# **HEALTH SERVICES**

### Barbie Robinson Director

The mission of the Sonoma County Department of Health Services is to promote, protect, and ensure access to services to support the health, recovery, and well-being of all in Sonoma County.

BUDGET AT A GLANCE	FY 2021-22
Total Expenditures	\$280,361,871
Total Revenues/Use of Fund Balance	\$271,870,444
Total General Fund Contribution	\$8,491,427
Total Staff	579.43
% Funded by General Fund	3.03%

### **DEPARTMENT OVERVIEW**

The Department of Health Services' Public Health and Behavioral Health Divisions, in partnership with the local health system, engage the community through a combination of direct services and a network of community-based contracts with provider agencies.

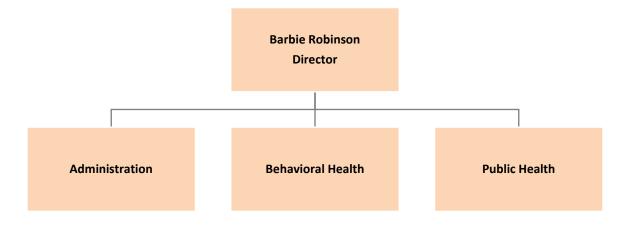
Behavioral Health programs promote the recovery and wellness of children, youth, and adults in need of specialty mental health services and/or substance use disorder services. This is accomplished through the administration of the County Mental Health Plan (MHP) and Drug Medi-Cal fee-for-service system that provides integrated services including specialty mental health, substance use disorder treatment, case management, advocacy, outreach, and education. The Division also supports the Mental Health Board and Mental Health Services Action Steering Committee.

Public Health programs include Environmental Health and Safety; Family Health; Health Care Coordination; Women Infants and Children; Disease Control and Surveillance including Vital Statistics; Healthy Communities, Public Health Preparedness; Animal Services; the Regional Public Health Laboratory; the Coastal Valleys Emergency Medical Services Agency; Special Clinical Services; Public Health Program Support; and support for a variety of commissions and committees. During the COVID-19 pandemic, the Department has implemented comprehensive COVID-19 response strategies to mitigate the impact of the disease and support a safe County reopening.

Administration provides support to the Department's operating divisions including accounting, budgeting, contracting, personnel, compliance and privacy, as well as facilitating internal services from information technology, risk management, facility, and fleet partners. In addition, Administration supports the County's Health Action Collective Impact Initiative as well as the CDC's Continuum of Care Board and other Boards, oversees the Department's epidemiologic responsibilities, and leads the Department's health policy, planning, evaluation, and research activities.

For more information, call (707) 565-4700, or visit http://sonomacounty.ca.gov/Health-Services/.

## **DEPARTMENT ORGANIZATIONAL CHART**



## **FINANCIAL SUMMARIES**

### **Expenditures by Program Area**

	FY 2020-21 Adopted	FY 2021-22 Recommended	Change from FY 2020-21	% Change from FY 2020-
	Budget	Budget	Adopted	21 Adopted
Administration/Special Projects	22,567,180	21,920,929	(646,251)	(2.9)
Access Sonoma	3,260,680	3,529,539	268,859	8.2
Behavioral Health*	111,247,741	120,043,230	8,795,489	7.9
Public Health**	53,935,574	51,032,609	(2,902,965)	(5.4)
Special Revenue Fund	81,690,681	83,835,564	2,144,883	2.6
Total Expenditures by Program	272,701,856	280,361,871	7,660,015	2.8

\*Behavioral Health includes Measure O expenditures of \$13.2 million.

\*\*Public Health does not include COVID-19 response expenses as appropriations will be included during Budget Hearings.

#### **Permanent Positions by Program Area**

	FY 2020-21 Adopted Budget	FY 2021-22 Recommended Budget	Change from FY 2020-21 Adopted	% Change from FY 2020- 21 Adopted
Administration/Special Projects*	89.10	92.10	3.00	3.4
Access Sonoma	12.00	12.00	0.00	0.0
Behavioral Health**	249.86	264.61	14.75	5.9
Public Health***	217.97	210.72	(7.25)	(3.3)
Total Permanent Positions	568.93	579.43	10.50	1.8

\*Administration and Special Projects added 3.0 FTE on 12/15/2020.

\*\*8.0 FTE were added in the Behavioral Health division for the Mobile Support Team on 11/10/2020. Other positions were added on 12/15/2020 in Youth and Family Services and Quality Assurance and Performance Improvement Sections.

\*\*\*4.0 FTE additional Public Health positions were added for the COVID Emergency Response and Health Communities Section.

#### **Department Budget Details**

Expenditures by Character	FY 2020-21 Adopted Budget	FY 2021-22 Recommended Budget	Change from FY 2020-21 Adopted	% Change from FY 2020-21 Adopted
Salaries and Benefits	93,070,100	97,335,696	4,265,596	4.6
Services and Supplies	44,327,867	43,822,811	(505,056)	(1.1)
Capital Expenditures	195,000	286,379	91,379	46.9
Other Expenditures*	124,867,014	128,584,929	3,717,915	3.0
Transfers within the County	10,241,875	10,332,056	90,181	0.9
Total Expenditures by Character	272,701,856	280,361,871	7,660,015	2.8
Revenues/Reimbursements/Use of Fund Balance (Sources)				
General Fund Contribution	8,401,246	8,491,427	90,181	1.1
Use of Fund Balance	3,937,005	9,824,488	5,887,483	149.5
Fees and Charges for Services	12,172,251	11,717,220	(455,031)	(3.7)
State, Federal, & Other Govt. Revenue	120,331,031	123,661,795	3,330,764	2.8
Other Departmental Revenue**	1,502,147	856,582	(645,565)	(43.0)
Internal County Reimbursements and Transfers***	126,358,176	125,810,359	(547,817)	(0.4)
Total Revenues/Use of Fund Balance	272,701,856	280,361,871	7,660,015	2.8

\* Other Expenses include community services contracts associated mainly with Behavioral Health Community Based Organizations.

\*\* Other Departmental Revenue includes Fines, Forfeitures and Penalties derived from Animal Services, Environmental Health Fees, and Substance Use Disorder program.

\*\*\*Internal County Reimbursements and Transfers includes new Measure O revenue replacing County discretionary funding in FY 2020-21.

### **ACCOMPLISHMENTS AND OBJECTIVES**

#### FY 2020-21 Accomplishments

- <u>COVID-19</u>: Led the County's response to the COVID-19 pandemic. Through its COVID-19 Section, and the Vaccine Mission, the staff implemented comprehensive COVID-19 response strategies to mitigate the impact of the disease and support a safe County reopening collaborated with community partners to establish 30 vaccine sites, and as of March 24, 2021 Sonoma County has administered 266,108 vaccine doses. In addition, staff provided and continues to provide all epidemiological and data support to the County's COVID-19 Emergency Response, including: case investigation and tracking, cluster and outbreak analysis, multiple data dashboards (reopening, equity, testing, vaccination, etc.), all data for public presentations and public information, among others. As of March 19, 2021, Sonoma County Lab (SCPHL) has tested 138,899 COVID specimens since testing began in March 2020. Supported our community diversity by establishing an equity-focused, in-house capacity testing for our most vulnerable residents and developed drive-through sites to serve close contacts of COVID-19 cases allowing them to be tested and receive results rapidly within 24-72 hours.
- In partnership with our community clinics and health partners, the Department led a coordinated response to implement surveillance and contact testing strategies to mitigate the disease spread. Via the COVID-19 Urgent

Response and Aid (CURA) project, families were reached with education and prevention information and provided emergency financial assistance.

- <u>Measure O:</u> In November 2020, the voters of Sonoma County passed Sonoma County Local Mental Health Addiction and Homeless Services Measure O, which imposes a 1/4-cent countywide sales tax for ten years, and estimated to generate approximately \$25 million annually. Measure O funding is to provide local mental health and addiction services and facilities for children, adults, veterans, seniors and those experiencing homelessness including: permanent supportive housing; crisis assessment; emergency psychiatric care; early detection and intervention; suicide prevention; and opioid and substance use prevention, treatment and recovery. Measure O funding will serve to preserve essential services and improve and strengthen the behavioral health and homeless system of care. The Measure O Ad Hoc Committee has been meeting and will make recommendations for programs and services to be funded with the new revenue to be presented to the Board of Supervisors in the summer of 2021.
- <u>Homeless Population:</u> During 2020-21, Health teams aided the homeless population during the wildfires in both relocation and support. The Interdepartmental Multi-Disciplinary Team and Homeless Encampment Access and Resource Team contacted and aided homeless individuals by connecting them with County programs and entering the system of care. Intervention efforts also included assisting with clearing homeless encampments and relocating the vulnerable population into safer environments.
- <u>Racial Equity:</u> The Department has actively recruited a bilingual, bicultural workforce for its COVID-19 unit to ensure services can be delivered in a timely, culturally appropriate manner to those most impacted by the disease. The Department hired a Health Equity Manager to explicitly lead our department in an equitable emergency response to COVID-19, building on the work regular staff and leadership have taken on since the pandemic began. It engaged with the Latinx workgroup to develop strategies to provide a culturally appropriate and relevant response to the disproportionate impact of COVID-19 on that community. This has included: disaggregating data by race/ethnicity and language; pop-up testing sites in high-impact Latinx communities; and establishment of culturally responsive outreach and engagement, case management and wrap-around services to support quarantine and isolation.

#### FY 2021-22 Objectives

- COVID-19 Staff will continue its activities related to testing, contact tracing and case investigation, public health lab, communications and engagement and targeting the most impacted communities, including Latinx and indigenous communities in order to keep our community healthy and reopen safely and equitably. In addition, the unit will continue help lead the county in vaccination coordination by working with community members, health partners, vulnerable populations and other groups.
- <u>Behavioral Health System:</u> Health will implement Measure O programs in coordination with Board of Supervisors direction and the approved expenditure plan. Measure O funding is critical to supporting redesigning the County's Behavioral Health system of care to focus on its core mandates, improve the quality of behavioral health services, maximize existing resources, and increase efficiencies to reduce costs, as well as identify and acquire resources for sustainable funding. Implementation of Measure O funding will preserve existing services and improve and strengthen the behavioral health and homeless system of care. Beginning on January 1, 2022, the California Department of Health Care Services will begin California Advancing and Innovating Medi-Cal (CalAIM). CalAIM is a framework encompassing a broad-based delivery system, program, and payment reform across the Medi-Cal program. DHS will participate in a series of CalAIM meetings and planning sessions scheduled to take place in FY 2021-22 that will include determining if and how it will participate in the new Enhanced Care Management (ECM) & In Lieu of Services (ILOS) benefits, which will be the responsibility of Partnership Healthcare Plan (PHP), and replaces the Whole Person Care pilot. DHS will respond to other CalAIM changes as they develop. This may include payment reform, changes in the Medical Necessity definition and an opportunity to join the Outpatient Delivery System (ODS) Waiver to expand the Substance Use Disorder service system.
- <u>Homeless Population/Access Sonoma</u>: The Department will continue to partner with the CDC to seek funding and to utilize anticipated Homeless Housing Assistance and Prevention (HHAP2) and Continuum of Care allocations to support ACCESS Sonoma Interdepartmental Multi-Disciplinary Team (IMDT) and Homeless

Encampment Access and Resource Team (HEART) in the efforts to address homeless encampments and causes of homelessness. The Department will build upon successes and continue to address inequity issues faced by homeless. The Department plans to sustain and expand upon 100 Day challenge successes with Transitional Age Youth who are homeless with emphasis on reducing inequities faced by Black, Indigenous, and People of Color. The Department will collaborate with CDC to seek funding and establish viable placement options for individuals with RVs, Trailers, and Campers that are cost saving and sustainable, and will remodel Mickey Zane Place and Elderberry Commons for sustainable and permanent homeless housing option.

- <u>Racial Equity continuation of effort</u>: The Department will continue to foster a County organizational culture that supports the commitment to achieving racial equity. This includes the continuation of the current mission of facilitating an equitable emergency response to COVID-19, and engaging key community and internal stakeholders to develop priorities and to advance racial equity.
- <u>Strengthening administration</u>: The Department continues to strengthen the administration infrastructure to ensure the efficient and effective administration of the department's programs and services. This includes the modernization and simplification of administrative processes and technologies, improving the integrity of operations, and generate advanced systems and processes for planning and evaluation. These improvements will also lead to an improvement in compliance, as well risk reduction. In addition to improving the department functionality, DHS will also improve the department by building and fostering a highly competent, effective, and engaging workforce.

The Department will continue to identify opportunities to improve its operations through:

- Continue with the redesign of Department programs to improve service provision, maximize revenues, reduce institutional care, improve compliance with State/federal mandates, and improve utilization review processes;
- Continue to improve the Department's fiscal systems including revenue forecasting, fiscal reporting processes to track service provision, program productivity, grant/contract performance and financial status, and oversight and monitoring to meet budget goals and improve services.

# **DEPARTMENT HIGHLIGHTS**

#### **Major Variances**

- Salary and Benefit increase of \$4.2 million is due primarily to additional \$500k to expand the Mobile Support Team in FY2021-22, funding for which was approved in the FY 2020-21 adopted budget. Year over year change also includes additional permanent and term-limited positions for Behavioral Health Program and Administration for \$2.5 million, overall department administration, and other programs approved during FY 2020-21 as part of the pandemic response and financed with COVID-19 available sources.
- State, Federal, and other Government revenue increased by \$3.3 million due to Behavioral Health Medi-Cal reimbursement increase of \$1.4 million and Behavioral Health Administration and Utilization Review budgetary increases due to enhanced invoicing based on historical trend of State reimbursement for administration, quality assurance, and monitoring of services costs of \$2 million.
- Use of Fund Balance increase of \$5.8 million due to Mental Health Services Act Innovation fund balance of \$1.2 million for technology upgrade projects, and one-time use of fund balance of \$2.5 million for High Needs Homeless in Behavioral Health and for Access Sonoma and associated costs until further funding is identified. There is also \$829,000 use of Environmental Health Fee Stabilization fund balance to mitigate cost of doing business increase while leaving unchanged the annual fee rate at the fiscal rate FY 2020-21 level.
- Other Expenditures \$3.7 million increase is associated with Behavioral Health growth in operational costs associated with salary and benefits adjustments and additional staffing, an increase of \$1.4 million in the administration allocation, increase of temporary staffing, and independent contracts with doctors. Additionally Other Expenditures project an increase \$1.5 million within Behavioral Health for Residential Care Facility costs and hospital inpatient utilization due to service level growth. This category of uses includes expenditure programming for innovation program costs financed with Mental Health Services Act available balance.

#### **Key Issues**

- The Department, in partnership with the CDC, continues to address Homelessness and Permanent supportive housing, but faces several issues. The County lacks significant quantities of low entry barrier transitional housing options similar to Los Guilicos Village. It also has an inadequate supply of safe parking and RV parking options for individuals living in vehicles. Additionally, there is a shortage of a fluid continuum of housing such as an indoor-outdoor shelter whereby individuals who struggle with one option can have seamless movement to a viable option at the same location.
- The pandemic has significantly impacted the department's cost and operational structures. The Department has had substantial resources focused on running the COVID-19 response for Sonoma County, and has had to realign its labor, equipment, and other resources. With the length of the pandemic continuing past previous estimates and its continued strain on existing resources, the Department is constantly adapting its funds and resources to support the county and its citizens, while facing an unknown future state.
- Fluctuation in Behavioral Health service utilization continues to be a risk with level of care and/or client count possibly rising above current projections and thus resulting in yet to be identified funding gap.