



Sutter-Yuba Mental Health Services

Mental Health Services Act Fiscal Year 2009/10 Annual Update to The Three-Year Program and Expenditure Plan

EXHIBIT A

COUNTY CERTIFICATION MHSA FY 2009/10 ANNUAL UPDATE

County Name: Sutter-Yuba Mental Health Services

County Mental Health Director	Project Lead					
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1965 Live Oak Blvd P.O. Box 1520 Yuba City, Ca 95992						

I hereby certify that I am the official responsible for the administration of public community mental health services in and for said County and that the County has complied with all pertinent regulations, laws and statutes for this Annual Update. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code Section 5891 and California Code of Regulations (CCR), Title 9, Section 3410, Non-Supplant.

This Annual Update has been developed with the participation of stakeholders, in accordance with CCR, Title 9, Sections 3300, 3310(d) and 3315(a). The draft FY 09/10 Annual Update was circulated for 30 days to stakeholders for review and comment and a public hearing was held by the local mental health board or commission. All input has been considered with adjustments made, as appropriate.

All documents in the atta	ached FY 2009/10 Ar	FY 2009/10 Annual Update are true and correct.			
Signature	 Date	Title Local Mental Health Director/Designee			

EXHIBIT B

Description of Community Program Planning and Local Review Processes MHSA FY 2009/10 ANNUAL UPDATE

County Name: Sutter-Yuba Mental Health Services

1. Briefly describe the Community Program Planning Process for development of the FY 2009/10 Annual Update. It shall include the methods for obtaining stakeholder input.

Sutter-Yuba Mental Health Services' Annual Update maintains programs identified in our Three Year Program and Expenditure Update Fiscal Year 2008-09. Our proposal maintains current programs at current service levels. This annual update was made available for public review for 30 days at Sutter-Yuba Mental Health Services, County Libraries, and the County Administrators' Offices. In addition, this annual update was posted on our County website along with the original plan and the augmentation to the plan. Clients, family members, and stakeholders continue to be involved in the ongoing planning and implementation of the CSS Plan. Participation occurs throughout the organization. A brief description of some of the ways in which participation occurs is below:

The Mental Health Board membership is composed of consumers, family members and community stakeholders.

Consumer employees attend the monthly MHSA and Mental Health Management-Supervisor meetings. They assist in creating systems navigation tools, and provide commentary on the process.

Consumers attend weekly MHSA FSP (Full Service Partnership) and non-FSP meetings and give input on system design issues and make recommendations for improvement.

2. Identify the stakeholder entities involved in the Community Program Planning Process.

The participating stakeholders included:

SYMHS Children's Mental Health	Mental Health Advisory Board			
SYMHS Ethnic Services	Yuba County CPS			
SYMHS Drug and Alcohol	Harmony Health Clinic			
SYMHS Resource Services	Yuba County Probation			
Sutter County Probation	Yuba County BOS			
Sutter County K-12	Sutter County CPS			
Parents of child consumers	SYMHS PES			

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SYMHS CSOC	SYMHS Adult Services
FICS provider	Sutter County BOS
Domestic Violence Services	Yuba County CalWorks
provider	
Hmong American Association	Sutter County Employment Services
Yuba City Police Department	Yuba City Unified School District
Victor Services	Family members
Consumers	Parent Partner
Peer Advisors	Family Intervention and Community
	Support
Sutter County Sheriff	Salvation Army
Parent disabled Adult	Sutter-Yuba Friday Night Live
Marysville Joint Unified School	Sutter County Office of Education
District	
Betterday Provider	Foster Parents Association
Options for Change	First Steps
Yuba County Department of Social	Yuba County APS
Services	
SYMHS Ethnic Outreach Services	

3. Describe how the information provided by DMH and any additional information provided by the County regarding the implementation of the Community Services and Supports (CSS) component was shared with stakeholders.

Information is shared with the Sutter-Yuba Mental Health Board at their monthly meetings. The Mental Health Board membership is composed of consumers, family members and community stakeholders. On each agenda there is an item called Program Presentation updates where key staff discuss their programs successes and challenges. Information is also provided on the Sutter-Yuba Mental Health Services website (with a link to the California State Department of Mental Health - MHSA Home Page), Network of Care website for Sutter County, and Network of Care website for Yuba County. The internet addresses are listed below:

http://www.co.sutter.ca.us http://www.Sutter.networkofcare.org http://www.Yuba.networkofcare.org

4. Attach substantive comments received about the CSS implementation information and responses to those comments. Indicate if none received.

None

5. List the dates of the 30-day stakeholder review and public hearing. Attach substantive comments received during the stakeholder review and

EXHIBIT B

public hearing and responses to those comments. Indicate if none received.

The 30 day public comment process for review of the MHSA Plan, Fiscal Year (FY) 2009/10 Annual Update to the Three-Year Program and Expenditure Plan commenced on June 29, 2009. The notification of public hearing and the FY 2009/10 Annual Update was distributed to all Sutter-Yuba Mental Health Services provider sites, and made available at the Sutter County and the Yuba County main libraries. This notification of public hearing and the update were available for public review at the Sutter-Yuba Mental Health Services website, Network of Care website for Sutter County, and Network of Care website for Yuba County. The internet addresses are listed below:

http://www.co.sutter.ca.us http://www.Sutter.networkofcare.org http://www.Yuba.networkofcare.org

The Notice of Public Hearing was mailed to all leadership committee members and partner agencies; was posted at the Sutter County and Yuba County main libraries; was posted in the Appeal-Democrat newspaper; and was provided to anyone who requested a copy. Public comments could either be emailed to plarrigan@co.sutter.ca.us or mailed to MHSA Coordinator, Sutter-Yuba Mental Health Services, at 1965 Live Oak Blvd., P.O. Box 1520, Yuba City, CA 95992 or presented in person. The public hearing before the local Mental Health Board was held on July 30, 2009. The public comment period ended at the conclusion of that meeting.

EXHIBIT C

Report on FY 2007/08 Community Services and Supports Activities MHSA FY 2009/10 ANNUAL UPDATE

County Name: Sutter-Yuba Mental Health Services

Provide a brief narrative description of progress in providing services through the MHSA Community Services and Supports (CSS) component to unserved and underserved populations, with emphasis on reducing racial/ethnic service disparities. (suggested length – one-half page)

The Ethnic Outreach & Engagement Program consists of three targeted outreach teams that have been established for our major unserved or underserved ethnic bilingual/monolingual populations: Latino, Hmong and Asian Indian. This program allows for the reduction in disparities for the identified ethnic groups who are now underserved in our community; providing improved access through the provision of services in community settings actively utilized by these populations; improved integration with mental health and substance abuse services, improved integration between child and adult systems to bridge gaps in services; a culturally sensitive family-friendly approach to service planning and delivery. The expertise and services of the Ethnic Outreach & Engagement Team is utilized by all MHSA CSS programs as needed to provide culturally and linguistically competent services to the MHSA clients we serve.

- A successful strategy in reaching our underserved Hmong populations has been the opening of the Hmong Community Center. The significance of the Hmong Community Center is that it is located closer to the Hmong community which helps to eliminate accessibility barriers and helps reduce stigma. Hmong clients have expressed their appreciation in having the Hmong Center and Hmong staff to provide needed services.
- Successful strategies for the Latino population have been to offer services by at Del Norte Clinic(s), schools and home visits.
- Successful strategies for engagement of the Asian Indian population have been to conduct outreach events in the community where Asian Indian populations meet including at the "Sangrand" event at the Sikh Temple in Yuba City, the Punjabi American Heritage Society Festival at the Yuba City Fairgrounds in Yuba City, and providing advertisement in Punjabi on the local television Channel 19 to inform the Asian Indian public about counseling services.

BEST (Bi-County Elders Services Team), the older adult mobile assessment team has been very successful in providing services to unserved or underserved older adults (60 years plus) with a serious mental illness who are, or are at risk of being homeless, who may also have a co-occurring disorder (mental health and substance abuse), and who are unwilling or unable to access traditional services. BEST has made a difference in the community, by forging relationships with our partners and with the underserved senior population.

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The Integrated Full Service Partnership (FSP) is effectively serving unserved or underserved youth and adults. To date no older adults have been admitted to the FSP. A Spanish speaking Latina therapist was added part time to the FSP team in 2008, and is available to provide culturally and linguistically appropriate services to bi-lingual/monolingual Spanish speaking youth their families.

Sutter-Yuba Mental Health Services (SYMHS) has an active Cultural Competence Committee (CCC) that oversees on-going cultural competence training, and monitors policies and procedures (P&Ps) to ensure that culturally and linguistically competent services are available to Sutter-Yuba residents, including the right for Limited English Proficient (LEP) clients to have access to free language assistance services, and how to access interpreters. During 2008, SYMHS' staff members participated in an agency wide seminar about "Creating Welcoming Based Culture in Organizations & Communities" by Bruce Anderson; A wellness and recovery training, "Personal and Program Transformation", presented by Mark Ragins, M.D. of the Village; "The African American Culture", presented by David Smith, M.D.; a client culture training entitled "The Consumer Experience"; two interpreter trainings, "How to Interpret" and "Working with Interpreters" presented by Emerita Banuelos, LCSW and Mai Vang, ASW; and Rajdeep Randhawa, ASW presented Youth Services staff with a presentation on the East Indian culture and therapeutic approaches.

Mental Health Services Act-Work Plan Description (EXHIBIT D)

County Name Sutter-Yuba Mental Health Services Work Plan Title Urgent Services Population to Be Served	COMMUNITY SERVICES AND SUPPORTS Annual Number of Clients to Be Served 45 Total Number of Clients By Funding Category Full Service Partnerships 45 System Development
The Urgent Services Program has been developed to serve all ages with distinct, age appropriate services for youth and for adults, who have acute mental health issues and are at greatest risk of harming themselves or others, are at risk of hospitalization or are at risk of incarceration in jails/juvenile justice institutions. We also work with the school-based counselors and other school personnel to identify children at greatest risk.	PREVENTION AND EARLY INTERVENTION Annual Number to Be Served Total Number of Clients By Type of Prevention Early Intervention Indicated/Selected Universal

The Urgent Services program advances the goals of the MHSA by enabling participants with a serious emotional disturbance to have the urgent services needed, to help them remain in their communities, in their home, at school and out of the legal system. The Urgent Services Team is designed to provide quick and intensive services to clients who have acute distress symptoms such as mild suicidal ideation and depression but do not meet criteria for hospitalization. In the past, clients in distress had to wait a few weeks to see a therapist. While waiting they often needed to return repeatedly to Psychiatric Emergency Services for support. The Urgent Services Team goals are to improve the speed of intensive services to these clients and provide improved care, thereby reducing recidivism to PES. Urgent Services also operates an Open Access Clinic which is a twice-weekly walk-in clinic for adults 18 years of age or older in the SYMHS service area who would like to be assessed for eligibility to receive specialty mental health services.

Mental Health Services Act—Work Plan Description (EXHIBIT D)

	COMMUNITY SERVICES AND SUPPORTS
·	Annual Number of Clients to Be Served
	200 Total
work Flan Tille	Number of Clients By Funding Category
County Name Sutter-Yuba Mental Health Services Work Plan Title Older Adult Services Population to Be Served The Older Adult Services Program has been developed to serve older adults aged 60 and over who are physically or geographically isolated and who have psychiatric disabilities. Further priority is given to those whose cultural identity places them in underserved populations within our community. Work Plan Description The program enables participants to obtain and maintain positive social commental health services; feel empowered and listened to in the process of plain their providers. The program incorporates peer-delivered services; uses a delivery; and provides housing services and treatment leading to recovery to of services and decreasing homelessness for the identified ethnic groups who	Full Service Partnerships
	System Development
Sutter-Yuba Mental Health Services Work Plan Title Older Adult Services Population to Be Served The Older Adult Services Program has been developed to serve older adults aged 60 and over who are physically or geographically isolated and who have psychiatric disabilities. Further priority is given to those whose cultural identity places them in underserved populations within our community. Work Plan Description The program enables participants to obtain and maintain positive social con mental health services; feel empowered and listened to in the process of pla in their providers. The program incorporates peer-delivered services; uses a delivery; and provides housing services and treatment leading to recovery to	200 Outreach & Engagement
The Older Add to Combine December 1 and the december 11 and 12 and 13 and 14 an	
	PREVENTION AND EARLY INTERVENTION
	Annual Number to Be Served
	Total
	Number of Clients By Type of Prevention
community.	Early Intervention
	Indicated/Selected Universal
	Oniversal
Work Plan Description	
The program enables participants to obtain and maintain positive social conne	ections: experience respect from their providers of
of services and decreasing nomerospiess for the identified canno groups who	are underserved in our community.

Mental Health Services Act-Work Plan Description (EXHIBIT D)

	COMMUNITY SERVICES AND SUPPORTS				
County Name Sutter-Yuba Mental Health Services Work Plan Title Ethnic Outreach	Annual Number of Clients to Be Served 280 Total Number of Clients By Funding Category Full Service Partnerships System Development				
The Ethnic Outreach Program targets our major underserved populations: Latino, Hmong and Punjabi speaking Asian Indians. Each program is intergenerational, serving children, youth, transition-aged youth, adults and older adults within each cultural group. Within these broader categories, females are specifically targeted as they are more likely to be underserved in our system, and specifically within these cultures.	280 Outreach & Engagement PREVENTION AND EARLY INTERVENTION Annual Number to Be Served Total Number of Clients By Type of Prevention Early Intervention Indicated/Selected Universal				
Work Plan Description					
The program enables participants to obtain and maintain positive social connectoosing; have access to integrated mental health and drug and alcohol treatments. Participants can also obtain assistance to engage in meaningful activities.	nent for those with co-occurring disorders if they				

The program enables participants to obtain and maintain positive social connections; live in safety and in a setting which is of their choosing; have access to integrated mental health and drug and alcohol treatment for those with co-occurring disorders if they choose. Participants can also obtain assistance to engage in meaningful activity such as employment or education/training; receive services which recognize their developmental process as "normal" and do not marginalize issues of wellness; and experience respect from their providers of mental health services. As a result, clients feel empowered and listened to in the process of planning and obtaining their services; have continuity in their providers; and have individualized service plans which recognize the uniqueness of each person within the context of their ethnic/racial/cultural identity.

Mental Health Services Act-Work Plan Description (EXHIBIT D)

	COMMUNITY SERVICES AND SUPPORTS
County Name Sutter-Yuba Mental Health Services	Annual Number of Clients to Be Served
Work Plan Title	80 Total
Integrated Full Service Partnership	Number of Clients By Funding Category 80 Full Service Partnerships
Population to Be Served	System Development Outreach & Engagement
Services are available to serve children ages 0-5, youth aged 6-15, and Transition Age Youth aged 16-25 who have severe emotional disturbances or severe mental illnesses that result in significant social, emotional, or educational impairments and/or who are at risk of homelessness or going into care. Services are also available for adults and older adults who have co-occurring mental health and substance abuse disorders and who are homeless, or at risk of homelessness.	PREVENTION AND EARLY INTERVENTION Annual Number to Be Served Total Number of Clients By Type of Prevention Early Intervention Indicated/Selected Universal
Work Plan Description	

Services for the FSP programs include but are not limited to 24/7 intensive in-home case management and wraparound services. The FSP program's focus is on doing "whatever it takes" with the resources available to help people meet their individual recovery goals. Services promotes success in school or job, safety, wellness and recovery and may include, integrated mental health and substance abuse treatment services, psychiatric assessment, medication services, group and individual psychotherapy, assistance with housing and employment services/job training, supported employment and education, independent living skills training, transportation, housing, benefit acquisition, respite care, youth and parent mentoring etc. The FSP programs provides the services necessary to help a person with serious mental illness live successfully, in the community rather than in jails, hospitals, institutions or the streets.

FY 2009/10 Mental Health Services Act Summary Funding Request

County: Sutter-Yuba Mental Health Services Date: 6/19/2009

	MHSA Component						
	CSS	CFTN	WET	PEI	Inn		
A. FY 2009/10 Planning Estimates							
1. Published Planning Estimate ^{a/}	\$4,510,900						
2. Transfers ^{b/}	-\$40,408						
3. Adjusted Planning Estimates	\$4,470,492	\$0	\$0	\$0	\$0		
B. FY 2009/10 Funding Request							
1. Required Funding in FY 2009/10 ^{c/}	\$4,510,900						
2. Net Available Unspent Funds							
a. Unspent FY 2007/08 Funds ^{d/}	\$1,907,291						
b. Adjustment for FY 2008/09 ^{e/}	\$1,907,291						
c. Total Net Available Unspent Funds	\$0	\$0	\$0	\$0	\$0		
3. Total FY 2009/10 Funding Request	\$4,510,900	\$0	\$0	\$0	\$0		
C. Funding							
1. Unapproved FY 06/07 Planning Estimates							
2. Unapproved FY 07/08 Planning Estimates							
3. Unapproved FY 08/09 Planning Estimates							
4. Unapproved FY 09/10 Planning Estimates	\$4,510,900						
5. Total Funding [#]	\$4,510,900	\$0	\$0	\$0	\$0		

a/ Published in DMH Information Notices

b/ CSS funds may be transferred to CFTN, WET and Prudent Reserve up to the limits specified in WIC 5892b.

c/ From Total Required Funding line of Exhibit E for each component

d/ From FY 2007/08 MHSA Revenue and Expenditure Report

e/ Adjustments for FY 2008/09 additional expenditures and/or lower revenues than budgeted

f/ Must equal line B.3., Total FY 2009/10 Funding Request, for each component

FY 2009/10 Mental Health Services Act Community Services and Supports Funding Request

County: Sutter-Yuba Mental Health Services Date: 6/19/2009

CSS Work Plans			FY 09/10 Required MHSA	Required			Estimated MHSA Funds by Age Group					
	No.	Name	New (N)/ Approved Existing (E)	Funding	Full Service Partnerships (FSP)	System Development	Outreach and Engagement	MHSA Housing Program	Children, Youth, and Their Families	Transition Age Youth	Adult	Older Adult
1.	2	Urgent Services	E	\$243,789	\$12,189	\$231,600						
2.	5	Older Adult Services	E	\$447,143	\$44,714		\$402,429					\$447,143
3.		Ethnic Outreach	E	\$98,158	\$19,632	\$49,079	\$29,447		\$24,540	\$24,540	\$24,540	\$24,540
4.	7	Integrated Full Service Partner	E	\$1,981,161	\$1,981,161							
5.												
6.												
7.												
8.												
9.												
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21.												
22.												
23.												
24.												
25.												
			\$2,770,251	\$2,057,696	\$280,679	\$431,876	\$0	\$24,540	\$24,540	\$24,540	\$471,683	
			\$1,293,833									
28.	Plus Op	tional 10% Operating Reserve		\$406,408								
		SS Prudent Reserve ^{b/}		\$40,408								
30.	Total MI	HSA Funds Required for CSS		\$4,510,900								

a/ Majority of funds must be directed towards FSPs (Title 9, California Code of Regulations Section 3620(c)). Percent of Funds directed towards FSPs= b/Transfers to Capital Facilities and Technological Needs, Workforce Education and Training, and Prudent Reserve are subject to limitations of WIC 5892b.

EXHIBIT G

Community Services and Supports Prudent Reserve Plan FY 2009/10 ANNUAL UPDATE MENTAL HEALTH SERVICES ACT

County Sutter-Yuba Mental Health Services Date June 23, 2009

Instructions: Utilizing the following format please provide a plan for achieving and maintaining a prudent reserve.

1. Requested FY 2009/10 CSS Services Funding

\$2,770,251

Enter the total funds requested from Exhibit E1 – CSS line 26.

2. Less: Non-Recurring Expenditures

0

Subtract any identified CSS non-recurring expenditures included in #1 above.

3. Plus: CSS Administration

+ 1,293,833

Enter the total administration funds requested for CSS from Exhibit E1 – CSS line 27.

4. Sub-total 4,064,084

5. Maximum Prudent Reserve (50%)

2,032,042

Enter 50%, or one-half, of the line item 4 sub-total. This is the estimated amount the County must achieve and maintain as a prudent reserve by July 1, 2010. If the funding level for CSS services and county administration changes for FY 10/11, the amount of the prudent reserve would also change.

6. Prudent Reserve Balance from Prior Approvals

0

Enter the total amounts previously approved through Plan Updates for the local prudent reserve.

7. Plus: Amount requested to dedicate to Prudent Reserve through this Plan Update

+ 40,408

Enter the amount of funding requested through this Plan update for the local prudent reserve from Exhibit E1 – CSS line 29.

8. Prudent Reserve Balance

40,408

Add lines 6 and 7.

9. Prudent Reserve Shortfall to Achieving 50%

1.991.634

Subtract line 8 from line 5. A positive amount indicates that the County has not dedicated sufficient funding to the local prudent reserve. Please describe below how the County intends to reach the 50% requirement by July 1, 2010; for example indicate future increases in CSS planning estimates that will be dedicated to the prudent reserve before funding any program expansion.

Our program will be maintained at the current service level and any future increase in CSS planning estimates will be dedicated to the prudent reserve fund.

Note: If subtracting line 8 from line 5 results in a negative amount – this indicates that the County is dedicating too much funding to the local prudent reserve, and the prudent reserve funding request will be reduced by DMH to reflect the maximum.