



WELLNESS • RECOVERY • RESILIENCE

# **MENTAL HEALTH SERVICES ACT**

## **ALAMEDA COUNTY**

### **FY 2018 - 2020**

### **AB 114 REVERSION PLAN**

Public Comment Period:

April 13, 2018-May 13, 2018

## Introduction and Overview

On December 28, 2017 Alameda County Behavioral Health Care Services (BHCS) received Information Notice (IN) 17-059 from the California Department of Health Care Services (DHCS) Mental Health & Substance Use Disorders Services (MHSUDS). The purpose of Information Notice 17-059 was to inform counties of the following:

- The process the Department of Health Care Services (DHCS) will use to determine the amount of unspent Mental Health Services Act (MHSA) funds subject to reversion as of July 1, 2017;
- The appeal process available to a county regarding that determination; and
- The requirement that by July 1, 2018, each county must prepare and publicly post a plan for MHSA funding subject to reversion from Fiscal Years 2005-06 through 2014-15.

## Background and Local Impact for IN 17-059

Assembly Bill (AB) 114 (Chapter 38, Statutes of 2017) became effective July 10, 2017. The bill amended certain Welfare and Institutions Code (WIC) Sections related to the reversion of MHSA funds. AB 114 implemented provisions concerning funds subject to reversion as of July 1, 2017. Funds subject to reversion as of July 1, 2017, were deemed to have been reverted and reallocated to the county of origin for the purposes for which they were originally allocated (WIC Section 5892.1 (a)). Funds that could be subject to reversion as of July 1, 2017, were distributed to counties from Fiscal Year (FY) 2005-06 through FY 2014-15.

## Spending Plan for Funding subject to AB 114

Pursuant to AB 114 (Chapter 38, Statutes of 2017) and the Department of Health Care Services Information Notice 17-059, each County must prepare and publically post a plan for MHSA funding subject to reversion from Fiscal Years 2005-06 through 2014-15.

As of April 5, 2018 Alameda County, in conjunction with the California Department of Health Care Services, has identified the following funds that were subject to reversion as of July 1, 2017.

Component	Fund Amounts	From Fiscal Year
Workforce Development and Training (WET)	1,571,685	FY 06/07
Innovation (INN)	5,013,354	FY 08/09 FY 09/10 FY 10/11
Capital Facilities and Technology (CFTN)	7,530,171	FY 07/08

**It should be noted that no Community Services and Supports (CSS) or Prevention Early Intervention (PEI) funds are included in this calculation or at risk for reversion.**

The following is a plan to spend the deemed reverted funds by June 30, 2020.

## **Workforce Education and Training (WET)**

The reverted funds under Workforce Education and Training will be applied to FY 17/18 as listed in Alameda's MHSa FY 18-20 Three Year Plan which can be found at [www.ACMHSA.org](http://www.ACMHSA.org) under Documents/MHSA Plans.

Funding specifics include:

1. Workforce Staffing Support: \$490,240

Program Description: Provides infrastructure to manage the development, implementation and evaluation of all Workforce Education and Training (WET) programs and initiatives. Spearheads partnerships with community-based organizations, peer-run agencies, educational institutions and local, regional and state agencies.

2. Consumer & Family Training, Education and Employment: \$480,929

Program Description: Offers an integrated, coordinated approach to consumer and family member employment and supports consumer and family employees at all stages of the employment process, from recruitment to retention. The goal is to develop and retain authentic consumer and family member voices in leadership roles as we develop new wellness, recovery and resiliency practices across the system.

3. Training Institute: \$135,844

Program Description: Provides a coordinated, consistent approach to training and staff development. Develops, researches and provides a broad array of training related to mental health practice; wellness, recovery and resiliency; peer employment and supports and management development.

4. Internship Program: \$1,000

Program Description: Coordinates academic internship programs across the ACBHCS workforce. Meets with educational institutions to publicize internship opportunities and provides training to interns.

5. Educational Pathways: \$99,172

Program Description: Develops a mental health career pipeline strategy in community colleges, which serve as an academic entry point for consumers, family members, ethnically and culturally diverse students, and individuals interested in human services education, and can lead to employment in the ACBHCS workforce.

6. Financial Incentives Program: \$364,500

Program Description: Offer financial incentives as workforce recruitment and retention strategies, and to increase workforce diversity. Financial Incentives are offered to individuals employed in ACBHCS and to graduate interns placed in ACBHCS and contracted community-based organizations, and who are linguistically and or culturally able to serve the underserved and unserved populations of the County.

## Innovation

**Innovative Programs** are intended to provide mental health systems with an opportunity to learn from innovative approaches. Innovation Programs are not designed to support existing or ongoing programs or services, but rather to provide the mental health system with innovative demonstration projects that will support system change in order to increase access to services and improve client/ consumer outcomes.

Alameda County has developed four new Innovation projects based on community input received during its recent Community Planning Process (CPP) which is documented in Alameda's MHSa FY 18-20 Three Year Plan at [www.ACMHSA.org](http://www.ACMHSA.org) under Documents/MHSa Plans. Summary details on the CPP are listed below.

Alameda's CPP for the MHSa FY 18-19 Three Year Plan was conducted from June – October 2017. During that process BHCS staff provided updates and information on current MHSa programs and community members provided input on mental health needs and services, including new Innovation ideas, activities and programming. There were three modes for providing input:

- Five large community forums (one in each county supervisorial district);
- Eighteen community focus groups: Chinese speaking family members, African American family members, providers for refugees, providers for LGBTQ community, transitional age youth (2 focus groups), Afghan immigrants, older adults, API and refugee providers and advocates, providers for individuals with developmental disabilities and mental illness, and the Pool of Consumer Champions (Alameda County's mental health consumer leadership group), and
- Community Input Surveys in all threshold languages: submitted by 550 unique individuals. Respondents were very diverse in age, race, and ethnicity. Survey respondents included: mental health consumers (12%), family members (10%), community members (12%), education (2%), community mental health (13%), homeless/housing services (4%), county behavioral health (1%), faith-based (1%), community substance use services (1%), hospital/healthcare (4%), law enforcement (1%), NAMI (1%), veteran/veteran services (1%), other community services (4%), other/unknown (33%).

The following Innovation programs have been vetted by BHCS and are based on the recent CPP process where the following themes emerged as areas for Alameda to provide increased attention and innovation:

- Community Violence and Trauma;
- The need for increased and alternative Crisis Services;
- Substance Use among the SMI and SED population, and
- Underserved Asian Pacific Islander (API) and Refugee communities.

Below is a summary of the four new Innovation projects as well as the final 18-month grant round from Alameda's approved Innovative Grant Program that will focus on increasing engagement in mental health services for the API and Refugee communities.

Information on this final grant round is also listed in Alameda's MHSa FY 18-20 Three Year Plan at [www.ACMHSA.org](http://www.ACMHSA.org) under Documents/MHSa Plans. Please see the new Alameda County INN Plan FY 2019-2023 at <http://www.acbhcs.org/mhsa-doc-center/> or at [www.ACMHSA.org](http://www.ACMHSA.org) for details on the four new Innovation projects. A summary of the four new Innovation projects is listed below.

## Summary of New Innovation Projects

### 1. Community Assessment and Transport team (CATT) : \$9,878,082 over five years (FY 18/19-22/23)

Many counties and cities struggle with developing a crisis response system that is efficient and effective – getting clients to the right services at the right time, without unnecessary use of first responder and client time, and in a respectful and non-stigmatizing manner. In Alameda, there have been a variety of efforts made to improve crisis response. But the impact has been limited – Alameda has the highest rate of 5150 holds in California, people who do not qualify for 5150 holds are not successfully linked to planned services and continue to over-use emergency services, and first responders spend many hours addressing behavioral health related 911 calls that would be better served in a different manner.

Alameda County proposes to test two primary strategies to improve the crisis response system:

- A collaboration among core Alameda County Health Care Services Agency programs - *Behavioral Health Care Services, Emergency Medical Services, and Alameda Care Connect (Whole Person Care)* – as well as other partners – *911 dispatch, the County Sheriff's Office, city police departments, city health and human services, and other relevant services* - to ensure the crisis response system is more agile and flexible.
- Combining a unique crisis transport staffing model with current technology supports to enable them to connect clients to a wider array of services in the moment.

This project is beyond adding a discrete service to a challenged system, it is a *test of concept for how to improve the system* through a collaborative approach and change in staffing models paired with technological support. If successful, it will contribute to increased efficiency for the emergency system, more appropriate services for the client, and a model that other counties can adopt or adapt to significantly improve their crisis response system.

Funds from FY 08/09, FY 09/10 and part of FY 10/11 will be applied to the first two fiscal years of operation through June 30, 2020.

### 2. Cannabis Policy and Education for Young Adults: budget \$1,484,375 3years 3 months (FY 18/19- FY 21/22)

Legalization of cannabis and resulting increased access may lead to increased use and increased negative consequences among mental health consumers. The purpose of this project is to reduce the risks and harms associated with cannabis access and use for young adults (21-24 years old) experiencing serious mental illness.

The results of this process are expected to lead to:

- A model for working with the cannabis industry to develop and implement effective practices to support the health of mental health consumers
- A well informed and collaborative education/harm reduction campaign/learning tools/approaches regarding cannabis and young adult consumers given the current legal environment

Funds from FY 10/11 will be applied to the first two fiscal years of operation through June 30, 2020.

### **3. Transitional Age Youth Emotional Emancipation Circles: \$501,808 over 2.5 years (FY 18/19-FY 20/21)**

Emotional Emancipation Circles<sup>SM</sup> (EEC) are support groups designed for African American people to “work together to overcome, heal from, and overturn the lies of White superiority and Black inferiority.” This Innovation project will:

- Tailor the EEC model to specifically target the needs of African American young adults, while ensuring fidelity to the model, and
- Evaluate mental health and functional outcomes: The current EEC evaluation process focuses on participant satisfaction. By expanding the scope of the evaluation we can determine if young adults felt engaged and if it resulted in positive mental health and functional outcomes.

Funds from FY 10/11 will be applied to the first two fiscal years of operation through June 30, 2020.

### **4. Introducing Neuroplasticity to Mental Health Services for Children: \$1,734,813 over 4 years (FY18/19- 21/22)**

Many children with emotional and behavioral disorders have underlying neurodevelopmental differences that exacerbate the emotional and behavioral disorders. Finding a way to provide neurodevelopmental interventions, in addition to mental health interventions, should lead to better mental health and functional outcomes.

This Innovation proposal integrates a neurodevelopmental approach into mental health services to achieve better outcomes. Holistic Approach to Neuro-Developmental Learning Efficiencies (HANDLE<sup>®</sup>) is a practice based on brain research on neuroplasticity and the effect of stress responses on learning, mood and behavior. It includes an initial assessment to determine inefficiencies in the communication between the body and the brain leading to functional difficulties. Based on that assessment a treatment plan is developed that specifies interventions to address the neurodevelopmental weaknesses. HANDLE does not teach coping mechanisms, it improves brain function, which ultimately reduces or eliminates the underlying neurodevelopmental problems contributing to emotional and behavioral symptoms.

Funds from FY 10/11 will be applied to the first two fiscal years of operation through June 30, 2020.

### **Round Five Innovation Grant Project: \$2,000,000 over two years (FY 18/19-19/20)**

Program Name: (INN 5B) Improving Mental Health Services Utilization for Asian/Pacific Islanders (API) and Refugees

Program Description: The API population in Alameda County remains persistently underserved or mostly unserved. Specifically, API Medi-Cal beneficiaries and API with a Serious Mental Illness and/or Serious Emotional Disturbance continue to have the lowest rate of seeking mental health help and substance use disorder treatment. ACBHCS seeks to improve this situation and to help produce a strategic plan to move forward in serving and working with the API community.

Also please note Alameda will be working on additional Innovation projects and will utilize any remaining reverted INN funds on new Innovation projects approved by the MHSOAC as funds are available.

## Capital Facilities and Technology

The reverted funds under Capital Facilities and Technology will be applied to FY 17/18-FY 19/20 as listed in Alameda's MHSa FY 18-20 Three Year Plan. Funding specifics include:

### Capital Facilities Projects FY 17/18

Project Name: South County Homeless Project (SCHP), also known as the A Street Shelter: \$690,913

Project Description: The South County Homeless Project (SCHP) emergency shelter provides 24 shelter beds for men and women with serious mental illness currently experiencing homelessness. The shelter operates out of a county-owned property located at 259 A Street in Hayward and has not received any significant maintenance or upgrade work since it was first used for this purpose in 1989.

At the request of BHCS with BHCS financing, the Alameda County General Services Agency (GSA) completed an assessment of the property and identified key areas in need of repairs including the Heating, Ventilation, and Air Conditioning (HVAC) systems, electrical, plumbing, fire safety and prevention systems, and other areas identified in their report. The proposed repairs can be completed within a 30-45 day period provided that the site can be entirely vacated for this time period.

Project Name: Villa Fairmont Renovation: \$754,000

Project Description: This is a county-owned property on the Villa Fairmont campus at 15200 Foothill Blvd. in San Leandro. This building is utilized by the company Telecare, which operates a 97-bed licensed Mental Health Rehabilitation Center. It serves adults with a history of severe mental illness and repeated hospitalizations. The flooring within the Villa Fairmont building is in need of renovation as they have not received maintenance and repairs in many years.

### Technology Projects FY 17/18

Program Name: MHSa Technology Project: \$4,716,622

Program Description: Purchase, installation and maintenance of a new Behavioral Health Management Information System, to include: billing, managed care, e-prescribing functions, data interoperability and functions as needed to support clinical and fiscal operations of BHCS. Additional expenditures for the necessary support staff during the implementation process, and other projects that provide access to consumers and family members to their personal health information and other wellness and recovery supports. In addition, BHCS developed and has implemented Yellowfin (a BHCS dashboard of utilization data) to facilitate client data collection and outcome evaluation. The following is a detailed list of all activities under this project.

## Technology Projects FY 17/18

Behavioral Health Management Systems	\$1,056,897
Web-Based Dashboard	\$97,000
Technical Assistance	\$225,000
Electronic File Storage and Document Imaging	\$42,256
Clinician's Gateway Interface	\$424,340
County Equipment and Software Update	\$1,300,000
CFTN Administration	\$126,216

## Technology Projects FY 18/19

Program Name: MHSA Technology Project: \$3,085,180

Behavioral Health Management Systems	2,988,180
Web-Based Dashboard	97,000

### Public Comment:

This Plan is being posted for a 30-day public review and comment period from 4/13-5/13. A public hearing will be held on May 14, 2018 at 2pm 500 Davis Street, San Leandro Conference Rooms A/B. Substantive comments and responses will be included here following the 30 day public review and comment period.

### REFERENCES

1. [Welfare & Institutions Code 5829.1 -6\(h\)\(1\).](#)
2. [Department of Health Care Services Information Notice.: 17-059](#)

All information in this Plan are true and correct.

James Wagner, LMFT/LPCC



Deputy Director of Alameda County Behavioral Health Care Services

4/13/18