

Mental Health Services Act (MHSA) Report

04/05/2018

MHSA (Mental Health Services Act) Annual Progress Report (APR) for FY 16/17 and MHSA Annual Plan Update (APU) for FY 18/19:

- Both the APU and APR are posted to the Behavioral Health website
- The information of the posting of both the APU and APR have been sent to the Department of Health Care Services (DHCS) and MHSOAC.
- Changes to the MHSA Plan:
 - CSS (Page 25)- \$14,200 is being transferred into the Prudent Reserve from CSS funds
 - PEI:
 - Social Nurse Outreach Program name changed to Social Outreach Program (Page 61-64)
 - Rapid Rehousing Program name changed to Housing Assistance Program (Page 42-47)
 - For programs that serve both the Truckee area and Western county we combined estimates into one estimate per program for estimate number of individuals served and cost per person
 - AB114 (Page 74-75): Adds information about Assembly Bill 114 and the Plan on how reallocated funds will be spent
 - Assembly Bill 114 added WIC Section 5892.1, which became effective July 10, 2017.
 - Provides that all unspent MHSA funds subject to reversion as of July 1, 2017, are deemed to have been reverted and reallocated to the county of origin for the purposes for which they were originally made available.
 - By July 1, 2018, counties are required to develop a plan to expend the funds by July1, 2020.
 - FY 05/06 CSS = \$80,061
 - FY 08/09 INN = \$133,693
 - FY 09/10 INN = 61,421
 - FY 10/11 INN = \$84,612
 - FY 12/13 Annual Revenue and Expenditure Data Report is not complete
 - FY 13/14 Annual Revenue and Expenditure Data Report is not complete
 - FY 14/15 Annual Revenue and Expenditure Data Report is not complete

SB 82 Round 2 2018: The Investment in Mental Health Wellness ACT

- Grant application was submitted on March 9, 2018
- Nevada County was not awarded a grant

Fiscal Information:

- Fiscal unit is continuing to work on past Revenue and Expenditure Reports (RER) so that we know how much revenue we have and what revenue may revert in the future if not spent
- MHSA fiscal projections continue to increase even with No Place Like Home being implemented

Department of Health Care Services (DHCS):

- Is working with fiscal staff to ensure that all overdue RERs are turned in ASAP
- Starting 12/31/2018 any county that is late in turning in their RER, 25% of the counties MHSA funds will be withheld until the late RER is received by the DHCS

Community Services and Supports (CSS):

- Program Managers, Fiscal staff and others are starting to set up contractor meetings to work on FY 18/19 contracts

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Housing:

- Coordinated Entry for the homeless population- is being utilized by the Behavior Health Department's Continuum of Care grant program participants
- HUD Monitoring Letter received with three concerns and one finding. The County has responded to the three concerns and the finding as of 2/28/18.
- MHSA Winter Haven #3- House remodel occurred in October 2017 and is continuing. Hope to close the loan soon.

Prevention and Early Intervention (PEI):

1. Expanded What's Up? Wellness Check Ups contract to include Mental Health First Aid Training. Contractor has attended training to become trainers and will start to provide trainings in the summer.
2. Turning Point Housing Assistance Program contract has been approved and Turning Point has hired two Case Managers/Care Coordinators

Innovations:

- Starting the planning process on providing housing and/or supportive services to homeless population that have a mental illness and traditionally do not come to the county for services. Just at the beginning of the research process of the plan.

Workforce Education and Training (WET)-

- All funds have to be spent by 6/30/18

Senate Bill 1004-

- Require the MHSOAC to approve all PEI Plans
- The commission would establish priorities that the prevention and early intervention portion of the local PEI plan would be required to include
- If the plan includes other priorities/programs the plan has to include a description of why those programs are included and metrics by which the effectiveness of those programs are to be measured
- The bill would require the commission to review the plans and approve them if they meet specified requirements
- The bill would prohibit funding for county prevention and early intervention programs from being distributed until after the approval of the county's prevention and early intervention plan by the commission.
- By requiring counties to include additional information in their local plans, this bill would impose a state-mandated local program
- Counties will need to spend a portion of their prevention and early intervention funds on at least one of the following proven programs:
 - Childhood trauma prevention and early intervention-refers to a program that targets children exposed to, or who are at risk of exposure to adverse and traumatic childhood events;
 - College mental health outreach, engagement, and service delivery- refers to a program that educates, engages students and provides either on-campus, off-campus, or linkages to mental health services not provided through the campus to students who are attending colleges and universities;
 - Early psychosis and mood disorder detection and intervention
 - Other programs the commission identifies that are proven effective in achieving the goals stated in Section 5840