

MENTAL HEALTH ADVISORY BOARD

BH Director Briefing June 17, 2021 Erik G. Riera

BH BUDGET

Review of funding opportunities in State Budget

Still unclear

Funding set asides for BH services, but most are very specific and limited to statewide initiatives

All time limited, one time funding

Will have a clearer picture next week

Things we are watching for:

- Capital funding to support alternatives to locked care and inpatient care
- Increases in block grant allocations (MH and SUD)
- Sustainability of any projects that are started with one-time funds

BH BUDGET

Areas of concern for me

- Lack of funding to support indigent care in FY 21/22
- Positions that are unfunded in BH: 16 Full-time positions
- Continued recruitment and retention issues
 - Bilingual staff
 - Growing vacancies in Psychiatry
 - Extended periods of time to hire staff- backlogs in Personnel
 - Loss of staff to school systems
 - BH lost 3 full time clinicians
 - Community providers seeing the same trends
- Shift of the State to a new reimbursement model through CALAIM

JAIL BEHAVIORAL HEALTH SERVICES

County BH will be transitioning out of direct services at the Jail

New vendor with expertise in Jail BH services will be selected and contract going to the Board of Supervisors on June 29

Role of County BH will shift from:

- Direct Service Provision ==== → Oversight of services and the contract
- Annual review of medical and BH services with a team from BH and Health
- Quarterly QI Meetings with the vendor, Sheriff, BH and Sheriff
 - BH Director will have direct involvement in oversight

LEGISLATIVE ADVOCACY

Recent Bills of Concern

- Governor proposal to close State Hospitals to LPS conservatees, and individuals requiring a restoration to competency
 - County position- OPPOSED, advocacy with local delegation

AB 451

- Require individuals experiencing a psychiatric emergency to be served on a local level, including those with commercial insurance
 - County position- OPPOSED, advocacy with local delegation

ASSISTED OUTPATIENT TREATMENT

Legislation requiring Counties to opt-in on July 1

• UNLESS, opting in would require reductions in services

BH brought a board letter to the Board of Supervisors on June 8 opting out of the program

- Board passed the opt-out provision for 1-year, with a report back and recommendations next June
- Two supervisors voted no to the opt-out or the alternative 1-year provision

CRISIS DIVERSION PROGRAM- PROPOSED

On the campus of the Behavioral Health Center

Alternative to hospitalization- place to divert people who don't need the high level of care of a psychiatric hospital, but do need extra supports

County to apply for grant funds from the State once released to support construction

Budget sets aside match required to apply (25%) and we have retained an architect to develop a preliminary design to ensure we are competitive in applying



OTHER PROGRAM CONSIDERATIONS

Build a facility that will support children in crisis, also as an opportunity to divert from inpatient care.

Looking at a CHFFA grant to support this initiative

• Grant due this fall

Do not have an identified site yet

Part of a larger discussion around shifting model for CSP services to a diversion model that is more community based with specific resources attached to the program.



<END>