources to providing housing, including permanent supportive services, and housing related case management services to those experiencing homelessness or at risk of experiencing homelessness.

HOUSING ELEMENT LAW

Issue:

The County has been concerned for many years with the State-mandated Regional Housing Needs Allocation (RHNA) process due to the conflict it creates between local land use policies (e.g., preservation of agricultural lands and city-centered growth policies) and State and regional mandates to create more housing.

A major obstacle in complying with these mandates is that agricultural areas like Napa County are largely unpopulated and have few public services in vast stretches within their unincorporated territory. Affordable housing should be built in locations near workplaces and urban centers that have the full complement of infrastructure, transit, and other services. Napa County supports enacting legislation and seeking administrative mechanisms that would achieve maximum flexibility for agricultural counties in their efforts to site and build affordable housing within a county. Further, Napa County seeks authority during state housing element cycles to recognize that expenditures made to support affordable housing are credited towards the County's RHNA obligation when those units are built.

Action:

1. Support legislative efforts intended to limit the exposure of county governments in civil liability lawsuits. Advocate and work with other counties in writing specific legislation and seeking administrative mechanisms that limit regional housing allocations in the unincorporated areas of prime agricultural counties such as Napa.
2. Continue efforts at the administrative level with the Association of Bay Area Governments (ABAG) and HCD to help implement Plan Bay Area, which locates

housing near jobs and transit, and preserves prime agricultural land. Also, the County will continue to work collaboratively with its municipalities to ensure future city-centered growth within Napa County.

3. Seek changes in State legislation that will broaden the actions that count towards progress in meeting regional housing allocations to include programs, such as the county's worker proximity housing program that provides financial assistance to home buyers with incomes below 100% of the county's average median income.
4. Seek legislative or administrative mechanisms to provide local jurisdictions with more input in identifying and certifying the adequacy of sites for housing throughout the County. In particular, provide that housing sites in unincorporated Napa County with densities less than 20 dwelling units per acre are suitable for affordable housing.
5. Seek legislation that would allow transfers of regional housing allocations during the housing element planning period when the County provides funds or land for affordable housing within cities.

LIBRARY FUNDING

Issue:

Library services and resources are a critical component to the vibrancy of a community. State support for public libraries is minimal and county libraries especially are impacted by the Educational Revenue Augmentation Fund (ERAF) property tax shift.

To help bolster library services, a State constitutional amendment must be passed to allow for a 55% vote – rather than the current two-thirds vote threshold – for local special taxes and bonds to fund critical local library operations and facilities.

Action:

1. Support funding for After-School and Summer Programming, including lunch at the library to serve California's youth.
2. Support legislation that funds literacy, career and other education programs for adults.
3. Support legislation that provides adequate funding to support the initiatives of the California State Library and local library programs.

RURAL BROADBAND AND CELLULAR INFRASTRUCTURE INVESTMENT

Issue:

High-speed broadband and cellular access is essential to education, economic development, public safety, and a vibrant quality of life. California libraries with broadband capability can connect millions of library cardholders in the State to access collective online library resources, including children’s programs such as homework help and foreign language programs.

Broadband access can attract high-tech businesses to the area that can create synergy with existing local businesses and help grow the economy. Broadband and cellular service is critical to connect local safety and law enforcement officials to the public to better communicate, prepare, and respond to natural disasters that may affect multiple jurisdictions, as well as state and federal agencies. Broadband and cellular service can allow citizens and business to utilize online technologies more, leading to less travel on congested roadways. Bringing greater access to remote communities and supporting adoption of new technology should be a cornerstone of our national infrastructure policy and a chief element of rural economic development.

The wireless industry has shifted the focus of new investment towards deploying wireless facilities such as small cells and distributed antenna systems with many facilities proposed for installation in the public rights-of-way. This is driven in large part by the industry’s desire to create additional capacity to meet the growing demand for broadband and data services. While access to cellular service and broadband is important, local governments should continue to play a role in the permitting process.

In counties and cities in California, cell towers must go through the discretionary permitting process. The proposals must be publicly reviewed and approved. In recent years, legislative attempts have been made to change the permitting process for new “small cell” towers, including limiting local control.

Action:

1. Support legislation that funds universal resilient broadband access to residents, businesses and visitors and close the broadband gap in rural and remote communities.
2. Oppose legislation and regulations that would preempt local zoning or regulatory authority regarding the placement of cell towers including small cells and distributed antenna systems.
3. Oppose legislation and regulations that would limit compensation for use of poles, rights of way and other taxpayer-funded property.

EDUCATIONAL REVENUE AUGMENTATION FUND (ERAF)

Issue:

ERAF is a mechanism enacted in July of 1992 by the State Legislature to shift local tax revenues from cities, counties, and special districts to a State controlled Education Revenue Augmentation Fund. The State uses this fund to reduce its obligation to the schools. ERAF funds have been used by the State to help school and community college districts meet minimum funding requirements. Napa County has become what is referred to as an “excess ERAF” county. Excess ERAF occurs when the amount of property tax shifted from the cities

and county is more than what is needed to meet the minimum funding requirements for the schools; this occurrence is limited to a small number of counties.

Recently, it has come to light that there is a discrepancy among the four “Excess ERAF” counties about the specific methodology inputs that should be included when determining ERAF status. It is imperative that a reliable, consistent and mutually-understood formula is utilized by all counties, the State Controller and the State Department of Finance when calculating their ERAF shifts.

Action:

1. Support legislative and administrative efforts to establish a single, universal set of criteria to establish ERAF status, so that the calculations are equitable and consistent across counties.

HEALTH CARE COVERAGE, ACCESS AND INTEGRATION

Issue:

The Board of Supervisors believes that increasing the proportion of County residents covered by health insurance will reduce the public health risks and local costs necessary to provide acute or urgent care. Many conditions could be treated more cost-effectively if patients had access to routine preventative care.

Increasing medical liability costs jeopardize the viability of vital health care services, particularly those services needed by vulnerable populations in Napa County and other rural areas. The attendant increase in malpractice insurance costs will force many physicians to cut back on services or close their doors – further isolating rural patients. These high-risk and specialty services include: women’s health care, community clinics, health centers and rural providers.

Napa County’s most vulnerable populations require doctors, nurses, clinics and hospitals to treat them, and if health care providers cannot afford liability insurance, many of these patients may be unable to find the appropriate care.

Action:

1. Support legislation that would promote better integration of health care delivery systems to reduce costs, increase efficiency, and provide a higher level of services to the greatest practicable extent.
2. Support legislation to provide funding for the Partnership HealthPlan of California at levels that are actuarially sound and sufficient to ensure the safe, ongoing operation of the plan. Support measures that will strengthen the “county- operated health systems” generally and the Partnership HealthPlan of California specifically, including measures allowing the organization to geographically expand its service area.

3. Oppose efforts to reduce State and federal funding streams that would reduce public health funding, create cost shifts to local health departments, and create unfunded mandates.
4. Support efforts and legislation that would protect access for vulnerable and rural populations to high-risk and specialty health care services that are jeopardized by high malpractice insurance costs.
5. Oppose legislation that would revise the Medical Injury Compensation Reform Act (MICRA) or other efforts to impede access, increase health care costs, and divert health care dollars from patientcare.
6. Napa County supports legislative or administrative efforts, if the Affordable Care Act (ACA) is amended or replaced, that preserve and expand the number of citizens currently receiving health insurance under the ACA and opposes efforts to reduce benefits and shift the current federal/State cost and responsibility to the states and counties.
7. Support legislation to increase communicable disease prevention and response capacity in local health departments.

MEDI-CAL REFORM

Issue:

The California Department of Health Care Services (DHCS) proposed on October 30, 2019 a comprehensive and ambitious framework for the upcoming federal waiver renewals that encompasses changes to many aspects of the Medi-Cal delivery system, administrative processes, and financial structures. This proposal, titled Cal AIM: California Advancing and Innovating Medi-Cal, includes initiatives and reforms which DHCS indicates are intended to eliminate or reduce variation across counties and plans while recognizing the importance of local control, move towards a full system alignment of Medi-Cal, and also reduce the per capita cost over time through iterative system transformation. There are many opportunities present in this expansive proposal, including the chance to streamline burdensome administrative systems, increase integration and availability of mental health and substance abuse services, and respond to needs for the most vulnerable residents in Napa County. The Cal AIM proposal puts particular emphasis on meeting the needs of those individuals experiencing homelessness, complex behavioral health needs, children with complex medical conditions, a growing number of justice-involved individuals who have significant clinical needs, and a growing aging population.

Medi-Cal is a critical resource for local safety net programs, and such programs such as exist within all divisions of Napa County's Health and Human Services Agency. While these changes have the possibility for positive change they also carry significant risk for local communities, including: (1) reduction of local control while maintaining local responsibility for significant elements of the Medi-Cal delivery system, (2) proposed financial and regulatory risk in this proposal to County government that are significant, and (3) limited language in the proposal focused on ensuring high quality patient care and successful treatment of these populations will

occur, particularly given historical challenges with service provision to these groups in the traditional health care system.

Local innovation and a comprehensive system of social welfare, health care, and community partner resources have been a strong historic value for Napa County. While at an administrative level, there appear to be opportunities to consolidate these resources in a unified framework, significant challenges exist in doing so. A question still unanswered in the Cal AIM proposal is whether it will be structured in such a way as to preserve the extraordinary successes of responsive local governments, who have leveraged significant investment in their community to provide a comprehensive system of care that effectively meets local needs.

The financial and regulatory risks of the Cal AIM proposal to service systems are not inconsequential. DHCS notes that all recommendations are dependent on the State budget process, and it is not yet clear what resources will be involved in this system transformation, although some existing funding has already been identified as to be shifted away from local control such as the Targeted Case Management service historically delivered by County Public Health programs. Unlike in previous waiver proposals, the Department of Health Care Services has identified that these changes are dependent on the State budget process and non-federal financial participation, which raises the possibility of further changes to funding resources historically provided to County systems.

Additionally, while the Cal AIM proposal is expansive in scope, it lacks sufficient detail in areas such as behavioral health repayment reform. Exactly how DHCS plans to reform its payment structure has yet to be determined. DHCS has convened various committees and stakeholder meetings over the first half of 2020 in order to receive input on its Cal AIM proposal and to work through important details.

Action:

1. Support efforts preserving local innovation and retaining Napa County's responsiveness to local needs, while opposing efforts that restrict local control.
2. Oppose efforts to realign responsibility for oversight of resources without commensurate oversight. Where changes to critical systems occur, support mandatory participation of responsible entities rather than voluntary.
3. Support the requirement that Counties receive "right of first refusal" for services, such as the Enhanced Care Management benefit for high risk, complex care cases and resultant transition of case management from Public Health Divisions or Departments. Support legislation requiring contracting with County providers where responsibility is changed.
4. Support measures that protect or enhance funding for local safety net systems such as Public Health, County Behavioral Health, County Welfare Programs, and Emergency Medical Response Services, including Whole Person Care pilot programs, and oppose changes that reduce funding or negatively impact local public resources.
5. Support any new contract or obligation created through the Cal AIM process be "fully funded" so as not to place additional financial burden on local taxpayers as required in Proposition 30. Oppose creation of new "unfunded mandates" through this process.
6. Support administrative changes or legal measures that create opportunities to streamline processes that decrease the administrative burden related to service provision, including full integration of behavioral health funding, contracting, and regulatory oversight, and channel these savings back into patient care. Oppose

administrative changes or legislative actions that increase administrative burden to local government, without adequate funding to offset this impact.

7. Support efforts requiring Medi-Cal investment in critical local systems infrastructure, particularly that which has not in the past received dedicated funding at adequate levels from the State such as health information systems, public facilities infrastructure, housing, and specialty care facilities.
8. Support efforts to increase accountability and a focus on patient outcomes for all aspects of the Medi-Cal system from the State and local government, to managed care plans, to the provider network.
9. Support efforts to ensure that National Committee for Quality Assurance (NCQA) accreditation remains an optional requirement for local government agencies and its subcontractors.

QUALITY AND AFFORDABLE CHILDCARE

Issue:

Childcare is essential for working families, but quality child care does more than support parent who must work or go to school: it also provides important early learning opportunities that can contribute to school readiness, short and long term physical health, and positive social and emotional development. Childcare costs are often a barrier to accessing high quality care and childcare costs can rival family's expenditures on housing, transportation and food. Currently in Napa County, only 21% of children 0-12 years old with parents in the labor force have access to a licensed childcare slot. The annual cost of full-time infant care in a center is \$14,289 (based on the 2016 Market Rate Survey from the California Resources and Referral Network). The cost to have an infant at a licensed family childcare home is \$9,733. For many working families, childcare is unattainable.

Action:

1. Support legislation that further the accessibility of childcare and simplifies the administrative requirement of the corresponding supporting systems.
2. Support legislation that promotes the economic benefits of high-quality early care and education programs and increases accessibility of high quality childcare and education programs for all young children.

SUPPORT FOR PUBLIC FACILITIES AND TECHNOLOGY SYSTEMS

Issue:

County governments have historically been at the center of efforts to provide critical community services for Public Health, Behavioral Health, and Social Services as the most effective and efficient mechanism for meeting complex needs at a local level. While resourcing for these services shifted with the responsibility for their provision to local government with two rounds of State realignment in 1991 and 2011, dedicated funding for facilities and information technology has never been adequately resourced by the State, resulting in many of these systems having

to confront difficult choices between spending on services or supporting critical infrastructure needs. Napa County has always prioritized the needs of our communities, and has accordingly used local dollars to support capital facilities and information technology improvement. This places a burden on local resources that requires more shared financial participation from the State of California, as Napa County acts in many ways as the service delivery system to meet shared responsibilities.

In 2013 Napa County purchased the 25 acre property at 2751 Napa Valley Corporate Drive, which was partially rehabilitated in 2016 allowing Health and Human Services to move from the Old Sonoma Road location. The costs associated with ongoing rehabilitation, efforts to create a more welcoming environment for the community members who access these critical services and maintenance in the face of wear and tear for a facility providing State mandated services to tens of thousands of individuals a year are presently borne by the County without additional external resources.

The separation of data systems across County Departments, and even within complex systems such as Health and Human Services, creates unnecessary challenges for quality delivery of services. Several Counties have begun to develop software solutions that bridge and link these discreet data silos, allowing for a high quality integration and improved coordination between agencies. These innovative approaches to data coordination are increasingly necessary to ensure local systems work effectively across silos and promote positive outcomes that benefit the whole community, and are largely unfunded by existing dedicated State resources.

Action:

1. Support legislation and administrative remedies at the State level to support funding capital facilities and information technology enhancements for local service delivery systems.
2. Support legislation and promote efforts to modernize and enhance existing Napa County HHSA facilities to better meet community needs.
3. Support legislation and administrative remedies that would reduce statutory barriers to sharing data among service providers.

MATERNAL, CHILD AND ADOLESCENT HEALTH

Issue:

Local health departments are responsible for the administration of a variety of programs designed to address the health priorities and primary health needs of infants, mothers, fathers, children, adolescents, and their families. These programs include breastfeeding support, Women, Infants and Children (WIC), childhood lead poisoning prevention, and newborn and developmental screenings. In California, there are still stark inequities in maternal and infant health outcomes.

Approximately 85% of brain development occurs in the first three years of life, yet many of the 500,000 babies born each year and their families face challenges from the start. As many as 1

in 7 children will experience abuse or neglect before entering kindergarten. Further, 47% of California children live in or near poverty or other circumstances that compromise the long-term health, learning and well-being. Identifying young children with or at risk for developmental and behavioral delays is an essential first step toward ensuring that every child has the opportunity to reach their optimal physical, mental, and socioeconomic health and well-being.

Growing up in deep poverty impairs children's ability to learn, develop and thrive. Decades of research reveal the negative impacts of poverty on children's health, educational achievement, and adult success. "Deep poverty" is defined as living in a family with an income below 50 percent of the Federal Poverty Level (FPL). Children in deep poverty suffer the worst outcomes. Deep poverty causes toxic stress that harms brain development and early functioning, disrupting a child's ability to succeed in school and in life. Even a short amount of time spent in deep poverty can derail a child emotionally, psychologically, physically, and educationally for a much longer period of time.

Changes to funding streams proposed by the Department of Health Care Services shift resources away from this locally provided care coordination service, which may result in reduced Public Health funding, create cost shifts to local Health Departments, and create additional administrative barriers to high quality early intervention.

Action:

1. Support programs designed to maximize the health and quality of life for all women, infants, children, adolescents, and their families, including such programs as the Children's Health Initiative, Women, Infants & Children (WIC), Maternal Child and Adolescent Health home visiting programs, childhood lead poisoning prevention, newborn screening, and early childhood education options. Oppose legislation and administrative action that threatens funding for these programs.
2. Support legislation and funding that prevent and address Adverse Childhood Experiences (ACEs) and effects on behavioral health and chronic diseases, current and future health outcomes and promotes the integration of cognitive and physical health, mental health, alcohol and drug, and other types of preventative services and healthcare in unified service delivery models.
3. Support legislation and funding that promote community programs that prevent childhood trauma and intergenerational violence, such as parenting education programs.
4. Support legislation that improves developmental screenings for children aged 0 to 3.
5. Support legislation that addresses negative impacts of child poverty and endeavors to end childhood deep poverty in California.

CHRONIC DISEASE PREVENTION AND POPULATION HEALTH IMPROVEMENT

Issue:

Chronic diseases such as cancer, heart disease, stroke, and type 2 diabetes are leading causes of death in Napa County. A lack of physical activity and a poor diet, both of which contribute to obesity, are driving factors behind the increase in chronic diseases worldwide. Health education and behavioral interventions targeted at individuals has not been effective in modifying unhealthy behaviors or stemming the rise of chronic diseases. Changes to the social and physical environment that promote physical activity and increase access to healthy food, are also needed in order to make the healthy choice the easy choice. Additionally, health disparities contribute to high costs of healthcare, worsening disease morbidity and premature mortality that impact the entire population of Napa County, and there is a need for improved data. The assurance of conditions for optimal health and well-being for all people and communities, for both present and future generations, and closes the gaps while improving health for everyone.

Action:

1. Support legislation that increases local funding for chronic disease prevention activities, administrative infrastructure for public health programs, and creates dedicated funding streams for preventative services and activities that improve community health outcomes and reduces health disparities.
2. Support legislation that improves access to public health services including access to healthy foods.
3. Support legislation that improves access to data containing information on race, income, sexual orientation, disabilities, and gender identity, to facilitate the ability of jurisdictions to provide culturally competent, place-based services to improve health outcomes for diverse populations.
4. Support legislation that incorporates health into cross-sector policies outside the healthcare arena to promote health for all (Health In All Policies).

FOOD INSECURITY

Issue:

Approximately one in 10 people in Napa County struggles with hunger; among children, the prevalence of food insecurity is even higher and affects one in five children. Emergency food service providers provide cash aid and free and low-cost food to increase access; however, use of these services is low in Napa County.

The number of people living below 185% of the Federal Poverty Level in Napa County who need help is over 35,000. There is a direct relationship between the rising cost of rent and growing rates of food insecurity, especially among families with children. Access and ability to utilize health, nutritious food is a social determinant of health. Food insecurity is linked to developmental, behavioral, and academic delays in children, as well as the development of chronic diseases in adults.

Action:

1. Support legislation that improves access to public health services including access to healthy foods.
2. Support legislation and funding that would provide outreach services to vulnerable, low-income, and rural populations in order to ensure enrollment, retention and access to Napa residents who are potentially eligible for CalFresh and other low-income nutrition programs

LOCAL MENTAL HEALTH SYSTEMS

Issue:

When the State provided realignment revenue for mental health services to the counties in 1991, the goal was to create a single integrated system of behavioral health services for persons with persistent mental illness.

It was recognized that these individuals were not receiving adequate attention in physical health managed care programs, so “specialty mental health services” were “carved out” from the rest of Medi-Cal managed care. Counties were given the first right of refusal to provide these services, which resulted in counties becoming the “mental health managed care plan” in all but one or two counties. This configuration made counties responsible for both the most expensive mental health services such as acute hospitalization, State hospitalization, and institutions for mental disease care (IMDs), and also for the “upstream” lower cost outpatient and supportive services, which can prevent the need for more expensive residential services. Even after more than two decades, it is unclear whether this county carve-out will survive legislation.

There are rational reasons for consolidating mental health services under the Medi-Cal and Medicare systems, and also for integrating them more closely with physical health care. However, there are also significant risks, including: (1) In its implementation of health care reform, the Department of Health Care Services (DHCS) has consistently promoted the privatization of health care coverage, even though the overhead of administering private health care programs for low-income California residents has proven to be approximately ten times higher than for county operated health systems; (2) as noted above, the chronically and severely mentally ill have historically not been well served in the conventional health care programs; (3) the successful treatment of such individuals often depends on the provision of community based social services, many of which are unlikely to be appropriately provided in a

medical system.

MHSA. The passage of Proposition 63 (known as the Mental Health Services Act (MHSA) in November 2004 authorizes the California Department of Mental Health (DMH) to provide increased funding, personnel and other resources to support county mental health programs and monitor progress toward statewide goals for children, transition age youth, adults, older adults and families. In recent years, some interest groups in the State have sought redirect funds for their own mental health projects. This funding is vital to county mental health programs and should stay available to meet local needs.

Katie A. Lawsuit. Mental health programs for youth are an increasingly important issue. The Katie A. lawsuit was settled in 2011 in a manner that will require county mental health programs to provide an expanded array of services to youth who qualify for Early Periodic Screening, Diagnosis, and Treatment (EPSDT)—a federal entitlement program. Basically, this program was realigned by the State to the counties. It is essential that counties, acting through the California Behavioral Health Directors Association, be given a strong voice in fashioning the manner in which the settlement is implemented.

Federal IMD 1115 Waiver. Since the creation of the Medicaid program, Federal law has prohibited the use of Medicaid funding to pay for placement costs in Institutions for Mental Disease (IMD). In California, this regulatory restriction shifts millions of dollars of cost to local government following the 1991 and 2011 rounds of State realignment. The Department of Health Care Services (DHCS) has agreed in their Cal AIM proposal to evaluate pursuing an 1115 waiver allowing for use of Medi-Cal funding for IMD placement. Significant challenges exist for this to be successful, but this would have significant positive implications for local Behavioral Health systems if completed.

Action:

1. Support measures to reduce administrative costs of integrated mental health programs and channel those savings back to patient care.
2. Support measures to continue the “carve-out” of specialty mental health services.
3. Support measures to enable counties to contract for the provision of the managed care mental health benefit under the federal Affordable Care Act.
4. Support legislation clarifying that individuals suffering from sudden acute mental illness onset may stay in crisis stabilization units (CSUs) beyond 24 hours when unable to find a psychiatric hospital replacement; and support efforts to compensate CSUs for services provided beyond 24 hours.
5. Support efforts to protect MHSA funding stream so it is available to counties.
6. Support measures that grant counties flexibility in designing and administering expanded mental health programs for youth as a result of the settlement of the Katie A.

lawsuit.

7. Support actions leading to the implementation of a California 1115 Institution of Mental Disease (IMD) waiver which allows leveraging of Medi-Cal to defray local costs.

MENTAL HEALTH COST REPORT AUDITS

Issue:

The Department of Health Care Services (DHCS) repeatedly delays settlements and subsequent audits of the Mental Health Cost Reports, waiting to settle costs many years after the last claims have been submitted. As an example, DHCS is currently auditing Napa County's Fiscal Year (FY) 10-11 Mental Health Cost Report. As a result, we are apprised years later of findings that impact subsequent years; in this case up to 8 years. DHCS' practice of routinely auditing so many years in arrears does not allow counties the ability to make required corrections timely so when an audit interpretation turns into a dispute or finding, it will apply for many years to come. If the state's settlements and audits were timelier, or there were a statute of limitations imposed, counties would be able to come to a consensus with the state and make appropriate adjustments within a reasonable time frame.

Additionally, DHCS cost report templates are often changing to include new categories. An example is in the FY 10-11 Mental Health Cost Report audit currently in progress in 2019, where DHCS has included, for the first time, a new category of indirect costs. Previous to this change, all costs were split between three separately reimbursable categories, which were Administrative, Utilization Review, and Direct Service. With this change, a new cost report manual was created that described the types of costs that could be charged to the new indirect cost category. In completing the FY 10-11 Mental Health Cost Report, counties followed the cost report instructions at that time, which placed costs like human resources, facilities, and utilities in the indirect cost categories and then allocated the indirect costs to the benefiting previous three reimbursable categories of Administrative, Utilization Review, and Direct Service. The DHCS auditors are applying different rules than the policy originally intended. These never-ending different interpretation can cause counties significant financial impacts because the rules are changed retrospectively, which provides counties no time to apply the rules differently.

Action:

1. Support legislation that addresses the never-ending statute of limitations on Department of Health Care Services (DHCS) Mental Health Cost Report audits by limiting the time for settlement of that audit to three years from initial submission by counties. Additionally, any audit adjustments made by the State based upon new interpretation by DHCS should only be prospectively applied to cost reports submitted from that point in time forward versus retrospectively applied.
2. Support legislation that requires Department of Health Care Services (DHCS) staff conducting Mental Health Cost Report audits to receive interpretation guidance from the DHCS program/policy division to ensure consistency between the two divisions to avoid unnecessary audit findings and county administrative appeals.
3. Support legislation that reduces administrative burden to local government and limits negative financial impact, including changes to reimbursement models for County services from the Department of Health Care Services (DHCS) which achieve these

goals while still meeting County costs. Oppose legislation that increases these burdens without adequate funding to meet administrative obligations, or shifts risk to local government.

OLDER ADULT SERVICES

Issue:

Napa County has a high percentage of older adults in its population. This percentage and the service needs of older adults are expected to grow in coming years. The Board of Supervisors has made services to our adult and frail elderly population a priority.

IHSS. One of the most important programs for older adults is the In-Home Supportive Services (IHSS) program. It enables many older and disabled adults to maintain themselves in their homes. The program is growing. There are ongoing significant increases in (1) program utilization by older and disabled county residents, (2) the number of caregivers and service hours and (3) necessary county administrative staffing. In 2017, local costs for the IHSS program increased significantly due to the termination of the Coordinated Care Initiative and the end of the IHSS Maintenance of Effort (MOE). The state budget shifted increased costs for IHSS provider payments and administration to counties. The structure of the State budget as it relates to IHSS does not allow counties to predict and contain costs. Without significant changes to State funding for the IHSS program, anticipating costs and maintaining the staff needed to provide quality IHSS services will become challenging. The County supports legislative and other efforts to maintain and increase state funding for both provider payments and administrative costs.

The County supports IHSS program changes that integrate evidence-based practice models. The County opposes program changes that would seek to remove social work assessment of IHSS recipients (or otherwise seek to redefine the program as a medical model), or serve as a departure from the Olmstead principles of personal choice for the disabled.

Public Guardian/Public Conservator: The Public Guardian or Public Conservator (PG/PC) conducts conservatorship investigations. The PG/PC also acts as the legally appointed guardian or conservator for persons of any age found by the Court to be unable to care for themselves and their finances or need protection against undue influence or fraud. These persons may suffer from severe mental illness or cognitive impairment and are often older, frail and vulnerable. The Omnibus Conservatorship and Guardianship Reform Act of 2006 imposed certain unfunded mandates on counties. Funding has been supported through county discretionary funds and fees collected through the conservatee's estate. These funding sources have not kept pace with the increasing demand for services under these new mandates. Funding for this vital and critical service should be fully supported by the State.

Adult Protective Services: As the local population continues to age, Adult Protective Services (APS) is a critical safety net for vulnerable older and dependent adults who are abused or neglected by others or who are unable to care for themselves (self

neglect). The County supports efforts to increase state funding for both the program and staff development.

Action:

1. Support measures to ensure adequate funding for Adult Protective Services program, including training for APS staff.
2. Support measures to provide county governments flexibility in utilizing benefits, particularly those available under the federal Affordable Care Act, and measures that provide adequate State or federal funding for such benefits.
3. Oppose measures and budget proposals that would reduce support for elder benefits or shift responsibility for such costs to local government.
4. Support legislation favoring full and continued state funding of the IHSS program including services related to daily living activities necessary to maintain recipients in their homes and out of institutional care.
5. Support legislation and other efforts to ensure adequate program and administrative funding.
6. Oppose legislation imposing program reductions likely to result in an increase in the number of local residents entering skilled nursing facilities and other institutional settings.
7. As long as the current public authority/employer of record model is retained, oppose legislation that would restrict the ability of the County to engage in the collective bargaining process, including legislation mandating specific levels of compensation or benefits.
8. Oppose legislation that would limit supportive services on the basis of medical necessity or other criteria that does not recognize the full range of supportive services necessary to prevent an older or disabled adult from progressing to otherwise unnecessary institutional care.
9. Support statewide efforts to improve the Adult Protective Services program and the development of database to measure outcomes at the State and federal level.
10. Support legislation or budget action that would provide adequate State funding for the Public Guardian and Public Conservator's office, including training funds for staff.
11. Support legislation or budget action that would allow for the provision and administration of an IHSS "back-up provider" registry to ensure care for IHSS recipients if their provider is sick.

12. Support legislative and other State efforts to ensure that the IHSS program is responsive to IHSS providers in addition to recipients, particularly non-English speakers and to improve or ease access to services during and after natural and other disasters.
13. Support statewide legislation that replicates Napa County's Caregiver Permit Program that requires home care workers to pass a background check and attain a permit or be registered before working as a caregiver in a private home.
14. Support measures to enhance the ability to age in place and promote a livable community for all ages.
15. Support legislation to improve and expand the Medi-Cal Assisted Living Waiver program. Oppose legislative action that would limit or eliminate the Medi-Cal Assisted Living Waiver program.
16. Support measures that will provide funding to enhance mental health and crisis services resources for all ages.
17. Support measures to change the Area Agency on Aging structure currently used to distribute funds from the Older Americans Act and increased corresponding state funds, allowing more local control for Napa County.

CHILDREN'S HEALTH SERVICES

Issue:

The California's Children's Services (CCS) program provides diagnostic and treatment services, medical case management, and physical and occupational therapy services to children under the age of 21 with CCS-eligible medical conditions. The CCS program is administered as a partnership between county health departments and the California Department of Health Care Services.

Action:

1. Support policies to streamline funding and program complexities of the CCS program in order to meet the demands of the complex medical care and treatment needs for children in Napa County with certain physically disabling conditions.
2. Seek protections against increased County program costs. Oppose action that would reduce or restrict funding for CCSA County administered programming.

Oppose any efforts to require counties to provide funding for the CCS program beyond their maintenance of effort (MOE) and ensure counties retain sufficient resources to

meet their responsibilities under the Whole Child Model.

PUBLIC HEALTH & PREVENTION POLICIES/CANNABIS AND TOBACCO

Issue:

The Adult use of Marijuana Act and the Medical Cannabis Regulation and Safety Act legalized adult use cannabis and regulated medicinal cannabis businesses. Legalization of recreational cannabis may lead to certain health and developmental issues in youth and offspring of pregnant and breastfeeding women. Additionally, safe use is important to avoid unintentional ingestion in children and pets, and motor vehicle injuries or death.

In Napa County, there are over 12,000 tobacco users. Lung cancer is the number one cause of cancer deaths in Napa County. Although tobacco use rates have been on the decline across the State, the use of electronic smoking devices and other smokeless tobacco products have been on the rise. Recent statewide data demonstrated increased tobacco use among youth in Napa County and increasing retail sales of flavored tobacco products in stores. Additionally, stores are selling inexpensive, small or single-serving tobacco products, often in packages appealing to children. These products are prevalent in low-income areas.

Action:

1. Support legislation that increases local funding for cannabis education programs.
2. Support efforts to study the impacts of cannabis use and legalization on public health.
3. Oppose efforts to exempt electronic nicotine delivery systems, such as e-cigarettes, from current tobacco control laws and regulations.
4. Support efforts to prevent youth access to all tobacco products, including electronic smoking devices and flavored tobacco products including menthol.
5. Support efforts to prevent nicotine addiction in youth, including all forms of nicotine use and delivery, by eliminating marketing, packaging, product placement, and other industry endeavors that promote youth tobacco uptake.
6. Support legislation to maintain or increase local health department tobacco control capacity and infrastructure.
7. Support legislation regulating the sales and marketing of smokeless tobacco products, restrict sale of flavored nicotine-containing products, and establish a minimum price or minimum package size for all tobacco products.
8. Support local tobacco retail licensing and restrictions, with license fees earmarked for enforcement of laws aimed at reducing tobacco use and retail density control,

especially in low-income areas where tobacco retail density tends to be higher.

VETERANS SERVICES

Issue:

The County Veterans Service Office (CVSO) provides direct advocacy, claims assistance and information and referral assistance to Napa County veterans and their families. Napa County has a veteran and active military population of approximately 11,000 (2010 Census data).

Assuming an equal number of dependents, this brings the total number of people eligible for service to 22,000. The County annually receives approximately \$45,000 in State and federal fiscal support for the CVSO from subvention funding, Medi-Cal cost avoidance and license plate fees. Subvention funds are distributed to each county on a workload basis.

State and federal revenue for the CVSO has not kept pace with the need for services and is less than the funding level required by State law. To meet demand without compromising service, it has become necessary to augment the small amount of federal and State revenue with increasing amounts of County general funds.

In 2018, Napa County created a Veterans Commission to address the local needs of Veterans beyond the defined scope of the CVSO. The county supports legislative and other efforts that will ensure the needs of local veterans are being met.

Action:

1. Support legislation that augments State and federal revenue in support of CVSO operations and keeps pace with the cost of providing these services.
2. Support legislation and other efforts that ensure the needs of local veterans are being met including: local veteran's clinics, transportation to regional facilities and expanded services at the Veterans Home in Yountville.

COUNTY CONTROL OF EMERGENCY MEDICAL SERVICES

Issue:

In 1980, the EMS Act empowered counties to establish local EMS agencies (LEMSAs) to develop and implement EMS systems. LEMSAs oversee and coordinate a systems approach to the delivery of EMS services by both public and private providers, hospitals, and tertiary resources. There are groups seeking to reduce or eliminate County authority regarding the governance of emergency medical services. Any attempts to limit the authority or move control of local EMS systems from the counties would cause significant disruption to the coordinated care that is provided in EMS systems.

Action:

1. Support legislation to maintain the authority and governing role of counties and their local emergency medical services agencies to plan, implement, and evaluate all aspects and components of the emergency medical services system.
2. Support legislation to maintain the administration and medical control of emergency medical services, pre-hospital emergency medical care, and ambulance services at the county level.
3. Oppose legislation that would threaten or weaken the authority and governing role of counties over emergency medical services.
4. Oppose legislation that would result in the fragmentation of the emergency medical services systems, prehospital emergency medical care, and ambulance services.
5. Oppose legislation that would prevent or weaken the ability of the LEMSA Medical Director to assure medical control of the EMS system.

WORKFORCE DEVELOPMENT AND RETENTION

Issue:

The federal Workforce Innovation and Opportunity Act (WIOA) of 2014 provides the means for linking workforce, education and business services initiatives under the One-Stop Career Center System. The WIOA legislation is designed to strengthen and improve our public workforce system to help individuals with significant barriers including youth. Job training and employment programs must be paired with job retention programs to effectively grow and maintain the local workforce, particularly in the area of health and human services, medical field, hospitality, and construction trades.

Action:

1. Support legislation that incentivizes public and private employers to hire and retain people facing barriers to employment including the long-term unemployed, people with criminal records, dislocated workers, and homeless individuals.
2. Support legislation that provides funding for public and private subsidized employment programs, which help workers access training and support services to ensure income stability and their long-term success in the job market.

**ENHANCEMENT OF CHILD WELFARE SERVICES/EMANCIPATED
FOSTER YOUTH**

Issue:

Since 2007, State funding for child welfare services has alternately decreased and increased. Commencing in Fiscal Year 2011-12, the State moved to “realign” funding for child welfare services to counties. However, it is not yet possible to determine whether funding levels will be realistic given the level of service envisioned in the larger Child Welfare Redesign concept.

Another child welfare issue of concern is services for emancipated foster youth. Harmful social and financial costs result when foster youth do not receive adequate support services while in care or move into the community from foster care settings without adequate preparation or ongoing support. This population includes those who reach the emancipation age of 18; those who have reached emancipation, but choose to remain in foster care until age 21; and those ages 16-17 that are approaching emancipation age. More funds are needed to sufficiently serve this population. State and federal authorities continue to make gradual progress toward the implementation of new interventions for emancipating foster youth and enhancing services related to the well-being of children in foster care.

Action:

1. Support measures leading to increased safety, permanency and well-being for children served in the child welfare system, with commensurate increases in state funding to cover current costs and new practice requirements.
2. Support a coordinated and evidence-based response to emerging mandates that provide for collaborative planning and action among State and local governments and support efforts for adequate funding.
3. Support federal and State funding and services for new and existing programs designed to serve emancipated foster youth from ages 18-21 and youth approaching the age of emancipation, including housing, preparation and support services, education and employment services.
4. Oppose further reductions in base funding for child welfare services in general, and continue to support restoration of past reductions in such funding.

PREVENTION AND TREATMENT OF SUBSTANCE USE DISORDERS

Issue:

California’s implementation of the Federal 1115 Waiver for Drug Medi-Cal provides additional Federal and State funding for substance abuse disorder treatment and supports an organized delivery system which ensures access to a full continuum of care from assessment and early intervention to recovery supports and which supports activities to ensure the quality of services. The implementation of the Drug MediCal Organized Delivery System meant significant additions to the requirements of Napa County to implement new programing, meet more stringent regulatory compliance and greater administrative reporting requirements. A significant portion of these services are not adequately funded or are presumed to be at the County’s expense. In order to maintain compliance with all of these new requirements, increased staffing, both

administrative and direct services, is needed. Greater and greater emphasis at both the State and Federal level are being put on documentation requirements that unfortunately do not prioritize patient care over administrative accountability. The 1115 waiver expires December 30, 2010.

The California Department of Health Care Services (DHCS) has proposed replacing the expiring 1115 waiver with a 1915b waiver that integrates funding, administration, regulatory requirements, and treatment elements between County Mental Health and Substance Disorder services. This proposal would allow for improved coordination and patient care in populations since there is an established significant overlap in patients using the two services. In this proposal there are several recommendations that promise administrative relief to some of the existing administrative requirements that have greatest negative impact on patient care, such as the limitation on number of inpatient treatment episodes allowed per year.

Action:

1. Support the continuation of the Federal 1115 transition of the existing 1115 Medicaid Waiver to an integrated 1915b Medicaid waiver with Specialty Mental Health Services in order to continue the Drug Medi-Cal Organized Delivery System and ensure counties have the ability to effectively manage the delivery system to provide accessible, effective treatment services and the authority to provide the oversight required to ensure high quality, cost effective services through such tools as selective contracting.
2. Support funding and policy changes to support coverage of medically necessary alcohol and substance use related disorder treatment at the same level as other medical conditions in health care services, including county's responsibility for Federal Financial Participation portion to increase Drug Medi-Cal reimbursement rates and incentivize providers to participate in the program.
3. Support eliminating same-day billing restrictions for Drug Medi-Cal beneficiaries who are receiving more than one treatment or recovery support service on a single day in an Federally Qualified Health Center.
4. Opioid Abuse Prevention and Treatment: Limited resources are available to address the growing epidemic of opioid abuse and resulting deaths. Support proposals that fund opioid surveillance, expand emergency treatment resources, and increase capacity to provide long-term prevention and treatment services. Support legislation that allows for the continued expansion on medication-assisted treatment and preventive harm reduction programs such as naloxone distribution. Support harm reduction services and monitor legislation for supervised consumption sites that prevent overdose deaths, and increase access to substance use treatment.
5. Support legislation to prioritize patients over paperwork and reduce unnecessary documentation and regulatory burdens on counties and providers. Support proposals that fund alcohol and drug treatment prevention that provide local flexibility and discretion for local planning processes. Support efforts requiring Proposition 64 revenues dedicated to drug and alcohol treatment and prevention to be allocated directly to local governments as a formula-based allocation for all counties, rather than grant program.

6. Support funding for alcohol and drug prevention, early intervention, treatment and recovery services that provide county flexibility and discretion for local planning purposes.
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DELTA WATER SUPPLY ALLOCATION

Issue:

The Governor's Administration is pursuing a conveyance system to protect and deliver water supplies for Californians that live south of the Delta. Any new conveyance system diverting water to, from or around the Delta could impact the County's own State Water Project allocations in quality, quantity and timing of delivery. On November 4, 2014, State voters approved Proposition 1, a \$7.5 billion water bond measure. The County seeks fair and appropriate funding from this bond issue to help the County meet its current and future water infrastructure needs.

Action:

1. Advocate that protections for Napa County's water quality and allocation at the North Bay Aqueduct (NBA) intake be included in any legislation involving operational changes or physical improvements for water conveyance through or around the Delta, or ensure that there is sufficient money set aside specifically for an alternate intake project at a more desirable location.
 2. Seek fair and appropriate funding from the Proposition 1 water bond issue to help the County meet its current and future water infrastructure needs.
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PROPOSITION 218 – WATER AND SEWER/STORM WATER PROGRAMS

Issue:

Case law in the last decade has determined that water and sewer user fees are subject to Proposition 218 protest hearings. For stormwater fees, Proposition 218 imposed the additional requirement that any fee be approved by voters (whereby either a majority of property owners or 2/3 or registered voters must vote to approve this fee.)

Proposition 218 made it difficult to impose assessments on homeowners for storm water programs mandated by the Regional Water Quality Control Boards. The homeowners affected by a project must have voted to approve any assessment on their properties to fund storm water projects.

In 2017, the passage of SB 231 represents a potentially major change in that it adds stormwater fees to the list of property-related fees (like water and sewer) that are not subject to the more onerous voter approval requirements of Proposition 218. The change was accomplished by explicitly including stormwater in the definition of "sewer" in the Proposition 218 Omnibus Implementation Act.

SB231 (2017) clarified that the definition of “sewer” in the Proposition 218 Omnibus Implementation Act includes storm sewers (e.g., municipal separate storm sewer system (MS4)). The passage of SB231 represents a potentially major change in that it allows stormwater fees to be added to the list of property-related fees (like water and sanitary sewer) that are not subject to the more onerous voter approval requirements of Proposition 218.

However, significant uncertainty remains regarding the practical application of the authority provided by SB 231, it has yet to be tested. The first municipalities who elect to use this process to establish or amend a stormwater-related fee are likely to face legal challenges.

The California Stormwater Quality Association is currently engaged with the “SB231 working group” that is strategizing options and identifying an appropriate test case that would allow municipalities to move forward with using the clarified definitions of sewer. The legal process, including the appellate and Supreme Court proceedings could take until 2022 or longer.

Action:

1. Engage in and follow the activities of the SB 231 working group on the development of test cases.

RECYCLED WATER/GROUNDWATER MONITORING & SUPPLIES

Issue:

In 2014, Governor Brown signed three bills into law that created a groundwater management, monitoring and sustainability framework for the State. The bills establish a definition of sustainable groundwater management and require local agencies to adopt management plans for the State’s most important groundwater basins. The legislation prioritizes groundwater basins that are currently overdrafted, and sets a timeline for management plan implementation. Additionally, the legislation provides measurable objectives and milestones to reach sustainability and a State role of limited intervention when local agencies are unable or unwilling to adopt sustainable management plans. The County seeks local flexibility and cost minimization in the implementation.

Recycled water has become a major part of agricultural counties’ solution to meet the future water demands of its citizens, particularly those who live in water-deficient areas. Timely federal and State funding for recycled water projects is crucial, as areas, such as Napa County’s Milliken-Sarco-Tulocay (MST) groundwater basin, which continue to be in deficit, will take longer and longer to replenish. This may lead to the failure of one or more aquifers if no alternative water source becomes available in the near future. Napa Sanitation District is increasing its efforts of reuse through the County’s relationship with the North Bay Water

Reuse Authority (NBWRA). As the State continues to face challenges regarding water supply, water reuse will become increasingly important.

Action:

1. Support State administrative rules and guidelines for implementation of the three 2014 groundwater bills that allow local governments maximum flexibility at the least possible cost to implement the law.
2. Support legislation seeking to amend the State's 2014 groundwater framework so that local governments can implement the law with maximum flexibility at the least possible cost.
3. Support federal and State legislative proposals that encourage and fund recycled water projects in agricultural areas.
4. Support legislative and administrative actions which will benefit the NBWRA in its mission to create a new water supply that can reliably supplement ever more scarce existing water supplies; reuse water; create a reliable irrigation supply for parks, public landscaping and vineyards; restore wetlands, and improve stream flows for riparian habitat and fisheries recovery.

CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) REFORM

Issue:

The California Environmental Quality Act (CEQA), signed into law by Governor Ronald Reagan in 1970, establishes a process to incorporate scientific information and public input into the approval of development projects, both public and private.

Viewed by many as landmark environmental law, CEQA has attracted controversy throughout its 44 years. The CEQA process is wrought with uncertainty, costly litigation and project delays. The CEQA process needs to be simplified and streamlined to make it more fair and responsive to applicants while maintaining the environmental protections for which the law was created.

Action:

1. Support legislative and administrative efforts to modernize, simplify and streamline the CEQA while maintaining the integrity of the law's environmental protections. These efforts should concentrate on making the CEQA process more effective, efficient, responsive, transparent, fair to applicants and the public, and reduce the risk and cost of litigation for local agencies.

PARKS BOND PROPOSAL

Issue:

The Legislature and Governor approved a \$4 billion parks and water bond proposal (SB 5, De Leon) which voters approved in June 2018. It is vital that Napa County parks projects are eligible for various funding pots.

Action:

1. Develop a comprehensive list of existing and future park project needs within the County of Napa with as many details as possible.
2. Advocate that implementation guidelines developed by State granting agencies include criteria that would be favorable to the County of Napa's projects.

EXTENDED PRODUCER RESPONSIBILITY (EPR)/WASTE MANAGEMENT/BOTTLE BILL REFORM

Issue:

Local jurisdictions are supporting an ever-increasing cost for the disposal of “universal wastes,” which are toxic and hazardous substances such as batteries, sharps, and fluorescent tubes that are banned from the landfill and have no other convenient disposal method. Other problematic product “wastes,” such as carpet, mattresses, and pharmaceuticals are also costly and difficult to manage.

Presently, local governments are paying increasing costs for disposal of universal wastes, while the manufacturers and distributors of these items reap the benefits but share no burden or responsibility for costly disposal when the items are discarded. Extended Producer Responsibility (EPR) legislation would place the responsibility for free and convenient disposal of these and other problematic products on the manufacturers and remove this costly and logistical burden from local governments. The California Department of Resources, Recycling and Recovery (CalRecycle) adopted Strategic Directive No. 5 in 2007, seeking to establish legislation supporting “cradle to cradle” producer responsibility and analyzing various approaches to EPR. Legislation was approved in 2010 to address paint (AB 1343), carpet (AB 2389) and brake pads (SB 346), while bills on other products were not successful..

In recent years, the State's bottle bill has become a victim of its own success. More and more people are returning bottles and reclaiming the deposits. The costs of sorting and recycling have caused the program to run at a deficit. As a result, funding from the program for local programs is at risk. The State needs to reform the bottle bill program for long-term sustainability.

In addition, recently, China formally stated its intent to ban, by the end of 2017, imports of

certain recyclable materials, including plastics and mixed paper. China is currently the predominant market for recycling such materials generated in California. CalRecycle's report, published in June 2017 and titled, "2016 California Exports of Recyclable Materials," notes that, "China was the top destination country for recyclable materials exported from California ports, receiving 9.2 million tons (62 percent) in 2016." This is an important reminder that diversion or recycling requirements alone cannot achieve the State's goals, and that the development of in- state markets is critically important to the success of the State's objectives.

Action:

1. Support legislation that complements and supplements legislative and administration efforts to implement EPR principles and removes the cost burden for disposal of products containing universal wastes and hazardous wastes from local governments.
2. Support legislation reforming the State's bottle bill law to put the program on track for long-term financial sustainability and retain the program's funding component for local recycling projects.
3. Support waste-related legislation and regulations that are developed within the context of the potential enormous shift as it related to exports to China, in order to ensure there are viable current and future markets for recyclable materials.

ENERGY

Issue:

The County supports efforts to ensure it has an adequate supply of safe, reliable energy at the most competitive prices possible, while adhering to the state's expressed order of priorities of conservation, renewables, new generation and new transmission.

The County is a member of the Joint Powers Authority, Marin Clean Energy, as an effective method increasing local control over power supply.

The County supports development and use of alternative energy sources such as wind, solar, biomass, hydropower, and geothermal resources. As such, the County participates in the Deep Green program through MCE.

Public Safety Power Shutoff (See page XX).

Action:

1. Support legislation that increases local control over the purchase and development of renewable energy resources.
2. Support legislation and regulatory policies that support Community Choice Aggregation (CCA) autonomy in policymaking and decision-making. Oppose anything that puts CCAs or its customers in a disadvantage or reduce or undermine local decision-making autonomy.

3. Support legislation that continues development of local renewable energy resources and supply, including protection of local autonomy to administer energy efficiency programs and install and utilize integrated distributed energy resources.
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PUBLIC SAFETY

Issue:

The Legislature and Governor approved a public safety and health and human services realignment in 2011, which shifted major programmatic responsibilities from the State to counties.

The 2011 Public Safety Realignment and other measures reformed the State prison system, including establishing the requirement to implement evidence-based criminal justice practices. This reform is intended to control State costs of operating the system, and improve health services provided to prisoners and their outcomes after release. It has resulted in shifts in prisoner populations to local jails, mandated levels of county health services to be provided to prisoners while incarcerated or in post-release, and caused reallocation of limited county services and resources from the general public to persons in the criminal justice system. However, many of these proposals do not include sufficient funding to cover these costs to counties.

Overcrowding in county jails throughout California was a substantial challenge before the 2011 Realignment, and remains so. Although certain alternatives to incarceration, such as home detention programs, have reduced crowding in county jails in some jurisdictions, additional inmate capacity for county jails is necessary.

1. Seek maximum flexibility in the use of funding to ensure that counties can best utilize resources to meet local needs.
2. Monitor the impacts of transitional-aged foster youth in County probation to ensure that these youth have access to services provided under AB 12 (Beall).
3. Closely monitor the data generated through the implementation of public safety realignment. Advocate for maximum flexibility of County resources to produce positive outcomes for realigned offenders.
4. Oppose any State efforts to restrict or recoup unused AB 109 funding that may accrue on an annual basis.
5. Ensure that adequate funding is provided to implement the evidence-based practices mandated by realignment.
6. Oppose legislation that would directly or indirectly shift costs related to State prisoners that are transferred under realignment to counties.

7. Oppose legislation that would require counties to prioritize health and other services to persons exiting the State prison system over services offered to the general public.
 8. Support legislation that provides for the State to retain responsibility, including fiscal responsibility, for services provided to prisoners on State parole.
 9. Oppose legislation that would increase state regulation of county jails, especially as an unfunded mandate.
 10. Oppose any state efforts to change criminal justice fine, fees, and penalties without providing a corresponding revenue back-fill.
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ANIMAL CRUELTY CONVICTION TRACKING

Issue:

California has continued to lead in the enactment of legislation to improve the quality of life for both domestic animals as well as livestock. However, animal cruelty and neglect remain a serious concern, and should remain a focal point of future legislation.

Action:

1. Continue to build upon legislation like SB 1200 (Jackson, 2016) that will track animal cruelty and neglect convictions in California.
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MARKETPLACE EQUITY AND CONSUMER PROTECTION

Issue:

Weights and Measures Programs are important to businesses and consumers in California. The Weights and Measures regulatory activities ensure that there is a “level playing field” for business and industries. Likewise, these programs are critical in providing equity in the marketplace. The Division of Measurement Standards (DMS) within the California Department of Food and Agriculture is the lead agency for weights and measures. DMS has incurred significant general fund reductions that have diminished their ability to provide consumer protection.

Action:

1. Support legislation that preserves and enhances funding resources for weights and measures programs at the State (DMS) and local (Sealer) level for consumer protection.
 2. Encourage the use of state general funds for the Division of Measurement Standards.
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3. Support legislation that assures clear labeling and accuracy of the net quantity of packaged products to promote value comparison and to ensure the consumer receives the correct product and the quantity of product for which they pay.
 4. Oppose legislation that would allow for industry self-certification of commercial weighing and measuring devices.
 5. Oppose legislation that would diminish or remove protections now afforded to consumers for transactions measured by weighing or measuring devices or computed by Point-Of-Sale systems.
 6. Support legislation that establishes funding for quality control and package inspection.
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SCHOOL SITING NEAR AG AREAS

Issue:

A governing board of a school district today may site a school in an area designated in a city, county, or city and county general plan for agricultural use and zoned for agricultural production. The school board must notify and consult with the city, county, or city and county within which the prospective school site is to be located. The school board will attempt to minimize any public health and safety issues resulting from the neighboring agricultural uses that may affect the pupils and employees at the school site. In tandem, the California Department of Pesticides is currently preparing regulations that would restrict or limit the use of pesticides within a quarter mile of a school. This regulation has the potential to remove many acres of agriculture production. Legislation expected to be refiled this session would require a school board to include within its findings that it has notified and consulted with the city, county, or city and county, including, but not limited to, the county agricultural commissioner. The bill would additionally require the school board to make a finding that the school district will attempt to minimize any land use incompatibilities that may arise when using a portion of land in an area zoned for agricultural production for a purpose other than agricultural use.

Action:

1. Support legislation that requires a school board to notify and consult a county agriculture commissioner, as well as local governing bodies, before a school is sited in or near agricultural-designated land.
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INDUSTRIAL HEMP

Issue

The California Industrial Hemp Farming Act (Senate Bill 566, Chapter 398, Statutes of 2013) was signed into law to authorize the commercial production of industrial hemp in

California. The Act became effective on January 1, 2017, due to a provision in the Adult Use of Marijuana Act (Proposition 64, November 2016).

The Farm Bill 2018 removes the plant *cannabis sativa L.* from the Controlled Substances Act if it contains no more than 0.3% THC on a dry-weight basis. This applies to any and all parts of the plant. States must develop regulations that include: THC testing procedures, including inspections done at least annually; bookkeeping procedures to keep track of land approved for hemp cultivation and plans for “effective disposal” of hemp plants with too much THC.

CACS have limited funding mechanisms and resources to carry out local responsibility or service for new mandates and/or programs. When statutory fees are insufficient to fund mandates or programs, County general funds are required to subsidize the difference.

Action

1. Oppose legislation creating local mandates or programs that:
 - a. Do not provide 100% funding and resources for additional regulatory activities to be carried out by Agricultural Commissioners or Sealers.
 - b. Impair local land use authority.
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EMPLOYEE DEFERRED COMPENSATION

Issue:

In the era of pension reform, when public employee pensions have been scaled back, deferred compensation will likely provide a significant level of financial support for employees in retirement, as pension benefits are unlikely to cover all financial obligations. However, current law requires that employees opt in to their deferred compensation benefit, instead of opting out. As a result, few employees take advantage of deferred compensation.

Action:

1. Support legislation that requires employees to opt out of deferred compensation benefits.