TO: Board of Supervisors
FROM: Shelli Brobst for Mary Butler - Interim Director
       Health & Human Services Administration
REPORT BY: Shelli Brobst, Employee Support and Development/Contracts Manager - 253-4720

RECOMMENDATION
Interim Director of Health and Human Services requests adoption of the proposed resolution and Board approval of Napa County's Mental Health Services Act (MHSA) Fiscal Year 2018-2019 Annual Update to the Three Year Plan for Fiscal Year 2017-2018 to Fiscal Year 2019-2020, which is necessary prior to submission to the California Mental Health Oversight and Accountability Commission.

EXECUTIVE SUMMARY
Approval of the recommended action to adopt the Napa County Mental Health Service Act (MHSA) Fiscal Year 2018-2019 Annual Update to the Three Year Plan for Fiscal Year 2017-2018 to Fiscal Year 2019-2020 will allow HHSA’s Mental Health Division to comply with state requirements for local approval per AB1467. By adopting the proposed resolution, the Board will certify their approval of Napa County’s Mental Health Services Act (MHSA) Fiscal Year 2018-2019 Annual Update to the Three Year Plan for Fiscal Year 2017-2018 to Fiscal Year 2019-2020, which is necessary prior to submission to the California Mental Health Oversight and Accountability Commission. The Mental Health Division has complied with all pertinent regulations, laws, and statutes of the MHSA, including stakeholder participation and non-supplantation requirements.

See below for explanations of how the Mental Health Division plans to spend Reverted/Reallocated MHSA funds to comply with AB 114 in the Innovation, Workforce Education and Training, and Capital Facilities Components of the MHSA.

MHSA Funding Projections
MHSA revenues are projected to decrease by 11% from FY 17-18 funding levels in FY 18-19 followed by a slight
increase of 6% over FY 18-19 levels in FY 19-20. The MH Division will cover the revenue shortfall in FY 18-19 by utilizing unspent MHSA funds from previous years.

Prevention and Early Intervention (PEI) Component
There are no anticipated changes to any of the nine PEI programs in FY 17-18. However, beginning in FY 18-19, approximately 7% of PEI funds or $137,847 will be taken by the state of California to finance the No Place Like Home (NPLH) Initiative to provide housing for homeless individuals with mental illness.

Community Services and Supports (CSS) Component
Most of the Division’s CSS Programs remain unchanged for FY 18-19 with the exception of the Transition Age Youth (TAY) Full Service Partnership (FSP) and funding allocations to NPLH. Previously contracted to Progress Foundation, the TAY FSP has transitioned to the Mental Health Division in order to provide more cost-effective, seamless services as well as timely referrals. As with PEI, beginning in FY 18-19, approximately 7% of CSS funds or $313,672 will be taken by the state of California to finance the No Place Like Home (NPLH) Initiative to provide housing for homeless individuals with mental illness.

Community Services and Supports (CSS) Housing Funds
The MH Division will be utilizing $46,977.85 in unexpended CSS Housing funds returned to Napa County from the California Mental Health Services Authority (CalMHSA) in FY 16-17 to provide Housing Assistance to homeless mentally ill persons or mentally ill persons who are at risk of being homeless.

Innovations (INN) Component
Four new Innovations Round 2 Projects, which were submitted to the Mental Health Services Oversight and Accountability Commission (MHSOAC) and approved in September of 2017, are included in the FY 18-19 Annual Update as an Addendum and include the Napa ACEs Project, the Native American Historical Trauma and Traditional Healing Project, the Understanding the Mental Health Needs of the American Canyon Filipino Community Project, and the Work for Wellness Project. The Mental Health Division will spend $844,141 in Reverted/Reallocated MHSA Innovation Funds in FY 18-19 and FY 19-20 on these recently approved Innovation Round 2 Projects to comply with AB 114.

Workforce Education and Training (WET) Component
Per AB 114, the MH Division has included $95,579 in Reverted/Reallocated MHSA WET (that DHCS has determined has reverted) in this Annual Update and plans to spend these funds in FY 18-19 and FY 19-20 on previously stakeholder-approved WET Actions or programs for MH Division and Contractor Staff Development activities including trainings, staff support for licensure exam preparation, and other previously approved WET Actions or programs as well as the Internship Program. Capital Facilities/Technological Needs (CF/TN) Per AB114, the MH Division has included $145,770 in CF/TN funds (that DHCS has determined has reverted) in this Annual Update and plans to expend these CF/TN funds by June 30, 2020 to purchase a new Electronic Health Record (EHR) system and to pay for related staff training, support, and maintenance costs for the transition to the new EHR system.

**FISCAL IMPACT**

Is there a Fiscal Impact? No

**ENVIRONMENTAL IMPACT**

ENVIRONMENTAL DETERMINATION: The proposed action is not a project as defined by 14 California Code of
Regulations 15378 (State CEQA Guidelines) and therefore CEQA is not applicable.

**BACKGROUND AND DISCUSSION**

The Mental Health Services Act of 2004 (MHSA), passed by the voters as “Proposition 63,” increased overall State funding for the community mental health system by imposing a 1% income tax on California residents with more than $1 million per year in income. The resulting revenue increased State funding for local mental health services by approximately 10%. Nevertheless, the stated intention of the proposition was to “transform” local mental health service delivery systems from a “fail first” model to one promoting intervention, treatment and recovery from mental illness. A key strategy in the act was the prioritization of prevention and early intervention services to reduce the long-term adverse impacts of untreated, serious mental illness on individuals, families and state and local budgets.

The State Department of Mental Health implemented the MHSA by imposing an elaborate set of substantive and procedural requirements as a prerequisite to each county drawing down its share of the new tax revenues. The funds were divided into six components, for which separate assessment and planning processes were required: Community Program Planning; Community Services and Supports; Prevention and Early Intervention; Innovation; Capital Facilities and Technology Needs; and Workforce Education and Training.

Counties are required to develop detailed plans for the use of MHSA funds in each of these components, then submit those plans to the MHSOAC or State for approval. The planning process requires extensive community input – in Napa County, thus far, well over 1,000 individuals have provided input into the planning process since local implementation of the MHSA began and the established MHSA Stakeholder Advisory Committee meets monthly. The Stakeholder Committee and Mental Health Board continue to submit their recommendations for review by the Mental Health Director. Utilizing this state-mandated, participatory process, counties identify local “underserved populations” most severely affected by, or at risk of, serious mental illness and then develop “culturally and linguistically competent approaches” to connect with and meet the needs of those underserved populations.

**AB1467**

As a result of AB 1467, the omnibus health trailer bill for the 2012-2013 State budget, a number of amendments to the MHSA have been implemented that aligned the Division’s planning and stakeholder processes with the Governor’s desire to streamline release of funding to counties and shifted approval to the local level.

These changes include:

1. Clarification that after the required 30-day public review process and public hearing that Updates to the Annual Plan and the Three-Year MHSA Integrated Plans are to be adopted by the County Board of Supervisors and submitted to the Mental Health Oversight and Accountability Commission (MHSOAC) within 30 days after Board adoption.
2. Requirement that MHSA Three Year Plans and Annual Updates to the MHSA Three Year Plans include the following additional elements:
   a. Certification by the County Mental Health Director to ensure county compliance with pertinent regulations, laws and statutes of the Act, including stakeholder engagement and non-supplantation requirements, and
   b. Certification by the County Mental Health Director and the County Auditor-Controller that the County has complied with any fiscal accountability requirements and that all expenditures are consistent with the Act. (Please Note: Signed Certification Forms will be included in the final version of the Napa County MHSA FY 18-19 Annual Update to the Three Year Plan for Fiscal Year 2017-2018 to Fiscal Year 2019-2020 that will be submitted to the MHSOAC.)
3. Requirements that counties “demonstrate a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on mental health policy, program planning, and implementation, monitoring, quality improvement, evaluation, and budget allocations.”

The Mental Health Division has complied with all requirements for the local stakeholder planning process and 30-day public review and comments, and public hearing of the County Mental Health Board. The Mental Health Division is in full compliance with all relevant regulations. By adopting the proposed resolution, the Board will certify their approval of Napa County's Mental Health Services Act (MHSA) Fiscal Year 2018-2019 Annual Update to the Three Year Plan for Fiscal Year 2017-2018 to Fiscal Year 2019-2020, which is necessary prior to submission to the California Mental Health Oversight and Accountability Commission.

SUPPORTING DOCUMENTS

A. Resolution
B. Napa County Mental Health Services Act FY18-19 Annual Update to Three Year Plan
C. Addendum 1--Proposed Mental Health Service Act (MSHA) Innovation Projects for
D. Addendum 2--Mental Health Board Public Meeting Minutes
E. Addendum 3--Responses to Public Comments Received on FY 18-19 Annual Update
F. MHSA Three Year Plan Executive Summary

CEO Recommendation: Approve
Reviewed By: Ben Guerrieri