



Solano County Health & Social Services Department

Solano County Health & Social Services is pleased to share its Community Services & Support Plan Update Fiscal Year (FY) 2008-09. This is the second Plan Update to the three-year Community Services & Support (CSS) Mental Health Services Act (MHSA) Strategic Plan (2005). Annually, Solano County Health & Social Services submits a CSS Plan Update to the California Department of Mental Health (DMH). Per the terms of DMH Information Notice Number 08-10, the CSS Plan Update FY 2008-09 provides detailed budget reports and narratives, other expenditure information, updates about existing programs, and the vetting process for the CSS Plan Update FY 2008-09.¹

MHSA Funded Programs

Full Service Partnerships

- Children
- Transition Age Youth
- Adults
- Older Adults

Wellness centers in 3 communities

Mobile Crisis Services

Supported Housing

Supported Vocational Education & Employment

MHSA Programs must be transparent and measurable, as well as:

- Centered on the consumer's (and family's) strengths and intentions
- Thoroughly competent to serve a variety of cultures and ethnicities
- Driven by the outcomes of health, hope, independence and choice experienced by consumer and family.

This CSS Plan Update FY 2008-09 is a draft document and public comment will be actively solicited from February 18, 2009 to March 20, 2009. The Plan Update can be found on the Solano County web site at <http://www.solanocounty.com/depts/hss/mhs/mhsa/css.asp> and by request at 275 Beck Avenue, Fairfield, CA MS 2-250 or 707-784-8320. The report will be available to MHSA Stakeholders, Local Mental Health Board, and other groups and organizations.

¹ Welfare & Institution Code Section 5847 (d), Section 5878.3, Section 5892, Section 5893 and California Code of Regulations Section 3315.

Solano County’s Vision for Mental Health Services

A mental health system that is state-of-the art, culturally competent, that promotes recovery and wellness through independence, hope, personal empowerment and resilience. Access is easy, client and family expressed needs and goals drive services and out-of-home institutional care is reduced.

I. FY 2008-09 PROCESS TO UPDATE THE COUNTY’S THREE YEAR PROGRAM AND EXPENDITURE PLAN

Table of Contents

	Section	Page
A.	Exhibit 1: Certification of the County Mental Health Director that the County will comply with the Non-supplant requirements of Section 3410 of the CCR.	3
B.	Exhibit 2: Program Workplan Listing for FY 2008-09.	4
C.	Exhibit 3: Total Amount of New MHSA CSS Funding Required for Needs Identified FY 2008-09.	5
D.	Exhibit 4: Prudent Reserve Plan.	6
E.	Exhibit 5: Budgets and Budget Narratives for each Workplan. <ul style="list-style-type: none"> • Administrative Budget Narrative • Adult Community Treatment Team—Forensic Assessment & Community Treatment • Children’s Multi-Disciplinary Intensive Services (Children’s FSP) • Foster Family and Bilingual Support • Young Adult—Transition Age Youth • Older Adult FSP • Wellness & Recovery Programs • Mobile Crisis • Outreach & Engagement 	7 - 23
F.	Calculation to Ensure Limit of 20% for Prudent Reserve	24
G.	Description of Requirements of the Community Program Planning Process as Described in Section 3300 of the CCR	24
H.	Documentation of the Local 30 Day Review Process per Section 3315(a) of CCR <ul style="list-style-type: none"> • Summary of public comments 	25
I.	Update Proposals to Change Existing Plans	27

A.

Exhibit 1
Community Services and Supports
FY 2008/09 Plan Update

COUNTY CERTIFICATION

I hereby certify that I am the official responsible for the administration of Community Mental Health Services in and for Solano County and that the following are true and correct:

This Community Services and Supports Plan Update is consistent with the Mental Health Services Act. This Plan Update is consistent with and supportive of the standards set forth in Title 9, California Code of Regulations (CCR) Section 3610 through 3650.

This Plan Update has been developed with the participation of stakeholders, in accordance with CCR Sections 3300, 3310, and 3315. The draft Plan Update was circulated for 30 days to stakeholders for review and comment. All input has been considered, with adjustments made, as appropriate.

Mental Health Services Act funds are and will be used in compliance with CCR Section 3410 of Title 9, Non-Supplant.

All documents in the attached Community Services and Supports Plan Update are true and correct.

Date: Signature _____

Michael Opredek

Date

Deputy Director, Solano Mental Health Division

Executed at: Solano County Health & Social Services
275 Beck Avenue, MS 5-250
Fairfield, CA 94533

B. Exhibit 2										
FY 2008/09 Mental Health Services Act Community Services and Supports Summary Workplan Listing										
Workplans			Total Funds Requested				Funds by Age Group			
No.	Name	New (N) /Appro ved (E)	FSP	Syst. Dev.	O&E	Total Request	CYF	TAY	Adult	Older Adult
1.	Children's Intensive Services	E	\$503,294			\$503,294	\$503,294	\$503,294		
2.	Foster Family and Bilingual Support	E		\$578,611		\$578,611	\$578,611	\$578,611		
3.	Transition Aged Youth	E	\$550,000			\$550,000		\$550,000		
4.	Community Treatment FSP	E	\$882,425			\$882,425		\$882,425	\$882,425	\$882,425
5.	Older Adult FSP	E	\$635,147			\$635,147				\$635,147
6.	Mobile Crisis	E		\$931,660		\$931,660	\$931,660	\$931,660	\$931,660	\$931,660
7.	Wellness and Recovery Program	E		\$3,861,592		\$3,861,592	\$3,861,592	\$3,861,592	\$3,861,592	\$3,861,592
8.	Outreach and Engagement	E			\$85,275	\$85,275	\$85,275	\$85,275	\$85,275	\$85,275
Subtotal Workplans			\$2, 571,496	\$5,371,913	\$85,275	\$8,028,684	\$5,961,112	\$7,393,537	\$5,760,952	\$6,396,009
Optional 10% Operating Reserve						\$802,868				
CSS Administration						\$735,514				
CSS Capital Facilities Projects						\$0				
CSS Technological Needs Projects						\$0				
CSS Workforce Ed. and Training						\$131,044				
CSS Prudent Reserve						\$35,013				
Total Funds Requested						\$9,733,123				

C. Exhibit 3

**FY 2008/09 Mental Health Services Act Community Services and Supports
 Funding Requirements**

County: SOLANO

Date: 2/18/2009

1.	Total FY 2008/09 Funds Requested from line 33 of Exhibit 2	\$9,733,123
2.	Less: Total MHSA CSS Unspent Funds from FY06/07 MHSA Revenue and Expenditure Report (Enter as negative amount)	(\$3,272,083)
3.	Plus: Additional expenditures and/or decreased revenues in FY07/08 (Describe below)	\$800,387
4.	Plus: Funds dedicated to Prudent Reserve in FY07/08	\$694,106
5.	Total Funding Requirements for CSS	\$7,955,533

Description for amounts on line 3 (insert additional lines if necessary):

Line 3: FY 07/08 Distributions from DMH - \$3,998,307 (CSS), \$114,700 (WET) ; \$4,113,007

Line 3: FY 07/08 Interest Income posted to MHS Fund - \$158,083 (CSS), \$1,090 (WET); \$159,173

Line 3: FY 07/08 Expenditures - \$5,071,783 (CSS), \$1,426 (WET); \$5,073,210

D. Exhibit 4

**Mental Health Services Act (MHSA)
 Community Services and Supports (CSS)
 FY 2008/09 Local Prudent Reserve Plan**

County: SOLANO

Date: 2/18/2009

Approved CSS Component Amount	
1. Requested FY 08/09 CSS Services Funding (Exhibit 2, line 26)	\$8,028,684
2. Less: Non-Recurring Expenditures (from Exhibit 5a, 5b, and/or 5c)	
3. CSS Administration (Exhibit 2, line 28)	\$735,514
4. Total CSS Plan Component Amount	\$8,764,198
5. Maximum Prudent Reserve (50%)	\$4,382,099
Prudent Reserve	
6. Prudent Reserve Balance from Prior Approvals	\$2,075,182
7. Amount Requested to Dedicate to Prudent Reserve through this Plan update	\$35,013
8. Prudent Reserve Balance	\$2,110,195
9. Prudent Reserve Shortfall to Achieving 50% (Describe below)	\$2,271,904

The Department cannot approve a Plan update that does not achieve a local prudent reserve of 50% unless services would have to be reduced in order to attain the required amount. Please describe below how the County intends to reach the 50% requirement.

Currently, Solano County cannot achieve a local prudent reserve of 50% unless services are reduced. Solano County plans to identify funds in the 2009-10 FY Plan Update and future Plan Updates to designate to the prudent reserve. Solano County also looks forward to California Department of Mental Health providing guidance and technical assistance to counties detailing how funds in the prudent reserve may be accessed by counties. Solano County looks forward to working with California Department of Mental Health through existing networks and workgroups to develop such policies.

E. EXHIBIT 5A ADMINISTRATION

County: Solano		Fiscal Year: 2008-09
		Date: 3/25/2009
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Personnel Expenditures		
a. MHSA Coordinator	\$90,184	\$92,001
b. MHSA Support Staff		\$30,667
c. Other Personnel		
• Project Manager Workforce Dev. (.5)	\$33,212	
• MH Clinician (1 FTE 07-08, .9 FTE 08-09)	\$81,220	
• MH Specialist II (EH)	\$9,909	
• Accounting Technician		\$25,420
• OA II		
d. Total Salaries	\$214,525	\$148,088
e. Employee Benefits	\$93,066	\$99,317
f. Total Personnel Expenditures	\$307,591	\$247,405
2. Operating Expenditures	\$222,182	\$199,734
3. County Allocated Administration		
a. Countywide Administration	\$7,511	\$53,625
b. Other Administration	\$175,281	\$242,128
c. Total County Allocated Administration	\$182,793	\$295,753
4. Total Proposed County Administration Budget	\$712,566	\$742,892
B. Revenues		
1. New Revenues		
a. Medi-Cal		
b. Other Revenue	\$6,920	\$7,378
2. Total Revenues	\$6,920	\$7,378
C. Non-recurring Expenditures		
D. Total County Administration Funding Requirements	\$705,646	\$735,514

Administrative Budget Narrative. In this Plan Update, Solano County is adding three positions to the budget above: Mental Health Services Coordinator, Office Assistant and Accounting Technician. The first two positions will expand the Outreach and Engagement Unit (O&E) and will move O&E from the Wellness and Recovery unit and make O&E its own stand alone unit. A key component of the Solano's MHSA plan is outreach and engagement; these amendments to the Plan Update help Solano reach its O&E goals. The O&E unit will expand and deepen outreach and engagement efforts to reach un-served and underserved populations in Solano County. Additionally, the Account Technician position will help to expand data collection and reporting efforts, as well as play in role in quality assurance efforts within the MHSA Bureau.

County Certification

I HEREBY CERTIFY under penalty of perjury that I am the official responsible for the administration of Community Mental Health Services in and for said County; that I have not violated any of the provisions of Section 5891 of the Welfare and Institution Code in that all identified funding requirements (in all MHSA program budgets and this administration budget) represent costs related to the expansion of mental health services since passage of the MHSA and do not represent supplanting of expenditures; that fiscal year 2004-05 funds required to be incurred on mental health services will be used in providing such services; and that to the best of my knowledge and belief this administration budget and all related program budgets in all respects are true, correct, and in accordance with the law.

Date: _____

Signature: _____
Mike Opredek, Deputy Director, Mental Health Division

Executed at: Fairfield, California

E. EXHIBIT 5B FORENSIC ASSESSMENT AND COMMUNITY TREATMENT FSP

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 4		Date: 3/25/2009
Program Workplan Name Adult Treatment Team—Forensic Assessment & Community Treatment, FSP		
Type of Funding 1. Full Service Partnership		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>120</u>	
Existing Client Capacity of Program/Service	<u>60</u>	Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>60</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures a) Housing b) Other Supports		
2. Personnel Expenditures	\$122,360	\$105,826
3. Operating Expenditures	\$91,939	\$119,949
4. Program Management		
5. Estimated Total Expenditures when service provider is not known	\$536,505	\$656,650
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$750,804	\$882,425
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)	\$996	\$0
b. State General Funds		
c. Other Revenue	<u>\$7,273</u>	<u>\$0</u>
d. Total New Revenue	\$8,269	\$0
3. Total Revenues	\$8,269	\$0
C. Total Funding Requirements	\$742,535	\$882,425

Forensic Assessment & Community Treatment FSP Narrative: Forensic Assessment Community Treatment (FACT) Full Service Partnership (FSP) (formerly known as Adult Community Treatment Team) has no significant differences between the FSP mentioned in the original Three Year Plan and this Plan Update. FACT is a jail diversion of severely and persistently mentally disordered, nonviolent, misdemeanor offenders (who may have history of violent felonies) from local incarceration. The project provides intensive outpatient treatment and supervision; following the principles of FSP to aid individuals develop their individual strengths, self management, network of care, crisis response, illness management, vocational goals, and living situation. Additionally, STRIDES (Steps Towards Recovery Independence Dignity Empowerment and Success) serves clients with severe and persistent mental illness with co-occurring conditions who may be homeless and/or associated with the criminal justice system. STRIDES services also include the FSP principles.

-Continued on Next Page-

E. EXHIBIT 5B CHILDREN'S MULTI-DISCIPLINARY INTENSIVE SERVICES (CHILDREN'S FSP)

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 1		Date: 3/25/2009
Program Workplan Name: Children's Intensive Services (Children's FSP)		
Type of Funding 1. Full Service Partnership		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>65</u>	
Existing Client Capacity of Program/Service	<u>30</u>	Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>35</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing		\$10,000
b. Other Supports	\$6,582	\$50,000
2. Personnel Expenditures	\$556,415	\$634,563
3. Operating Expenditures	\$120,674	\$242,162
4. Program Management		
5. Estimated Total Expenditures when service provider is not known		
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$683,671	\$936,725
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)	\$180,190	\$176,723
b. State General Funds		\$237,447
c. Other Revenue	<u>\$221,623</u>	<u>\$18,631</u>
d. Total New Revenue	\$401,813	\$432,801
3. Total Revenues	\$401,813	\$432,801
C. Total Funding Requirements	\$281,858	\$503,924

Children's Multi-Disciplinary Intensive Services (Children's FSP) Narrative: This Update Plan includes an additional Mental Health Clinical Supervisor position (1 FTE). This new position will oversee the existing program ensuring that FSP standards, ideals, and services are appropriately rendered per

the requirements of the FSP model. This Unit serves seriously emotionally disturbed children who have been placed out of home or are at risk of placement out of home in residential, foster, or institutional care or who have experienced their first hospitalization or who are exiting the Juvenile Hall or other placement(s) or have co-occurring substance use. The services include: child and family engagement; comprehensive assessment; intensive, flexible treatment response and support; single person responsible for working with family to accomplish treatment goals; support and assistance provided at home, school and work; and other support as needed, including funds for safe housing, clothing, food, recreation, school, vocational training and nontraditional supports.

-Continued on Next Page-

E. EXHIBIT 5B FOSTER FAMILY AND BILINGUAL SUPPORT

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 2		Date: 3/25/2009
Program Workplan Name" Foster Family and Bilingual Support		
Type of Funding 1. Full Service Partnership		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>150</u>	
Existing Client Capacity of Program/Service	<u>80</u>	Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>70</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing		
b. Other Supports		
2. Personnel Expenditures	\$393,059	\$475,949
3. Operating Expenditures	\$75,340	\$136,591
4. Program Management		
5. Estimated Total Expenditures when service provider is not known		
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$486,399	\$612,540
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)		
b. State General Funds		
c. Other Revenue	<u>\$38,239</u>	<u>\$33,879</u>
d. Total New Revenue	\$38,239	\$33,879
3. Total Revenues	\$38,239	\$33,879
C. Total Funding Requirements	\$430,160	\$578,661

Foster Family and Bilingual Support Narrative: There are no significant differences between the description of Foster Family and Bilingual Support Services project in the Three Year Plan and this Plan Update. The Foster Family Support services includes two clinician/therapists: one

to case manage Child Welfare Services consumers who need mental health services and are placed in high end residential treatment facilities and one to assess and treat foster children who are entering the foster care system. Staff also monitor child hospitalizations and discharge planning aimed at shortening hospital stays, improvising discharge planning, and reducing report admittances. Implementation successes include significant improvements in treatment and discharge planning, as well as cost reductions. The program strengthens the overall system by formalizing partnerships between mental health and foster/child welfare services. The Bilingual Support project offers services to families in North Solano County who are monolingual Spanish speakers. The program funds bilingual Mental Health Specialists and 1 FTE bilingual Mental Health Clinician. Staff conduct outreach, engagement and treatment services to Spanish speaking families in Vacaville and Dixon enabling them to access care and stay connected to services. The program strengthens the overall system by expanding services to previously un-served residents, and by increasing cultural competency.

-Continued on Next Page-

E. EXHIBIT 5B TRANSITION AGE YOUTH

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 3		Date: 3/25/2009
Program Workplan Name: Transition Age Youth		
Type of Funding 1. Full Service Partnership		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>28</u>	
Existing Client Capacity of Program/Service		Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>28</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing		
b. Other Supports		
2. Personnel Expenditures		
3. Operating Expenditures		
4. Program Management		
5. Estimated Total Expenditures when service provider is not known		\$550,000
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$0	\$550,000
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)		
b. State General Funds		
c. Other Revenue		
d. Total New Revenue	\$0	\$0
3. Total Revenues	\$0	\$0
C. Total Funding Requirements	\$0	\$550,000

Young Adult (Transition Aged Youth (TAY)) Intensive Services Narrative: There are no significant differences between the Young Adult Intensive Services described in the Three Year Plan and program that is being implemented today. Young Adult Intensive Services is designed

to serve seriously emotionally disturbed or mentally ill TAY who are homeless or at risk of homelessness because they are leaving home, foster care placement, residential care, incarceration and/or develop illness late in adolescence. The services include comprehensive assessment, substance abuse treatment, consumer family engagement, supported housing, supported education, flexible treatment response and support, as well as a single person responsible for working with the consumer and family to accomplish treatment goals.

-Continued on Next Page-

E. EXHIBIT 5B OLDER ADULT FSP

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 5		Date: 3/25/2009
Program Workplan Name: Older Adult FSP		
Type of Funding 1. Full Service Partnership		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>64</u>	
Existing Client Capacity of Program/Service	<u>28</u>	Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>36</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing	\$7,546	\$10,000
b. Other Supports	\$17,512	\$55,000
2. Personnel Expenditures	\$477,020	\$416,166
3. Operating Expenditures	\$108,858	\$277,448
4. Program Management		
5. Estimated Total Expenditures when service provider is not known		
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$610,936	\$758,614
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)		
b. State General Funds		
c. Other Revenue	<u>\$121,345</u>	<u>\$123,466</u>
d. Total New Revenue	\$121,345	\$123,466
3. Total Revenues	\$121,345	\$123,466
C. Total Funding Requirements	\$489,591	\$635,148

Older Adult Community Treatment Team Narrative: This Plan Update includes the addition of a mental health nurse in order to help meet the medical needs of this population. The Older Adult Community Treatment Team serves individuals with severe and persistent mental illness at risk of

deteriorating health and functioning abilities, as well as at risk of losing housing, independence or placement in restrictive settings. These consumers may also face cultural, language and/or geographical impediments to needed resources. Services include consumer engagement, co-management of care with primary care physician, around the clock treatment, support and assistance provided at home, school and/or work, and consumer and family support, including funds for safe housing, clothing, food, recreation, school, vocational training and other non-traditional supports. Some case management services linked to reduction/resolution of mental health symptoms are not billable but are vital to meeting the consumer's needs, including assistance picking up prescriptions; providing education and support about medical issues; accompaniment and assistance with medical appointments; and assistance and support with rent subsidy applications.

-Continued on Next Page-

E. EXHIBIT 5B WELLNESS AND RECOVERY PROGRAMS

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 7		Date: 3/25/2009
Program Workplan Name: Wellness and Recovery Programs		
Type of Funding 2. System Development		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>450</u>	
Existing Client Capacity of Program/Service		Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>450</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing		
b. Other Supports		
2. Personnel Expenditures	\$128,960	\$168,909
3. Operating Expenditures	\$206,341	\$191,728
4. Program Management		
5. Estimated Total Expenditures when service provider is not known	\$2,012,915	\$3,775,955
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$2,348,216	\$4,136,592
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)		
b. State General Funds		
c. Other Revenue	<u>\$460,675</u>	<u>\$275,000</u>
d. Total New Revenue	\$460,675	\$275,000
3. Total Revenues	\$460,675	\$275,000
C. Total Funding Requirements	\$1,887,541	\$3,861,592

Wellness & Recovery Centers/Consumer Operated Recovery Narrative: This Plan Update includes an additional \$1 million targeted towards this project in order to serve clients in Board & Care Facilities and provide clients with enhanced MHSA services, including case management services by the Mobile Crisis team, which includes assessment, referral and linkage to appropriate community resources and levels of care. Wellness and Recovery Centers/Consumer Operated Recovery is operated by consumers and operates in three Solano communities, including Dixon, Fairfield, and Vacaville. The Centers serve adults with severe mental illness who want life skills support, vocational training, supported education, work opportunities, and peer support. They also serve families who need education, group support and family advocacy to help them keep their children at home. The Centers operate on the principle of "work first" and offer curriculum-based life skills and illness management, education, supported education opportunities, and vocational training and placement. Also, through Vocational Services and Supported Education project clients receive vocational education and employment services in partnership with the State Department of Rehabilitation and other community based organizations. Finally, through the partnership with Caminar, Inc. clients receive supported housing; emphasis is on clients in the priority populations who are not living independently.

-Continued on Next Page-

E. EXHIBIT 5B MOBILE CRISIS

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 6		Date: 3/25/2009
Program Workplan Name: Mobile Crisis		
Type of Funding 2. System Development		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>500</u>	
Existing Client Capacity of Program/Service		Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>500</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing		
b. Other Supports		
2. Personnel Expenditures	\$457,020	\$801,279
3. Operating Expenditures	\$101,164	\$168,329
4. Program Management		
5. Estimated Total Expenditures when service provider is not known		
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$558,184	\$969,608
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)		\$37,948
b. State General Funds		
c. Other Revenue	<u>\$50,546</u>	<u>\$0</u>
d. Total New Revenue	\$50,546	\$37,948
3. Total Revenues	\$50,546	\$37,948
C. Total Funding Requirements	\$507,638	\$931,660

Mobile Crisis Narrative: The Mobile Crisis unit was expanded to include four new positions, including: Mental Health Clinician, Mental Health Nurse, Psychiatric Technician, Mental Health Specialist II and an OA II. With these new positions, the unit is better able to serve the target

population of 500 clients in a FY. In previous years, this unit has not met the annual target number of 500 clients because the unit was not fully staffed as described in the original Three Year plan.

Mobile Crisis will continue to carry out the services as first described in the original Three Year Plan. Mobile Crisis was designed to serve clients and their families confronted with an emerging or evident psychiatric crisis at home or in the community, including individuals and their families in community support placements, such as residential care facilities and individuals recently discharged from institutional care services.

Services include field interventions and linkage to on-going services to avoid hospitalization or involuntary services; a community safety team that offers a supportive first contact by peers or teams of peers and professionals; education and training with law enforcement and service providers to ensure appropriate services, during crises; and integrated services among mental health, hospitals and jails.

Furthermore, Solano recently reduced the operating hours of its 24 hour Crisis Unit and the Mobile Crisis unit will play an increased role in serving clients that have traditionally been served by the 24 hour Crisis Unit. In order to successfully expand the Mobile Crisis unit, Solano County Mental Health Division collaborated with outside agencies, including law enforcement, hospitals, and policymakers to develop and implement the plan to expand Mobile Crisis in Solano County. All partners are supportive and encouraging about the enhanced services for clients. Additionally, Solano County expanded the role of the Mobile Crisis unit in order to model it after best practice models in other parts to the state.

-Continued on Next Page-

E. EXHIBIT 5B OUTREACH & ENGAGEMENT

County: Solano		Fiscal Year: 2008-09
Program Workplan #: 8		Date: 3/25/2009
Program Workplan Name: Outreach & Engagement		
Type of Funding 2. System Development		Months of Operation <u>12</u>
Proposed Total Client Capacity Program/Service	<u>500</u>	
Existing Client Capacity of Program/Service	<u>0</u>	Prepared by: Karl Cook
Client Capacity of Program/Services Expanded through MHSA	<u>500</u>	Phone #: 707-784-8394
	Estimated FY 2007-08 Expenditures and Revenues	Estimated FY 2008-09 Expenditures and Revenues
A. Expenditures		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing		
b. Other Supports		
2. Personnel Expenditures	\$0	\$65,275
3. Operating Expenditures	\$0	\$20,000
4. Program Management		
5. Estimated Total Expenditures when service provider is not known	\$0	\$0
6. Non-recurring expenditures		
7. Total Proposed Program Budget	\$0	\$85,275
B. Revenues		
1. Existing Revenues		
2. New Revenues		
a. Medi-Cal (FFP Only)	\$0	\$0
b. State General Funds		
c. Other Revenue	\$0	\$0
d. Total New Revenue	<u>\$0</u>	<u>\$0</u>
3. Total Revenues	\$0	\$0
C. Total Funding Requirements	\$0	\$85,275

Outreach & Engagement Narrative: In this Plan Update, Solano County is expanding the Outreach & Engagement component and adding two positions, including the Mental Health

Services Coordinator and Office Assistant. These two positions will expand the Outreach and Engagement component (O&E) and will move O&E from the Wellness and Recovery component and make O&E its own stand alone component. A key strategy of the Solano's MHSA Plan was and is outreach and engagement; these amendments to the Plan Update help Solano reach its stated O&E goals. The O&E unit will expand and deepen outreach and engagement efforts to reach un-served and underserved populations in Solano County. As you will note below, community members have urged and supported the Mental Health Division to expand efforts to reach the unserved and underserved in Solano County. The expansion activities will occur as soon as the Plan Update is approved.

F. CALCULATION TO ENSURE LIMIT OF 20% FOR PRUDENT RESERVE

Solano County did not exceed the 20% limit for the prudent reserve as stated in California Department of Mental Health Exhibit 6.

G. DESCRIPTION OF REQUIREMENTS OF THE COMMUNITY PROGRAM PLANNING PROCESS AS DESCRIBED IN SECTION 3300 OF THE CCR

Solano County MHSA has a multi-pronged strategy to seek and solicit community involvement in all MHSA Plans including the CSS Plan Update:

- Electronic Mail Lists: Solano County has developed an extensive e-mail list, *MHSA Stakeholders*, which includes representatives from community based organizations, providers, consumers, family members, and policy makers. Additionally, interested community members can sign up to be added to the e-mail list. The Stakeholder e-mail list receives timely information about draft Plans and Plan Updates for review and comment, as well as other notices and information about MHSA activities. (Stakeholders without e-mail access are called and notified about draft Plans available for comment and review.) Additionally, we utilize existing e-mail distribution lists in the community and ask the hosts of the lists to please forward information to their respective groups.
- MHSA Web Page: Solano County established a Solano MHSA web page in order to provide an easy location for Solano County residents to view and comment on Plans and Plan Updates, as well as receive notice of MHSA Solano activities in the community.
- MHSA Stakeholders Group: A quarterly meeting of agencies, organizations, consumers and individuals is held in order to provide updates about MHSA Plans and solicit feedback from the community. The Group meets March, May, August, and November 2009.
- MHSA Steering Committee: In 2009, a MHSA Steering Committee will be formed to: 1.) develop and draft the Five Year Integration MHSA Plan; 2.) provide ongoing input and feedback about all MHSA plans; and 3.) develop policy recommendations for MHSA. The Committee will meet at least six times per year.
- Local Mental Health Board: This Board is active in the MHSA planning process and receives periodic updates about MHSA implementation. The Boards' membership

includes representation from the general public, consumers and family members, the Board of Supervisors, organizations, agencies, and etc.

- Consumer and Family Advisory Group: A monthly meeting of consumers and family members is held to provide information and solicit feedback; MHSA is a standing item on its agenda in order to provide regular updates about MHSA to consumers.
- Solano County Health & Social Services Executive Staff: Executive staff include the deputy directors of each division within Solano County Health & Social Services. Staff are briefed on Solano MHSA activities weekly and feedback is solicited from this group.
- Solano Early Child Mental/Development Health Collaborative: This Collaborative represents agencies, organizations, consumers, providers, and family members interested in early child mental/development health issues. This group receives occasional updates about the MHSA implementation process (as requested).
- Cultural Competency/Diversity Committee: This committee is a component of the H&SS Mental Health Quality Improvement Committee. Participants include H&SS Mental Health Directors, Mental supervisors, managers and line staff. The mission of the committee is to fulfill the objectives of the cultural competency plan, which covers organizational, workforce development, consumer services, community outreach and provider education.
- First 5 Solano Children & Families Commission: This Commission provides oversight to the local First 5 Solano efforts and includes community members, Board of Supervisors, Solano Health & Social Services staff, and representatives from each Solano city. This Commission receives periodic updates about the MHSA implementation process (as requested).
- Transitional Age Youth (TAY) Collaborative: The TAY Collaborative was recently formed under the leadership of Solano Child Welfare Services. MHSA Prevention & Early Intervention TAY contractors will be required to attend monthly meetings. Additionally, Solano MHSA will provide updates to the Collaborative on a regular basis (as requested).
- Solano County Board of Supervisors: The Solano County Board of Supervisors receives updates from the Solano Mental Health Board, including updates about Solano MHSA Plans, Plan Updates, and other MHSA activities. Additionally, the Solano County Health & Social Services Director and/or Solano Mental Health Deputy Director provide updates to the Board and Health & Social Services subcommittee as requested (at least annually).

H. LOCAL 30 DAY REVIEW PROCESS PER SECTION 3315(A) OF THE CCR

Solano County provided the CSS Plan Update FY 2008-09 for stakeholder review from February 18 – March 20, 2009. The County will notify stakeholders and other interested parties about the Plan Update through the MHSA Stakeholder E-mail List, Solano MHSA web site page, and through various existing community e-mail distribution lists. Additionally, updates about MHSA, including CSS updates, were provided to the Local Mental Health Board February 17, 2009 and Solano MHSA Stakeholders on March 3, 2009.

Before submission of the CSS Plan Update FY 2008-09 to the California Department of Mental Health substantial recommendations or revisions to the report will be summarized and analyzed.

Solano County Mental Health is pleased to share the written comments received during the 30 day public posting, as well as the comments received at the MHSA Stakeholders meeting on March 3, 2009:

- Integrated Mental Health Primary Care Services: one comment from a local agency noted that zero CSS funds were dedicated to integration of Mental Health and Primary Care Services. Solano County's original MHSA Plan included a work plan to Ingrate Mental Health and Primary Health Care Services. Solano County thanked the agency for their response and urged their participation in the MHSA Steering Committee so that the agency could be involved with the development and oversight of the Five Year Integrated MHSA Strategic Plan, as well as the MHSA Annual Updates.
- Foster Family and Bilingual Support Work Plan: one written comment supported the work of the Foster Family and Bilingual Support Work Plan and also supported efforts to reach out to unserved and underserved populations in the community. Solano County thanked the community member for her response. Also, Solano County notified the community member that the CSS Plan also includes funds to expand the Outreach & Engagement work plan in order to increase outreach and engagement activities to unserved and underserved populations in Solano County.
- Mobile Crisis Unit Work Plan: Solano County received multiple comments about the expansion of the Mobile Crisis unit in Solano County, including questions about referral processes, response times, number of staff in the unit, consumers in the unit, and whether the unit travels to Rio Vista. The supervisor and manager of the Mobile Crisis unit provided the phone number (707-428-1131) for referrals (24 hour answering); stated that response time is usually about an hour; stated that the Unit had not been deployed to Rio Vista yet; and stated that a consumer was part of the Unit. Also, a question was asked about how success will be gauged—the Unit is surveying clients receiving Mobile Crisis services and meeting regularly with law enforcement and hospitals. Additionally, questions were asked about Mobile Crisis response for children and how does the unit work with Kaiser Permanente: protocols are in place for Mobile Crisis response for children and works closely with Children's Mental Health; and the Unit is working with Kaiser Permanente to develop protocols and working agreements. Finally, a written question was received asking "How does the Mobile Crisis unit/services work with minors detained at the juvenile detention facility? Would a person call the general number, 428-1131?" Yes, Mobile Crisis unit works with minors in a juvenile detention facility and yes, referrals should be made to 428-1131. Solano County will continue to provide regular updates and information to the community about Mobile Crisis expansion in the coming months.
- Consumer Staff/Personnel: Solano County received multiple comments and questions about inclusion of consumer staff and personnel within each MHSA Plans and work plans. Solano County identified the MHSA Plans and work plans (existing and proposed MHSA Plans) that include consumer personnel. Additionally, Solano County will provide monthly updates about MHSA at the CFAC meeting and solicit feedback about MHSA at these meetings.
- Proposition 1E: Solano County received multiple questions about which MHSA Plans or work plans were identified to be reduced if Proposition 1E passed. We notified the

community that MHSA Plans and work plans have not been identified for reduction if 1E passed on May 19, 2009.

- Children's Full Service Partnership: a questions was asked about how much Children's Full Service Partnership (FSP) worked with children in foster care. Solano County responded that some children in the Children's FSP are in foster care.
- Wellness and Recovery Work Plan: a community member asked if Wellness and Recovery services are provided to Rio Vista citizens. The response was yes services may be provided to Rio Vista citizens. Questions were also asked about how jobs are identified for clients and is there a social time for clients: each client is assessed, a care plan is developed, and clients are linked to appropriate services, including job placement and prevocational services; and yes, social activities are provided to clients in Wellness and Recovery.
- MHSA Steering Committee: stakeholders asked how a person may be nominated to the MHSA Steering Committee, and they were advised to contact Jayleen Richards, MHSA Coordinator, at 707-784-8320 or jmrichards@solanocounty.com. Only one nomination was received.
- MHSA Revenues: a written question was submitted: "How much more will be cut in each program?" The question does not clarify whether they are asking about possible reductions in MHSA funds due to 1E or due to the decline in MHSA revenue. Currently, the Mental Health Division does not know where DMH will make reductions within MHSA if Proposition 1E passes. Solano County has notified stakeholders and contractors that in the FY 2010-11 MHSA funds will decline: all CSS contracts are reduced in 2009-10 FY to prepare for the dip in funds, and additional reductions will occur in the 2010-11 FY. The Five Year Integrated Strategic Planning process is an opportunity to address the projected decline in MHSA revenue.
- Contact Information: a written question was asked if contact names and phone numbers of county staff and contractors that presented the MHSA Plans and work plans at the Stakeholders meeting on March 3 could be provided to the public. Solano County will provide this information at the next MHSA Stakeholders meeting on May 21, 2009.

I. UPDATE PROPOSALS TO CHANGE EXISTING PROGRAMS

Please see the budget narratives (Exhibits 5b) for changes to existing CSS programs (as noted above, pg. 7-14).

-END-