Nevada County Mental Health and Substance Use Disorder Board

Role of the MHSUD Board: Advise the Board of Supervisors and the local Behavioral Health Director regarding any aspect of the local behavioral health program, including:

Programs and Services	Review and evaluate the community's public behavioral health needs, services and facilities
Contracts and Agreements	Review agreements entered into by the BH department including the annual Mental Health Services Act update, state audits and key contracts
Outcome Data	Review the county's performance outcome data
Community Involvement	Ensure community involvement in all BH planning processes
Hire Director	Review and make recommendations on applicants for appointment as the local Behavioral Health Director

Note: These duties are outlined in Welfare and Institutions Code 5604.2

Current members of the Board

All Board members are appointed by the Board of Supervisors

Board must be comprised of at least 50% consumers or families of consumers (minimum 20% consumers)

One member will be from the Board of Supervisors

Board members or spouses cannot work for the County or local contracted agency (unless the person is a mental health consumer)

Key accomplishments for the MHSUD Board this year:

Sustained board engagement despite virtual meetings

Provided input on department budget priorities

Brought in a diversity of outside presenters

Monitored demand for mental health and SUD services

One key function: oversight of Mental Health Services Act funds

- What is MHSA?
 - MHSA, aka Prop 63, is funded by a 1% tax on personal income over \$1 million/per year in California
 - Since MHSA is tied to personal income, funding can be extremely volatile based on economic factors
 - Three-Year Program Plan, with Annual Updates to the Plan
 - Current 3-year plan: FY 20/21 through FY 22/23

5% of total funding is set aside for Innovation – of the remaining funding:

Prevention and Early Intervention (PEI)

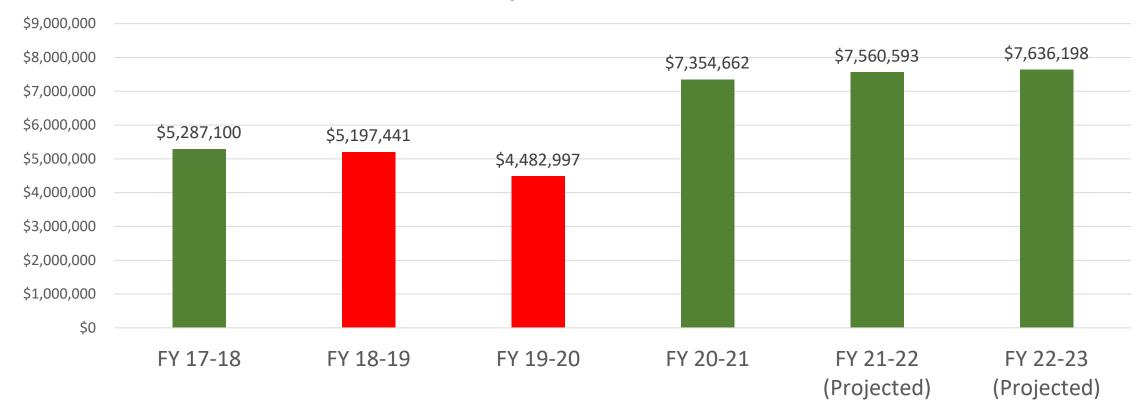
20%

Community Services and Supports (CSS) 80%

PEI programs aim to prevent mental health issues, and implement early strategies to keep serious mental illnesses from being disabling, if possible. 51% of funding set aside for individuals 25 years or younger.

recovery services to individuals living with serious mental illness or emotional disturbance. 51% of CSS funding set aside for Full Service Partnerships (FSP) — "whatever it takes" services. Funding can also be utilized for Workforce Education and Training (WET) programs and Capital Facilities and Technological Needs (CFTN).

Nevada County Annual MHSA Revenue



Fiscal Year	FY 17-18	FY 18-19	FY 19-20	FY 20-21	FY 21-22 (Projected)	FY 22-23 (Projected)
MHSA Revenue	\$5,287,100	\$5,197,441	\$4,482,997	\$7,354,662	\$7,560,593	\$7,636,198
% Change from Previous Year	9%	-2%	-14%	64%	3%	1%



Annual Update for Fiscal year 22/23

Most of the plan stays the same with the following changes:

- Contract increases for all existing contractors
- Support for HOME Team
- Electronic Health Record (EHR) funding

Funded Programs in FY 22/23

Community Services & Supports - \$5.48 million

- Full Service Partnership
- Network Providers
- Outpatient Services
- Crisis and Mobile Crisis Services, including peer support
- Intensive & Alternative Early Intervention for Youth
- Family Education & Support
- North San Juan Mental Health Services
- Homeless Services Case Management & Therapy
- Forensic Liaison
- Veterans' Services & Therapy
- Supportive Housing & Project Based Housing

Prevention & Early Intervention - \$1.36 million

- Bilingual Therapy
- Perinatal Depression
- Early Intervention for Youth in Crisis
- Homeless Outreach
- Senior & Disabled Outreach
- Mental Health Screening in High Schools
- Youth Mentoring/Youth Empowerment
- Youth Wellness Center
- Family Support/Parentin gClasses
- Community Crisis Response
- LGBTQ+ Support
- Community MH Training
- LatinX outreach
- Suicide Prevention and Intervention

Workforce Education & Training - \$112K

- Intern Supervision
- Training

Innovation - \$547K

 Homeless Outreach & Medical Engagement (HOME) Team

Technological Needs - \$600K

Electronic Health Record

Adult FSP Outcomes: FY 20/21









87%

SUCCESSFULLY REMAINED HOUSED

60% Reduction in homeless days



84%

AVOIDED PSYCHIATRIC HOSPITALIZATION

78% Reduction in days of psychiatric hospitalization



92%

AVOIDED ARREST OR INCARCERATION

84% Reduction in jail days

Children's FSP Outcomes: FY 20/21







OF CAREGIVERS
REPORTED IMPROVEMENT
IN PARENTING SKILLS



94%

SUCCESSFULLY REMAINED HOUSED



95%

AVOIDED
PSYCHIATRIC
HOSPITALIZATION



98%

AVOIDED NEW LEGAL INVOLVEMENT



88%

REPORTED A C AVERAGE OR IMPROVEMENT IN ACADEMIC PERFORMANCE

Community Services & Supports – GSD FY 20/21



188 individuals in crisis received peer support at the **Emergency Department or Crisis Stabilization Unit**

35% 調

of individuals admitted to the **Crisis Stabilization Unit on** 5150 holds were stabilized without hospitalization



Prevention and Early Intervention (PEI) – Youth FY 20/21

263

Nevada County high school youth screened for mental health needs



192

Eastern County
high school youth
supported at
school-based
Wellness Centers



70% of the 10 mothers in the Moving Beyond Depression program showed improvement in depression symptoms



of 107 children served by Stanford Sierra Youth & Families were stabilized at home or in foster care



19

youth in crisis in Tahoe/Truckee received immediate access to alternative nature-based therapy mentorships pending connections to appropriate levels of long-term care



35

Boys and Girls Club youth members in the Tahoe/Truckee region completed the "Positive Action" curriculum to promote social & emotional learning



89%

of the 90 Tahoe/Truckee families who participated in parenting classes demonstrated improved parenting skills



9

young adults
experiencing
homelessness received
case management &
referrals to services



of 11 youth mentorships for elementary schoolers were sustained throughout the year

Board request:

- Approval of the annual update to the MHSA Three Year Program and Expenditure Plan in the amount of \$8,100,980
 - This provides authorization to spend MHSA funds in accordance with the programs described within the plan and up to this amount
- Approval of the Annual Progress Report from 2020-21