



A Tradition of Stewardship
A Commitment to Service

Agenda Date: 5/9/2017

Agenda Placement: 6J

NAPA COUNTY BOARD OF SUPERVISORS Board Agenda Letter

TO: Board of Supervisors

FROM: JoAnn Melgar for Howard Himes - Director
Health & Human Services Operations

REPORT BY: JoAnn Melgar, Staff Services Analyst II - 707-253-4722

SUBJECT: Adoption of a resolution approving the Mental Health Services Act (MHSA) Fiscal Year 2016-2017 Annual Update to the Three Year Plan

RECOMMENDATION

Director of Health and Human Services requests adoption of a resolution adopting the Mental Health Division's Mental Health Services Act (MHSA) Fiscal Year 2016-2017 Annual Update to the Three Year Plan.

EXECUTIVE SUMMARY

Approval of the recommended action to adopt the Mental Health Services Act Fiscal Year 2016-2017 Annual Update to the Three Year Plan will allow the County's Mental Health Division to comply with state requirements for local approval per AB1467 and to submit the Mental Health Services Act (MHSA) Three Year Plan to the Mental Health Oversight and Accountability Commission (MHSOAC) for review and approval.

The Mental Health Division has complied with all pertinent regulations, laws, and statutes of the MHSA, including stakeholder participation and non-supplantation requirements.

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

The Mental Health Services Act of 2004 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.

County mental health agencies are required to develop detailed plans for the use of MHSA funds in each of these components, then submit those plans to the MHSAOAC 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. 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 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 (MHSAOAC) 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.
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; the established MHSA Stakeholder Advisory Committee meets monthly. The Mental Health Division is in full compliance with all relevant regulations and the Stakeholder Committee and Mental Health Board continue to submit their recommendations for review by the Mental Health Director prior to preparation for the Board's final review and adoption. The final FY16-17 Mental Health Services Act Annual Update to the Three Year Plan is attached to this agenda item.

SUPPORTING DOCUMENTS

- A . Final FY16-17 MHSA Annual Update to the Three-Year Plan
- B . Resolution

CEO Recommendation: Approve

Reviewed By: Bret Prebula