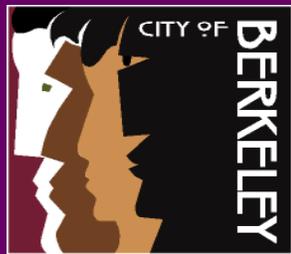


**City of Berkeley
Health, Housing and
Community Services
Department
Mental Health Division**





**Community Input Meeting
for the
Mental Health Services Act (MHSA)
FY25 Annual Update**



MHSA BACKGROUND

- Proposition 63 passed on November 2, 2004
- Became effective as statute, Mental Health Services Act (MHSA) on January 1, 2005
- 1% of personal income over \$1 million
- Money is deposited into the MHSA Fund in the State Treasury
- Funds are to be used to expand and transform the Mental Health System.

PROPOSITION 1 – Behavioral Health Services Act (BHSA)

- Ballot Measure that was passed in March 2024 that will make changes to the MHSA.
- Original MHSA Legislation still currently in place for this Annual Update.
- Additional information on Proposition 1, will follow this presentation and community input.

MHSA FUNDING COMPONENTS

- Community Services and Supports (CSS)
- Prevention and Early Intervention (PEI)
- Innovation (INN)
- Workforce Education and Training (WET)
- Capital Facilities and Technological Needs (CFTN)

CURRENT MHSA FUNDING DISTRIBUTION/TIMELINES

- Estimate local funds by State Estimates
- Funding distributed monthly based on deposits into MHSA Fund
- Monthly fund distribution fluctuates
- Five year timeframes to expend CSS, PEI and INN
- Use previous years unspent funds first

MHSA REQUIREMENTS

- Three Year Plans
- Annual Updates

STEPS TO AN APPROVED PLAN

Conduct a Community Planning Process that includes input from Consumers, Family Members and other MHSA Stakeholders.

PARTICIPANT SURVEY

<https://www.surveymonkey.com/r/Y6MQVN6>

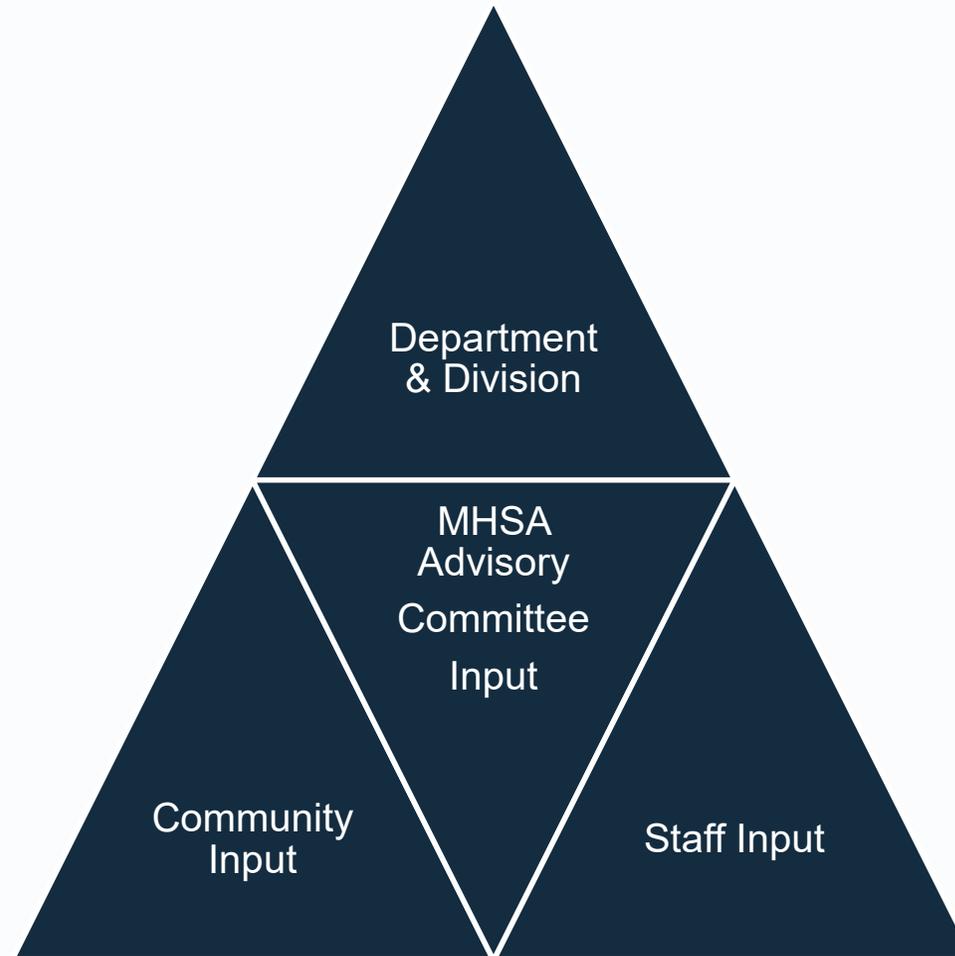
COMMUNITY PROGRAM PLANNING

- Write a Draft Annual Update
- Conduct a 30-Day Public Review
- Conduct a Public Hearing
- Obtain approval from City Council

MHSA PLAN COMPONENTS

- Report on Community Planning Process
- Analysis of substantive comments received in 30-Day Public Review Period
- MHSA Funding Components (CSS, PEI, INN, WET, CFTN) will include:
 - Whether continuing services
 - Whether funding new services
 - Report on Program Data
 - Projected Program Expenditure Plan
- Cost Per Person on CSS/PEI/INN Services
- PEI and INN Evaluation Reports

COMMUNITY PLANNING PROCESS METHODOLOGY



FY25 PROJECTED REVENUE

FY25

\$8,439,938

Once received, funding is locally distributed across the three annually occurring funding components as follows: 76% CSS, 19% PEI, 5% INN.

COMMUNITY SERVICES & SUPPORTS (CSS) Programs/Services

***FULL SERVICE PARTNERSHIPS**

***MULTICULTURAL OUTREACH & ENGAGEMENT**

***SYSTEM DEVELOPMENT**

FULL SERVICE PARTNERSHIPS (FSP)

Children/Youth Intensive Supports Program

Provides intensive short-term, individualized treatment, care coordination, and support to children and youth.

TAY, Adult & Older Adult Program

Provides intensive support services to individuals with severe mental illness using an Assertive Community Treatment approach.

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FULL SERVICE PARTNERSHIPS

Homeless Full Service Partnership

This FSP provides wrap-around services to individuals who are homeless and experiencing mental health needs.

MULTICULTURAL OUTREACH & ENGAGEMENT

Diversity & Multicultural Services

The Division's Diversity and Multicultural Coordinator provides leadership in identifying, developing, implementing, monitoring, and evaluating services and strategies that lead to continuous cultural, ethnic and linguistic improvements within the organizations system of care.

MULTICULTURAL OUTREACH & ENGAGEMENT

Transition Age Youth Support Services

Provides outreach, supports, services and/or referrals to Transition Age Youth with serious mental health issues who are homeless and not currently receiving services.

SYSTEM DEVELOPMENT

- Wellness & Recovery Support Services
- Family Support Services
- Housing Supports
- Benefits Advocacy Services
- Mobile Crisis Team Staffing
- Transitional Outreach Team (TOT)
- Flex funds for other levels of care
- Berkeley Wellness Center
- Sub-rep payee services
- Case Management Services for Transition Age Youth
- Funds specifically to support services for Asian Pacific Islanders
- Increased services for individuals with Substance Use Disorders

PROPOSED CHANGES IN FY25 TO CSS PROGRAMS

-Move the Assistant Management Analyst position that was previously approved for the Adult FSP, to the Children's FSP

CSS FY25 PROJECTED REVENUE

FY25

\$6,414,353

CSS FY25 TOTAL PROJECTED FUNDS

Estimated FY25 Revenue:	\$ 6,414,353
Estimated Unspent Amount:	\$13,247,388
Approximate Interest:	<u>\$192,430</u>
	\$19,854,171

CSS FY25 TOTAL PROJECTED EXPENDITURES

PROGRAM	FY25
Children’s Full Services Partnership	\$717,159
Adult Full Services Partnership	\$2,173,000
Homeless Full Services Partnership	\$1,453,532
Multi-Cultural Outreach	\$111,923
System Development (Family Services; Wellness Recovery Services; Crisis Services; Transitional Outreach Team; TAY Case Management; Hearing Voices Network; Benefits Advocacy; Housing Supports; Wellness Center; SUD Services; Counseling for Older Adults; Rep Payee Services; Flex Funds)	\$2,786,471
Transfer CSS Funds to WET	\$208,654
CSS Administration	\$1,158,212
TOTAL ESTIMATED EXPENDITURES FY25	\$8,608,951

CSS FY25 PROJECTED FUNDS

Total Estimated Funds:	\$19,854,171
Estimated FY25 Expenditures:	- <u>\$8,608,951</u>
	\$11,245,220

PREVENTION/EARLY INTERVENTION (PEI) Programs/Services



EARLY CHILD HEALTH & WELLNESS PROGRAM

- Coordinated system in Berkeley to identify children age 0-5 at risk of developmental delay, and social/emotional/behavioral concerns.
- Triage, assessment, referral, and treatment to community based or specialist services for children who are screened positive.

SUPPORTIVE SCHOOLS PROJECT

Transforms school culture towards a preventive, positive, and supportive approach to managing problem behavior.

Provides individual and group mental health services for children in need.

ADDITIONAL SCHOOL PROJECTS

- High School Youth Prevention Project: Provides mental health services and supports at Berkeley High and B-Tech for youth who are experiencing various stressors.
- Mental and Emotional Education Team (MEET): Trains student peers to conduct class presentations on common mental health disorders, area resources, and basic coping and intervention skills.
- Dynamic Mindfulness (DMind) Project: An evidence based intervention that integrates mindful action, breathing, and centering into classroom and afterschool sessions.

ADDITIONAL SCHOOL PROJECTS

African American Success Project

Project in BUSD middle school for students and their families to actively engage in the classroom and school life while creating a pathway for long-term success.

COMMUNITY EDUCATION/SUPPORTS

Program Components

- ❖ Outreach & Engagement
- ❖ Support Groups
- ❖ Community Education
- ❖ Building Leaders
- ❖ Consultation/Training

Target Groups: • AA • Latinos • LGBTQIA+
• Older Adults • TAY

SOCIAL INCLUSION

- Anti-Stigma Project, “Telling Your Story”.
- Consumer and family member–led education effort.
- Consumer presentations to schools and community organizations to dispel myths, attitudes, and discrimination around mental health clients and issues

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY (CaIMHSA)

- A State Joint Powers Authority that provides local resources on:
- Suicide Prevention
- Student Mental Health
- Stigma and Discrimination

MENTAL HEALTH PROMOTION CAMPAIGN

PROPOSED CHANGES IN FY25 TO PEI PROGRAMS

- Eliminate the Be A Star Project.
- Eliminate FY25 local funding for the PEI Statewide Projects Initiative.

PEI FY25 PROJECTED NEW REVENUE

FY25

\$1,603,588

PEI FY25 TOTAL PROJECTED FUNDS

Estimated FY25 Revenue:	\$1,603,588
Estimated Unspent Amount:	\$4,154,447
Approximate Interest:	<u>\$48,107</u>
	\$5,806,142

PEI FY25 TOTAL PROJECTED EXPENDITURES

PROGRAM	FY25
High School Prevention Project	\$900,560
BUSD Projects (Supportive Schools; MEET; African American Success Project: & DMIND)	\$401,389
Community Education & Supports	\$364,092
Social Inclusion	\$10,000
Mental Health Promotion Campaign	\$100,000
PEI Administration	\$389,262
TOTAL ESTIMATED EXPENDITURES FY25	\$2,165,303

PEI FY25 PROJECTED FUNDS

Total Estimated Revenue:	\$5,806,142
Estimated FY25 Expenditures:	- <u>\$2,165,303</u>
	\$3,640,839

INNOVATIONS (INN) Programs/Services

MOBILE WELLNESS CENTER PROJECT

- Mobile wellness center to visit various homeless encampment locations to provide on-site customized services, resources, and linkages.
- Led by peers with lived experience of homelessness, and include partners from encampment communities to encourage participation, help define service needs, and support service provision at the site.
- To assess whether on-site wellness center services have a positive impact on mental health outcomes.

INN FY25 PROJECTED NEW REVENUE

FY25

\$421,997

INN FY25 TOTAL PROJECTED FUNDS

Estimated FY25 Revenue:	\$421,997
Estimated Unspent Amount:	\$2,413,336
Approximate Interest:	<u>\$12,660</u>
	\$2,847,993

INN FY25 TOTAL PROJECTED EXPENDITURES

PROGRAM	FY25
Encampment-Based Mobile Wellness Center	\$600,000
TOTAL ESTIMATED EXPENDITURES FY25	\$600,000

INN FY25 FUNDS

Total Estimated Revenue:	\$2,847,993
Estimated FY25 Expenditures:	<u>\$ 600,000</u>
	\$2,247,993

WORKFORCE, EDUCATION & TRAINING (WET)

WET SERVICES

- Loan Repayment Program – Through the Greater Bay Area Workforce, Education and Training Regional Partnership.
- Workforce Development Coordinator

CAPITAL FACILITIES & TECHNOLOGICAL NEEDS (CFTN)

NEXT STEPS

- Write the Draft MHSA Annual Update
- Conduct a 30 Day Public Review of Annual Update
- Conduct a Public Hearing at a Mental Health Commission Meeting
- Obtain approval from City Council
- Submit approved plan to the Department of Health Care Services (DHCS) and the Mental Health Oversight and Accountability Commission (MHSAOAC)

COMMENTS/QUESTIONS COMMUNITY INPUT

INFORMATION ON PROPOSITION 1

- On the March 5, 2024 Ballot, and passed by voters.
- Combined two Bills into one Proposition: SB326 - The Modernization of MHSA; and AB531 - General Obligation Bond for Housing.
- Changes the name of the Mental Health Services Act (MHSA), to the Behavioral Health Services Act (BHSA) to include allowances for funding to be use for individuals with Substance Use Disorders.
- BHSA Funding component changes, will begin 7/1/26.

INFORMATION ON PROPOSITION 1 - BHSA

AB326 – Modernization of MHSA

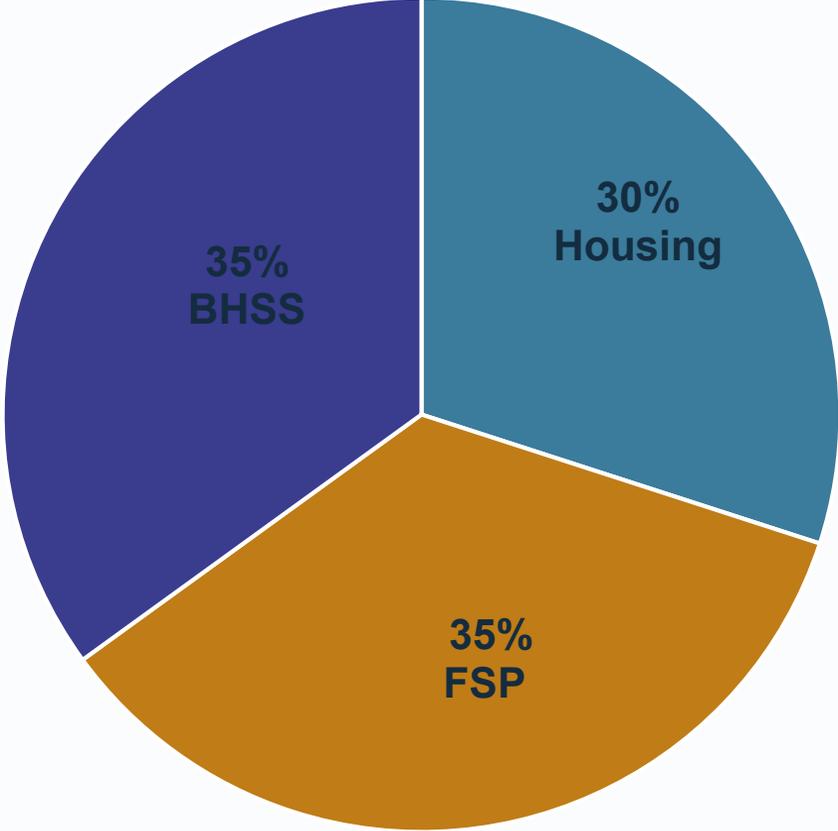
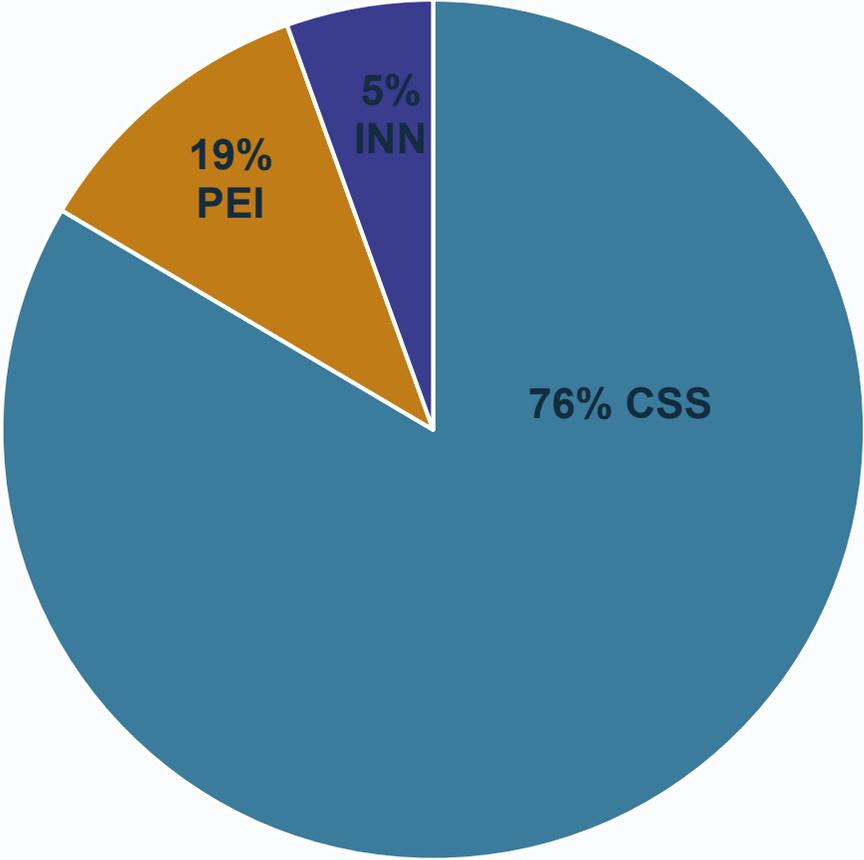
Current MHSA – 5 Funding Components

- Community Services & Supports (CSS) – 76%
- Prevention and Early Intervention (PEI) – 19%
- Innovation (INN) – 5%
- Workforce Education & Training (WET)
- Capital Facilities and Technological Needs (CFTN)

NEW BHSA – 3 Funding Components

- Housing – 30%
- Full Services Partnership Programs – 35% (CSS FSP Programs Only)
- Behavioral Health Services and Supports – 35% (CSS; EI; INN; WET, CFTN)

PROPOSITION 1 COMPONENT CHANGES



■ CSS - 76% ■ PEI - 19% ■ INN - 5% ■ Housing - 30% ■ FSP - 35% ■ BHSS - 35%

PROPOSITION 1 - BHSA

- Behavioral Health Services and Supports Component – 51 % of the total amount of funding must be used for Early Intervention, and 51% must be used for individuals who are 25 years or younger.
- May move up to 14% of funding from one service category to another with a maximum shift of 7% across any category. Funding changes can only be made during the 3-year plan cycle or through Annual Updates. DHCS has to approve shift of funds.
- Reduces the Prudent Reserve amount from 33% to 20% for small counties and from 33% to 15% for large counties.

PROPOSITION 1 - BHSA

- Increases the amount of funds at the State level from 5% to 10%. Counties will receive 90% of funds for local programming. The State will receive 10% of funds: 4% for Population-based Prevention programming; 3% for Workforce Initiative; 3% for State Administration.
- Focuses on Outcomes, Accountability, and Equity.
- Requires counties to demonstrate coordinated behavioral health planning using all services and sources of behavioral health funding.
- Requires a new Integrated Plan for Behavioral Health and Outcomes which includes all local behavioral health funding and services.

PROPOSITION 1 - BHSA

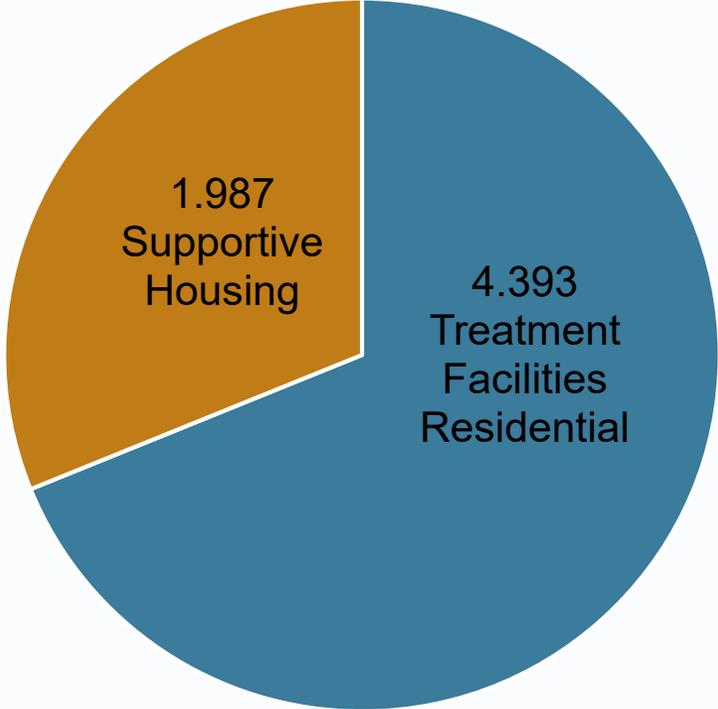
AB531 – Housing

-Creates a \$6.38 billion general obligation bond for the construction of unlocked community-based behavioral health treatment and residential care settings, and permanent supportive housing.

-Bond funding will be used to construct, acquire, and rehabilitate Treatment Beds (4.393 billion) and for Permanent Supportive Housing Units (1.987 billion) for veterans and individuals who have mental health needs and/or Substance Use Disorders.

PROPOSITION 1 - BHSA

AB531 – Housing



■ Tx Facilities/Residential -4.393 ■ Supportive Housing -1.987

CONTACT INFORMATION & RESOURCES

MHSA Coordinator

Karen Klatt, M.Ed.

(510) 849-7541

(510) 981-7644

KKlatt@berkeleyca.gov

City of Berkeley MHSA Website

www.ci.berkeley.ca.us/mentalhealth

*(follow link to MHSA webpage)



Thank you!

Karen Klatt
KKlatt@cityofberkeley.info

