

James M. Illig
President

Sonia E. Melara
Vice President

Edward A. Chow, M.D.
Commissioner

Margine A. Sako
Commissioner

David J. Sanchez, Jr., Ph.D.
Commissioner

Steven Tierney, Ed.D.
Commissioner

Catherine M. Waters, R.N., Ph.D.
Commissioner

HEALTH COMMISSION

CITY AND COUNTY OF SAN FRANCISCO

Gavin C. Newsom, Mayor

Department of Public Health



Mitchell H. Katz, M.D.
Director of Health

James M. Soos
Acting Executive Secretary

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MINUTES

HEALTH COMMISSION MEETING

Tuesday, May 5, 2009

At

4:00 p.m.

101 GROVE STREET, ROOM 300 or ROOM 302

San Francisco, CA 94102

1) CALL TO ORDER

Commissioner Illig called the meeting to order at 4:08 p.m.

Present: Commissioner James M. Illig, President
Commissioner Sonia A. Melara, Vice-President
Commissioner Edward A. Chow, M.D.
Commissioner David J. Sanchez, Ph.D.
Commissioner Steven Tierney, Ed.D.
Commissioner Catherine M. Waters, R.N., Ph.D.

Absent: Commissioner Margine A. Sako (excused)

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF APRIL 21, 2009

Action Taken: The Commission (Illig, Melara, Chow, Sanchez, Tierney, Waters) approved the minutes of the meeting of April 21, 2009.

3) FOR DISCUSSION: DIRECTOR'S REPORT

2009 H1N1 Flu

As the Commissioners know, the City and County of San Francisco had its first confirmed case of 2009 H1N1 Flu (previously referred to as swine flu) on April 30 in a child who had traveled

recently to Mexico. The Mayor hosted a press conference to make the announcement, which also gave Dr. Fernyak, Director of Communicable Disease Control & Prevention, and myself another opportunity to offer prevention messages and give the public a perspective about this strain of flu and how it is affecting individuals here in the U.S. who have acquired it. DPH activated our Department Operations Center last Monday, April 27 and on Wednesday, the City did a partial activation of the Citywide Emergency Operations Center. You have received in your packet a memo with a number of actions that have already been taken. Later in today's agenda, Dr. Fernyak and I will discuss the 2009 H1N1 Flu in more and greater detail and respond to your questions.

Primary Stroke Center Certification Review

Linda Brown from the Joint Commission recently spent a full day on April 20th surveying the Designated Stroke Program at San Francisco General Hospital. She interviewed staff, reviewed medical records of stroke patients and studied the Quality Improvement Data. Ms. Brown left impressed by the program and stating that "San Francisco General Hospital Designated Stroke Program had no findings for this survey and no requirements for improvement." Furthermore, Ms. Brown acknowledged that it is unusual for a hospital to have a "perfect" survey and that it was a pleasure to review such an outstanding program

These surveys are only as successful as the Stroke Program team behind them. A special thanks Claude Hemphill MD, Christine Martin, Renee Allen, Ken Coehlo, and David Kutys. Congratulations to all.

Centralized Business Office Created for Community Programs

I am pleased to announce that effective May 4, 2009, Michelle Long will become the *Director of Contract Development and Technical Assistance* for the new **Community Program's Centralized Business Office**. The Business Office will be responsible for centralization of all contract development functions such as solicitations and providing technical assistance for Community Programs' contractors.

Ms. Long has been the Director of HIV Health Services since 1998. Her expertise in the contracting functions and program management in HIV Health Services will serve her well in this important role.

Also effective May 4, 2009, Bill Blum will become the *Interim Director of HIV Health Services*. Mr. Blum has been the Assistant Director of HIV Health Services since November 2006. I am confident that Mr. Blum will provide excellent leadership and support in this transition.

Open House Planned for Hawkins Youth Clinic, May 13, 3-6 p.m.

The Hawkins Youth Clinic is planning an Open House on Wednesday, May 13, 3-6 p.m. The Commissioners will be receiving invitations to this event soon. For the Commissioners who may not be familiar with the Hawkins Health Clinic, some background will provide context to this event.

Darryl Hawkins was a young man whose work as a social worker made an impact in Visitacion Valley. Mr. Hawkins died suddenly at a young age of a heart attack and to acknowledge him and his work, a satellite clinic operating out of the Silver Avenue Health Center, was named in his honor—**Hawkins Health Clinic**. In the winter of 2007, Hawkins Health Clinic became part of Community Health **Programs for Youth**, directed by Michael Baxter and Susan Obata, MD.

Hawkins Youth Clinic targets youth between 12 and 24 years of age and is currently open Tuesday and Wednesday afternoons, offering both reproductive and behavioral health services. Due to

significant access challenges for many youth in the Sunnydale neighborhood that it serves, the clinic is developing a unique approach to offering services by thinking of themselves as the clinic without walls. This means that neighborhood youth can also get services from Hawkins Youth Clinic staff through schools and other community agencies where they gather.

In the summer of 2008, Hawkins Youth Clinic was awarded a three-year grant from an anonymous funder to address two major issues that youth in the community face: post traumatic stress disorder and high incidence of sexually transmitted infections. Over the past six months this funding has allowed the clinic to hire two youth outreach staff from the community and a full time social worker. Due to this staffing increase the clinic has been able to build important relationships in Visitacion Valley with other community based organizations and community leaders and gain more understanding of the neighborhood.

The Open House on May 13th has been organized to re-introduce the Visitacion Valley community to the clinic and its expanded services. The clinic is reaching out to youth and their families, residents, community leaders and other Visitacion Valley supporters to celebrate with food, games, prizes and entertainment. Hawkins Youth Clinic encourages people to meet staff and tour the facility in order to gain a greater understanding of what the clinic offers and how the clinic can contribute to the work of others in the neighborhood. I hope the Commissioners will take some time in their schedules to stop by the Hawkins Youth Clinic on May 13th and meet the very dedicated staff and the grateful neighborhood residents who depend on its services.

Palliative Care Highlighted on KQED Health Dialogues

Rev. Will Hocker, Executive Director of Sojourn Chaplaincy at SFGH and Steve Pantilat, MD of UCSF's palliative care service were interviewed recently with for a segment of "Health Dialogues" show on KQED. Here is a link to the show that can be podcast.

<http://www.kqed.org/radio/programs/healthdialogues/about.jsp#carriage>

Case Study Identifies Herbal Supplement as Critical to Lead Poisoning Source

Ihsan DuJaili, Environmental Health Technician, is one of the authors on a Case Study recently published in *Nature Reviews Nephrology* by Suma Prakash *et. al.* (vol. 5, 297-300, May 2009). Ihsan assisted Vivek Bhalla, MD, from the Stanford University School of Medicine's Nephrology Division, in identifying a lead poisoning source for a patient who was being treated for Stage 3 chronic kidney disease. The paper's finding is that the patient's disease was probably worsened by consumption of lead in the form of an Ayurvedic herbal remedy, which Mr. DuJaili identified as a potential source and had analyzed by a laboratory.

American Association of Architects Tour New LHH

Dozens of architects from all over the country toured the new Laguna Honda buildings during the American Association of Architects annual convention in San Francisco last week. The interest in the Laguna Honda rebuild was due in part to its scale, its green building status and as an example of "evidence-based" design, a new movement in architecture that combines good design principles with what we know about what is best for people.

John Kanaley Family Accepts Award

The family of John Kanaley accepted an award on John's behalf at the annual meeting of the American Hospital Association (AHA) in Washington April 27. John was honored for his fundraising work for the political action committees of the AHA and the California Hospital Association. John's brother and sister attended the ceremony to receive the award.

ADA Ramp at LHH Signals Continued Progress

Work has begun on an ADA (Americans with Disabilities Act) ramp from Woodside Avenue into Laguna Honda. The ramp is one of the final projects of the Laguna Honda Replacement Program, which entered its last year in April. Construction of the ramp is part of the department's strategic goal to encourage the highest level of independence for each Laguna Honda resident whether it be on the campus or in the community. A current ADA ramp provides access to the Forest Hill MUNI station. The new ramp will improve access to bus lines running along Woodside.

HeartBeat Wins National Award

The Healthy San Francisco quarterly participant newsletter, *HeartBeat*, was recently honored with a Silver Award at the 26th Annual Healthcare Advertising Awards.

The Healthcare Advertising Awards is the oldest, largest and most widely respected healthcare advertising awards competition. The awards are sponsored by Healthcare Marketing Report, the leading publication covering all aspects of healthcare marketing. Awards are made to entrants whose programs and materials display exceptional quality, creativity and message effectiveness.

A national panel of judges reviewed over 3,600 entries in 28 categories, choosing the winners on creativity, quality, message effectiveness, consumer appeal, graphic design and overall impact.

SFGH CARE Patients Travel to Alcatraz

Last Wednesday, over 75 SFGH cancer patients from our English, Spanish, and Chinese (Cancer Awareness Resource and Education) CARE groups enjoyed an excursion to Alcatraz. Although many of the patients have lived in the City all of their lives, it was the first trip for most. The outing was an opportunity for many of the patients who have been through the rigors of cancer treatment to meet each other and enjoy a day on the Bay together. Fun and the friendship of others can be the best tonic for many of our ill, and associating with others who have shared in the same experiences has its own therapeutic value beyond clinical medicine.

ShapeUp SF Receives Sponsorship Funding from Kaiser Permanente

Kaiser Permanente San Francisco has once again extended generous support to ShapeUp San Francisco. Their \$35,000 sponsorship will enable ShapeUp SF to support the Walking Challenge, Soda Free Summer, city worksite wellness activities and the Stadium to Stadium Run.

As a result of its continued support, Kaiser Permanente has been named as a Gold Medal ShapeUp SF Sponsor. Organizations achieving this designation have demonstrated commitment to the mission of ShapeUp SF not only by providing substantial funding or in-kind support, but also by working side by side with the Coalition to create healthy eating and active living environments where people live, work, learn and play.

Sunday Streets May 10

Mark your calendar for the second 2009 Sunday Streets, May 10th from 10 a.m. – 2 p.m. along the waterfront route in the City's southeast sector. This upcoming event will feature the 20th anniversary of the San Francisco Bay Trail. Volunteers are needed or just come out and play.

www.sundaystreetssf.com/volunteer.html.

Conference on Child Safety Scheduled

The Commissioners may wish to attend an upcoming conference on child safety entitled "Keeping Our Children Safe: Preventing Injuries to Children in San Francisco," on Friday, May 29th, from 9 a.m. to 12 noon at the Whitcomb Hotel in San Francisco. This conference will feature Phyllis

Agran, MD, from the Center for Trauma & Injury Prevention Research at UC Irvine, speaking on child development and its relationship to injuries. The conference will also include current resources in San Francisco for child injury prevention, and how the Child Unintentional Injury Prevention Program can be of assistance to other child-related programs. The conference is free, and continuing education for nurses, health educators, and social workers/counselors is also free. For more information, contact Isabel Auerbach, 575-5684.

In addition, Dr. Katz announced that the Department is undertaking three events in celebration of Nurse Week next week, including:

1. Gene O'Connell is speaking at Carr Auditorium tomorrow, May 6 at 4 pm, followed by a reception and an awards ceremony from 5-7
2. Also at SFGH on Thursday, May 7, at 2 p.m. RN Evidenced Based Fellows presentations
3. Following a luncheon at LHH on Monday, May 11, Catherine Waters is speaking on "Diplomacy, Democracy and Politics in Nursing and Health Care," also followed by a reception.

Commissioner Comments:

Commissioner Illig commended staff on the comprehensiveness of the Director's Report and how important it is to the Commission to understand the activities of the Department.

4) GENERAL PUBLIC COMMENT

Shakira De Abreu is an MFCC at Southeast Family Services, and spoke against the move of the clinic outside of the Mission district location. The location of the clinic is further out in the Mission than Silver Ave. Family Health Center. She is unaware of any other mental health services in the vicinity.

Lucia Hammond spoke about her concern about the relocation of Southeast Family Services clinic outside of the Excelsior district. She and her colleagues are concerned that the Excelsior is not well served by programs and many of the patients will lose services as a result.

Female speaker spoke on behalf of keeping Southeast Family Services at its present location. Many of the current clients will not follow the clinic to its new location as they have limited transportation. For many Latino clients, Silver Ave. Family Health Center is not necessarily their medical home, so they are unlikely to seek services.

5) FINANCE COMMITTEE REPORT

Commissioner Steven Tierney reported on the actions of the Finance Committee

Action Taken: The Commission (Illig, Melara Chow, Sanchez, Tierney, Waters) approved the May 5, 2009 Consent Calendar of the Finance Committee.

6) 2009 H1N1 INFLUENZA UPDATE

Susan Fernyak, M.D., Director of Communicable Disease Control and Prevention (CDCP) provided an update on the status of the 2009 H1N1 influenza outbreak. Dr. Fernyak noted that the outbreak began about a week and a half ago with the first cases in the U.S. and reports of deaths in Mexico. She noted

that the initial reports out of Mexico were overstated and that disease in Mexico has been mild as it has been in the U.S.

She noted that the Department Operations Center (DOC) and the City's Emergency Operations Center (EOC) were activated last week. The DOC has since been scaled back and the EOC has been deactivated. She noted the importance of messaging, and how effective the Department's messages have been in allaying public fear. The City's 3-1-1 system has been used effectively and CDCP's website has been updated several times daily.

The one concerning thing is the possibility of genetic mutation of the virus with increased virulence. As a result the Department and others throughout the state have been engaging in surveillance to determine any changes in the outbreak. In addition, the City did receive Tamiflu through the Strategic National Stockpile. Finally, Mayor Newsom did declare a City Emergency in order to access federal funds and to access medications or supplies. Dr. Fernyak concluded by noting how good the response has been by City agencies.

Commissioner Comment/Requests for Follow-up:

Commissioner Sanchez thanked the Department for its rapid and exceptional response. He has called the Department with questions and has been able to respond to community concerns. He noted the need to continue to follow the outbreak, especially with the next flu season in the fall.

Commissioner Illig asked about the declaration of emergency and whether the City can get reimbursed. Dr. Katz noted that the declaration was made in case funds became available but it is not yet clear whether the federal government will reimburse localities. He also commended the Department in being effective in getting out correct information to counter fear.

Commissioner Illig asked about next steps if the outbreak had been worse. Dr. Fernyak responded that the Department has been exercising for a pandemic. Next steps would have been to close schools and social events, such as much of what was undertaken in Mexico to encourage social distancing.

Commissioner Chow thanked and commended the Department, and noted how private providers relied on the Department's messages to inform their constituents.

Commissioner Chow suggested that in the future that press events also be conducted in Cantonese. Dr. Katz noted that some of the events may have been conducted in Cantonese, but that because of the link to Mexico, many of the Spanish-language media outlets have been requesting information and participating in press events.

Commissioner Chow asked about the number of confirmed cases. Dr. Fernyak responded that there are four confirmed and two probable cases. He followed up by asking about ongoing effectiveness of Tamiflu. Dr. Fernyak responded that the CDC has been following this and that the sensitivity of the virus to Tamiflu continues.

Dr. Katz concluded by noting that last Saturday, one of the first Chronicle articles contained quotes from other health officers were more alarmist than information being put out by the Department. He noted that the lesson is to attempt to get a less alarmist message out, while still appealing to the press's need for news. He added that the SF Medical Society members appreciated the Department's communications, which helped to limit the flood of "worried well" appearing at hospitals. Finally, he noted the important lessons learned from responding to a real outbreak.

7) **PRESENTATION OF A RESOLUTION HONORING CHINATOWN PUBLIC HEALTH CENTER ON 80 YEARS OF CONTINUOUS SERVICE AND ON THE 40TH ANNIVERSARY OF GROUND-BREAKING AT THEIR CURRENT SITE**

Lei-chun Fung, Health Educator, Chinatown Public Health Center presented the resolution to the Commission.

Commissioner Comment/Requests for Follow-up:

Commissioner Chow congratulated the staff of the health center on its anniversary moved the resolution.

Action Taken: The Commission (Illig, Melara Chow, Sanchez, Tierney, Waters) approved the Resolution Honoring Chinatown Public Health Center on 80 Years of Continuous Service and on the 40th Anniversary of Ground-Breaking at their Current Site.

8) **PRESENTATION OF A RESOLUTION RECOGNIZING JUNE AS REFUGEE AWARENESS MONTH IN SAN FRANCISCO**

Patricia Erwin, Program Director, Newcomers Health Program presented the resolution to the Commission.

Commissioner Comment/Requests for Follow-up:

Commissioner Sanchez noted that the Refugee Clinic was established years ago at SFGH, and thanked staff of the Department in their work over the years with the refugee population.

Action Taken: The Commission (Illig, Melara Chow, Sanchez, Tierney, Waters) approved the Resolution Recognizing June as Refugee Awareness Month in San Francisco.

9) **APPROVAL OF FY 2009-2010 PATIENT RATES AND OTHER FEES**

Gregg Sass, Chief Financial Officer, presented the FY 2009-2010 patient rates and other fees. He noted that overall, the rates are rising by roughly ten percent.

Commissioner Comment/Requests for Follow-up:

Commissioner Illig asked who pays these rates. Mr. Sass responded that very few people actually pay these rates. These are rates charged to insured patients who come into SFGH by and large through the Emergency Department or Trauma Center. Commissioner Illig followed up asking about agreements the Department may have with insurers. Mr. Sass responded that unlike private hospitals, SFGH does not have separate agreements with insurers, and that insurers are required to pay these charges.

Commissioner Illig asked about the cost to charge ratio at SFGH. Mr. Sass responded that the ratio for SFGH is approximately 50 percent, which is significantly lower than for private hospitals.

Action Taken: The Commission (Illig, Melara Chow, Sanchez, Tierney, Waters) approved the FY 2009-2010 patient rates and other fees.

10) REVENUE SUPPLEMENTAL APPROPRIATION

Gregg Sass, Chief Financial Officer presented the revenue supplemental appropriation. A copy of his presentation is attached and incorporated into these minutes. Mr. Sass added that he had hoped to have the legislation available for the Commission, and has been working with the Mayor's Budget Office to draft that legislation.

Commissioner Comment/Requests for Follow-up:

Commissioner Illig asked whether by approving this, the Department would be returning money to the City. Mr. Sass responded in the affirmative.

Action Taken: The Commission (Illig, Melara Chow, Sanchez, Tierney, Waters) approved the revenue supplemental appropriation.

11) MENTAL HEALTH SERVICES ACT (PROPOSITION 63) UPDATE

Bob Cabaj, M.D., Director, Community Behavioral Health Services presented the Mental Health Services Act update. Alice Gleghorn, Ph.D., Deputy Director of Community Behavioral Health Services also presented. A copy of their presentation is attached and incorporated into these minutes.

Public Comment:

Michelle Schulz, a member of Health and Welfare Action Advocates of the Mental Health Association spoke in opposition of use of MHSA funds to backfill staffing.

Commissioner Comment/Requests for Follow-up:

Commissioner Illig asked about the last report on the MHSA. Dr. Cabaj responded that the Commission has not received a full report on the MHSA for approximately two years.

Commissioner Tierney congratulated CBHS staff in moving this work forward. He added his commendation to staff on developing and reporting outcome measures in the use of this funding. He asked about the prohibition on supplantation with this funding. Dr. Cabaj responded that CBHS has been careful to work with the State and other counties to develop a clear definition of supplantation. He noted that staff who would otherwise be laid off have been able to stay a board to do projects related to the MHSA. He's also worked with the State to release more of the funds available through Proposition 63.

Commissioner Chow asked about table three, with regard to housing outcomes. Dr. Gleghorn responded that the first box shows housing in the year prior, while the second box shows housing in the year after starting in the program.

Commissioner Illig asked about the lower share of funds that San Francisco received versus what was expected. Dr. Cabaj replied that the homeless population could not be counted in the formula for funding because the State considered the data to be unreliable. Secondly, a study from rural Texas was used to determine the number of serious mental illness, which was far below the number of clients being seen already in San Francisco's CBHS programs. The Department petitioned the State for

additional funds, but never received a response. In addition the State has been unwilling to revisit the funding formula. San Francisco was able to get additional administrative funding for one year.

Commissioner Illig asked about the funds sitting in the “prudent reserve.” Dr. Cabaj responded that this is being used to cushion against decreased funding in bad economic years, when State allocations drop below a target percentage. San Francisco actually has less in its “prudent reserve” because the focus has been on developing services quickly rather than accruing reserve.

Commissioner Illig asked why the Health Commission was bypassed in the planning process. Dr. Cabaj noted that Health Commission approval is not in the legislation, and the planning process moved very quickly and was transparent.

Commissioner Sanchez noted that CBHS did come before the Commission in an expedited process. In addition, Commissioners were invited to participate in the planning group process. He noted the need to protect these programs in these bad economic times.

Commissioner Illig noted that the community-based agencies have also been important in the hiring of consumers. Dr. Cabaj concurred.

Commissioner Tierney asked about outreach to the LGBTQQ community. Dr. Gleghorn responded that they have funded CYC to work with A/PI families facing LGBTQQ issues.

12) OTHER BUSINESS

Commissioner Illig requested that scheduling agendas for the summer, including any summer vacation plans for Commissioners be forwarded to Mr. Soos for calendaring.

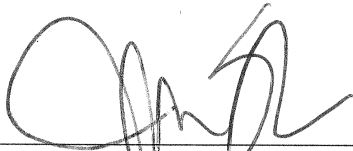
Commissioner Illig asked about the pleasure of the Commission in having a joint meeting with the Human Services Commission, the Long-Term Care Planning Council, and the Aging and Adult Services Commission.

Commissioner Illig asked for regular reports from the LHH and SFGH JCCs at the Health Commission meeting following each of the JCCs.

Commissioner Illig noted that it is time for the evaluation of Dr. Katz by the Health Commission. He has asked Dr. Katz to write a self-evaluation based on the objectives established by the Commission. Commissioner Illig stated that the Commission would request a closed session following receipt of Dr. Katz’s self-evaluation.

13) ADJOURNMENT

The Commission adjourned at 6:00 pm.



James M. Soos

Acting Health Commission Executive Secretary

Attachments: (2)

Department of Public Health Preliminary Financial Results Nine month Projection

Division	REVENUES			EXPENDITURES			TOTAL Surplus/ (Deficit)
	Revised Budget	Current Projection	Surplus/ (Deficit)	Revised Budget	Current Projection	Surplus/ (Deficit)	
Department of Public Health							
SFGH	\$ 756,336,000	\$ 779,622,000	\$ 23,286,000	\$ 756,336,000	\$ 764,334,000	\$ (7,998,000)	\$ 15,288,000
Laguna Honda	173,944,000	176,699,000	2,755,000	173,944,000	180,849,000	(6,905,000)	(4,150,000)
Primary Care	63,112,000	67,181,000	4,069,000	63,112,000	60,686,000	2,426,000	6,495,000
Health at Home	8,861,000	8,861,000	-	8,861,000	8,250,000	611,000	611,000
Jail Health	29,107,000	29,866,000	759,000	29,107,000	29,547,000	(440,000)	319,000
Public Health	134,928,000	136,441,000	1,513,000	134,928,000	131,400,000	3,528,000	5,041,000
Mental Health	267,446,000	271,400,000	3,954,000	267,446,000	262,633,000	4,813,000	8,767,000
Substance Abuse	75,742,000	75,742,000	-	75,742,000	73,625,000	2,117,000	2,117,000
TOTAL DPH	\$ 1,509,476,000	\$ 1,545,812,000	\$ 36,336,000	\$ 1,509,476,000	\$ 1,511,323,983	\$ (1,848,000)	\$ 34,488,000

The Revised Budget in the table above includes: Annual Appropriation Ordinance for DPH, carry forwards from prior year, Inter Governmental Transfer (IGT), Transfer In and Project Related expenses.

Projections include a revenue surplus of \$36.3 million and expenditure deficit of \$1.8 million for an overall surplus of \$34.5 million. We are projected to be overspent at the two hospitals. Surplus revenues are available to fund a revenue supplemental.

Mental Health Services Act

A Presentation to the Health Commission
May 5, 2009

What is MHSA?

- Voter initiative in 2004
- Levies 1% tax on incomes above \$1 million
- Expand and enhance mental health services to unserved and underserved
- Prohibits replacement of existing state and local funding for MH services with MHSA

Five Principles of MHSA

- Wellness and Recovery Focused
- Consumer Participation & Family Involvement
- Community Collaboration
- Integrated Delivery System
- Cultural Competence

MHSA Components

- Community Services and Supports
 - Full service partnerships
 - General System Development
 - MHSA Housing
- Workforce Development Education and Training — identify gaps in workforce; increase workforce cultural and linguistic capacities; educate consumers
- Prevention and Early Intervention — identify risks early on; prevent worsening of mental illness and promote positive outlook
- Capital Facilities and Information Technology- fund renovation of admin and service facilities; modernize information systems and provide access to health records to consumers/family members
- Innovation — apply new practices that will contribute to learning

Continuing Stakeholders Process

- Each component has its own community planning meetings to develop a Three Year Plan
- 30 day public review and comment of the Three Year Plan
- Public Hearing of the Mental Health Board
- Resolution supporting the Three Year Plan by the Board of Supervisors

Funding Allocations

Fiscal Year	Health	CFR	Community	CFR	CFR	CFR	CFR
FY 04-05	\$207,487						
FY 05-06		\$ 5,332,500					
FY 06-07		\$ 5,386,299					
FY 07-08	\$ 7,095,700	\$9,877,600	\$3,049,990	\$2,269,600	\$8,296,700		
FY 08-09		\$11,570,500			\$5,445,300		\$1,313,800
TOTAL	\$207,487	\$30,226,799	\$9,877,600	\$3,049,990	\$2,214,900	\$8,296,700	\$1,313,800

Grand Total = \$61,646,276

Funds Received

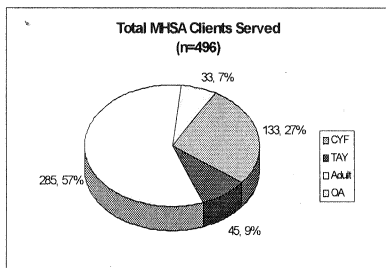
Fiscal Year	Balance	Q1	Q2	Q3	Q4	YTD	YTD %	QTD
FY 04-05	\$207,487							
FY 05-06		\$ 5,332,900						
FY 06-07		\$ 5,386,299						
FY 07-08		\$ 7,895,700	\$9,877,600			\$ 472,200		
FY 08-09		\$ 11,570,900			\$1,923,400			
TOTAL	\$207,487	\$30,286,799	\$9,877,600		\$1,923,400	\$ 472,200	10	10

Grand Total - \$42,796,486

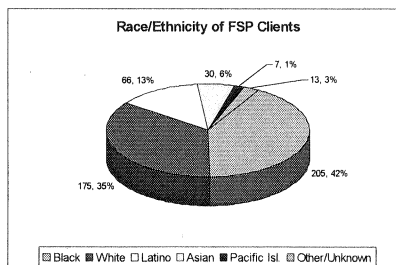
CSS Implementation – Full Service Partnerships (FSP)

- 9 Full Service Partnerships serving children & families, transitional aged youth, adults, and older adults
- 496 Clients currently being served
 - Seriously mentally ill /serious emotional disorder
 - Homeless or at risk of homelessness
 - Children at risk of out of home placements
 - Children in foster care
 - Exiting foster care, institutionalized care, or criminal justice system
 - Dual or Multiple-Diagnoses
- \$15,574 average cost per client

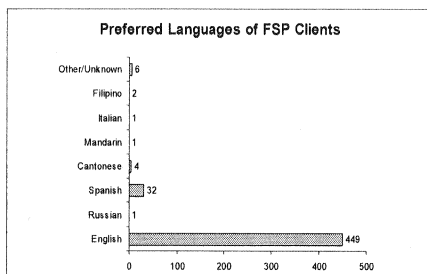
Full Service Partnerships by Age Group



Full Service Partnerships by Race/Ethnicity



Full Service Partnerships by Preferred Language



FSP Outcomes Across Programs

Transitional Aged Youth Housing Outcomes (n=48)

Housing	Year before FSP	Year since FSP	Change (days)	Change (percent)
Days homeless	1550	366	-1184	76% reduction
Days in jail, prison, or Juvenile Hall	1035	865	-170	16% reduction
Days hospitalized	896	457	-439	49% reduction

FSP – Milestones of Recovery (MORS)

- Developed by David Pilon and colleagues at The Village in Long Beach
- Targeted at outcomes
- Very brief (1-item)
- Assesses clients' levels of:
 - Risk
 - Engagement
 - Skills and Supports

General System Development (GSD)

- 11 Programs funded
 - reach the API, African American, Latino, and LGBTQQ communities
 - provide behavioral health services in non-traditional settings
 - offer services to children youth and families affected by trauma and violence
 - develop community centers with very low thresholds for participation
 - encourage development of consumer-led centers and activities
 - assist consumers in obtaining and maintaining housing
 - enhance existing vocational rehabilitation activities
 - provide integrated assessments and referrals to behavioral health services
 - extend services to non-Medi-Cal eligible clients who otherwise would not be able to access services

Consumer Hiring

- Consumer Employment Manager
- Implementation Specialists – assist with CSS implementation
- System Navigators and Peer Family Intern Employees
- Pathways to Discovery staff – peer run wellness and community integration program

MHSA Housing

- 990 Polk Senior Housing
 - Opened in November 2008
 - 10 clients moved in
 - \$1 million financing
- 365 Fulton
 - \$2.4 million for 12 units
 - Scheduled to open in 2011
- 220 Golden Gate
 - \$3.4 million for 17 units
 - Scheduled to open in 2011

Workforce Development Education and Training

- 8 month community planning
- Plan submitted in March 2008
- Plan approved in September 2008
- RFP pending release

Prevention and Early Intervention

- 6 month community planning process
- Dual approval by DMH and OAC
- Plan submitted in February 2009
- Plan approved April 24, 2009
- RFP pending release

Capital Facilities and Information Technology

- Capital Facilities
 - 3 community meetings
 - Plan submitted in April 2009
 - First project proposal – renovate Silver Avenue Family Health Center
- Information Technology
 - 2 informational meetings
 - 6 community planning meetings
 - Project prioritization currently underway

Innovation

- 4 community planning meetings currently ongoing
- Mini proposals will be considered
- MESA Advisory Committee will review all mini proposals and recommend projects for inclusion in Plan