BI-COUNTY MENTAL HEALTH

Bi-County Mental Health, also referred to as Sutter-Yuba Mental Health Services (SYMHS), a Division of the Sutter County Human Services Department, provides mental health and substance abuse services to residents of both Sutter and Yuba Counties under a joint powers agreement entered into between the Counties of Sutter and Yuba in 1969. Subsequently, in the mid-1970’s, by resolution of both Boards of Supervisors, it was determined that drug and alcohol services would also be provided under the auspices of Bi-County Mental Health. In FY 2005-06 budget unit 4-104 was established for the Mental Health Services Act (MHSA) funding that Sutter-Yuba Mental Health Services receives. Mental Health provides direct services to clients and families, as well as maintaining contracts with various community organizations that also provide services to the Bi-County population.

Department Request

The Requested Total Budget for the combined Mental Health/Drug and Alcohol Budget for FY 2007-2008 total $23,220,530. This is a decrease of $820,148 from the FY 2006-2007 Adopted Budget. The Department’s Total Available Financing is requested to total $23,220,530. This is a decrease of $820,148 from last year. There are no unreimbursed costs in this budget. There is no County General Fund contribution to the Mental Health Budget. In prior years, Yuba and Sutter Counties shared on a 50/50 basis the Maintenance of Effort (MOE) share of State Hospitalization utilization costs.

Over ten years the number of unique clients served by Mental Health increased from 2,410 to 5,430 in FY 2005-06. This is a 125% increase overall, or an average compounded annual growth of 8.5% per year. This dramatic increase in the demand for Mental Health services is due in part to expanded children’s services supported by Early Periodic Screening Diagnosis and Treatment (EPSDT) funds made available beginning in 1995, the Medi-Cal Consolidation that became effective April 1, 1998, and the growth in the local population. This does not include anticipated growth in services as a result of the Mental Health Services Act (MHSA) funding. MHSA-related activities and policy issues will be addressed in that budget unit narrative.

Under Medi-Cal consolidation, since 1998 Sutter-Yuba Mental Health Services has been the Mental Health Plan for the 36,500 Medi-Cal beneficiaries from Sutter and Yuba Counties. Mental health treatment is an entitlement under Medi-Cal. Sutter-Yuba Mental Health is responsible for assessing and treating, or referring for treatment, all bi-county Medi-Cal eligible individuals who meet medical necessity criteria and seek Specialty Mental Health Services on either an inpatient or outpatient basis. In addition to providing services directly, Mental Health has established contracts with licensed therapists in the local community, and statewide to serve area children who have been placed out-of-home.

Two major factors are affecting the FY 07-08 Mental Health budget. (1) Since FY 03-04 both local and statewide Mental Health realignment allocations have remained flat, even though the costs of doing business have continued to increase. Statewide growth in realignment funding has gone to pay for increasing caseloads in Child Welfare Services foster care and IHSS services. The Mental Health Division uses realignment funding as match to draw down the federal contributions to MediCal. (2) Drug and Alcohol funding has also been flat or declining slightly for the past three fiscal years.

Due to these structural problems for FY 07-08 the Division is recommending a reduction in staff, and in associated outpatient treatment services. No change in staffing for the psychiatric health facility is recommended. For FY 07-08 it is proposed that identified staff be reassigned to Mental Health Services Act-funded programs in Budget Unit 4-104 where they will provide new services consistent with the intent of the MHSA. It is recommended that your Board reassign 11 existing full time positions and a portion of the time of 24 other existing positions within and between the Mental Health Budget (4-102) and the Mental Health Services Act Budget (4-104), effective July 1, 2007. Our objective is to keep the Mental Health Budget (4-102) and the Mental Health Services Act budget (4-104) in balance and to fully utilize all available funding in a fashion most advantageous to our counties.

For FY 07-08 no Mental Health staff layoffs are being recommended. However, if the statewide structural problems in realignment funding are not addressed, in future years the staff and services within both the
Mental Health and Mental Health Services Act budgets will likely need to be reduced, and some staff may need to be laid off, in order to balance revenues and expenditures.

The Mental Health Division has already spent a great deal of effort and staff time in the implementation of HIPAA requirements. Although HIPAA is a federal mandate, there has been no new funding for the required changes, and the Division has had to absorb the costs out of existing funding. During FY 2007-08, the Division will again be required to expend significant staff time to focus on continuing HIPPA implementation.

As a result of mandates contained in our annual Performance Contract with the State Department of Mental Health, Mental Health is conducting formal utilization review and compliance activities to ensure that the Division does not inadvertently engage in fraud or abuse and to ensure that there are not excessive errors in billing of federal and state funds. During FY 2007-08 the Division will continue to undergo a number of audits and program reviews conducted by the State or entities performing under contract with the State, placing the Division at risk for audit exceptions and lost revenue due to very minor errors in documentation.

Thus, it is recommended that one Mental Health Therapist position be deleted from this budget and your Board approve the creation of a new management level position, Manager of Utilization Review, Quality Improvement and Compliance (URQIC), at MGT Range 46 ($5,821.31 per month at step 1). Seventy five percent of the cost of this position will be reimbursed by federal funds (through revenue line item 45355) and a proportionate share of the cost will also be reimbursed by the Mental Health Services Act budget. It is anticipated that with the addition of this management position disallowed billings and lost revenue will be significantly reduced and there will be net savings to the Mental Health and Mental Health Services Act Budgets. It is further recommended that at the budget hearings your Board authorize filling this position effective July 1, 2007.

Mental Health wishes to continue to contract with Victor Community Support Services, Inc., dba Sutter-Yuba FICS, to provide assessment and treatment services to youth on school campuses, at the juvenile hall, and to CPS involved children in Sutter and Yuba Counties. Their contract has grown significantly in response to identified community need. These services are funded primarily through a combination of MediCal and EPSDT, with additional funding from federal IDEA/26.5 funds and Mental Health realignment funds. The contract with Victor Community Support Services, Inc. allows children and families to receive services they might otherwise not be able to access due to the high level of demand currently being experienced by our internal Mental Health programs.

Mental Health anticipates that the last phase of the remodel of the mental health building (the psychiatric health facility and psychiatric emergency services) that was begun in FY 2005-06 will be completed in early FY 2007-08.

Mental Health will continue to deliver an array of drug and alcohol services to local residents under the SAPT and Negotiated Net Amount contracts with the State Department of Drug and Alcohol Programs, CalWORKS and Drug Court funding. The Safe and Drug-Free Schools prevention grant will end in December 2007.

Due to funding shortages, in March, 2007 two Drug and Alcohol treatment positions were moved to budget unit 4-104 (MHSA Services). Also, Drug and Alcohol Services provided through the Yuba County Victim Witness Program were discontinued. The START Adolescent Outpatient Treatment Program begun in FY 2004-05 was discontinued as well; however, a program to serve youth with both mental health and substance abuse needs is being provided through the Mental Health Services Act Transition Aged Youth full-service partnership instead. Affected staff was transferred to alternative positions within the Mental Health Division. Drug and Alcohol prevention, assessment and treatment programs will be continued, but will be reduced due to funding limitations.

Mental Health provides a number of judicially-linked programs, including PC 1000 Drug Diversion services to a large number of people referred by the courts in both counties; mental health treatment, substance abuse counseling, plus psychiatric services to youth in the juvenile hall and the youth guidance center; inmates of both jails each receive about 4 hours of psychiatric services, 20 hours or more of mental health crisis services and substance abuse counseling services per week; and the Division has
been providing substance abuse treatment through two local adult drug courts in cooperation with each Probation Department. The largest judicially-linked program is the Substance Abuse and Crime Prevention Act (SACPA) of 2000 (Proposition 36) program, which began in 2001. SACPA allows people arrested for simple drug offenses the option of treatment rather than incarceration. Sutter County SACPA clients are serviced through the Bi-County program. Yuba County is delivering its SACPA services separately, through its FOR Families program. A majority of those seeking SACPA services in both Counties are multiple offenders with a history of felony offenses and serious drug-abuse problems. A policy issue of concern is that the established funding for this program ended after FY 2005-06, however the statutory requirement to provide SACPA services remained. Currently, the level of funding being proposed for this program is not sufficient. The State Legislature is in the process of addressing long-term funding, but at this time, the funding issues have not been resolved. In the absence of a legislative solution, other drug and alcohol services would have to be eliminated in order to continue to provide services under the mandate created by the passage of SACPA.

First Steps provides an intensive day treatment program to pregnant women or women with small children. First Steps moved to a larger location in FY 2003-04. As a result, the treatment capacity increased from 30 to 40. First Steps is widely recognized to be a very effective treatment program.

The Division is requesting that the Board approve continuation of the Blended Funding Agreements developed between Mental Health and both Sutter and Yuba County Social Services Departments during FY 1997-98. This Blended Funding arrangement has allowed the Mental Health Division to provide enhanced treatment services to the community while also increasing the amount of revenues available to the Social Services Departments through an enhancement of local monies used as match for State and Federal Child Welfare Services dollars.

The State offset costs are important to monitor since the State Department of Mental Health has absolute control over setting the State Hospital daily rate and the ancillary costs in that setting. There are no local clients held under civil commitment at a State Hospital at the present time, and the Division has no expenditures budgeted for this purpose in FY 2007-08. In the event that placement of a client in the State hospital becomes necessary, the Division will have to seek a future modification to this budget.

Compared to the FY 2006-07 Adopted Budget, the requested decrease for Salaries and Benefits is $266,862. The primary reason for this decrease is that some positions are being eliminated and other are being reassigned, in total or in part, to the Mental Health Services Act budget unit.

Compared to the FY 2006-07 Adopted Budget, the request for services and supplies is reduced by $314,580. Computer Hardware items being requested are:

10 Personal Computers, Monitors and Related Software $20,000

10 Printers $ 8,000

Compared to the Adopted Budget for FY 2005-2006, the Division’s request for Other Charges has decreased by $168,206. This is due to the fact that there is a reduced amount budgeted for Plant Acquisition for the completion of the last phase of the Mental Health remodel.

No Intrafund Charges are requested.

Compared to the FY 2006-07, the request for Fixed Assets is reduced by $20,500. Fixed Assets being requested are:

1 Upgrade to the current Gaynor Telephone System and Voicemail System making it possible to move the phones from Children’s Services onto the Mental Health System with adequate voicemail and room for expansion that will allow for additional extensions to be installed as needed.

2 Document Imaging System. Currently Mental Health uses several storage facilities and boxes to store records. An updated document imaging system would allow for records to be stored on a server that could be accessed as needed to obtain records.
Total available financing decreased by $820,148 (3.41%) for this budget. Anticipated Fund Balance is $436,021 more than last year's Fund Balance and MediCal and EPSDT revenues have been reduced by $956,615. MVIL revenue has been budgeted at an increase of $219,778 (14.22%) over last year's level even though there may need to be adjustments made later due to uncertainty at the State level.

The Mental Health Division is including in this Proposed Budget a list of ongoing contracts. By approving the Proposed Budget, the Board of Supervisors approves these contracts and, thereby, authorizes the County Auditor to pay claims related to these ongoing contracts until such time as formal contracts are completed (anticipated to be completed no later than December 2006).

**Mental Health Programs**

- Stephanie Hansel (Hearing Officer) 8,500
- Linda Kestermont (Patient’s Rights) 9,600
- Jeffrey Marshall (Hearing Officer) 8,000
- Y-S Mental Health Association (formerly Alliance for the Mentally Ill) 6,500
- QuEST-Community Resource Services (Supported Employment/Job Coaching) 179,950
- Rich, Fudge, Morris & Iverson (Hearing Officer) 8,000
- Donald Thommen (Hearing Officer) 6,000
- Susan Williams (Patient’s Rights) 5,000
- Janece McKenzie (Interpreter) 8,000

**Managed Care Network Providers**

- Michael Barnett, MD 6,000
- Kenneth Baum, Ph.D. 6,000
- Joan Beck, MFT 6,000
- Elizabeth Blake, MFT 6,000
- Jeanette Callow, MFT 6,000
- Cathy Ciampa, MFT 6,000
- Sidney Comier, Ph. D. 6,000
- Robert Fromm, MFT 6,000
- Susie Gonsalves, LCSW 6,000
- Hiawatha Harris, MD 6,000
- Pat Hurt, LCSW 6,000
- Karen Jacka, LCSW 6,000
- Brian Jacobs, LCSW 6,000
- Amy Kline, Ph. D 6,000
- Mell LaValley-Sandoval, MFT 6,000
- Jim Lazansky, LCSW 6,000
- L. Mader, M.D. 6,000
  - Kenneth McCarty, MFT 6,000
  - Mona McNelis-Brodley, LCSW 6,000
  - Lisa Metcalf, LCSW 6,000
  - Katherine Moore, MFT 6,000
  - Edward Olvera, MFT 6,000
  - James Pannell, MFT 6,000
  - Iris Pasquet, Ph. D 6,000
  - Doris Sami, LCSW 6,000
  - John Shobe, MFT 6,000
  - Yana Slade, MFT 15,000
  - Sharon Stewart, LCSW 6,000
  - Kristen Smith, LCSW 6,000
  - Spencer Van Dusen, MFT 6,000
  - Robert Venkus, MFT 6,000

**Alcohol and Drug Abuse Program**

- Drug Court Services 30,000
- TBA 5,000
### Mental Health - Physicians

<table>
<thead>
<tr>
<th>Name</th>
<th>Billing Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irving Baran, M.D.</td>
<td>137,000</td>
</tr>
<tr>
<td>Edward Perry Benbow, M.D.</td>
<td>131,500</td>
</tr>
<tr>
<td>Hugo Bierteumpfel, M.D.</td>
<td>131,500</td>
</tr>
<tr>
<td>Bruce Burns, M.D.</td>
<td>223,000</td>
</tr>
<tr>
<td>Michael Cosgrove, M.D.</td>
<td>194,700</td>
</tr>
<tr>
<td>Zhila Haghbin, M.D.</td>
<td>188,000</td>
</tr>
<tr>
<td>Ronald Hayman, M.D.</td>
<td>236,500</td>
</tr>
<tr>
<td>Oscar Jaurigue, M.D.</td>
<td>245,000</td>
</tr>
<tr>
<td>V. Meenakshi, M.D.</td>
<td>44,000</td>
</tr>
<tr>
<td>Rajinder Randawa, M.D.</td>
<td>224,500</td>
</tr>
<tr>
<td>Gerardo Toribio, M.D.</td>
<td>52,000</td>
</tr>
<tr>
<td>Chunlin Yang, M.D.</td>
<td>110,000</td>
</tr>
<tr>
<td>J. S. Zil, M.D.</td>
<td>219,000</td>
</tr>
</tbody>
</table>

### Managed Care Providers - Physicians

<table>
<thead>
<tr>
<th>Name</th>
<th>Billing Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>H. Auluck, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>L. Barley, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>A. Bates, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>R. Blanco, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>P. Cheema, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>C. Collins, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>J. Fong, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>M. Grimley, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>L. Hirschault, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>W. Hughes, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>S. Hunter, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>J. Kahn, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>K. Koka, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>C. Mason-Hufless</td>
<td>6,000</td>
</tr>
<tr>
<td>M. Nwangburlua, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>J. Orgel, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>F. Romman, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>D. Rue, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>S. Shaw, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>F. Stoddard, M.D.</td>
<td>6,000</td>
</tr>
<tr>
<td>TBA</td>
<td>9,000</td>
</tr>
</tbody>
</table>

### Professional and Special Medical Services

<table>
<thead>
<tr>
<th>Name</th>
<th>Billing Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Linda Baran, Ph.D. (Clinical Psychologist)</td>
<td>105,500</td>
</tr>
<tr>
<td>Karen Cartoscelli, RN</td>
<td>8,500</td>
</tr>
<tr>
<td>Marilyn Elliot, RN (PHF Physicals)</td>
<td>20,999</td>
</tr>
<tr>
<td>Fremont Medical Group (Lab Services)</td>
<td>1,000</td>
</tr>
<tr>
<td>Joseph Gannon, Ph.D. (LPS Conservatorship)</td>
<td>6,000</td>
</tr>
<tr>
<td>Dale McBride, P.A.</td>
<td>55,000</td>
</tr>
<tr>
<td>Cynthia Nielson, P.A. (PHF Physicals)</td>
<td>9,600</td>
</tr>
<tr>
<td>Rideout Hospital (Lab Services)</td>
<td>500</td>
</tr>
<tr>
<td>Gary Snodgrass, Pharm.D. (Pharmacy Consultant)</td>
<td>100,000</td>
</tr>
<tr>
<td>Donald Stembridge, Ph.D. (Psychological Evaluations)</td>
<td>9,600</td>
</tr>
<tr>
<td>Sutter Buttes Imaging</td>
<td>1,500</td>
</tr>
<tr>
<td>Sutter Buttes MRI</td>
<td>500</td>
</tr>
</tbody>
</table>

### Alcohol and Drug Testing

<table>
<thead>
<tr>
<th>Service</th>
<th>Billing Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support Care Services</td>
<td>25,500</td>
</tr>
</tbody>
</table>

### Support Care Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Billing Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victor Community Support Services, Inc. (FICS)</td>
<td>4,143,129</td>
</tr>
<tr>
<td>Willow Glen (Augmented Family Care Home Services)</td>
<td>17,000</td>
</tr>
<tr>
<td>Sacramento Children’s Home Society</td>
<td>38,400</td>
</tr>
<tr>
<td>Charis Youth Center</td>
<td>125,000</td>
</tr>
</tbody>
</table>
Full Circle Program
Families First
Children’s Hope FFA
Milstous Children’s Program
Phoenix Programs, Inc.
The Child Therapy Institute of Marin
True to Life Children’s Services
Youth for Change
New Directions to Hope
Redwood Children’s Services
Summitview
River Oak Center for Children

Alcohol and Drug Abuse
Casa de Esperanza
Community Recovery Resources
Cornerstone
Devereaux
Friday Night Live
Sutter County Schools
Latino Commission
Northern California Treatment Services
Pathways Combined
Progress House
Skyway House
TBA

Other Contracts
Beverly Enterprises, Inc.
BHC Heritage Oaks/Sierra Vista
Center for Behavioral Health
Sutter Center for Psychiatry
Mt. Diablo Medical Pavilion
Sun Garden Rest Home
Feather River Manor
Sunrise Garden Rest Home
Victor Residential Center
Crestwood IMD and Patch Services
Salvation Army Homeless Services
Sutter County Public Guardian
Yuba County Public Guardian
Yuba County Probation (Meals)
Yuba County Sheriff (Laundry)
Fremont Medical Center (Special Meals)
Walgreen’s Pharmacy

The Mental Health Services Act budget unit (4-104) was created in fiscal year 2005-06. The Mental Health Services Act (MHSA) requires that MHSA funding be contained in a unique budget unit and operating fund, and forbids the co-mingling of other mental health funds and MHSA funds.

The Mental Health Services Act was a voter initiative passed in November of 2004. Under this initiative individuals with incomes in excess of one million dollars per year are levied an additional 1% income tax to pay for expanded mental health services statewide. The Mental Health Services Act requires the development of several specific plans; the Community Services and Supports Plan was the first of these to be developed and approved. MHSA programs may be expanded or discontinued over time depending upon costs, available resources and the changing needs of the community.
Department Request

While the realignment funding in Mental Health Budget Unit 4-102 has been flat, and there are not sufficient funds to cover the costs of continuing all of the established treatment services in that budget unit, new opportunities have occurred as a result of the passage of the MHSA. It is important to note, however, that in real buying power, the additional MHSA funding in 4-104 is only partially compensating for the lost buying power in the Mental Health budget, 4-102. Only modest overall expansion of services has been possible.

In order to fully take advantage of the available funding in these two budget units, the Mental Health Division is proposing that identified staff in budget unit 4-102 be reassigned to Mental Health Services Act-funded programs in Budget Unit 4-104 where they will provide new services consistent with the intent of the MHSA. It is recommended that your Board reassign 11 existing full time positions and a portion of the time of 24 other existing positions within and between the Mental Health Budget (4-102) and the Mental Health Services Act Budget (4-104), effective July 1, 2007. Our objective in doing this is to keep the Mental Health Budget (4-102) and the Mental Health Services Act budget (4-104) in balance and to fully utilize all available funding in a fashion most advantageous to our counties. This will allow the Mental Health Division to avoid staff layoffs, and to continue to maximize the provision needed mental health treatment services to our bi-county community.

By the end of FY 07-08 if most of the funding available in budget unit 4-104 is not utilized to provide treatment services it will be “swept” back to the state MHSA fund and will be lost to our counties. By design, the MHSA is rewarding counties that aggressively utilize MHSA funds to provide treatment services. Counties who are slow to develop services are similarly being penalized. Unfortunately, it is not possible to develop and retain significant MHSA reserves even though this funding source (taxing millionaires) is widely recognized to be very volatile with a fourfold change in available funding possible from year to year.

For FY 2007-08 Mental Health will receive $1,865,108 in additional MHSA funds to operate the programs identified in the approved Community Services and Supports plan. With unexpended carry-over funds from FY 2005-06 and FY 06-07, and anticipated program-generated revenues, the total budget for FY 07-08 is $4,926,620. Expanded services within the established MHSA service components are being recommended.

In addition, the Mental Health Division has received formal notification from the State Department of Mental Health that the Division may submit a supplemental CSS Plan and, beginning in July, 2007, is eligible to receive an additional $703,192 per year in ongoing CSS MHSA funding. This is due to higher than predicted tax revenues associated with this 1% per year tax on millionaires. A community planning process is underway and it is anticipated that the Mental Health Division will bring a proposed plan to expand ongoing CSS services to your Board this spring in order to fully take advantage of this additional funding. This additional funding is not contained this budget proposal since these funds have not yet been formally allocated to Sutter-Yuba Mental Health by the state.

Mental Health has been working diligently to begin the new MHSA services. Inevitably there have been predictable delays in acquiring suitable additional treatment space (some remodeling was required), developing contracts, and hiring additional staff. Key staff has been hired for all program elements. All of the MHSA treatment components include consumer staff (clients or their family members) who share in responsibility for service provision and also in planning, implementation and evaluation of these services.

As a requirement of the initiative, all MHSA-funded services must be provided to clients seeking these services on a voluntary basis. The CSS programs currently under development, by regulation, serve those individuals who have a serious mental illness and who would already be eligible to receive mental health services through our bi-county program due to their diagnosis and degree of functional impairment. Therefore, some additional growth in number of clients served is anticipated as eligible but currently unserved clients are identified through outreach activities. Mostly, these new programs will provide existing clients with expanded service opportunities.
The full-service partnership for children aged 5 and under will begin offering services in mid-April when remodeling of the leased space is completed. The Urgent Services program for youth began providing expanded services in June, 2006 and many youth, most at risk of hospitalization, have benefited from these services. The transition-aged youth (16-25) full service partnership is operating at capacity, providing 10 at risk youth with comprehensive services. Initial results have exceeded expectations. These youth are voluntarily seeking services on a daily basis, and are showing improved functioning in maintaining housing, avoiding hospitalizations and arrests. A co-occurring mental health and substance abuse treatment element is being added to this treatment component.

Mental Health finalized an agreement with the Salvation Army, facilities in Marysville have been leased and remodeled, and the adult/older adult Wellness and Recovery program opened its doors in February. This program will serve about twenty at risk adults and older adults in a full-service partnership while many others will access the Wellness and Recovery center. Key Older Adult outreach staff has been hired, they have been provided with specialty training and are now connecting with a variety of organizations and have begun serving older adults.

Two bi-cultural, bi-lingual Latina therapists are now providing outreach services, as is a Hmong-speaking therapist. We have also hired a Punjabi-speaking individual who is in the process of earning her Masters in Counseling. She is currently being trained in substance abuse treatment and will work as a Resource Specialist until she receives her Master’s degree, providing specialized services to the Asian Indian community. A Memoranda of Understanding was approved with Del Norte clinics, and these ethnic outreach staff is being co-located at these clinics, interfacing with primary care staff in order to reach out to these underserved populations. They will similarly provide services at the Sutter County Health Department, and other sites in Yuba County are planned.

Four Resource Specialists (a parenting educator, a housing specialist, a vocational specialist and a consumer self-help specialist) have been hired and are providing these important services to MHSA and Mental Health clients.

A new, web-based resource guide, known as the Network of Care, has “gone live” in our community, providing up-to-date information on local resources and events. This is a statewide network that highlights mental health services and news as well as all other important resources.

Discussions are underway and there has been conceptual agreement with the Sutter County Housing Authority that will allow them to utilize up to $750,000 in one-time MHSA funds to expand the availability of affordable housing to mental health clients in the bi-county area. It is anticipated that a very specific proposal to utilize these funds will be brought to both the Sutter and the Yuba County Boards of Supervisors during FY 07-08.

The MHSA was a complex initiative. Ultimately, in addition to the current funding coming to Sutter and Yuba Counties for treatment services through the approved CSS plan, Bi-County Mental Health will be eligible to apply for additional funds to enhance the local mental health workforce through the Training and Education Plan, develop additional information technology capability or enhance local facilities through the Facilities and Information Technology Plan, develop new and innovative services through the Innovation plan, and develop prevention and early intervention services through that plan. In addition to our local one-time housing funds, about $75 million dollars are due to be made available statewide annually for several years for the development of more affordable housing for our disabled and low income clients. Several of these plans, in which expansion of services, facilities or technology will be proposed, will be developed and brought to your Board during FY 07-08.

The request for services and supplies is $808,721. Included within this amount are:

The Mental Health Division has identified that the acquisition of an updated data management system is a very high priority. During FY06-07 the Human Services Department convened a workgroup to evaluate shared data management needs. During FY 07-08 it is recommended that a consultant be selected to assist the Division in the selection, acquisition and implementation of a new data management system. Mental Health is proposing to the state that available MHSA funds be used to pay for this consultant and also that MHSA funds largely be used to pay for this new data management system.
The request for Other Charges is $1,041,068.

No Intrafund Charges are requested.

The request for Fixed Assets is $48,000. Fixed Assets being requested are:

(1) Gaynor Phone System for the Holly Oak facility including voicemail capabilities.
(2) Upgrade to the current Gaynor Telephone System and Voicemail System making it possible to move the phones from Children’s Services onto the Mental Health System with adequate voicemail and room for expansion that will allow for additional extensions to be installed as needed.
(3) Document Imaging System. Currently Mental Health uses several storage facilities and boxes to store records. An updated document imaging system would allow for records to be stored on a server that could be accessed as needed to obtain records.

Total available financing for this budget is anticipated to be $4,926,620.
The Mental Health Division is including in this Proposed Budget a list of ongoing contracts. By approving the Proposed Budget, the Board of Supervisors approves these contracts and, thereby, authorizes the County Auditor to pay claims related to these ongoing contracts until such time as formal contracts are completed (anticipated to be completed no later than December 2007).

QuEST-Community Resource Services (Supported Employment/Job Coaching) 179,950
Ronald Hayman, M.D. 236,500
Linda Baran, Ph.D. (Clinical Psychologist Children’s Services) 105,500
TBA 30,000
Salvation Army Homeless Services 150,000