



Strategic Plan: Mental Health Treatment Act (Measure B) DRAFT - October 2020

Mendocino County Health & Human Services

Measure B Program

1120 S Dora Street

Ukiah, CA 95482

[MendocinoCounty.org/Community/Mental-Health-Oversight-Committee](https://mendocinocounty.org/Community/Mental-Health-Oversight-Committee)

MeasureB@MendocinoCounty.org

Project Manager: Alyson Bailey (707) 510-6637

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Introduction: What is Measure B?

Measure B was an ordinance placed on the fall 2017 ballot adopting a “Sales and Use Tax” on retail transactions throughout Mendocino County “in order to generate revenue for a special Mental Health Treatment Fund entirely dedicated to funding improved Services, Treatment, and Facilities for persons with Behavioral Health conditions.”¹

Specifics include:²

- **Providing a “Psychiatric Facility and other Behavioral Health Facilities” for assistance in diagnosis, treatment and recovery**
- **A “Regional Behavioral Health Training Facility for Behavioral Health and Public Safety” training and development**
- **Provide infrastructure geared toward stabilization and support for people with Behavioral Health conditions “including addiction and neurological disorders”**

The text goes on to include the mandate for measuring effectiveness (KPIs³) annually including an independent Quality Assessment, as well as the formation of the Citizens Oversight Committee⁴, which “shall review the independent annual audit, expenditures, and performance.”

The 0.5% rate of tax will last “for a period of five (5) years.

A maximum of 75% of the revenue deposited into the Mental Health Treatment Fund may be used for facilities, with not less than 25% dedicated to services and treatment.”⁵

Starting in 2023, “all revenue deposited into the Mental Health Treatment Fund shall be used for ongoing operations, services and treatment.” This rate of taxation is a reduction to 0.125% and will continue indefinitely unless it is voted otherwise.

¹ Section 5.180.050. Purpose of the Measure B ordinance

² Section 5.180.040. Specific Purpose

³ KPIs = Key Performance Indicators, such as: Revenue, Sustainability, Use, Client Retention, and Service Quality.

⁴ Fiscal recommendation and operations analysis committee for Measure B.

⁵ Section 5.180.070. Transactions Tax Rate

The estimated fiscal outcome⁶ for Measure B is posted below:

Facilities Projection Table Years 1 - 5:

Facilities - (Maximum 75%)					
Fiscal Year	18/19	19/20	20/21	21/22	22/23
Measure B Sales Tax Proceeds	6,000,000.00	6,375,000.00	5,250,000.00	5,438,000.00	5,625,000.00
Quarterly Interest Revenue	52,500.00	150,000.00	150,000.00	112,500.00	75,000.00
Annual Facilities Revenue	\$6,052,500.00	\$6,525,000.00	\$5,400,000.00	\$5,550,500.00	\$5,700,000.00
Cumulative Amount		\$12,577,500.00	\$17,977,500.00	\$23,528,000.00	\$29,228,000.00

Operations Projection Table Years 1 - 5:

Operations - (Minimum 25%)					
Fiscal Year	18/19	19/20	20/21	21/22	22/23
Measure B Sales Tax Proceeds	2,000,000.00	2,125,000.00	1,750,000.00	1,813,000.00	1,875,000.00
Quarterly Interest Revenue	17,500.00	50,000.00	50,000.00	37,500.00	25,000.00
Annual Operations Revenue	\$2,017,500.00	\$2,175,000.00	\$1,800,000.00	\$1,850,500.00	\$1,900,000.00
Cumulative Amount		\$4,192,500.00	\$5,992,500.00	\$7,843,000.00	\$9,743,000.00

Operations Projection Table Years 6 - 10:

Operations - (100%)					
Fiscal Year	23/24	24/25	25/26	26/27	27/28
Measure B Sales Tax Proceeds	2,000,000.00	2,000,000.00	2,000,000.00	2,000,000.00	2,000,000.00
Quarterly Interest Revenue	50,000.00	50,000.00	50,000.00	50,000.00	50,000.00
Annual Operations Revenue	\$2,050,000.00	\$2,050,000.00	\$2,050,000.00	\$2,050,000.00	\$2,050,000.00

Facilities and Operations/Services accounts estimate for 2018 - 2023 at 0.5% tax proceeds, and Long-Term Operations estimate starting in 2023 and continuing in perpetuity at 0.125%. Contributed by Mr. Lloyd Weer, Auditor.

In addition, the Citizens Oversight Committee sent a recommendation to maintain a 6.85%

⁶ Fiscal estimation provided by Mendocino County Auditor's Office

Prudent Reserve⁷ to the Board of Supervisors. It has been accepted and will accumulate near \$2,800,000 by 2023.

Measure B: Mission and Goals

Both the Mission and Goals for Measure B are made clear in the ordinance language.

Funding improved Services, Treatment, and Facilities⁸ for persons with Behavioral Health conditions by building or remodeling a “psychiatric facility”⁹ and other behavioral health facilities¹⁰,” developing a Regional Training Center¹¹ for Behavioral Health and Public Safety professionals, emphasizing infrastructure that promotes Stabilization and Support, and ensuring that “no less than 25% of the tax revenue go to Services and Treatment.” No more than 75% of proceeds will go towards building or renovating the facilities listed and/or required by the Behavioral Health community.

Future safeguards, such as audits and quality control,¹² along with a reduced, but continued, tax revenue fund of 0.125% ensuring financial assistance with “ongoing operations, services, and treatment” are also part of Measure B mission and goals.

Definitions & Terms

Kemper Plan: A robust exposition developed by Kemper Consulting concerning Behavioral Health in Mendocino County that was contracted by the Measure B Program as a roadmap to a Strategic Plan. There is a Kemper ad hoc committee, that stems from the Citizens Oversight Committee, assigned to the document analysis mentioned in this report.

Ad Hoc Committee: A smaller committee assigned by the primary, standing committee (Citizens Oversight Committee), to a specific project or task.

Supportive Housing: A combination of housing and services intended as a cost-effective way to help people live more stable, productive lives.

CRT: Crisis Residential Treatment is a lower-cost, community-based treatment option in home-like settings that help reduce emergency department visits and divert hospitalization and/or incarcerations.

⁷ Prudent Reserve is an account intended to cover expenses in the event that there is an unexpected fiscal need.

⁸ Overall

⁹ Goal 1 - Inpatient - TBA

¹⁰ Goal 2 - Acute Stabilization and Support Facility - CRT - Approved

¹¹ Goal 3 - BHR Training Facility - Approved

¹² Goal 4 - System for audits not yet created

PHF: Physiological Health Facilities specialize in treating people with acute psychological distress (or who are in crisis) who are experiencing unsafe situations due to their symptoms.

Aftercare: An agency provided service with assistance obtaining medication and life stability after a psychiatric hospitalization to promote reintegration and avoid relapse. Many people with private insurance do not receive this treatment.

Mobile Outreach: A law enforcement based endeavor involving a Mental Health Worker and Peace Officer partnership, addressing Behavioral Health related emergency calls and requests as a team.

Community Education, Awareness, and Support (CEAS): Public and agency-based education regarding theoretical and hands-on topics concerning Mental Health.

Partial Hospital: This service provides a structured, intensive program of outpatient psychiatric services as an alternative to inpatient psychiatric care. This treatment is provided during the day and doesn't require an overnight stay.

Board & Care: Licensed facilities where clients live long term, without time limits, and are cared for by staff members. These facilities are where most conserved clients live.

Rehabilitative Care: Shorter term care that can help people get back, keep, or improve abilities that you need for daily life. These abilities may be physical, mental, and/or cognitive (thinking and learning). This can be integrated into Supportive Housing, Board & Care, and CRT living.

Remote Areas: Unincorporated areas throughout Mendocino County.

Expanded Outreach & Support: Outreach is the activity of providing services or information to any population that might not otherwise have access to those services. A component of outreach is that the group providing it is not stationary. In other words, it involves meeting someone in need of an outreach service at their location.

Approved or Recommended Projects & Services _____

Listed below is the operational, start-up, and fiscal information available for each Approved and Recommended project and service.

A project or service is “Approved” only after the Board of Supervisors approves it.
A project or service is “Recommended” if the Citizens Oversight Committee sends a recommendation to the Board of Supervisors for review and potential approval.

Approved Project 001 - Facility: Behavioral Health Regional Training Center ____

One of two specific deliverables written in the Measure B ordinance, the Behavioral Health Regional Training Center is a designated space for Behavioral Health Workers, Law Enforcement and other First Responders, and Families and Clients to engage in teaching, training, and gathering regarding Behavioral Health topics.

The location is owned and operated by Mendocino County, though the current business model is meant to sustain itself fiscally. This means that time spent using the venue includes a fee. It is the only facility or service that has been designated within Measure B to be operated by the County.

Questions regarding business and facility operations were requested by the Board of Supervisors concerning this project. Those have been addressed here.

Market Size and Segments - Who will Rent, Learn, and Teach here?

Behavioral Health Workers:

People who fall into this category include independent, government, and government contractors involved in the following: psychology, sociology, substance use, acute and chronic mental health conditions, domestic violence and other physical abuse, some genetic disorders, dementia, and, traumatic brain injuries, veterans, trauma and intergenerational trauma.

Also, behavioral health professionals are in demand, and certifying new or developing practitioners is desirable.

Within the immediate region (Humboldt, Lake, Mendocino, Sonoma, and Trinity counties) there are approximately 120 local (not including regional, federal, or state) related agencies, and an unknown quantity of individual practitioners.

Families and Clients:

Many families and individuals within families are facing specific barriers that are in some ways unique to them and need to be addressed as such. They need specific instruction, one-on-one coordination for daily living, respite, and coping tools regarding various aspects of the following: substance use, acute and chronic mental health conditions, domestic violence and other physical abuse, some genetic disorders, dementia, and, traumatic brain injuries, veterans, trauma and intergenerational trauma.

Mendocino County has at least 2,200¹³ confirmed individuals within the system of care and a much larger group of unknown mild to moderate designated clients. The total county population is 87,841.

First Responders and Professionals Working in Psycho-Social Environments:

This audience is made up of people who work closely with the public but who do not necessarily have expertise in behavioral health. Teachers, most Medical Workers, Law Enforcement, First Responders, Librarians, Retail workers, Beauticians, Fitness professionals, and Hospitality workers are all examples of this segment.

Training these individuals in behavioral health disciplines can save lives and prevent escalating situations from becoming unmanageable.

It is nearly impossible to say how many people work under the psycho-social umbrella, but there are thousands of teachers or professors, over 30 law enforcement jurisdictions, and close to 200 non-behavioral health medical facilities within the immediate region.

To attract these groups, initially, Measure B is preparing an introduction and feedback survey that automatically aggregates answers into data to show the level of interest local and regional groups have in patronizing the Behavioral Health Regional Training Center.

The survey questions are posted below:

Q1: How do you feel now that you know about the Behavioral Health Regional Training Center?

(Excited, Interested, Nothing)

Q2: How likely is it that you would come to Redwood Valley to engage in the activities and possibilities described?

(Likely, Not Likely, I would with transportation)

Q3: The location offers the following amenities: Ample Parking, Private Setting, Restrooms, Air Conditioning, Food Storage/Staging, Custodial and Trash, First Responder

¹³ Mendocino County Health and Human Services Agency - Data Reports

Safety Equipment and Simulator, Tables and Comfortable Chairs, a Stage, Large Projector Screen with Projector, a Landline, ADA and Language Services, WiFi, a Comprehensive Audio/Visual System with Control Cabinet, Easels with Paper or Whiteboards, and T.V. Monitors. Other equipment may be included.

How well do they meet your needs?

(Very Well, Okay, but I need other items too, Not Well)

Q4: Applicable to those who would book or give a training/program, given the fee structure below, which option would you use if any?

Please leave suggestions and feedback in the field provided:

Early Bird: \$75 (7:00 A.M. - 9:00 A.M.)

Partial-Day: \$140 (8:00 A.M. - 11:00 A.M., 11:30 A.M. - 2:30 P.M., or 3:00 P.M.- 6:00 P.M.)

Full-Day: \$285 (8:00 A.M. - 6:00 P.M.)

Three-Days: \$785 [8:00 A.M. - 6:00 P.M. (3x in a week or month)]

I'd take advantage of last minute booking deals at \$25 per hour

I'd use grant money or other funding sources to run a program

I would consider sharing the cost and time with another group or agency

Q5: Considering the fee structure, how would you rate the value of these services: 1 to 5
(1 = no value, 5 = excellent value)?

Q6: What type of events would be most interesting to you?

Certification for Mental Health Workers and Continuing Education Credits

Scenario and Role-play simulation or activities involving people in distress

Employment and Daily Living Skills (Applied/Hands-On)

Mental Health Education for the Public

Train the Trainer Workshops

Programs i.e. Parenting with a Diagnosis, Parenting someone with a Diagnosis

Support Groups

Online Learning and Event Attendance

Provider Conferences and Mixers

Other (Please Include More Details)

Q7: How does this location compare with your current training and meeting spaces?

(It's Better and More Convenient, It's not as Convenient, but Might Work, I don't think I'll switch venues)

Q8: What can we do to make the Behavioral Health Training Center more attractive to you and your agency or family?

The survey will circulate in October 2020 with results available in early November. Results will help narrow the Target Audience, making business decisions and Marketing more finite and less costly.

It has been said that County agencies will not use the space because there is a fee to use it.

Intended Amenities and Accommodations _____

Currently, Facilities, IS, contractors, and the ad hoc committee for this project have worked to put together the following offerings and items for the BHRTC space:

- Ample Parking
- Seating for up to 70 people (possibly more)
- Private Setting
- Restrooms
- Air Conditioning
- Food Storage/Staging
- Custodial and Trash
- First Responder Safety Equipment and Simulator
- Tables and Comfortable Chairs
- Stage
- Hands-Free Mics
- Large Projector Screen with Projector
- Landline
- ADA and Language Services
- WiFi
- Comprehensive Audio/Visual System with Control Cabinet
- Easels with Paper or Whiteboards,
- T.V. Monitors
- Other equipment may be included

This is more than other local meeting spaces offer their renters and we offer these amenities at a lower rate. In this way, we have positioned the business to be a more attractive option than our inland competitors.

To cater to those experiencing sensory difficulties, we have a versatile light system that can shut lights off in multiple zones. Facilities has also installed sound dampening panels, but the space

still echoes too much. Tapestries, quilts or other textile art would help control the sound. Sound dampening machines would also be helpful.

ADA adaptors for those with hearing loss, and a potential English to Spanish translation device are also on our list of accommodations to purchase or consider.

There are no windows, so confidentiality is easy to achieve.

If a group wants to meet separately, room dividers could be purchased to accommodate multiple activities at the same time.

The gun locker for first responders is to be installed in the utility room off of the kitchenette. It will be accessible from both an interior and exterior door in case it needs to be accessed when another group is renting the space.

It will not be visible from the main rental area, restrooms, or kitchenette as long as the utility room door remains closed.

All other First Responder tools have a neutral appearance that should not cause alarm or emotional triggers. There will be floor mats, and a plain black, virtual reality training simulator.

Business Projections _____

Business projections for the Behavioral Health Regional Training Center Include: hours of operation, building and business maintenance costs (courtesy of Facilities and Fleet), a monthly revenue goal, and a pricing schedule for how to accomplish that. Examples of failed and successful booking days are shown in a graph below.

**OPEN Monday - Friday
(Weekends by Request)**

**Regular Hours: 8:00 A.M. - 6:00
P.M.**

Special Hours: 7:00 A.M.

Consistent Expenses	Hourly Costs	Monthly Costs	MOU Cost Reduction
Custodial Service	\$42.00	\$630.00	
Building Maintenance Mechanic	\$55.00	\$550.00	
Landscape Maintenance	\$48.00	\$288.00	\$96.00
Management	\$51.50	\$3,862.50	

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Utilities		\$880.00	\$250.00
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Total Estimated Monthly Costs	\$5,864.50
Total Estimated Annual Costs	\$70,374.00
Estimated Annual Costs w/ Contingency	\$80,124.00

**Common Items needing Routine Maintenance per
Facilities & Fleet:**

Roof/Gutter Cleaning - Roof/Gutter
Repair/Replacement (if needed)

HVAC - Preventive Maintenance - Coil Cleaning, Filter Changes, Unit
Cleaning, Winter Startup, etc.

Doors/Locks/Alarms/Plumbing/Fixtures/Lighting/Fans/Electrical, etc.
Repair/Replacement as needed.

Winterizing of Outdoor Piping/Irrigation.
Repair/Replacement as needed.

Property Drain/Ditch Maintenance.

Landscape Trimming and Fall Clean-up. Debris
Removal and Disposal.

Ongoing Landscape Services including Parking Lot/Sidewalk Debris Removal,
Irrigation Maintenance, Tree Pruning, Debris Clean-up/Removal.

Water Heater Inspection.
Repair/Replace as needed.

Hard Flooring Maintenance.

Carpet Cleaning.

**Future Repairs (next 5 years)
Facilities & Fleet:**

Building will need to be painted
within the next few years.

Metal fence maintenance (paint).

Possible roof shingling.

Proposed Fee Structure:

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Early Bird: 7:00 A.M. - 9:00 A.M.	\$75.00	Daily Goal	\$332.67
Partial-Day: 8:00 A.M. - 11:00 A.M., 11:30 A.M. - 2:30 P.M., or 3:00 P.M.- 6:00 P.M.	\$140.00	Weekly Goal (5 Days: 10.5 Hours)	\$1,663.35
Full-Day: 8:00 A.M. - 6:00 P.M.	\$285.00	Monthly Goal	\$6,666.67
Three-Days: 8:00 A.M. - 6:00 P.M. (3x in a week or month)	\$785.00	Annual Goal	\$80,000.04

Custom options available for unique situations such as a traveling program, invitee, or same week unfilled time slot

Earning Ratios per Option				
Early Bird	Add One Partial Day	Add Two Partial Days	Add Full Day	Three Days
\$75.00	\$240.00	\$405.00	\$425.00	\$407.67
Partial Day	Partial Day + Early Bird	Partial Day+1	Partial Day+2	
\$165.00	\$240.00	\$330.00	\$495.00	
Full-Day	Full-Day + Early Bird			
\$350.00	\$425.00			
Three-Days	Three - Days + Early Bird			
\$332.67	\$407.67			

Red = Under Daily Goal
Bold - Meets or Exceeds Daily Goal

Project Projections _____
(Detailed Notes Below Each Spreadsheet)

The total project cost for the training center is estimated to be \$524,985 out of the \$585,258 allocated funds.

Start-up funds to prepare to operate the business will cost approximately \$24,900 including all currently purchased business materials, advertising, and marketing materials. Currently,

business/operations materials are paid for with the 25% services account. A total of \$9,906 has been spent on appliances and furniture.

The current balance for the project is \$272, 698.06 with \$312,559.94 spent (including the purchase of the property).

**Project 001 - Behavioral Health
Regional Training Facility**

Allocations [1]	Estimated Expenditures	Current Expenditures	Current Balance
\$585,258.00	\$524,985.00	\$312,559.94	\$272,698.06

Purchase of Facility [2]	\$278,000.00	\$278,000.00	\$278,000.00	\$0.00
Estimated Improvements [3]		\$153,900.00	\$17,510.94	\$136,389.06
County's Contingency 15% of Improvements Cost		\$23,085.00		
Design Costs/Planning [4]		\$30,000.00	\$17,049.00	\$12,951.00
Internal Costs/Partner/s [5]		\$40,000.00	[6]	

Additional Alternatives (Budget Allowing)		\$63,568.00 [7]	\$0.00	\$0.00
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**Operations - Behavioral Health
Regional Training Facility**

Allocations [8]	Estimated Expenditures	Current Expenditures	Current Balance
\$0.00	\$24,906.00	\$9,906.00	NA

Annual Ongoing Expenses	\$0.00	\$80,000.00		NA
Estimated Start-up Business Costs (One Time) [9]	\$0.00	\$24,906.00	\$9,906.00 [10]	NA

Spreadsheet Notes:

[1] \$50,000 allocated by the Board of Supervisors (BOS) to Facilities and Fleet for the project. \$257,258 allocated by BOS to complete remodel and capital improvements. \$278,000 to purchase the main building.

[2] Approved by the BOS, part of a joint purchase with Mendocino County Sheriff's Office.

[3] Estimated by Doug Anderson of Facilities and Fleet. Number includes: \$4000 for repairs to the Septic System, Landscaping, Flooring and Paint, External Labor Costs.

[4] This is for the Architect's time, plans, and permits.

[5] Project Manager, Facilities, County Council, Purchasing, Behavioral Health, EO, IS

[6] Contracts and inquiries are underway for this and other projects.

[7] Not an Expenditure. These are items that might happen if there's money leftover.

They include: conversion to LED lights, fire sprinklers and new fans.

[8] No funds allocated towards business start-up expenses/operations. Funds come from the 25% proceeds account. No ongoing annual operations funds have been allocated.

[9] Marketing, Furniture, Tech Items, Gun Locker

[10] Furniture, Coffee Maker, Microwave, and Refrigerator purchased out of 25%, non-capital funds.

Approved Project 003 - Facility: Crisis Residential Treatment

Mendocino County could benefit from the cost effective, rehabilitative, and liminal step services available in a Crisis Residential Treatment Facility and Program.

This maximum thirty-day stay location allows people who are nearing or recovering from a severe psychological crisis to spend time in a supportive environment at a lower level of care compared to a PHF or other inpatient facility.

The project will cost an estimated 5.3 million dollars, possibly 4.8 million including the \$500,000 CHFA grant. Current expenditures come to \$502,000.

The collaboration of NAMI, BHAB, and BHHS suggests that the County contract with an operator that will work with other counties (such as Lake) as well as private insurance companies to help meet capacity and operating costs.

Annual operations will approximate \$1,100,000 per year¹⁴.

This amount is consistent with operation costs reported by other CRT programs.

It is possible that the selected contractor could pursue other means of payment aside from reimbursement for Medi-Cal and County realignment funds for the CRT (which will be approximately \$600,000) though this is not guaranteed.

To ensure annual costs are met, in addition to maintenance and landscape, Measure B should plan to allocate \$500,000 annually beginning in 2022: Approved.

An operator will be chosen in mid November 2020.

Project 003 - Crisis Residential Treatment

Allocations [1]	Estimated Expenditures	Current Expenditures	Current Balance
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¹⁴ Information courtesy on Behavioral Health

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	\$5,300,000.00	\$4,800,000.00	\$502,000.00	\$4,798,000.00
CHFA Grant	\$500,000.00	\$500,000.00		
Construction [2]		\$3,256,897.00	\$0.00	\$0.00
Other Contingencies		\$126,784.00	\$0.00	\$0.00
Design Costs/Planning [3]		\$1,127,167.00	\$490,000.00 [4]	\$637,167.00
Internal Costs/Partner/s		\$91,325.25	\$12,000.00 [5]	\$79,325.25

Operations - Crisis Residential Treatment	Allocation/Revenue	Estimated Expenditures	Current Expenditures	Current Balance
	\$500,000.00 [6]	\$500,000.00	\$0.00	\$500,000.00
Annual Ongoing Expenses	[7]	\$1,100,000.00	\$0.00	\$1,100,000.00
Operations Materials and Expenses [8]		\$110,000.00	\$0.00	\$110,000.00

Spreadsheet Notes:

- [1] Funding includes coverage of the purchase of the land, contract with Nacht & Lewis, Internal Costs, contracting with AECOM, and construction of the facility.
- [2] Estimated by Nacht & Lewis and AECOM. This includes construction and sitework (everything aside from the building itself. Project escalation has been added at \$38,887. \$50,000 for utilities installation.
- [3] Nacht & Lewis \$720,000 from 3.3 million dollar contract. AECOM \$332,000. Building Commissioning \$59,167
- [4] Invoices from Nacht & Lewis and AECOM
- [5] Project Manager, Facilities, County Council, Purchasing, Behavioral Health, EO, IS
- [6] Measure B residual fund \$500,000.
- [7] It takes approximately 1.1 million to operate a CRT annually
- [8] Marketing/RFPs, and appliance purchases

Approved - Service: Mobile Outreach

Mobile Outreach would begin as a pilot program that will shift away from the Mobile Outreach and Prevention Services model, to a Mobile Crisis Team.

This intended model will provide three Mental Health Rehabilitation Specialists to respond and ride along with Deputies from the Mendocino County Sheriff's Office.

It was recommended that Measure B allocate Three Hundred Forty Thousand Dollars

(\$340,000) per year for 4 years to fund three Mental Health Rehabilitation Specialists for the Mobile Crisis Team program. (A total of \$1,360,000). The Board of Supervisors agreed, and this new service is being developed.

In addition, it is recommended that outcome statistics are tracked and reported, so that information can be provided on the success of this program.

This is the only way to track its efficacy and make it eligible for future funding.

Recommended - Facility: Psychological Health Facility (or other Inpatient) _____

According to the Behavioral Health collaborative consisting of NAMI, BHAB, and BHHS, Mendocino County could benefit from having an acute psychiatric facility within the county.

This collaboration would suggest that the County contract with an operator that can run a facility independent of additional monies from Measure B aside from project costs and standard maintenance if the building is to remain County owned.

The selected contractor will work with other counties (such as Lake), as well as pursue revenue through private insurance companies and Medicare to help with meeting capacity and operating cost.

This proposal would also require any agency engaging in client placement to cover the cost of their charge's stay if not allowable by insurance. If the PHF is operated similarly to other private facilities, the collaboration believes the program would be able to operate without Measure B dollars to support annual operations costs. No long term Measure B funds have been requested, but may be in the future.

This project has yet to begin, and is expressed as expected costs without allocations and balance.

The following information was gathered from: The California Hospital Association, Aurora Santa Rosa Hospital, and previous estimates obtained by Measure B in conjunction with Mendocino County Behavioral Health:

Renovating a building to create a PHF in a rural area (such as Mendocino County) can cost between \$400 to \$650 per square foot in comparison to a new facility at an estimated \$1122 per square foot. Another measuring or estimation device calculates \$500,000 per bed. For instance, the 27,000 square foot former Howard Hospital building may cost up to \$17 million to renovate (or \$630-\$650 per square foot), while a 16-bed facility may cost approximately \$8 million to renovate according to the \$500,000 per bed model. This excludes some soft costs including the cost of equipment and operations.

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The dark blue cells have been allocated to Architect

Location:	To be determined
Number of Beds:	10 to 16
Building Area: (Gross Square Feet)	8,500+

Capital Costs		
Construction		\$9,690,000
County's Construction Contingency	15%	\$1,501, 030
Estimated Capital Costs (Reflects New Construction, Not Remodel)		
		\$11,191,300

Soft Costs		
Facility Planning and Programming		\$260,000
Design and Engineering		\$1,794,959
Special Consultants (Environmental/CEQA, Behavioral Health Expert)		\$270,000
Geotechnical Investigation/Surveying		\$60,000
Construction Manager		\$930,031
Building Commissioning		\$120,000
Materials Testing (Construction)		\$93,003
Plan Check, Permit and Inspection Fees		\$200,000
Utility Connections		\$300,000
Advertising, Printing & Mailing*		\$5,000
Land Acquisition/Value (1 acre site)		\$500,000
Sub-total		\$4,532,993
Contingency	10%	\$453,299
Estimated Soft Costs		\$4,986,292

Total Estimated Project Cost (Construction+Soft Costs)	\$16,177,592
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Nacht & Lewis Design new build estimate

A PHF project will cost anywhere from 8 million to 17 million according to research trends within the last five years. An average of 12 million is used in the final fiscal section.

A PHF project will be strongly influenced by the chosen operator which will be identified in the winter of 2020. They will be able to help determine the maintenance needs of the facility based

on the systems required, enabling the Facilities & Fleet department to estimate an annual cost.

Overall, the project is estimated to cost anywhere from 8 million to 17 million depending on size, remodel, or build.

Nearly any of the suggested programs and possibly, a facility, could share a building (though not an entrance) with a PHF.

Currently, the Measure B Ad Hoc committee and program staff are working on the beginnings of a business justification for the project, including possible locations.

One location is promising:

677 N State St, Ukiah

8,440 SF

Offered at \$1,100,000 (\$130/SF)

Year Built: 1990



More research on potential locations is taking place.

Recommended - Service: Aftercare for the Privately Insured

On a regular basis, individuals are discharged from an acute psychiatric hospital stay, or have received a crisis (5150) assessment.

Individuals who have Medi-Cal, or are indigent, are offered follow-up services for at least 60-days afterwards to get them connected to long term services.

Unfortunately, if an individual has private insurance or Medicare there is no guarantee s/he will get the needed follow-up services to connect them to those long term services such as medication management. This lack of connection increases the risk for rehospitalization for those who don't receive it.

It is recommended that Measure B allocate Two Hundred Sixty Thousand Dollars (\$260,000) per year for 4 years (\$1,040,000). This will provide follow-up Aftercare to all individuals not eligible for County services who have been discharged from a psychiatric hospital stay or have received a crisis (5150) assessment. Outcome statistics will be tracked and reported so that information can be provided on the success of this program, and allow for continued, outside, funding and advocacy with private insurance and Medicare clients.

This item has been tabled by the Board of Supervisors.

Recommended - Service: Community Education, Awareness, and Support (CEAS)

People with mental health conditions experience discrimination and stigma on a daily basis.

There is a need in our community to provide education and awareness around mental health conditions to law enforcement, physicians, community leaders, and community members to reduce this discrimination and stigma.

This effort could pair with the Behavioral Health Regional Training Center if appropriate.

Too often, discrimination and stigma impact an individual's desire and actions to seek services and get the help they need. Families often feel the pressure of stigma in addition to their loved one with a mental health condition.

They both need assistance navigating community resources and support systems. In fact, this was the most outstanding request in the Kemper Report: coaching and family support. The researcher made a point of singling this out on his page 41 list of recommendations.

If approved, Measure B will allocate Three Hundred Fifty Thousand Dollars (\$350,000) per year for four (4) years towards education (\$1,400,000).

It is imperative that the selected provider apply for grants and seek additional funding opportunities during that four (4) year period to sustain the program in future years.

This item has been tabled by the Board of Supervisors.

Recommended - Facility: Supportive Housing

Housing is a needed resource within Mendocino County, especially for our vulnerable mental health population.

Housing is the first step in prevention and early intervention.

It has been proven that providing housing allows individuals with mental health conditions to improve their lives and succeed with recovery. It creates stability (a hallmark of Measure B) that allows people to begin and succeed in recovery.

It is nearly impossible for an individual to maintain stability without housing, and housing could act as a step down option for some instead of returning them to a life on the streets.

It is proposed that Measure B allocate a one-time amount of One Million Three Hundred Thousand Dollars (\$1,300,000) to purchase and renovate, or build permanent housing for individuals on the coast who are homeless, chronically homeless, or at risk of chronic homelessness and who have a mental health condition. The Citizens Oversight Committee added the caveat that in order to move forward with this project, additional, matching funds would be pursued.



This listing, 24001 S. Hwy 1 in Point Arena, consists of four parcels on approximately four acres with eight detached single family manufactured homes: four 2bd/2 ba, and four 3 bd/2ba. This location could house twenty or more people.

Each unit has a private asphalted driveway, fenced yard, trash/utility enclosure, and covered front porch. The property is next door to a CAL-Fire station, and is within easy walking distance to town, and several beach accesses and public hiking trails.

The owner is asking \$2,530,000 and a 5% Cap Rate.

This listing is more expensive than the allocation suggested, but not if matching funds are found/provided.

This item has been tabled by the Board of Supervisors.

Review - Facility: Board & Care

A board and care can take several forms. It can be a Residential Care Facility for the Elderly (RCFE) that specializes in dementia or traumatic brain injuries. It can also be an Adult Residential Facility (ARF) for people who need long term care at a less restrictive level.

Nearly every conserved client from Mendocino County lives in a Board & Care, most are out-of-county. Support for neural disorders such as dementia and tbi are almost non-existent. Any long term facility will be needed and full.

A step up from Supportive Housing, Board & Cares have the same stabilizing effect for its clients. The same bed, a hot shower and meal, daily activities, and game time keep symptoms minimal most of the time.

An RCFE with 6 to 16 beds will cost approximately \$800,000 to 2.8 million annually to run, and an ARF of the same sizes will cost close to \$620,000 through 1.7 million annually. These are simple buildings, and a single structure, large remodel could cost 1.6 million. To build one, the estimated cost is 2.2 million¹⁵.

Regarding operations, they are run and operated by laypeople who are certified to provide specific care and administration. They can be trained and recruited in Mendocino County.

Review - Service: Rehabilitative Care

Psychiatric rehabilitation, also known as psychosocial rehabilitation, is the process of restoration of community functioning and well-being of an individual experiencing symptoms regarding

¹⁵ Information from California Community Care Licensing - Licensing agency for RCFEs and ARFs in California.

mental health.

Developing this service could allow clients to have access to rehabilitative learning at the CRT, and Behavioral Health Regional Training Center. It also dovetails with the Aftercare practice of monitoring clients who have recently done a 5150 assessment, or returned from a PHF.

There is no financial data on this program. Once the program operator is able to explain the needs and basics of the service, a financial plan can be drawn.

Review - Service: Partial Hospital

Partial Hospital can help everyone, including people who are resistant to inpatient help.

This structured (3 or more days a week) day program offers intensives and care for people who are suffering from life interrupting symptoms, but are able to stay home.

Partial hospitalization programs known to be most effective when used as a step down from residential treatment. This allows a recovering individual to slowly return to everyday life and supports recovery as an ongoing process.

Attending Partial Hospital is very much like spending time at a hospital. There are mandatory groups, therapy, medications review, review of coping skills and rehabilitation, and other services involved in a Partial Hospital.

Because a Partial Hospital is run by high level professionals, the expense would involve Counselors, a Social Worker, and a Prescriber (tele-health?) A Nurse might also be necessary depending on medication management decisions.

A further look into exact costs will be developed.

Review - Service: Expanded Outreach & Support Programs

Expanded outreach and support is something every rural county with a lot of land and not many people needs in order to reach the public in any meaningful way.

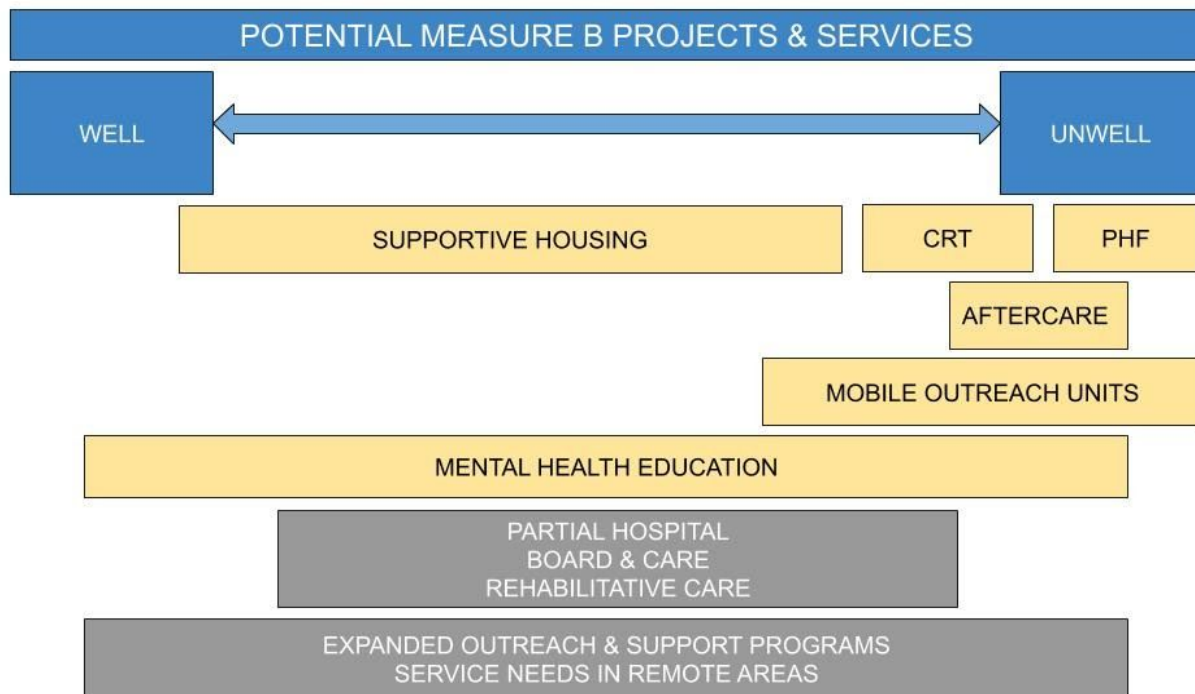
Outreach does not involve staying stationary, and asking for people to come to you. It is a mobile endeavor, and relationship builder. Going to people and giving them information in a way and place that makes them feel comfortable is much more likely to bring results.

This is why the Mobile Crisis program has been such a success in other rural counties.

There are no numbers on what it would take to run this service in Mendocino County at this time. A plan of where the outreach would take place, who would go, and how often will need to

be created before the fiscal portion can be estimated.

Using accrued County statistics, it may be possible to determine what Behavioral Health maladies are happening to people in remote areas and what services may counteract those happenings. With that information, determining what could be done and for what price is possible and encouraged.



Projects and Services.

Recommended projects and services by the Citizens Oversight Committee to the Board of Supervisors are represented in yellow. Not all have been approved.

Dark gray boxes identify Kemper recommendations that are being reviewed as options by the Kemper Ad Hoc and Measure B Ad Hoc committees.

This diagram does not include Operations or Finance.

Why It Works _____

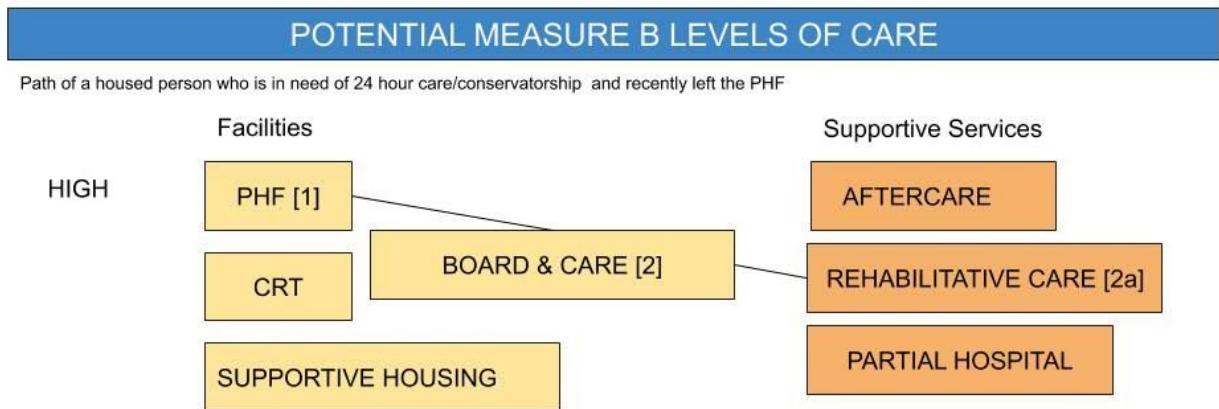
Using the diagram above, we can see that the boxes in yellow create a multi-tiered, redundant support system for people across the health spectrum. This is an important step towards supporting the citizens of Mendocino County with education, stability, and intervention, while reducing the risk of symptom-related arrests, eliminating days-long emergency room stays due to out-of-county transport requirements, and ensuring that people who need inpatient facility care remain in their own community.

Many of the included components were contributed by the collaborative efforts of the Behavioral Health Advisory Board (BHAB), Behavioral Health and Human Services (BHHS), and National Alliance on Mental Illness (NAMI) Mendocino. They worked together to begin identifying gaps in the System of Care that could be met by Measure B funding. Others came from the Kemper Plan.

It has been agreed among them that some concerning factors include care and coverage for people with “mild to moderate” symptoms as well as preventative and/or stabilization models, and remote outreach and services.

Shown below are several ways in which the suggested, recommended, and approved Measure B endeavors can work together to help clients through the step-down process.

- Diagram one shows the path of a conserved client from their PHF stay to stability and support
- Number two is an example of someone who has housing, is high functioning, but is headed for a crisis
- Our third example imagines someone who has been unhoused, and needed a recent visit to the PHF
- The fourth and final shows a person who is housed, high functioning, and did have a crisis which required a PHF stay

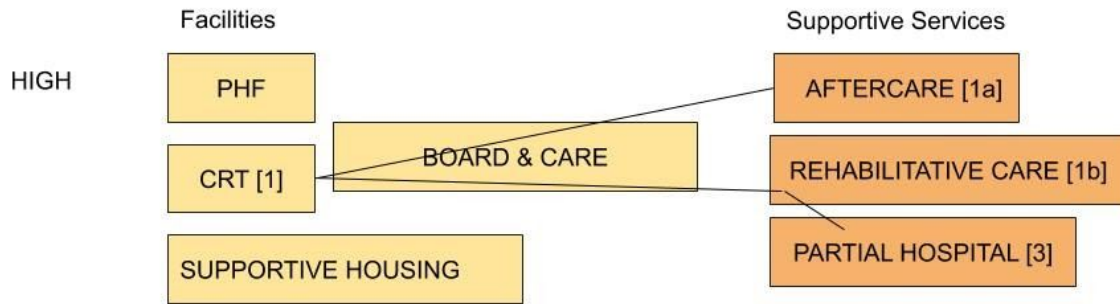


LOW

Mobile Outreach, Education, and Remote Outreach are not measured here because they do not fit in the step-down model, but they do contribute greatly to the outcome of Behavioral Health events.

POTENTIAL MEASURE B LEVELS OF CARE

Path of a housed person who is high functioning and is heading towards Crisis

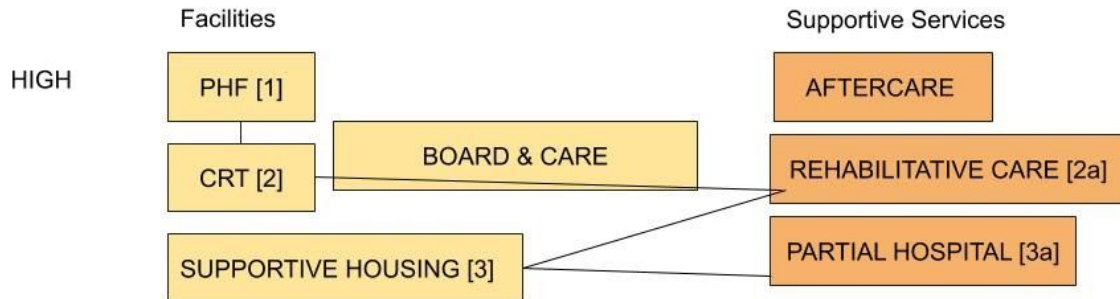


LOW

Mobile Outreach, Education, and Remote Outreach are not measured here because they do not fit in the step-down model, but they do contribute greatly to the outcome of Behavioral Health events.

POTENTIAL MEASURE B LEVELS OF CARE

Path of an unhoused person who is high functioning from a stay at the PHF

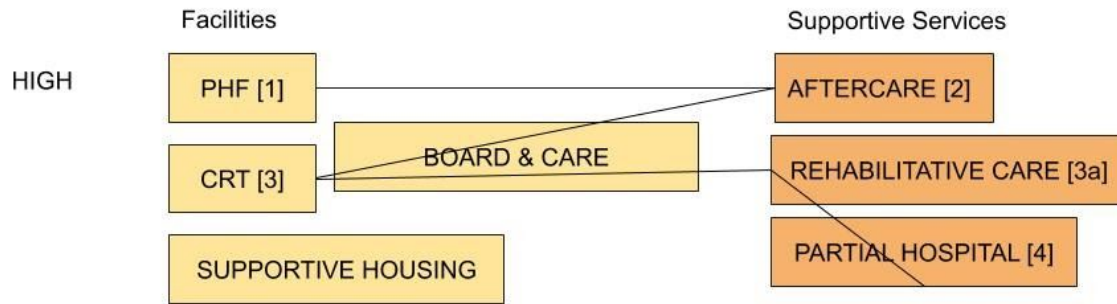


LOW

Mobile Outreach, Education, and Remote Outreach are not measured here because they do not fit in the step-down model, but they do contribute greatly to the outcome of Behavioral Health events.

POTENTIAL MEASURE B LEVELS OF CARE

Path of a housed, Mild to Moderate classified person who is leaving the PHF



LOW

Mobile Outreach, Education, and Remote Outreach are not measured here because they do not fit in the step-down model, but they do contribute greatly to the outcome of Behavioral Health events.

The important takeaway from seeing these various facilities and supportive services in action is that together, they fit both the mild to moderate and severe and persistent populations, allowing for a slow descent into normalcy, and in the case of a housing alternative, can keep people from returning to crisis creating situations such as homelessness.

These diagrams also show that it is not necessarily easier to care for someone labeled mild to moderate. They may use four or more of these hypothetical items, while someone who is conserved may only need two or three. The perception around what certain people do and do not need regarding healthcare (especially mental health) is often wrong, but this proposed combination of facilities and services fits everyone.

Financials

Unfortunately, there is not enough information to deliver a complete fiscal review, but what we do have is posted as well as the actions needed to get the rest of the data.

Facilities	FY 18/19	FY 19/20	FY 20/21	FR 21/22	FY 22/23	FY 23/24	FY 24/25
Annual Revenue	\$6,052,500.00	\$6,525,000.00	\$5,400,000.00	\$5,550,500.00	\$5,700,000.00	\$0.00	\$0.00
Cumulative Revenue	\$0.00	\$12,577,500.00	\$17,977,500.00	\$23,528,000.00	\$29,228,000.00		

Strategic Plan: Mental Health Treatment Act (Measure B)
DRAFT - October 2020

Proposed Facilities							
001 Behavioral Health Regional Training Center [1]	\$275,000.00	\$310,258.00					
003 Crisis Residential Treatment [2]		\$1,600,000.00	\$3,700,000.00				
Recommended - Psychiatric Health Facility [3]				\$4,367,002.00	\$7,632,998.00		
Recommended - Supportive Housing			\$1,300,000.00				
Under Review - Board & Care					\$1,600,000.00		
TOTAL EST COST							
\$20,785,258.00							
BALANCE							
\$8,442,742.00							

Services & Operations							
Annual Revenue	\$2,017,500.00	\$2,175,000.00	\$1,800,000.00	\$1,850,500.00	\$1,900,000.00	\$0.00	\$0.00
Cumulative Revenue	\$0.00	\$4,192,500.00	\$5,992,500.00	\$7,843,000.00	\$9,743,000.00		

Proposed Services and Short Term Operations							
Mobile Outreach [4]			\$340,000.00	\$340,000.00	\$340,000.00	\$340,000.00	
Recommended - Aftercare [5]			\$260,000.00	\$260,000.00	\$260,000.00	\$260,000.00	
Recommended - Education [6]			\$350,000.00	\$350,000.00	\$350,000.00	\$350,000.00	
Recommended - Outreach and Services			\$0.00	\$0.00	\$0.00	\$0.00	
Under Review - Rehabilitative Care				\$0.00	\$0.00	\$0.00	\$0.00
Under Review - Partial Hospital				\$0.00	\$0.00	\$0.00	\$0.00
Under Review - Remote Services			\$0.00	\$0.00	\$0.00	\$0.00	
001 Behavioral Health Regional Training Center [7]		\$9,000.00	\$16,000.00				

Strategic Plan: Mental Health Treatment Act (Measure B)
DRAFT - October 2020

Measure B Program (Staff & Services/Supplies) [8]	\$199,047.00	\$31,389.14	\$608,500.00	\$157,775.00	\$157,775.00	\$157,775.00	
TOTAL EST COST							
\$5,137,261.14							
BALANCE							
\$4,605,738.86							

Long Term Operations	FY 23/24	FY 24/25	FY 25/26	FY 26/27	FY 27/28	FY 28/29	FY 29/30
Annual Revenue	\$2,500,000.00	\$2,500,000.00	\$2,500,000.00	\$2,500,000.00	\$2,500,000.00	\$2,500,000.00	\$2,500,000.00

Estimated Annual Operations Costs							
001 Behavioral Health Regional Training Center	\$80,000.00	\$80,000.00	\$80,000.00	\$80,000.00	\$80,000.00	\$80,000.00	\$80,000.00
003 Crisis Residential Treatment (allocated)	\$1,100,000.00	\$1,100,000.00	\$1,100,000.00	\$1,100,000.00	\$1,100,000.00	\$1,100,000.00	\$1,100,000.00
Recommended - Psychiatric Health Facility							
TOTAL	No priority allocation of long term funds has taken place. \$500,000 has been allocated to the CRT.						
\$500,000.00							
BALANCE							
\$2,000,000.00							

- [1] Total Project Cost Est: \$585,258
- [2] Total Project Est: \$5,300,000
- [3] A PHF can cost from 8 to 17 million.
12 million was used as a placeholder until definite numbers are known.
- [4] Total \$1,360,000 (over 4 years)
- [5] \$1,040,000 Total over 4 years
- [6] \$1,400,000 Total over 4 years
- [7] Business expenses and start-up costs estimate
- [8] Actual and Estimated funds for the Measure B budget per Auditor's Office

Although the projects or services diagramed are not yet part of a complete strategy, combined not only with each other, but with existing services and facilities, a long term strategic plan for Measure B could be identified.

Analyzing how the new will affect the existing will allow the Measure B Program to develop Key Performance Indicators (KPIs) that will provide a long-term plan for success. KPIs are a little bit different for every business or industry, but for the purposes of Measure B they are: Revenue, Fiscal/Operational Sustainability, Risk Management, Client and B2B Use, Client Retention, and Service Quality.

To achieve this, assigning priority to specific facilities and services according to the 0.125% tax revenue, a cost analysis of what each facility or service would supplement or relieve regarding current client outcomes and expenditures, followed by a cost analysis of what each facility or service would cost to build, start, and operate, are needed for a complete fiscal blueprint.

Facility and Service operators will provide answers regarding Revenue, Sustainability, Risk Management (with assistance from County Council). And statistics will help us estimate what successful Client Retention, Use, and Service Quality is supposed to look like.

In addition, an analysis of how each facility and service will affect the existing facilities and services within the system of care (both in and outside of Mendocino County) including adjacent agencies and causes such as legal, and decisions about how associated change management would be implemented, will deliver the information for a complete and integral strategy for Measure B.