



FY 2015-16 Mental Health Services Act (MHSA) Three-Year Plan Update

County of El Dorado
Health and Human Services Agency
Mental Health Division
August 25, 2015





MHSA Overview

- Passed by the voters as Proposition 63 in November 2004
- 1% tax on personal income above \$1,000,000
- Focus on Wellness, Recovery and Resiliency
- Funding is required to be utilized for new programs or expanded programs

MHSA Funding

- 76% to Community Services and Supports (CSS)
- 19% to Prevention and Early Intervention (PEI)
- 5% to Innovation (INN)
- No new MHSA funding directed to Capital Facilities and Technology Needs (CFTN) or Workforce Education and Training (WET)

MHSA Component	FY 2014-15 Actual Revenue	FY 2015-16 Projected Revenue
PEI	\$1,336,660	\$1,124,548
CSS	\$5,346,640	\$4,649,435
INN	\$351,753	\$295,934
Total	\$7,035,053	\$6,069,917



FY 2014-15 Accomplishments

- Opening of a New In-County Adult Residential Facility (ARF)
- New Transitional Housing (T-house)
 - One T-house master lease for South Lake Tahoe was signed in FY 2014-15, and negotiations continue for an additional T-house in South Lake Tahoe



FY 2015-16 Planning Process

- Started in Fall 2014 to better align with the County budget cycle
- Press Release, County News & Hot Topics, MHSA Email Update, MHSA Web Page
- 10 Community Planning Meetings
- Approximately 14 additional meetings where MHSA was discussed or handouts provided



Priority Issues

- Lack of services in remote areas
- More school-based services are needed
- More services for older adults are needed
- Transitional housing needed in South Lake Tahoe
- More peer-to-peer services
- Service collaboration



Priority Populations

- School-Aged Children
- Older Adults
- Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) Individuals
- Transitional Age Youth (TAY)
- Jail Releases and Clients on Probation
- Homeless



CSS Budget

- Key issue to be addressed in FY 2015-16 Plan Update
- Input for increasing revenues to help offset the CSS budget shortfall included:
 - Applying for grants
 - Seeking contributions from the casinos
 - Increasing community donations, including donations for specific programs
 - Reducing the HHSA and County indirect costs
 - Increasing the use of interns



Outcome Measures

- Participants identified the need for more information about the populations served and client outcomes.
 - Data reported in the Plan Update
 - The Quality Improvement Unit continues to work on additional reporting
- Mental Health Division 12 Priority Indicators



Plan Update Changes

- PEI
 - New PEI Projects:
 - Project 1g: The Nurtured Heart Approach
 - Project 2g: Statewide PEI Projects
 - Discontinued PEI Projects:
 - None
 - Funding
 - Adequate funding for all PEI projects through FY 2017-18



Plan Update Changes

- CSS
 - New CSS Project:
 - Project 2d: Assisted Outpatient Treatment (AOT)
 - Discontinued CSS Projects:
 - Project 1b: Family Strengthening Academy
 - Project 2c: Older Adults Program
 - Funding
 - Lack of MHSA funding for all CSS projects through FY 2017-18
 - Two projects discontinued
 - Five projects reduced in funding
 - Three projects increased funding due to increased program costs
 - Reduction in reallocation to WET and CFTN



Plan Update Changes

- **WET**
 - No new projects
 - Funding: Reduction to most projects, including Crisis Intervention Training (CIT)
- **CFTN**
 - No new projects
 - Funding: Reduction to most projects as a true-up to anticipated expenditures
- **INN**
 - No new projects
 - Funding: Approximately \$567,000 subject to reversion in FY 2015-16



Challenges

- Lack of Sufficient MHSA Funding
- Staffing
- Increased Client Acuity
- Increased Demand for Services

Population	FY 2013-14	FY 2014-15
Children	471	711
Adults	961	1,143
Total Requests	1,432	1,854
Increase		29%



Future Considerations

- Revised Innovation and PEI regulations
- Consolidation of MHSA projects for a seamless continuum of care
- Development of an Innovation Plan



Questions?