

**REPORT/RECOMMENDATION TO THE BOARD OF SUPERVISORS  
OF SAN BERNARDINO COUNTY, CALIFORNIA  
AND RECORD OF ACTION**

June 13, 2017

**FROM: VERONICA KELLEY, Director  
Department of Behavioral Health**

**SUBJECT: MENTAL HEALTH SERVICES ACT THREE-YEAR INTEGRATED PLAN FISCAL  
YEARS 2017-18 THROUGH 2019-20**

**RECOMMENDATION(S)**

1. Approve the Mental Health Services Act Three-Year Integrated Plan Fiscal Years 2017-18 through 2019-20, in the amount of \$394,902,861, for the period of July 1, 2017 through June 30, 2020.
2. Approve the annual assignment of Prevention and Early Intervention funds to the California Mental Health Services Authority for continued implementation of statewide projects, through the approval of the Mental Health Services Act Three-Year Integrated Plan Fiscal Years 2017-18 through 2019-20.
3. Authorize the Director of the Department of Behavioral Health, as the County Mental Health Director, to sign the Mental Health Services Act County Compliance Certification form, as required by the California Department of Health Care Services, for the Mental Health Services Act Three-Year Integrated Plan Fiscal Years 2017-18 through 2019-20, on behalf of the County.
4. Authorize the Director of the Department of Behavioral Health, as the County Mental Health Director, and the Auditor-Controller/Treasurer/Tax Collector to sign the Mental Health Services Act County Fiscal Accountability Certification form, as required by the California Department of Health Care Services, for the Mental Health Services Act Three-Year Integrated Plan Fiscal Years 2017-18 through 2019-20, on behalf of the County.
5. Authorize the Director of the Department of Behavioral Health, as the County Mental Health Director, to execute and submit the Mental Health Services Act Three-Year Integrated Plan Fiscal Years 2017-18 through 2019-20 documents and any subsequent non-substantive amendments necessary, as required by the California Department of Health Care Services, to the State of California Department of Health Care Services, Mental Health Services Oversight and Accountability Commission, on behalf of the County, subject to review by County Counsel.
6. Direct the Director of the Department of Behavioral Health, as the County Mental Health Director, to transmit all documents and amendments in relation to the Mental Health Services

Page 1 of 4

cc: **BH-Aguirre**  
BH-Kelley  
BH-Kessee  
CAO-Garcia  
ATC-Valdez  
File - Behavioral Health/General  
w/ attachment  
mb 06/20/17

**ITEM 19**

Record of Action of the Board of Supervisors

**APPROVED (CONSENT CALENDAR)**

**COUNTY OF SAN BERNARDINO**

**Board of Supervisors**

MOTION	<u>AYE</u>	<u>AYE</u>	<u>SECOND</u>	<u>MOVE</u>	<u>AYE</u>
	1	2	3	4	5

**LAURA H. WELCH, CLERK OF THE BOARD**

BY \_\_\_\_\_

DATED: June 13, 2017

**MENTAL HEALTH SERVICES ACT THREE-YEAR INTEGRATED PLAN  
FISCAL YEARS 2017-18 THROUGH 2019-20  
JUNE 13, 2017  
PAGE 2 OF 4**

Act Three-Year Integrated Plan Fiscal Years 2017-18 through 2019-20, to the Clerk of the Board of Supervisors within 30 days of execution.

(Presenter: Veronica Kelley, Director, 388-0801)

**COUNTY AND CHIEF EXECUTIVE OFFICER GOALS AND OBJECTIVES**

**Operate in a Fiscally-Responsible and Business-Like Manner.**

**Provide for the Safety, Health and Social Service Needs of County Residents.**

**Pursue County Goals and Objectives by Working with Other Agencies.**

**FINANCIAL IMPACT**

This item does not impact Discretionary General Funding (Net County Cost). The submission and approval of the Mental Health Services Act (MHSA) Three-Year Integrated Plan Fiscal Years 2017-18 through 2019-20 (Plan) to the California Department of Health Care Services (DHCS), Mental Health Services Oversight and Accountability Commission (MHSOAC) is required by the State in order to expend State funds for the upcoming program years. The Plan will not exceed \$394,902,861 of MHSA funding. Over the three-year period, the approximated annual amounts are provided below. The annual assignment of Prevention and Early Intervention (PEI) funds to the California Mental Health Services Authority (CalMHSA) is included in the aggregate total of PEI expenditures.

<b>MHSA Component</b>	<b>2017-18</b>	<b>2018-19</b>	<b>2019-20</b>	<b>Total MHSA Expenditures</b>
Community Services and Supports	\$94,357,136	\$85,408,869	\$85,919,839	\$265,685,844
Prevention and Early Intervention	\$18,435,655	\$18,437,460	\$18,438,165	\$55,311,280
Innovation	\$6,080,794	\$5,057,956	\$4,546,986	\$15,685,736
Workforce Education and Training	\$4,124,645	\$4,124,645	\$4,124,645	\$12,373,935
Capital Facilities and Technological Needs	\$33,876,192	\$5,772,536	\$6,197,338	\$45,846,066
<b>Total</b>	<b>\$156,874,422</b>	<b>\$118,801,466</b>	<b>\$119,226,973</b>	<b>\$394,902,861</b>

Adequate appropriation and revenue have been included in the Department of Behavioral Health's (DBH) 2017-18 recommended budget and will be included in DBH's future recommended budgets.

**BACKGROUND INFORMATION**

DBH developed the MHSA Integrated Plan according to the guidelines provided by MHSOAC, including following the stakeholder process in Welfare and Institutions Code (WIC 5848) and California Code of Regulations Title 9, Division 1, Chapter 14, Section 3300, 3315, and 3320, which included a 30-day public comment period from March 24, 2017 through April 24, 2017 and

**MENTAL HEALTH SERVICES ACT THREE-YEAR INTEGRATED PLAN  
FISCAL YEARS 2017-18 THROUGH 2019-20  
JUNE 13, 2017  
PAGE 3 OF 4**

a public hearing held by the County of San Bernardino Behavioral Health Commission on May 4, 2017.

MHSOAC has directed the DBH Director, as the County Mental Health Director and responsible for the administration of the County's mental health services, to execute and submit the Plan to MHSOAC within 30 days of adoption by the Board of Supervisors (Board). The MHSOAC maintains evaluation responsibilities over all MHSOAC components and maintains approval authority over the Innovation (INN) component only. After approval by the Board and Plan submission to the MHSOAC, MHSOAC program services and operations will proceed with implementation and an annual update will be submitted next year to report evaluation outcomes and any required changes.

The proposed MHSOAC Integrated Plan provides a comprehensive overview of MHSOAC programs and services that contribute to sustaining the health and wellness of the County populace. Priorities of the Wellness Component of the Countywide Vision that the Plan supports include:

- Strengthening our pipeline for healthcare professionals – growing our own;
- Evaluating financial models and collaboration as a way to improve access to healthcare; and
- Improving collaboration and partnership to better treat the whole person.

The Plan highlights trends, program goals, and outcomes of DBH programs and provides a roadmap to a unified system of care. The emphasis of the Plan is to link MHSOAC components, programs, and funding with Medi-Cal and other behavioral health programs to create an integrated service experience for County residents.

In 2004, California voters passed Proposition 63, which established a state personal income tax surcharge of one percent on the portion of taxpayers' annual taxable income that exceeds \$1 million. Since 2005, MHSOAC (also known as Proposition 63) has provided funding to the County for services and resources that promote wellness, recovery, and resiliency for adults and older adults with serious mental illness and for children and youth with serious emotional disturbances and their family members. The WIC Section 5847 states that DBH must submit a Board approved MHSOAC Three-Year Program and Expenditure Plan and annual updates.

The Plan consists of six MHSOAC components including: Community Program Planning (CPP), PEI, Community Services and Supports (CSS), INN, Workforce Education and Training (WET), and Capital Facilities and Technological Needs (CFTN).

- The CPP is not a specific "programmatic component", but rather includes countywide stakeholder input and involvement in the planning, implementation, evaluation, and improvement of all MHSOAC components.
- The PEI component is intended to reduce risk factors, increase protective factors, and intervene early in the progression of an illness.
- The CSS component contributes to the ongoing transformation of the public mental health system by: augmenting existing services; establishing a system of care for crisis services; developing programming to address the needs of transitional age youth; developing

**MENTAL HEALTH SERVICES ACT THREE-YEAR INTEGRATED PLAN  
FISCAL YEARS 2017-18 THROUGH 2019-20  
JUNE 13, 2017  
PAGE 4 OF 4**

supportive housing and maximizing MHSAs funds for housing opportunities; and enhancing and expanding wraparound services to children, youth, and adults.

- INN projects are unique, as they are intended to contribute to learning and test the implementation of novel, creative, ingenious mental health approaches expected to contribute to learning for integration into the mental health system. All INN projects are time-limited and part of rigorous evaluation process, which can include transitioning INN activities into other funded programs or ending activities depending on lessons learned.
- The WET component is intended to develop and maintain an appropriately educated and culturally competent workforce.
- The CFTN component provides funding to purchase or rehabilitate County-owned buildings that will be utilized in the provision of behavioral health services, such as Crisis Residential Treatment, and to support the implementation of the new Electronic Health Record system.

Over the three-year period, DBH anticipates that MHSAs programs will serve approximately 495,000 clients across the continuum of care. The cost per client varies widely depending upon the specific MHSAs program and the individual level of care provided, with estimated costs ranging from \$298 to \$5,110 per client.

As part of the PEI component, on June 17, 2014 (Item No. 31), the Board approved the assignment of 4% (\$561,894 annually) of PEI funds to CalMHSAs for continued implementation of statewide projects through the approval of the MHSAs Three-Year Integrated Plan Fiscal Years 2014-15 through 2016-17. The three statewide projects include: Stigma and Discrimination Reduction; Student Mental Health Initiative; and Suicide Prevention Program. The funding assigned to CalMHSAs for implementation of statewide projects will expire on June 30, 2017. To continue statewide efforts in the three project areas, counties have been asked to allocate a percentage of their PEI MHSAs funds to CalMHSAs for project support. During CPP, stakeholders expressed the desire to continue supporting these statewide projects annually through 2019-20. As part of the annual stakeholder and reporting process, DBH will return to the Board for approval of any plan updates, including the ongoing support of statewide projects through 2019-20.

**PROCUREMENT**

Not applicable.

**REVIEW BY OTHERS**

This item has been reviewed by Behavioral Health Contracts (Natalie Kessie, Contracts Manager, 388-0869) on May 24, 2017; County Counsel (Frank Salazar, Deputy County Counsel, 387-5455) on May 25, 2017; Finance (Paul Garcia, Administrative Analyst, 386-8392) on May 25, 2017; and County Finance and Administration (Tanya Bratton, Deputy Executive Officer, 388-0280) on May 25, 2017.