



## Legislation Text

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**File #:** 12-1455, **Version:** 1

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Health and Human Services Agency, Mental Health Division recommending the Board consider the following;

- 1) Approve the elimination of the Mental Health Services Act, Community Services and Supports Work Plan No.3 "Crisis Residential Treatment Facility" effective to December 1, 2012; and
- 2) Authorize the Director of the Health and Human Services Agency, or designee, to apply to the California State Department of Social Services for an increase in capacity of the Psychiatric Health Facility from ten (10) beds to sixteen (16) beds. (Est. Time 45 Min.)

**FUNDING:** The Crisis Residential Treatment facility is funded by the Mental Health Services Act fund and Medi-Cal reimbursement. The Psychiatric Health Facility is funded by Realignment, Managed Care, and Medi-Cal reimbursement.

### **Fiscal Impact/Change to Net County Cost**

There is no Net County Cost associated with either the elimination of the Crisis Residential Treatment facility or the expansion of the Psychiatric Health Facility.

### **Background**

The Mental Health Services Act (MHSA), also known as Proposition 63, was approved by voters in November of 2004 and enacted into law January 1, 2005. The MHSA imposed a one percent (1%) tax on individuals with an adjusted annual income over \$1,000,000. This funding stream is dedicated to transforming the public mental health system and seeks to reduce the long-term adverse impact of untreated serious mental illness. MHSA is made up of five components: 1) Capital Facilities and Information Technology (CF/IT); 2) Community Services and Supports (CSS); 3) Innovation (INN); 4) Prevention and Early Intervention (PEI); and 5) Workforce Education and Training (WET).

Crisis Residential Treatment Facility (CRT): In Fiscal Year (FY) 2008-09 and after conducting a Community Program Planning (CPP) process, the Mental Health Division (MHD) proposed the establishment of and funding for a CRT facility under the CSS component of the MHSA plan. The CRT was proposed in response to a need for a facility that offered voluntary crisis intervention for individuals experiencing acute mental health disabilities before the crisis became life threatening. Additionally, the CRT could be used to provide services to individuals who had been recently released from the Psychiatric Health Facility. The proposal was approved by the Board of Supervisors on December 16, 2008 via Board Item 08-1721 and the CRT began operation in February of 2009.

The CRT is a six (6) bed 24-hour facility that provided services to 56 individuals in FY 2011-12, with an average daily census of 4.7. Expenditures for CRT services in FY 2011-12 were \$1,500,000.

While the CRT has benefitted clients, recent experience and analysis indicate the most urgent need for clients who reside at the CRT is housing, rehabilitative, and supportive mental health services. These services can be more effectively and appropriately provided in community-based settings.

Approval of this recommendation to eliminate the CRT as a program under MHSA will allow the MHD to close the CRT. The funds currently budgeted for CRT operations would be directed to the establishment and funding of community housing options and the enhancement of community based services through the establishment of an Intensive Case Management Team.

Psychiatric Health Facility (PHF): The PHF located in Placerville is a County operated non-medical acute psychiatric treatment facility serving the residents of the County of El Dorado and surrounding foothill counties. The PHF was licensed for and operated at a 16-bed capacity until February 2009. However, the average daily census at the PHF was eight and, in consideration of the low average daily census at the PHF, and following the CPP process in FY 2008-09 where a need was identified for Crisis Residential Treatment Services, the capacity of the PHF was reduced to 10 beds and the CRT was established and co-located at the PHF site.

Since October 2011, the PHF has exceeded its capacity of 10 beds, resulting in the placement of County residents in more expensive out-of-county facilities. In addition to the significant cost of these facilities, placement in an out-of-county facility hinders the ability of MHD to provide services that would assist the client in transitioning back to the community. Expansion of the PHF also provides the County with the potential to realize additional revenue by contracting out with other counties for dedicated beds.

Approval of this recommendation to return the PHF to the original 16-bed capacity by utilizing the six beds currently dedicated to the CRT would result in higher availability of beds to clients requiring services and reduction in external client placements at more expensive facilities.

### **Reason for Recommendation**

Approval of these recommendations to eliminate the CRT and utilize the space currently occupied by the CRT to expand the PHF would reduce the number of client placements in high cost external facilities and potentially result in approximately \$434,794 of additional Medi-Cal and CMSP revenue.

### **Action(s) to be taken following Board approval**

1. Health and Human Services Agency, Mental Health Division to forward a copy of the approved MHSA Plan update to the Mental Health Services Oversight and Accountability Commission, as required by statute.
2. Health and Human Services will submit an application to the State Department of Social Services to increase the capacity of the PHF to sixteen (16) beds.

### **Contact**

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