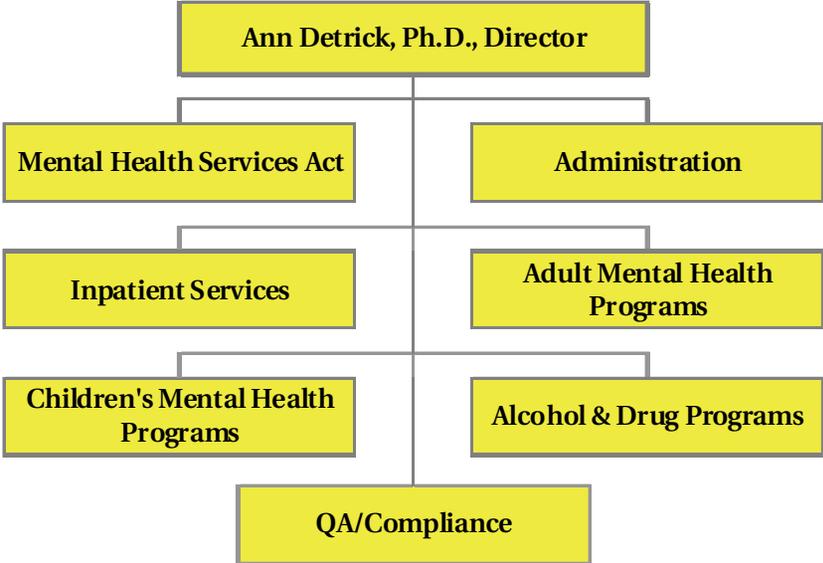
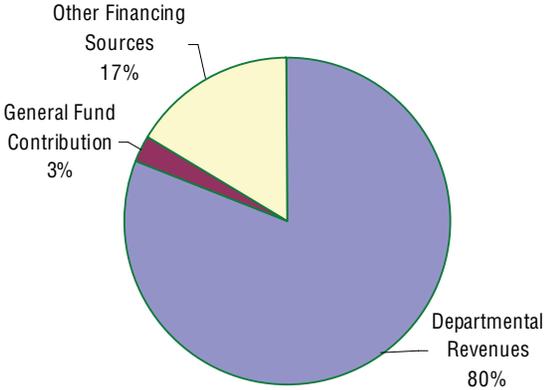


ALCOHOL, DRUG & MENTAL HEALTH SVCS

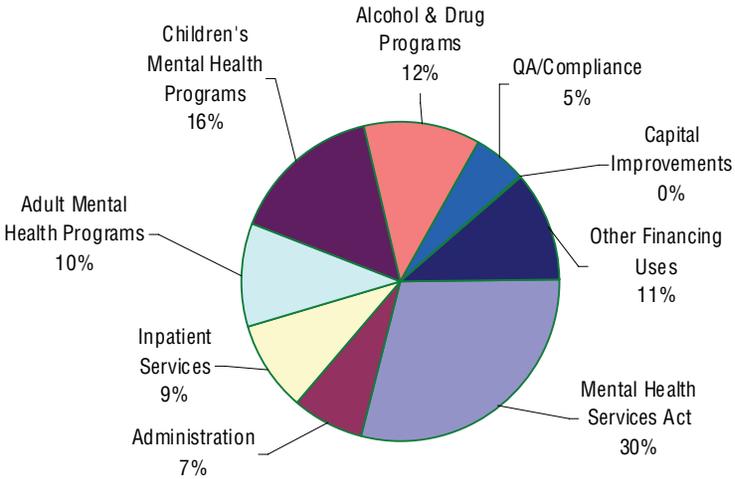
Budget & Positions (FTEs)	
Operating \$	69,861,638
Capital	184,900
Positions	268.3 FTEs



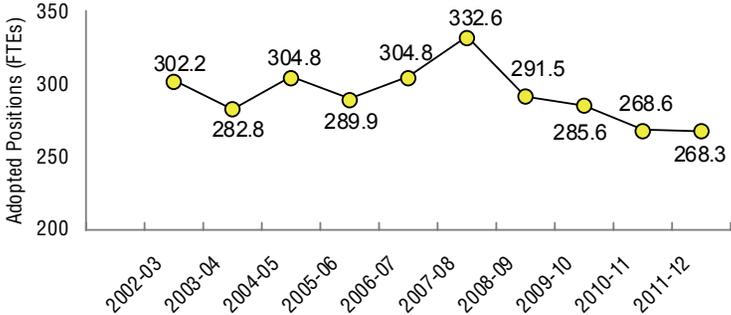
SOURCE OF FUNDS



USE OF FUNDS



STAFFING TREND



ALCOHOL, DRUG & MENTAL HEALTH SVCS

Department Summary

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Mental Health Services Act	\$ 14,952,089	\$ 21,542,915	\$ 23,358,433	\$ 25,139,712
Administration	7,049,223	6,659,755	6,714,011	6,243,397
In-patient Services	9,258,108	8,514,465	8,538,834	8,167,637
Adult Mental Health Programs	9,971,052	9,264,696	8,356,076	9,055,438
Children's Mental Health Programs	16,672,449	14,968,509	12,980,884	13,688,162
Alcohol & Drug Programs	10,557,544	9,920,731	10,198,385	10,286,224
QA/Compliance	4,690,919	5,008,740	4,582,574	4,790,046
Operating Sub-Total	73,151,384	75,879,811	74,729,197	77,370,616
Less: Intra-County Revenues	(6,843,983)	(5,733,197)	(7,148,253)	(7,508,978)
Operating Total	66,307,401	70,146,614	67,580,944	69,861,638
<i>Non-Operating Expenditures</i>				
Capital Assets	--	36,000	36,000	184,900
Expenditure Total	66,307,401	70,182,614	67,616,944	70,046,538
<i>Other Financing Uses</i>				
Operating Transfers	1,343,225	998,783	1,095,839	858,692
Designated for Future Uses	9,492,227	14,153,256	8,269,088	8,789,124
Department Total	\$ 77,142,853	\$ 85,334,653	\$ 76,981,871	\$ 79,694,354

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	\$ 22,324,107	\$ 22,527,444	\$ 22,096,578	\$ 22,860,321
Overtime	496,860	217,131	367,001	357,534
Extra Help	593,936	174,346	--	498,117
Benefits	9,348,106	9,801,028	10,268,972	11,178,480
Salaries & Benefits Sub-Total	32,763,009	32,719,949	32,732,551	34,894,452
Services & Supplies	39,519,681	43,159,862	41,916,646	42,476,164
Public Assistance Payments	868,694	--	80,000	--
Operating Sub-Total	73,151,384	75,879,811	74,729,197	77,370,616
Less: Intra-County Revenues	(6,843,983)	(5,733,197)	(7,148,253)	(7,508,978)
Operating Total	66,307,401	70,146,614	67,580,944	69,861,638
<i>Non-Operating Expenditures</i>				
Capital Assets	--	36,000	36,000	184,900
Expenditure Total	\$ 66,307,401	\$ 70,182,614	\$ 67,616,944	\$ 70,046,538

Source of Funds Summary

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
<i>Departmental Revenues</i>				
Interest	(89,120)	\$ 10,000	\$ 9,650	\$ 20,000
Federal & State Revenues	32,780,093	30,941,837	34,246,994	31,230,397
Other Charges for Services	36,892,141	39,739,201	38,142,483	39,010,935
Miscellaneous Revenue	1,537,946	267,000	401,431	264,961
Revenue Sub-Total	71,121,060	70,958,038	72,800,558	70,526,293
Less: Intra-County Revenues	(6,843,983)	(5,733,197)	(7,148,253)	(7,508,978)
Revenue Total	64,277,077	65,224,841	65,652,305	63,017,315
<i>General Fund Contribution</i>				
	2,810,265	2,972,395	2,972,395	2,271,535
<i>Other Financing Sources</i>				
Operating Transfers	1,257,301	13,334,750	5,887,104	7,901,618
Sale of Property	5,350	--	--	--
Use of Prior Fund Balances	8,792,860	3,802,667	2,470,067	6,503,886
Department Total	\$ 77,142,853	\$ 85,334,653	\$ 76,981,871	\$ 79,694,354

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12	
Pos.	FTE	Pos.	FTE	Pos.	FTE

Position Summary

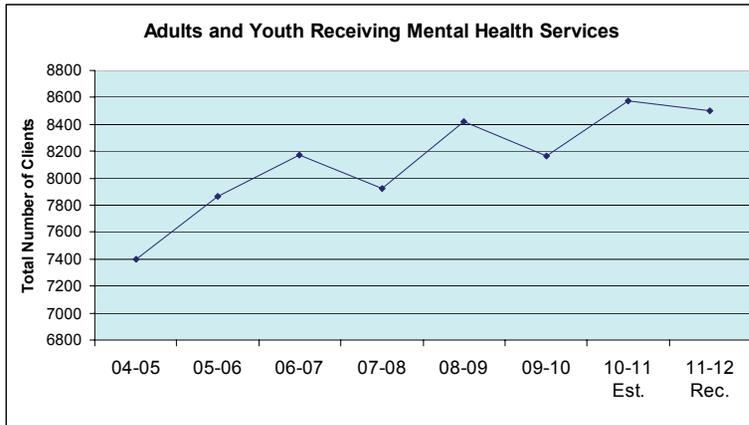
<i>Permanent</i>									
Mental Health Services Act	66.5	58.0	86.9	84.2	86.9	75.4	88.3	88.5	
Administration	38.0	35.1	33.8	29.7	33.8	31.0	33.8	29.7	
In-patient Services	37.0	32.8	32.5	30.4	32.5	32.5	32.8	29.3	
Adult Mental Health Programs	75.2	65.8	60.8	52.7	60.8	58.8	64.5	51.9	
Children's Mental Health Programs	57.9	51.4	39.6	33.6	39.6	35.9	38.8	29.5	
Alcohol & Drug Programs	24.0	18.2	19.0	17.0	19.0	16.2	14.6	15.0	
QA/Compliance	13.4	11.6	14.0	13.5	14.0	11.5	13.0	11.9	
Total Permanent	311.9	272.9	286.5	261.0	286.5	261.3	285.6	255.6	
<i>Non-Permanent</i>									
Contract	--	4.5	--	4.5	--	3.6	--	3.1	
Extra Help	--	8.2	--	3.1	--	9.1	--	9.5	
Total Positions	311.9	285.6	286.5	268.6	286.5	274.0	285.6	268.3	

MISSION STATEMENT

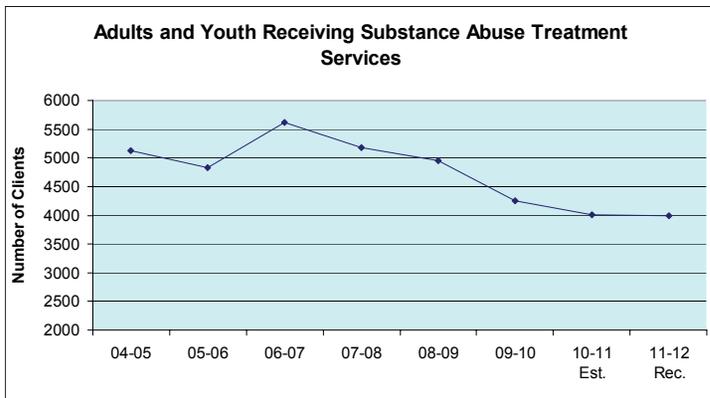
The mission of Alcohol, Drug & Mental Health Services is to promote the prevention of and recovery from addiction and mental illness among individuals, families and communities, by providing effective leadership and delivering state-of-the-art, culturally competent services.

Budget Organization

Alcohol, Drug & Mental Health Services (ADMHS) is organized into seven divisions with a staff of 268.3 FTE. The divisions are: Mental Health Services Act Programs (MHSA), Administration, Inpatient Services, Adult Mental Health Programs, Children's Mental Health Programs, Alcohol and Drug Programs (ADP) and Quality Assurance/Compliance.



The number of mental health clients served will decrease in FY 2011-12 due to fewer indigent clients being served.



The number of clients served is expected to continue decreasing from FY 2010-11 to FY 2011-12, as the department experiences a decrease in State funded services.

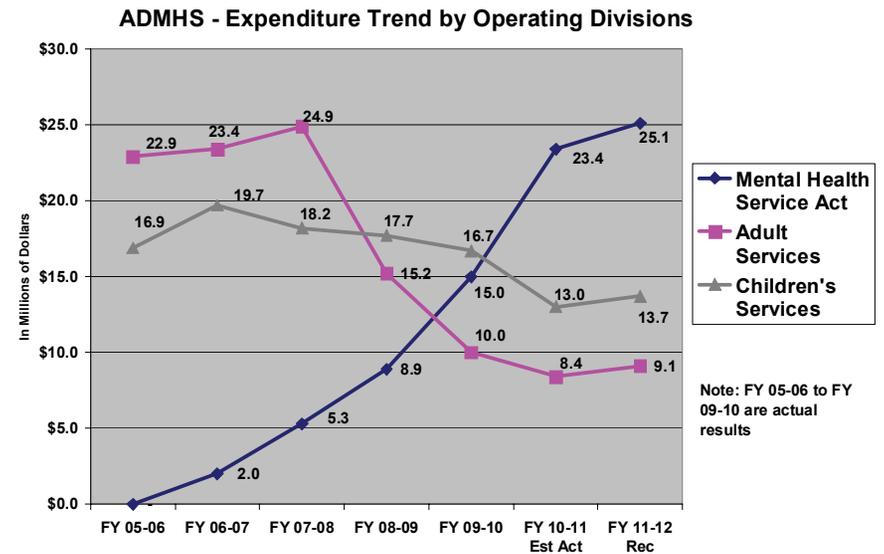
ALCOHOL, DRUG & MENTAL HEALTH SVCS

Department Summary (cont'd)

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

Overall Expenditure Change

There has been a significant expenditure change in mental health services across the past few years with spending in the Child and Adult divisions decreasing, while new Mental Health Services Act (MHSA) spending has been increasing. A description of these new programs may be found in the subsequent section on the Mental Health Services Act.



Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

The Estimated Actual expenditures decreased \$1,151,000 to \$74,729,000 from the Adopted Budget of \$75,880,000. This 1.5% decrease is primarily the result of:

- -\$2,000,000 – decrease in the Children's Division resulting from serving portions of this client population through MHSA specialty programs and reduction of 6.75 FTE to align staffing levels with current caseload;
- +\$1,800,000 – increase in MHSA programs for adult and children services;
- -\$900,000 – decrease in the Adult Division primarily due to reduced utilization of Aurora Vista Del Mar acute hospital services as a result of improved care management.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Department Summary (cont'd)

The Estimated Actual revenues increased \$1,843,000 to \$72,801,000 from the Adopted Budget of \$70,958,000. This 2.6% increase is primarily due to:

- +\$5,400,000 – increase for services provided to adults and children through MHSA programs (\$2.6 million); new State funding for MHSA Innovation Program (\$1.6 million) and for Capital Facilities/Technological Needs (\$1.1 million);
- -\$1,600,000 – decrease in Children’s programs due to reduced number of children served and reduced services;
- -\$1,000,000 – decrease in Adult programs;
- -\$1,000,000 – decrease in Federal funding for Quality Assurance/Compliance programs.

Note: Subsequent to the preparation of the financial statements, the Estimated Actual revenue was reduced by \$1,100,000 to \$783,000. The two primary factors contributing to this decrease are over-accrued revenue from the prior fiscal year in the amount of \$600,000 and lower Medicare revenue than anticipated for the Psychiatric Health Facility due to the percentage of non-paying indigent clients increasing significantly (\$500,000).

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

The Recommended expenditures will increase \$2,641,000 to \$77,370,000, from the Estimated Actual expenditures of \$74,729,000. This 3.5% increase is due to:

- +\$1,800,000 – increase for MHSA programs as they are projected to be fully developed in FY 2011-12;
- +\$700,000 – increase in Children’s programs primarily related to an increase in services provided through community providers;
- +\$700,000 – increase as Adult clinic operations stabilize after several years of decreases;
- -\$470,000 – decrease in Administrative costs from the County Cost Allocation Plan.

Note: As explained earlier, subsequent to the preparation of the financial statements, the FY 2010-11 Estimated Actual revenues of \$72,801,000 were reduced by \$1,100,000. The impact on expenditures and services in FY 2011-12 is currently being evaluated.

The Recommended revenues will decrease \$2,275,000 to \$70,526,000 from the Estimated Actual revenues of \$72,801,000. This 3.1% decrease is primarily due to:

- -\$3,877,000 – decrease in MHSA revenues due to multi-year allocations for FY 2010-11 to FY 2012-13 which were received in FY 2010-11;
- +\$2,381,000 – increase in charges for services throughout the operating divisions (MHSA, Inpatient, Adult, Children’s and Alcohol and Drug Program);

- -\$1,678,000 – decrease in Federal ARRA Medi-Cal payments which terminate on June 30, 2011;
- -\$700,000 – decrease in County General Fund Contribution (\$300,000 of which was “one-time” funding in FY 2010-11 to support on-going services for indigent adult clients with complex co-occurring mental health and alcohol/drug disorders);
- +\$425,000 – increase in Realignment revenues;
- +\$393,000 – increase in State Aid Drug Medi-Cal for ADP;
- +\$290,000 – increase in Administrative Charges to MHSA and ADP;
- +\$228,000 – increase in new Federal grants in the Alcohol and Drug Program (ADP);
- +\$165,000 – increase in insurance payments and patient fees.

Note: As explained earlier, subsequent to the preparation of the financial statements, the Estimated Actual revenues of \$72,801,000 were reduced by \$1,100,000.

Significant Staffing Changes (FY 2010-2011 Adopted Budget to FY 2011-2012 Recommended Budget):

Staffing in the FY 2011-2012 Recommended Budget will remain effectively flat at 268.3 FTEs (including Contractors on Payroll and Extra Help) compared to 268.5 FTE in the FY 2010-2011 Adopted Budget. Although overall FTE changes are minimal, staffing within the funds reflect the categorical funding evolution within the Department. The most significant changes are:

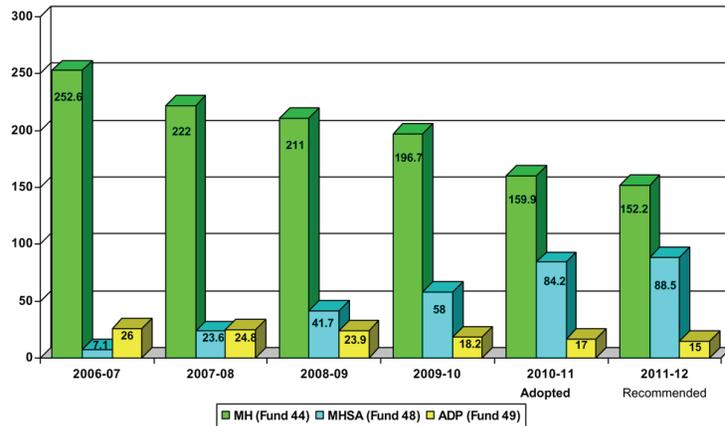
- +8.1 FTE in the MHSA division, primarily in the new Prevention and Early Intervention, Capital Facilities/Technological Needs and Innovation Programs.
- -4.7 FTE in Children’s mental health clinics.
- -1.8 FTE in ADP staff.
- -1.7 FTE in Quality Assurance.

The graph on the next page depicts changes in the number of staff over the past five years. ADMHS has decreased from 252.6 FTE mental health staffing in FY 2006-07 to a projected low of 152.2 (-100.4 FTE) in FY 2011-12. The decrease in this mental health fund is a reflection of the reduction in Realignment and VLF (Vehicle License Fee) revenues and the elimination of the Multi-agency Integrated System of Care Program (MISC) for children’s services. Over the same period, the MHSA Division has increased from 7.1 FTE to a proposed 88.5 (+81.4 FTE) in FY 2011-2012. Due to diminishing resources, ADP Division has decreased from 26 FTE to 15 FTE in FY 2011-12. The Department continues to realign staffing based on available funding sources while creating a cohesive system of care for adult and children with alcohol, drug or mental health service needs.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Department Summary (cont'd)

ADMHS FTEs by Fund



Liabilities from Prior Periods reflected in FY 2010-11 and FY 2011-12

Self Reported Liabilities and Cost Settlements with the State

The programs and services provided by the Department are funded through a combination of local, State and Federal funds. During FY 2007-08, the County became aware of claiming and cost reporting practices that appeared incorrect. These practices were immediately discontinued and disclosed to the State Department of Mental Health (DMH). ADMHS has developed policies and procedures to ensure appropriate documentation, billing and reimbursement processes. As of April 2010, the outstanding liability from the self reported issues is \$8.9 million.

The dollars ADMHS collects from the State for mental health services provided to Medi-Cal beneficiaries are subject to a complex and lengthy cost settlement process. ADMHS is required to submit an annual Cost Report which reports all costs associated with providing services for a given fiscal year (actual cost). The actual cost is one component that the State reviews when performing its "cost settlement" process. In this process, the State settles to the lower of: actual cost; published charges which are the fees charged to the general public (as adopted by the Board of Supervisors); or the State Maximum Allowable (SMA) rate, which is set by the State.

The cost settlement process results in a preliminary settlement, which typically takes place two years after the close of a fiscal year. However, the settlement is not complete until the DMH "audit settlement" is completed, approximately five years after the close of any given fiscal year. This lengthy settlement process means that the Department is at risk for payback or has to wait for its approved payment for up to five years after services have been provided. The Department

estimates that liability for prior year routine cost report settlements is \$3.6 million.

The liabilities described above will be met through funds set aside in a General Fund audit designation. Release of funds from the audit designation will be phased to correspond with payment of these liabilities. At this time, it is estimated that \$5.0 million will be paid to the State in FY 2010-11 and the remaining \$7.5 million will be paid in FY 2011-12 or subsequent years, for a net total of \$12.5 million. However, the actual release of funds could vary, since payment is due to the State within 60 days after receiving an invoice. At the time of this publication, the County has received invoices in the amount of \$3 million but has received audit reports indicating total amounts due of approximately \$5.0 million.

Audit Appeal

As described above, DMH audits take place approximately five years after the close of any given fiscal year. The FY 2002-03 Short Doyle Medi-Cal Audit Report was provided to ADMHS by DMH in February, 2008. The audit contained a significant finding regarding the disallowance of Medi-Cal billing for child/adolescent mental health services provided by ADMHS' interagency partners, Department of Social Services (DSS), Probation and Public Health through the Multi-Agency Integrated System of Care/Counseling and Education Center (MISC/CEC). The finding represents a potential financial liability initially estimated at \$14.4 million for FY 2002-03 through FY 2007-08.

In FY 2008-09, the State withheld \$2.2 million for the FY 2002-03 disallowance of the partner agency portion of the MISC program, causing a \$0.4 million additional gap for ADMHS. During FY 2009-10, the County received the FY 2003-04 Short Doyle Medi-Cal Audit Report and paid the amount assessed, \$2.6 million. In February 2011, the Department received the FY 2004-05 Audit Report which contains an assessment of \$2.15 million; however, at the time of this writing, the invoices have not yet been received. In January 2011, the County paid an assessed \$1.8 million related to the Multi-agency Integrated System of Care Program/Counseling and Education Center (MISC/CEC) partner agency denied services for FY 2005-06. (This assessment was based on a claim file review, whereas all other assessments came through the normal financial audits.)

In light of the audit findings, the County discontinued the MISC/CEC program whereby DSS, Probation and Public Health had claimed Medi-Cal for services they provided to child and adolescent mental health clients. In its response to the FY 2002-03 Audit Report, the County submitted a proposed settlement to eliminate the potential partner agency liability for the multi-year period of FY 2002-03 through FY 2007-08. In January 2011, the County received a counter-settlement from the State and the County is continuing to negotiate a global settlement. In addition, the County is appealing the FY 2002-03 through FY 2004-05 Audit findings as they relate to the MISC/CEC program. At the time of this publication, the appeal of the FY 2002-03 MISC finding is scheduled to be heard on September 2011. As a result of the payments referenced above, the potential multi-year financial liability is currently estimated at \$8.8 million.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Department Summary (cont'd)

Departmental Priorities and Their Alignment with County Goals

The Department provides treatment, rehabilitation and support services to approximately 4,261 clients with addiction problems and 8,174 child and adult clients with a mental illness and faces significant challenges in FY 2011-12 as described below.

Increasing Reliance on Mental Health Services Act (MHSA) Funds:

The County Mental Health Department (ADMHS) has been responsible for caring for the State mandated Medi-Cal population of children and adolescents with Serious Emotional Disturbance (SED) and adults with Serious Mental Illness as resources are available and has relied heavily on State Realignment and Federal Medi-Cal funding for essential services. With the passage of the Mental Health Services (MHSA) Act in November, 2004, ADMHS, like other County Mental Health Plans, has deployed MHSA resources to reconfigure its system toward new service delivery models. The MHSA dollars have been a critical resource in the face of declining resources. To successfully manage and operate a system of care for persons who fall within ADMHS' mandate, the Department will continue to exercise cost containment, fiscal and programmatic efficiencies, and integration of Medi-Cal, Realignment and the Mental Health Services Act (MHSA) funding sources.

MHSA funding declined in FY 2010-11 due to the reduction in personal income tax and the State economy. This trend is expected to continue in FY 2011-12, and then increase in FY 2012-13. During FY 2010-11 and FY 2011-12, the Department will draw on local MHSA reserves set aside for use during years when there is a funding decline. It is anticipated that current reserves are sufficient to continue existing programs through the end of FY 2011-12 when the reserve balance is projected to be approximately \$5.1 million.

Providing Services to Persons who are Indigent and Managing Unreimbursed Costs: In FY 2010, in light of increasing costs, the Department moved forward with a policy decision to reduce the provision of mental health services to indigent persons who do not fall within its mandated population of persons with serious mental illness. A new MHSA-funded Innovation Program was implemented in FY 2010-11. Through this MHSA funding, the Department is applying a nationally recognized, proven practice for helping qualified indigent persons with serious mental illness to gain disability and health care benefits. Success of this program will benefit individuals and will ultimately enhance Medi-Cal for the Department.

In FY 2010-11, the County provided one-time funding for psychiatric care for approximately 150 indigent clients with complex co-occurring mental health and substance use conditions for whom there are limited community alternatives. The Department will face ongoing difficulties in identifying appropriate referral sources for these persons in FY 2011-12.

There is an unmet community need for services to people with mild or moderate mental health symptoms who do not fall within State mandated client populations. To support mental health service delivery alternatives for indigent persons in these circumstances, the Department provided MHSA Prevention and Early Intervention funding to community health centers in North and South County. In the past year, ADMHS also has worked in partnership with the Public Health Department to refine the referral process and develop training opportunities for the Public Health Department physicians. In FY 2011-12, ADMHS will continue to provide consultation and education services to Department of Public Health primary care physicians to facilitate their provision of mental health assessments for persons with mild to moderate conditions who fall outside of ADMHS State mandated population of persons with serious mental illness.

Changes in ADP Treatment Services: The Department's Alcohol and Drug Program Division (ADP) has responsibility for ensuring the delivery of publicly funded alcohol and drug treatment and prevention programs. Between FY 2008-09 and FY 2009-10, historic Substance Abuse and Crime Prevention Act (SACPA) funding of approximately \$2 million per year was eliminated. Overall, ADP revenues have remained relatively flat for FY 2010-2011 and will increase slightly for FY 2011-2012 due to modest increases in Drug Medi-Cal (DMC), CalWORKs and the award of three Substance Abuse and Mental Health Services Administration (SAMHSA) grants totaling \$1.1 million. These funding streams are targeted to specific clientele or new projects to serve new unique clients.

Potential Impact of the Governor's FY 2010-11 Proposed Budget: The recommended budget does not include potential impacts contained in the Governor's proposed budget.

The key projects and strategic actions address the County's Critical Issues of Health Care and Social Service Delivery and Financial Stability of the County and are aligned with County goals as follows:

Goal 1: Efficient and Responsive Government: An Efficient, Professionally Managed Government Able to Anticipate and to Effectively Respond to the Needs of the Community.

Current Year (FY 10-11) Accomplishments:

- Restructured mental health community-based service delivery systems to support more integrated, local systems of care while achieving management cost savings. Three regional managers now oversee the Child/Adult Mental Health Clinics, Crisis and Recovery Emergency Services (CARES) and provider service;
- Continued to focus on business improvements at ADMHS' Clinics by establishing monthly expense and revenue models and conducting weekly reviews of revenue at each clinic;
- Developed standard client scheduling and rolled out new scheduling software to all ADMHS sites with ongoing reviews and planned refinements;
- Reassigned patient representatives, who set up client billing data at the Clinics, from clinical to

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Department Summary (cont'd)

fiscal oversight. This has led to improved communications, billing and standardized duties;

- Completed timely cost report settlements with service providers for FY 2008-09 and FY 2009-10 in accordance with new fiscal procedures;
- Strengthened service delivery and fiscal oversight by conducting Quarterly "Scorecard" reviews of programmatic and fiscal performance;
- Updated and revised entire ADP monitoring policies and procedures to ensure greater consistency, accuracy and accountability;
- Initiated collaborations between ADMHS and the Public Health Department to improve coordination of care.

Proposed Strategic Actions:

- Maintain focus on internal controls to monitor documentation of services, accurate and timely billing, and compliance activities in order to achieve fiscal and quality management goals;
- Continue to ensure that service levels align with available funding and revenue streams by ongoing monitoring of revenues and expenditures;
- Complete implementation of standard client scheduling and billing procedures by monitoring compliance protocols for consistency.

Goal 2: Health and Safety: A Safe and Healthy Community in Which to Live, Work and Visit.

Current Year (FY 10-11) Accomplishments:

- Increased housing for at least 26 persons with mental illness through MHSAs funding to support 12 units of an affordable housing development, Rancho Hermosa, in Santa Maria;
- Continued implementation of the MHSAs Workforce Training & Education (WET) Plan by providing a two-week Consumer/Family Peer Support Training for 37 consumers and family members, of whom 14 were bilingual;
- Hired eight peer/consumer interns, including six bilingual individuals, to fulfill peer support roles across ADMHS Clinics and Crisis and Recovery Emergency Services (CARES) sites County-wide;
- Implemented Prevention and Early Intervention services across the County after receiving Plan approval from the State Department of Mental Health (DMH);
- Received State DMH approval for the MHSAs Capital Improvement/Technological Needs Plan to improve security of department facilities, as required under Federal confidentiality laws; restructured the ADMHS website; and established computer training and skill building for clients in Recovery Learning Centers in Santa Barbara, Santa Maria and Lompoc;

- Received State DMH approval for MHSAs Innovation Program and implemented a project to help indigent persons with serious mental illness gain disability and health care benefits. Innovation Program components include hiring four part-time consumer/family member peers and funding one part-time homeless discharge planner in the County jail;
- Developed an outreach and engagement pilot project with input from consumers, family members and criminal justice representatives, using current Assertive Community Treatment resources to respond to individuals at high risk due to severe mental illness symptoms;
- Received three new SAMHSA grants totaling \$1.1 million per year for three years: the Drug Court Grant, Youth Re-Entry Grant and Family Treatment Court Grant will serve new clients in the ADP treatment system and provide enhanced services..

Proposed Strategic Actions:

- Building on the goals of MHSAs, increase the involvement of consumers and families in all Department activities and continue efforts to improve service access for Hispanic persons and families across communities;
- Further integrate alcohol/drug and mental health services on a clinical and administrative level on behalf of individuals with co-occurring conditions;
- Continue to review service use, cost and outcome indicators for mental health and alcohol and drug programs for Department and Community Based Organization (CBO) services countywide, to ensure the most effective resource allocation.

Proposed Key Projects:

- Monitor the activities of recently implemented MHSAs projects to ensure compliance with approved Plans (Prevention and Early Intervention, Technology and Innovation);
- Increase focus on review of assessment, treatment planning and service delivery activities in support of consistency in practices and quality of work efforts;
- Complete planning activities initiated to review the Children's Mental Health System of Care, with input from constituents and interagency partners;
- Refine dashboard/tracking tools to continue to improve ADMHS' real-time tracking and monitoring of expenses and revenue generation;
- Redesign the Department's website and implement video conferencing between ADMHS locations to improve internal and external communications;
- Collaborate with the Public Health Department to initiate Medi-Cal Section 1115 waiver to better serve the community through improved integration of primary and mental health services.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Mental Health Services Act

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Program Administration & Support	\$ 2,547,396	\$ 3,167,060	\$ 2,918,938	\$ 3,329,203
Adult Programs	10,936,077	14,265,093	15,844,434	17,046,760
Children/Transitional Age Programs	1,076,143	3,707,419	4,186,299	4,338,539
Co-Occuring Programs	392,473	403,343	408,762	425,210
Operating Sub-Total	14,952,089	21,542,915	23,358,433	25,139,712
Less: Intra-County Revenues	(255,955)	(716,059)	(1,514,943)	(1,585,213)
Operating Total	14,696,134	20,826,856	21,843,490	23,554,499
<i>Non-Operating Expenditures</i>				
Capital Assets	--	6,000	6,000	154,900
Expenditure Total	14,696,134	20,832,856	21,849,490	23,709,399
<i>Other Financing Uses</i>				
Operating Transfers	--	--	214,076	214,734
Designated for Future Uses	8,958,352	534,452	2,285,593	--
Division Total	\$ 23,654,486	\$ 21,367,308	\$ 24,349,159	\$ 23,924,133

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	4,749,733	6,668,728	7,156,751	7,448,889
Overtime	80,984	2,000	7,983	7,900
Extra Help	119,913	6,500	--	122,168
Benefits	1,829,925	2,934,073	3,377,009	3,653,527
Salaries & Benefits Sub-Total	6,780,555	9,611,301	10,541,743	11,232,484
Services & Supplies	8,171,534	11,931,614	12,816,690	13,907,228
Operating Sub-Total	14,952,089	21,542,915	23,358,433	25,139,712
Less: Intra-County Revenues	(255,955)	(716,059)	(1,514,943)	(1,585,213)
Operating Total	14,696,134	20,826,856	21,843,490	23,554,499
<i>Non-Operating Expenditures</i>				
Capital Assets	--	6,000	6,000	154,900
Expenditure Total	\$ 14,696,134	\$ 20,832,856	\$ 21,849,490	\$ 23,709,399

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Source of Funds Summary				
<i>Departmental Revenues</i>				
Interest	\$ 54,635	\$ 120,000	\$ 120,000	\$ 100,000
Federal & State Revenues	14,922,684	13,406,551	16,153,746	12,276,380
Other Charges for Services	5,229,767	5,501,290	8,124,595	7,738,039
Miscellaneous Revenue	54,681	--	300	--
Revenue Sub-Total	20,261,767	19,027,841	24,398,641	20,114,419
Less: Intra-County Revenues	(255,955)	(716,059)	(1,514,943)	(1,585,213)
Revenue Total	20,005,812	18,311,782	22,883,698	18,529,206
<i>Other Financing Sources</i>				
Use of Prior Fund Balances	3,648,674	3,055,526	1,465,461	5,394,927
Division Total	\$ 23,654,486	\$ 21,367,308	\$ 24,349,159	\$ 23,924,133

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
Program Administration & Support	5.0	5.3	4.0	6.2	4.0	6.1	4.0	6.0
Adult Programs	49.5	43.0	67.5	63.4	67.5	54.2	69.3	66.8
Children/Transitional Age Programs	6.0	6.7	12.4	11.8	12.4	12.1	12.0	12.9
Co-Occuring Programs	6.0	3.0	3.0	2.8	3.0	3.0	3.0	2.8
Total Permanent	66.5	58.0	86.9	84.2	86.9	75.4	88.3	88.5
<i>Non-Permanent</i>								
Contract	--	1.3	--	1.4	--	1.5	--	1.4
Extra Help	--	1.4	--	--	--	2.6	--	3.8
Total Positions	66.5	60.7	86.9	85.6	86.9	79.5	88.3	93.6

SERVICE DESCRIPTION

The MHSA Programs are funded by Proposition 63 and are intended to transform the mental health system to be more culturally competent, consumer and family member driven and focused on wellness.

Significant Changes (FY 2010-11 Adopted Budget to FY 2010-11 Estimated Actual)

The Estimated Actual expenditures increased \$1,815,000 to \$23,358,000 from the Adopted Budget of \$21,543,000. This 8.4% increase is the result of:

- +\$930,000 – increase due to staffing of three MHSA programs: Prevention and Early Intervention (PEI), Capital Facilities/Technological Needs, Workforce Education and Training (WET), as well as the expansion of existing Community Services and Supports (CSS) programs which have increased service levels for qualifying mental health clients;
- +\$798,000 – increase in charges for staff for services to MHSA programs;
- -\$144,000 – decrease in Administration charges to MHSA due to lower Indirect Cost Rate Plan (ICRP) charges;
- +\$139,000 – increase in the use of temporary nurses in programs due to difficulty recruiting and retaining regular nursing staff;.
- +\$70,000 – increase due to upgrades and improvements on ADMHS facilities.

The Estimated Actual revenues increased \$5,371,000 to \$24,399,000 from the Adopted Budget of \$19,028,000. This 28% increase is the result of:

- +\$1,824,000 – increase in Medi-Cal, ARRA, and related revenues, as Medi-Cal penetration rates for major programs exceeded planned levels;
- +\$1,626,000 – the Innovation Program was approved in FY 2010-11 and received a three year funding allocation for FY 2010-11 to FY 2012-13;
- +\$1,121,000 – the Capital Facilities/ Technological Plan was approved in FY 2010-11 and this is the first year allocation;
- +\$799,000 – increase in intra-departmental revenue due to charges for staff providing services to MHSA programs.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

FY 2011-12 Recommended expenditures will increase \$1,782,000 to \$25,140,000 from the Estimated Actual of \$23,358,000. This 7.6% increase is the result of:

- +\$768,000 – increase in contracts with Community Based Organizations (CBOs) to fully implement the Prevention and Early Intervention programs and expansion of Santa Maria ACT (Assertive Community Treatment) to provide residential support services to persons who have been receiving more expensive Institute for Mental Disease (IMD) services;

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Mental Health Services Act (cont'd)

- +\$691,000 – increase in Salaries and Benefits for the expansion of the Partners in Hope and MHSA Innovation Program and increase in retirement contribution rates;
- +\$272,000 – increase due to Indirect Costs charged for ADMHS administration; allocation based on salary and benefit levels;
- +\$158,000 – Increase in County assessed Cost Allocation Plan charges based on growth of MHSA programs;
- -\$142,000 – decrease in budgeted use of temporary nursing staff.

FY 2011-12 Recommended revenues will decrease \$4,285,000 to \$20,114,000 from the Estimated Actual of \$24,399,000. This 17.6% decrease is the result of:

- -\$2,600,900 – decrease due to a three year funding allocation for Innovation Program received in FY 2010-11, with no funds expected in FY 2011-12;
- -\$1,121,000 – decrease due to funding of Capital Facilities/Technological Needs projects received in FY 2010-11;
- -\$906,000 – decrease due to the termination of ARRA funding as of June 30, 2011;
- +\$672,646 – increase for continuation of WET projects in FY 2011-12;
- +\$519,000 – increase from Medi-Cal and related revenues in Community Services and Supports (CSS) programs;
- -\$465,800 – decrease in CSS funding due to lower statewide FY 2011-12 tax receipts.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
--	--------------------	---------------------	-------------------------	-------------------------

Recurring Performance Measures

Program Administration & Support

In order to assist law enforcement to respond to persons with mental illness or addiction who may be in crisis, provide 960 hours (32 hours/person) of Crisis Intervention Training (CIT) to 30 law enforcement personnel.	120%	100%	100%	100%
	1,152	960	960	960
	960	960	960	960

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Mental Health Services Act (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
To support consumer recovery and independence, of the 15 consumers and family members trained, place 6 trainees in internship positions for a minimum of a 6-month stipend-funded program annually.	--	40% 6 15	133% 8 6	100% 6 6
To support consumer recovery and independence, the department will provide 1,200 hours (80 hours per person) of employment training to 15 consumer and family members in preparation for placement into an internship annually.	--	100% 1,200 1,200	233% 2,800 1,200	100% 1,200 1,200
Adult Programs				
Increase the social, emotional and life skill functioning of adults (26-59 years) as demonstrated by maintaining the psychiatric hospitalization rates of 200 adult clients in MHSA ACT Programs at or below 9%.	7% 14 197	9% 18 200	5% 9 189	9% 18 200
Increase the social, emotional and life skill functioning of older adults (60 years) as demonstrated by maintaining the psychiatric hospitalization rates of 45 older adult clients in MHSA ACT Programs at or below 7%.	4% 2 46	8% 4 50	4% 2 50	7% 4 50
Children/Transitional Age Programs				
Increase the resiliency and social-emotional development of transitional age youth (16-25 years), as shown by maintaining the psychiatric hospitalizations rates of these clients in MHSA ACT Programs at or below 10%.	4% 1 19	10% 2 19	0% 0 24	10% 2 20

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Prevent out-of-home placements by increasing the resiliency and social-emotional development of children (0-16 years) which will maintain the out-of-home placement rate of clients in the MHSA SPIRIT at 5 or less.	15% 3 20	100% 5 5	60% 3 5	100% 5 5
	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Program Administration & Support				
Division Chief	2.0	1.0	1.0	1.0
Cost Analyst	1.0	1.0	1.0	1.0
Department Business Specialist	2.0	2.0	2.0	2.0
Sub-Division Total	5.0	4.0	4.0	4.0
Adult Programs				
Psychiatrist	3.5	4.5	4.5	3.8
Program Manager	3.0	1.0	1.0	4.0
Team Supervisor	1.0	2.0	2.0	--
EDP Systems & Prog Analyst	--	2.0	2.0	2.0
Computer Systems Specialist Supervisor	--	1.0	1.0	1.0
Psychiatric Nurse Sr.	1.0	1.0	1.0	--
Admin Office Pro	6.0	5.0	5.0	5.0
Financial Office Pro	1.0	--	--	--
Psychiatric Nurse	7.0	7.5	7.5	7.5
Computer Systems Specialist	--	1.0	1.0	1.0
Department Business Specialist	--	1.0	1.0	1.0
Practitioner	7.0	12.0	12.0	12.0
Rehab Specialist	2.0	2.0	2.0	4.0
Alcohol & Drug Service Specialist	2.0	5.0	5.0	5.0
Psych. Technician	4.0	4.0	4.0	5.0
Case Worker	5.0	8.5	8.5	8.0
Recovery Assistant	7.0	10.0	10.0	10.0
Sub-Division Total	49.5	67.5	67.5	69.3

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Mental Health Services Act (cont'd)

Position Detail	Actual	Adopted	Est. Actual	Recommended
	FY 09-10	FY 10-11	FY 10-11	FY 11-12
	Pos.	Pos.	Pos.	Pos.
Children/Transitional Age Programs				
Psychiatrist	--	0.4	0.4	--
Clinical Psychologist	1.0	--	--	1.0
Practitioner	2.0	5.0	5.0	7.0
Alcohol & Drug Service Specialist	--	2.0	2.0	--
Case Worker	--	2.0	2.0	1.0
Recovery Assistant	3.0	3.0	3.0	3.0
Sub-Division Total	6.0	12.4	12.4	12.0
Co-Occuring Programs				
Clinical Psychologist	1.0	1.0	1.0	1.0
Practitioner	2.0	2.0	2.0	2.0
Alcohol & Drug Service Specialist	3.0	--	--	--
Sub-Division Total	6.0	3.0	3.0	3.0
Division Total	66.5	86.9	86.9	88.3

Program Descriptions

The Mental Health Services Act (MSHA) funds Community Services and Supports (CSS), Workforce Education and Training (WET), Prevention and Early Intervention (PEI), Capital Facilities and Technological Needs and Innovation programs, which are organized as follows:

Adult Programs

- Crisis and Recovery Emergency Services (CARES) Mobile Crisis teams in South and North County providing 24/7 field response to 1,000 individuals in crisis annually
- Lompoc Assertive Community Treatment (ACT) providing 24/7 wraparound services to 100 persons (adults and youth transitioning into adulthood)
- Santa Barbara ACT providing 24/7 wraparound services to 100 persons
- Santa Maria ACT, providing 24/7 wraparound services and residential services to 100 persons
- Partners In Hope, staffed by Peer Recovery Specialists and Family Partners/Advocates, providing support activities to 100 persons
- Supported Housing, initiated in FY 2008-09, assisting 260 clients to preserve independent housing.
- Housing Initiative supporting the capital development and support services of 10 residential units at the Garden Street complex in Santa Barbara and an additional 8 housing units at Homebase on G in Lompoc.
- Workforce Education and Training (WET) supporting internships for consumers and family

members in the mental health system, as well as mental health Crisis Intervention Training for law enforcement professionals.

- Prevention and Early Intervention (PEI) program began implementation in FY 2010-11. PEI Initiatives include community health educators in underserved communities, the integration of primary and mental health care at community health clinics and depression screening for older adults.
- Innovation, the final MHSA component, helping indigent adults with serious mental illness to gain disability and health insurance, was implemented in FY 2010-11.

Children and Transition-Age Youth Programs

- SPIRIT providing individualized wraparound services on a 24/7 basis for 75 children and youth who are at risk of out-of-home placement or homelessness
- New Heights designed to serve 90 transition aged youth (45 youth in Santa Barbara and 45 youth in Santa Maria between the ages of 16 and 25).
- Prevention and Early Intervention programs, implemented in FY 2010-11, include early childhood mental health services and prevention/early intervention services for children and transition-age youth.

Co-Occurring Conditions Programs

- Bridge to Care redesigned and currently providing services to co-occurring clients needing medication and evaluations in Lompoc. Clients in Santa Maria and Santa Barbara are receiving services through other resources.
- Justice Alliance providing screening and referral services for adults with mental illness presenting in the local Superior Courts for civil and criminal hearings who may also have co-occurring substance abuse conditions.

Capital Facilities/Technological Needs Plan

This plan was submitted to the State for approval in FY 2009-10, and in FY 2010-11 the Department received approval from the State Department of Mental Health for the portion of the Plan relating to Technological Needs. The Plan includes the following components:

- Client Access to Computer Resources with training in Santa Barbara County, Santa Barbara, Santa Maria, and Lompoc.
- Video conferencing capabilities to increase access to meetings.
- Electronic Health Records (EHR) to expand and build on the current Integrated Information System. This project will create system-wide access to clinical, administrative and financial information in digital format. The Psychiatric Health Facility, which is currently a paper based operation, will be converted to digital format.
- Consumer Security and Confidentiality Project expanding the security efforts currently in place. The project also facilitates secure system-wide access to clinical and administrative information, ensure the security of data, and reduce the risk of potential identity theft. Four (4) Benefit Specialists provide client benefit and insurance-related support and to validate demographic information.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Administration

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
ADMHS Administration	\$ 3,198,216	\$ 3,173,020	\$ 3,215,729	\$ 2,648,678
Patient Rights	174,408	176,528	179,107	211,820
Mental Health Commission	945	1,296	295	295
Human Resources	326,287	272,742	287,619	292,511
Management Information Systems	1,357,349	1,370,583	1,189,735	1,372,172
Fiscal/Accounting/Contracts	1,934,268	1,665,577	1,735,946	1,717,850
Prog Eval & Perform Outcomes	57,750	9	105,580	71
Operating Sub-Total	7,049,223	6,659,755	6,714,011	6,243,397
Less: Intra-County Revenues	(2,069,680)	(2,289,936)	(2,099,720)	(2,389,100)
Operating Total	4,979,543	4,369,819	4,614,291	3,854,297
<i>Non-Operating Expenditures</i>				
Capital Assets	--	30,000	30,000	30,000
Expenditure Total	4,979,543	4,399,819	4,644,291	3,884,297
<i>Other Financing Uses</i>				
Operating Transfers	40,136	39,685	115,047	76,020
Designated for Future Uses	3,737	12,846,572	5,102,640	7,741,522
Division Total	\$ 5,023,416	\$ 17,286,076	\$ 9,861,978	\$ 11,701,839

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	2,933,652	2,489,670	2,570,266	2,574,782
Overtime	14,094	5,000	18,956	3,215
Extra Help	38,969	--	--	19,512
Benefits	1,269,733	1,154,670	1,183,174	1,323,831
Salaries & Benefits Sub-Total	4,256,448	3,649,340	3,772,396	3,921,340
Services & Supplies	2,061,913	3,010,415	2,861,615	2,322,057
Public Assistance Payments	730,862	--	80,000	--
Operating Sub-Total	7,049,223	6,659,755	6,714,011	6,243,397
Less: Intra-County Revenues	(2,069,680)	(2,289,936)	(2,099,720)	(2,389,100)
Operating Total	4,979,543	4,369,819	4,614,291	3,854,297
<i>Non-Operating Expenditures</i>				
Capital Assets	--	30,000	30,000	30,000
Expenditure Total	\$ 4,979,543	\$ 4,399,819	\$ 4,644,291	\$ 3,884,297

Source of Funds Summary

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
<i>Departmental Revenues</i>				
Interest	(126,681)	(110,000)	(99,574)	(75,000)
Federal & State Revenues	6,908	234,208	604,288	--
Other Charges for Services	4,209,112	4,408,334	3,806,739	4,172,134
Miscellaneous Revenue	1,161,650	1,400	900	900
Revenue Sub-Total	5,250,989	4,533,942	4,312,353	4,098,034
Less: Intra-County Revenues	(2,069,680)	(2,289,936)	(2,099,720)	(2,389,100)
Revenue Total	3,181,309	2,244,006	2,212,633	1,708,934
<i>General Fund Contribution</i>				
	--	2,018,500	2,018,500	1,544,128
<i>Other Financing Sources</i>				
Operating Transfers	236,936	12,741,520	5,000,000	7,529,575
Sale of Property	850	--	--	--
Use of Prior Fund Balances	1,604,321	282,050	630,845	919,202
Division Total	\$ 5,023,416	\$ 17,286,076	\$ 9,861,978	\$ 11,701,839

Position Summary

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
<i>Permanent</i>								
ADMHS Administration	9.0	6.8	7.3	5.9	7.3	5.1	8.3	5.9
Patient Rights	1.5	1.5	1.5	1.4	1.5	1.5	1.5	1.4
Human Resources	3.0	2.8	3.0	2.4	3.0	2.5	3.0	2.4
Management Information Systems	10.0	8.5	8.0	7.6	8.0	7.1	8.0	7.6
Fiscal/Accounting/Contracts	14.5	14.6	14.0	12.4	14.0	13.9	13.0	12.4
Prog Eval & Perform Outcomes	--	1.0	--	--	--	0.9	--	--
Total Permanent	38.0	35.1	33.8	29.7	33.8	31.0	33.8	29.7
<i>Non-Permanent</i>								
Extra Help	--	0.5	--	--	--	0.5	--	0.2
Total Positions	38.0	35.6	33.8	29.7	33.8	31.5	33.8	29.9

SERVICE DESCRIPTION

Administrative services provides support to all divisions to ensure that alcohol, drug and mental health prevention, rehabilitation and treatment services are offered in an efficient, cost effective and safe manner.

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

The Estimated Actual expenditures increased \$54,000 to \$6,714,000 from the Adopted Budget of \$6,660,000. This 0.8% increase is due to:

- +\$54,000 – increase is not expected to have a significant impact on service levels

The Estimated Actual revenue decreased \$222,000 to \$4,312,000 from the Adopted Budget of \$4,534,000. This 4.9% decrease is the result of:

- -\$602,000 – decrease in Medi-Cal Administration (tied to clinical Medi-Cal revenue which has declined) and Administrative Charges revenue;
- + \$370,000 – increase in Realignment funding used to balance the division.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

FY 2011-12 Recommended expenditures will decrease \$471,000 to \$6,243,000 from the Estimated Actual of \$6,714,000. This 7% decrease is the result of:

- -\$558,000 – decrease in County Cost Allocation Plan charges;
- +\$149,000 – increase in salaries and benefits due higher retirement contribution rates;
- -\$80,000 – decrease in Grant and Audit Settlements.

FY 2011-12 Recommended revenues will decrease \$214,000 to \$4,098,000 from the Estimated Actual \$4,312,000. This 5% decrease is the result of:

- -\$604,000 – decrease in Realignment revenue allocated to this Division. Less Realignment is needed due to increases in other funding sources;
- +\$289,000 – increase in Administrative Charges allocated to the MHSA Division (based on salaries and benefits);
- +\$76,000 – increase in Medi-Cal Administration revenue;
- +\$25,000 – increase in Interest income.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Administration (cont'd)

Improving Department Business Operations

The importance of financial oversight cannot be overstated in a department such as ADMHS which is accountable to State and Federal agencies. In FY 2010-11, the Department continued to monitor several key projects that were developed in FY 2009-2010. The projects were designed to strengthen business practices and fiscal controls. A key project, the development of written Policies & Procedures for State and Provider Cost Settlements, resulted in improvement in the provider settlement process. The Department took steps to contain hospital costs by conducting daily inpatient utilization review meetings to manage care at acute facilities. Other actions to strengthen business operations included:

- Conducted quarterly reviews of internal and provider rates charged to the State, making adjustments as required, in order to reduce future settlement costs with the State;
- Defined duties of managers and staff to enable improvements in the areas of Cost Reporting, Audits and Compliance, Contract Monitoring and Medi-Cal/ Medicare claiming activities;
- Reconciled State and Federal payments over the past five years;
- Maintained a reserve for MHSA programs, estimated to be \$7.6 million at the end of FY 2010-11 (\$5.7 million required by law as a reserve and \$1.9 million set aside for development of existing programs);
- Developed a process for standard allocation of administrative costs between ADMHS funds;
- Received approval of Compliance Plan revision to meet State guidelines from the State Department of Mental Health;
- Completed roll-out of a Clinic and CARES scheduling module using new software in Health Insurance Portability and Accountability Act (HIPAA) compliant format (Federal laws to ensure client privacy). The scheduler provided a consistent method for staff to set future appointments with clients. In FY 2011-12, scheduling templates will be developed for enhanced standardization and reporting;
- Completed a Front Office Client Intake Project resulting in review and revision of all policies and procedures and establishment of a continuous quality improvement activity with the goal to improve all intake and billing practices.

**ALCOHOL, DRUG & MENTAL HEALTH SVCS
Administration (cont'd)**

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
As an efficient and responsive government, the Department will reduce or maintain the rate of General Liability claims filed from the previous year's actual claims filed.	25% 3 12	90% 3 3	33% 1 3	33% 1 3
As an efficient and responsive government, the Department will reduce or maintain the rate of Workers' Compensation claims filed from the previous year's actual claims filed.	44% 15 34	89% 17 19	80% 12 15	80% 12 15
ADMHS Administration				
As an efficient and responsive government, the County will maintain a quality workforce through completing 100% of departmental Employee Performance Reviews (EPRs) by the anniversary due date.	13% 44 345	100% 315 315	24% 47 198	100% 315 315
As an efficient and responsive government, the Department will reduce or maintain the rate of Medical Malpractice Liability claims filed from the previous year's actual claims filed.	8% 1 12	100% 3 3	33% 1 3	33% 1 3

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
As an efficient and responsive government, ADMHS will maintain a productive workforce through a Departmental lost time rate of 5% or less.	5% 26,132 566,515	5% 26,132 566,515	5% 25,547 542,582	5% 28,685 562,452
Fiscal/Accounting/Contracts				
In order to provide safe facilities for the public and staff, process 95% of approximately 300 facility work requests, or 25 requests per month, within 2 business days.	99% 379 382	95% 285 300	100% 178 178	98% 295 300
To ensure uninterrupted service delivery to clients from private providers, process 91% of an estimated 450 complete invoices within 30 days of receipt.	88% 466 528	89% 400 450	99% 419 424	89% 400 450

**ALCOHOL, DRUG & MENTAL HEALTH SVCS
Administration (cont'd)**

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
ADMHS Administration				
Deputy Director	1.0	1.0	1.0	1.0
Director	1.0	1.0	1.0	1.0
Division Chief	--	--	--	1.0
Facilities Manager	1.0	1.0	1.0	1.0
Admin Office Pro	4.5	3.5	3.5	3.5
Building Maintenance Worker	1.5	0.8	0.8	0.8
Sub-Division Total	9.0	7.3	7.3	8.3
Patient Rights				
Patients Rights Advocate	1.5	1.5	1.5	1.5
Sub-Division Total	1.5	1.5	1.5	1.5
Human Resources				
Human Resources Manager	1.0	1.0	1.0	1.0
Admin Office Pro	2.0	2.0	2.0	2.0
Sub-Division Total	3.0	3.0	3.0	3.0

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Management Information Systems				
IT Manager	1.0	1.0	1.0	1.0
EDP Systems & Prog Analyst	3.0	3.0	3.0	3.0
Computer Systems Specialist Supervisor	1.0	--	--	--
Admin Office Pro	1.0	1.0	1.0	1.0
Computer Systems Specialist	4.0	3.0	3.0	3.0
Sub-Division Total	10.0	8.0	8.0	8.0
Fiscal/Accounting/Contracts				
Deputy Director	1.0	1.0	1.0	1.0
Chief Financial Officer	1.0	1.0	1.0	1.0
Fiscal Business Manager	1.0	1.0	1.0	1.0
Program Manager	1.0	1.0	1.0	1.0
Accountant Supervising	1.0	1.0	1.0	1.0
Cost Analyst	3.0	2.0	2.0	1.0
Financial Office Pro	2.0	4.0	4.0	4.0
Accountant	3.5	2.0	2.0	2.0
Department Business Specialist	1.0	1.0	1.0	1.0
Sub-Division Total	14.5	14.0	14.0	13.0
Division Total	38.0	33.8	33.8	33.8

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Inpatient Services

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Program Admin (Medical Director)	\$ 277,544	\$ 323,504	\$ 79,467	\$ 203,303
InPatient Services	3,309,158	3,150,315	2,280,235	2,206,460
Psychiatric Hospital Facility (PHF)	5,625,474	5,040,646	6,179,154	5,757,874
Adult-Acute Care - Jail Services	45,932	--	(22)	--
Operating Sub-Total	9,258,108	8,514,465	8,538,834	8,167,637
Less: Intra-County Revenues	(284,390)	(357,720)	(140,000)	(150,000)
Expenditure Total	8,973,718	8,156,745	8,398,834	8,017,637
<i>Other Financing Uses</i>				
Designated for Future Uses	1,500	125,354	125,352	--
Division Total	\$ 8,975,218	\$ 8,282,099	\$ 8,524,186	\$ 8,017,637

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	3,138,682	3,035,717	3,302,774	3,023,871
Overtime	312,859	190,000	298,915	298,700
Extra Help	265,814	125,374	--	290,950
Benefits	1,281,380	1,262,799	1,541,321	1,424,681
Salaries & Benefits Sub-Total	4,998,735	4,613,890	5,143,010	5,038,202
Services & Supplies	4,162,288	3,900,575	3,395,824	3,129,435
Public Assistance Payments	97,085	--	--	--
Operating Sub-Total	9,258,108	8,514,465	8,538,834	8,167,637
Less: Intra-County Revenues	(284,390)	(357,720)	(140,000)	(150,000)
Expenditure Total	\$ 8,973,718	\$ 8,156,745	\$ 8,398,834	\$ 8,017,637

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Source of Funds Summary				
<i>Departmental Revenues</i>				
Federal & State Revenues	\$ 5,881,655	\$ 4,234,474	\$ 5,135,112	\$ 4,681,945
Other Charges for Services	3,372,618	4,405,345	3,229,074	3,485,692
Revenue Sub-Total	9,254,273	8,639,819	8,364,186	8,167,637
Less: Intra-County Revenues	(284,390)	(357,720)	(140,000)	(150,000)
Revenue Total	8,969,883	8,282,099	8,224,186	8,017,637
<i>Other Financing Sources</i>				
Operating Transfers	1,500	--	300,000	--
Use of Prior Fund Balances	3,835	--	--	--
Division Total	\$ 8,975,218	\$ 8,282,099	\$ 8,524,186	\$ 8,017,637

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
Program Admin (Medical Director)	1.0	0.8	1.0	1.0	1.0	1.0	1.0	0.6
Psychiatric Hospital Facility (PHF)	36.0	31.8	31.5	29.5	31.5	31.5	31.8	28.7
Adult-Acute Care - Jail Services	--	0.2	--	--	--	--	--	--
Total Permanent	37.0	32.8	32.5	30.4	32.5	32.5	32.8	29.3
<i>Non-Permanent</i>								
Contract	--	0.5	--	0.9	--	0.4	--	0.5
Extra Help	--	3.6	--	2.4	--	3.7	--	4.5
Total Positions	37.0	36.9	32.5	33.6	32.5	36.6	32.8	34.3

SERVICE DESCRIPTION

Inpatient Services provides assessment and treatment to the seriously mentally ill people in Department institutions, with the goal of rebuilding lives and reducing recidivism.

Significant Changes (FY 2010-11 Adopted Budget to FY 2010-11 Estimated Actual)

The Estimated Actual expenditures increased \$25,000 to \$8,539,000 from the Adopted Budget of \$8,514,000. This 0.3% increase, while not significant, is comprised of the following:

- -\$673,000 – decrease due to enhanced case management resulting in lower utilization of involuntary, high cost acute care facilities such as Aurora Vista Del Mar Hospital, and higher utilization of less restrictive, lower cost facilities;
- +\$372,000 – increase in staffing requirements (+3 FTE) of the PHF based on client acuity to staff ratios, providing an increase in the level of care at the PHF;
- +\$204,000 – increase in pharmaceutical costs which were understated in the adopted budget;
- +\$158,000 – increase in retirement related costs;
- -\$69,000 – decrease in use of contract doctors at Aurora Vista Del Mar Hospital related to reduced bed usage;
- +\$30,000 – increase in facility maintenance costs at the Psychiatric Health Facility.

The Estimated Actual revenues decreased \$276,000 to \$8,364,000 from the Adopted Budget of \$8,640,000. This 3.2% decrease is the result of:

- -\$1,176,000 – decrease in charges for services due to increase in clients without insurance (Medi-Cal, Medicare or private insurance);
- +\$901,000 – increase in use of State funding, primarily Realignment (Sales Tax) to provide fund services for the uninsured;
- +\$300,000 – increase in General Fund Contribution for indigent services.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Inpatient Services (cont'd)

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

FY 2011-12 Recommended expenditures will decrease by \$371,000 to \$8,168,000, from the Estimated Actual of \$8,539,000. This 4.3% decrease is as follows:

- -\$105,000 – decrease in salaries and benefits due to a reduction in extra help;
- -\$100,000 – decrease for funding conservatorship services provided by the Treasurer, following State disallowance of this expenditure. This decrease has not impacted service to Mental Health clients at the present time;
- -\$73,000 – decrease in services provided through contractors resulting from utilization management.

FY 2010-11 Recommended revenues will decrease \$196,000 to \$8,168,000 from the Estimated Actual of \$8,364,000. This 2.3% decrease is as follows:

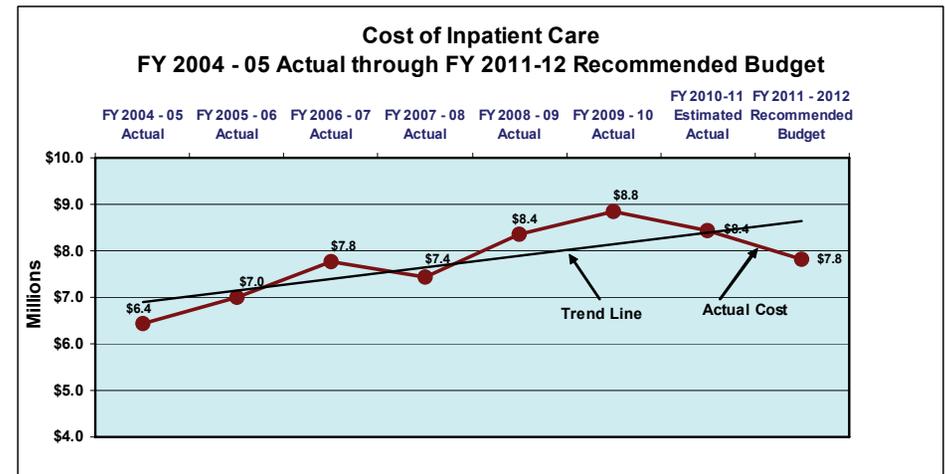
- -\$453,000 – decrease in State funding, primarily Realignment (sales tax). Based on reduced expenses, less State funding will be required;
- +\$380,000 – increase due to number of clients with Medicare in the Psychiatric Health Facility;
- -\$274,000 – reduction due to termination of ARRA federal funding in FY 2011-12;
- +\$137,000 – increase in insurance payments and patient fees.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Inpatient Services (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Program Admin (Medical Director)				
Improve the effectiveness of outpatient Mental Health treatment with the result of decreasing the psychiatric hospitalization re-admission rate within 30 days of discharge from 18% to 16%. (Includes PHF and Aurora Vista Del Mar)	16%	18%	13%	16%
	43	49	26	44
	272	272	197	272
InPatient Services				
To reduce the high cost of out-of-county acute hospitalizations and return clients to their community, decrease the average number of adult Aurora Vista del Mar Hospital bed-days by 20% from an average of 369 to 295 per month	80%	75%	54%	80%
	295	276	200	295
	369	369	369	369
To redirect the high cost of institutional care to community-based crisis resources, decrease the average number of IMD (Institute for Mental Disease) the bed-days utilized by adult clients by 25% from 541 to 408 per month.	102%	95%	126%	75%
	439	408	541	408
	430	430	430	541

Recurring Performance Measures

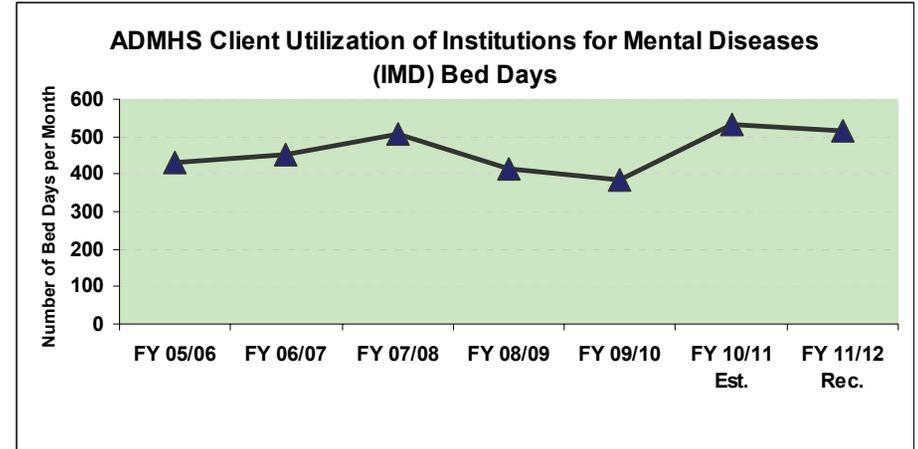
	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
To redirect the high cost of institutional care to community-based crisis resources, decrease the average number of State hospital bed-days utilized by adult clients by 3% from 124 to 120 per month.	95%	97%	47%	97%
	118	120	58	120
	124	124	124	124
Maintain the average length of stay of clients in crisis using County Psychiatric Health Facility acute hospital bed days per month at 9 days.	62%	85%	69%	100%
	8	11	9	9
	13	13	13	9
To reduce the cost of hospitalizations and return clients to their community, reduce hospitalization rates for North County by 27%, from 19 to 15 clients/month, by providing a 10-day crisis stabilization program at North County CARES Residential.	--	--	126%	79%
	--	--	24	15
	--	--	19	19



Recent changes to care management of acute beds have proven effective in reducing costs.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Inpatient Services (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Program Admin (Medical Director)				
Medical Director	1.0	1.0	1.0	1.0
Sub-Division Total	1.0	1.0	1.0	1.0
Psychiatric Hospital Facility (PHF)				
Psychiatrist	1.5	1.5	1.5	2.3
Staff Physician	0.5	0.5	0.5	0.5
Program Manager	2.0	1.0	1.0	1.0
Psychiatric Nurse Supervising	--	1.0	1.0	1.0
Psychiatric Nurse Sr.	2.0	1.0	1.0	1.0
Admin Office Pro	3.0	3.0	3.0	1.5
Psychiatric Nurse	8.5	8.0	8.0	9.0
Practitioner	4.0	3.0	3.0	3.0
Psych. Technician	12.5	11.0	11.0	11.0
Recreational Therapist	1.5	1.5	1.5	1.5
Recovery Assistant	0.5	--	--	--
Sub-Division Total	36.0	31.5	31.5	31.8
Division Total	37.0	32.5	32.5	32.8



The number of IMD beds increased in FY 2010-11 due to an increase in the number of individuals requiring longer term care. The number is expected to drop in FY 2011-12.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Adult Mental Health Programs

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Adult Program Administration	\$ 202,817	\$ 99,744	\$ 6,512	\$ 208,945
Clinical Services	5,973,243	5,852,671	5,194,126	5,884,085
Intake & Crisis Intervention	2,917,326	2,527,007	2,271,733	2,064,563
Residential Services	505,280	473,496	513,705	510,650
Network Providers	114,773	129,000	110,000	123,000
Special Projects	257,613	182,778	260,000	264,195
Operating Sub-Total	9,971,052	9,264,696	8,356,076	9,055,438
Less: Intra-County Revenues	(384,112)	--	--	--
Expenditure Total	9,586,940	9,264,696	8,356,076	9,055,438
<i>Other Financing Uses</i>				
Operating Transfers	204,869	204,869	100,101	100,102
Designated for Future Uses	200	212,174	212,174	--
Division Total	\$ 9,792,009	\$ 9,681,739	\$ 8,668,351	\$ 9,155,540

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	5,142,498	4,901,530	4,367,832	4,862,133
Overtime	94,294	14,000	35,136	35,600
Extra Help	77,253	--	--	--
Benefits	2,201,570	2,005,694	1,928,344	2,310,478
Salaries & Benefits Sub-Total	7,515,615	6,921,224	6,331,312	7,208,211
Services & Supplies	2,415,437	2,343,472	2,024,764	1,847,227
Public Assistance Payments	40,000	--	--	--
Operating Sub-Total	9,971,052	9,264,696	8,356,076	9,055,438
Less: Intra-County Revenues	(384,112)	--	--	--
Expenditure Total	\$ 9,586,940	\$ 9,264,696	\$ 8,356,076	\$ 9,055,438

Source of Funds Summary

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
<i>Departmental Revenues</i>				
Federal & State Revenues	\$ 1,222,841	\$ 3,190,379	\$ 2,928,941	\$ 4,406,572
Other Charges for Services	6,122,776	5,668,360	4,930,008	4,249,104
Miscellaneous Revenue	146,072	123,000	127,821	127,821
Revenue Sub-Total	7,491,689	8,981,739	7,986,770	8,783,497
Less: Intra-County Revenues	(384,112)	--	--	--
Revenue Total	7,107,577	8,981,739	7,986,770	8,783,497
<i>General Fund Contribution</i>				
	1,819,334	300,000	300,000	--
<i>Other Financing Sources</i>				
Operating Transfers	400,000	400,000	381,581	372,043
Sale of Property	3,500	--	--	--
Use of Prior Fund Balances	461,598	--	--	--
Division Total	\$ 9,792,009	\$ 9,681,739	\$ 8,668,351	\$ 9,155,540

Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE

Position Summary

<i>Permanent</i>								
Adult Program Administration	2.0	0.9	2.0	0.5	2.0	0.6	3.0	1.2
Clinical Services	48.8	43.9	42.0	39.4	42.0	41.3	45.5	39.2
Intake & Crisis Intervention	24.4	21.0	16.8	12.8	16.8	16.8	16.0	11.5
Special Projects	--	--	--	--	--	0.1	--	--
Total Permanent	75.2	65.8	60.8	52.7	60.8	58.8	64.5	51.9
<i>Non-Permanent</i>								
Contract	--	0.7	--	0.7	--	0.4	--	0.5
Extra Help	--	1.1	--	--	--	0.9	--	--
Total Positions	75.2	67.6	60.8	53.4	60.8	60.1	64.5	52.4

SERVICE DESCRIPTION

Adult Mental Health Services provides intensive mental health recovery model treatment and case management services in the clients' natural environments whenever possible, thereby enhancing the clients' quality of life.

Significant Changes (FY 2010-11 Adopted Budget to FY 2010-11 Estimated Actual)

The Estimated Actual expenditures decreased \$909,000 to \$8,356,000 from the Adopted Budget of \$9,265,000. This 9.8% decrease is the result of:

- -\$590,000 – decrease due to a shift of 3 FTE from the Adult Clinics to the Partners in Hope program in MHSA. This reflects a shift from clinical to rehabilitative and vocational services with no decrease in number of clients served;
- -\$295,000 – decrease in Pharmaceutical expenses tied to a reduction in indigent services in the Clinics.

The Estimated Actual revenues decreased \$995,000 to \$7,987,000 from the Adopted Budget of \$8,982,000. This 11.1% decrease is the result of:

- -\$738,000 – decrease in Medi-Cal and related revenues resulting from fewer billable services than projected, a slower rate of indigent discharge than expected, and a reduction in services due to the shift of staff to a MHSA program;
- -\$250,000 – decrease in Realignment revenues to balance the Division.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

FY 2011-12 Recommended expenditures will increase \$699,000 to \$9,055,000 from the Estimated Actual of \$8,356,000. This 8.4% increase is the result of:

- +\$877,000 – increase in salaries and benefits due to salary increases, planned use of a contractor on payroll (physician) and retirement/benefit related increases;
- -\$153,000 – decrease in Physician Fees due to reallocation of these costs to Salaries.
- -\$28,000 – decrease in allocated Data Processing Fees for County IT connectivity.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Adult Mental Health Programs (cont'd)

FY 2011-12 Recommended revenue will increase \$796,000 to \$8,783,000 from the Estimated Actual of \$7,987,000. This 10% increase is a result of:

- +\$1,478,000 – increase in the use of Realignment funds to balance the division;
- -\$736,000 – decrease in ARRA revenue due to expiration of funding as of June 30, 2011;
- +\$55,000 – increase in Medi-Cal and related revenues.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
In order to maintain stability for 100% of adults assessed as needing Level 4 services in Lompoc on the Level of Care & Recovery Inventory the department will enroll them in Supportive Housing, ACT or higher level of care services.	86%	100%	88%	100%
	148	200	66	75
	173	200	75	75
In order to maintain stability for 100% of adults assessed as needing Level 4 services in Santa Barbara on the Level of Care & Recovery Inventory the department will enroll them in Supportive Housing, ACT or higher level of care services.	81%	100%	89%	100%
	113	140	139	156
	140	140	156	156
In order to maintain stability for 100% of adults assessed as needing Level 4 services in Santa Maria on the Level of Care & Recovery Inventory the department will enroll them in Supportive Housing, ACT or higher level of care services.	88%	100%	85%	100%
	85	97	116	137
	97	97	137	137

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Adult Mental Health Programs (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Intake & Crisis Intervention				
Avoid hospitalization and stabilize community members in crisis such that 90% of the 900 residents arriving at North County CARES in crisis are not hospitalized within 24 hours of a crisis contact.	89%	90%	88%	90%
	826	540	694	810
	925	600	788	900
Avoid hospitalization and stabilize community members in crisis such that 90% of the 970 residents arriving at South County CARES in crisis are not hospitalized within 24 hours of a crisis contact.	87%	90%	86%	90%
	847	630	714	873
	970	700	834	970

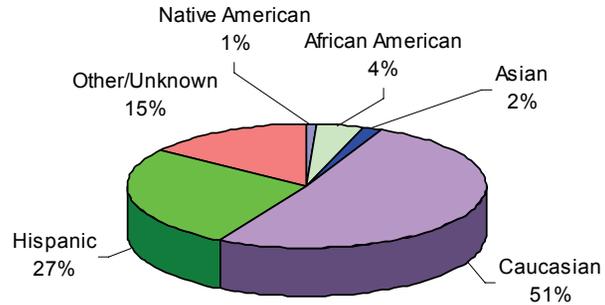
	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Adult Program Administration				
Deputy Director	1.0	1.0	1.0	1.0
Division Chief	1.0	1.0	1.0	2.0
Sub-Division Total	2.0	2.0	2.0	3.0

Please note: On the table above, the Division Chief position listed in “ADMHS Adult Mental Health Programs” is actually assigned to Division 1, MHSA, and is being adjusted. There is no increase in the number of ADMHS administrative positions in FY 2011-12.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
	Pos.	Pos.	Pos.	Pos.
Position Detail				
Clinical Services				
Psychiatrist	6.3	5.5	5.5	5.0
Program Manager	3.0	1.0	1.0	--
Regional Manager	--	--	--	2.0
Team Supervisor	2.0	2.0	2.0	2.0
Clinical Psychologist	1.0	--	--	--
Admin Office Pro	6.0	4.0	4.0	7.0
Psychiatric Nurse	2.0	2.0	2.0	2.0
Practitioner	10.5	11.5	11.5	12.0
Rehab Specialist	2.0	2.0	2.0	--
Psych. Technician	10.0	9.0	9.0	9.0
Case Worker	6.0	5.0	5.0	6.5
Sub-Division Total	48.8	42.0	42.0	45.5
Intake & Crisis Intervention				
Psychiatrist	1.9	1.8	1.8	2.0
Program Manager	1.0	1.0	1.0	--
Team Supervisor	1.0	1.0	1.0	1.0
Psychiatric Nurse Sr.	--	--	--	1.0
Admin Office Pro	4.0	4.0	4.0	3.0
Psychiatric Nurse	2.0	2.0	2.0	2.0
Practitioner	8.0	4.0	4.0	4.0
Psych. Technician	3.0	3.0	3.0	2.0
Case Worker	2.5	--	--	1.0
Recovery Assistant	1.0	--	--	--
Sub-Division Total	24.4	16.8	16.8	16.0
Division Total	75.2	60.8	60.8	64.5

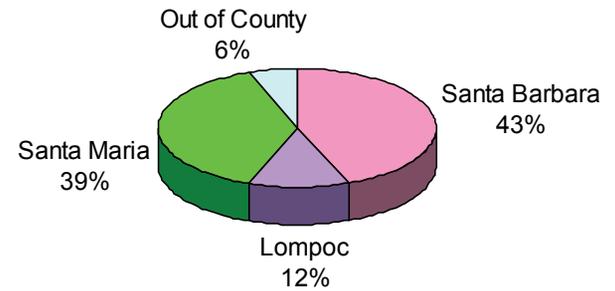
ALCOHOL, DRUG & MENTAL HEALTH SVCS
Adult Mental Health Programs (cont'd)

Adult MH Clients Ethnicity FY 2009-10
5,442 Unduplicated Clients



Department caseloads are reflecting greater ethnic diversity. The Department continues to train staff in cultural sensitivity and hire bilingual staff and service providers so that cultural barriers do not inhibit the delivery of effective services. Note: FY 2010-11 data are not available at time of publication.

Adult MH Clients Region of Service FY 2009-10
5,442 Unduplicated Clients



Over half of the Department's clients receive services in the North and Central parts of the County. The Department continues to address capacity needs in these areas to deliver high quality services. Note: FY 2010-11 data are not available at time of publication.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Children's Mental Health Programs

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
Children's Program Administration	\$ 627,187	\$ 123,067	\$ 66,829	\$ 83,016
Clinic Services	4,797,089	3,823,715	3,197,127	3,450,976
Services to Other Departments	1,685,025	1,198,355	1,234,928	1,300,070
O/P Treatment (CBO Provided)	9,554,310	9,812,372	8,482,000	8,854,100
Network Providers	8,838	11,000	--	--
Operating Sub-Total	16,672,449	14,968,509	12,980,884	13,688,162
Less: Intra-County Revenues	(1,745,709)	(1,248,074)	(1,360,762)	(1,377,137)
Expenditure Total	14,926,740	13,720,435	11,620,122	12,311,025
<i>Other Financing Uses</i>				
Operating Transfers	365,383	381,699	191,362	192,676
Designated for Future Uses	--	132,059	132,059	927,102
Division Total	\$ 15,292,123	\$ 14,234,193	\$ 11,943,543	\$ 13,430,803

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	4,131,417	3,050,740	2,635,868	2,783,865
Overtime	(6,343)	--	1,492	1,500
Extra Help	62,283	29,697	--	52,870
Benefits	1,821,563	1,377,924	1,264,060	1,384,977
Salaries & Benefits Sub-Total	6,008,920	4,458,361	3,901,420	4,223,212
Services & Supplies	10,662,782	10,510,148	9,079,464	9,464,950
Public Assistance Payments	747	--	--	--
Operating Sub-Total	16,672,449	14,968,509	12,980,884	13,688,162
Less: Intra-County Revenues	(1,745,709)	(1,248,074)	(1,360,762)	(1,377,137)
Expenditure Total	\$ 14,926,740	\$ 13,720,435	\$ 11,620,122	\$ 12,311,025

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Source of Funds Summary				
<i>Departmental Revenues</i>				
Federal & State Revenues	\$ 1,567,893	\$ 1,275,000	\$ 1,600,000	\$ 1,200,000
Other Charges for Services	12,588,906	13,644,982	11,704,305	13,607,940
Miscellaneous Revenue	92,688	--	--	--
Revenue Sub-Total	14,249,487	14,919,982	13,304,305	14,807,940
Less: Intra-County Revenues	(1,745,709)	(1,248,074)	(1,360,762)	(1,377,137)
Revenue Total	12,503,778	13,671,908	11,943,543	13,430,803
<i>General Fund Contribution</i>	893,466	562,284	--	--
<i>Other Financing Sources</i>				
Operating Transfers	256,164	--	--	--
Sale of Property	1,000	--	--	--
Use of Prior Fund Balances	1,637,715	1	--	--
Division Total	\$ 15,292,123	\$ 14,234,193	\$ 11,943,543	\$ 13,430,803

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
Children's Program Administration	--	0.6	--	0.5	--	0.5	--	0.4
Clinic Services	43.5	37.3	30.3	25.2	30.3	26.7	27.8	21.5
Services to Other Departments	14.4	13.5	9.4	8.0	9.4	8.7	11.0	7.6
Total Permanent	57.9	51.4	39.6	33.6	39.6	35.9	38.8	29.5
<i>Non-Permanent</i>								
Contract	--	1.5	--	1.1	--	0.9	--	0.3
Extra Help	--	1.2	--	0.6	--	1.1	--	0.9
Total Positions	57.9	54.1	39.6	35.2	39.6	37.8	38.8	30.6

SERVICE DESCRIPTION

Children's Mental Health Services identifies at-risk youth early, focusing on strength of youth and families to build a foundation for achieving and sustaining meaningful, successful lives.

Significant Changes (FY 2010-11 Adopted Budget to FY 2010-11 Estimated Actual)

The Estimated Actual expenditures decreased \$1,988,000 to \$12,981,000 from the Adopted Budget of \$14,969,000. This 13.3% decrease is the result of:

- -\$1,342,000 – decrease in Children's services provided through contractors resulting from serving portions of this client population through MHSA specialty programs, including early childhood mental health, school mental health, and transitional age youth programs;
- -\$557,000 – decrease in salaries and benefits due to a reduction of 6.75 FTE to align staffing levels with current caseload. (Four staff have transferred to MHSA and Adult program vacancies, and the remaining 2.75 FTE positions are not being filled.)

The Estimated Actual revenues decreased \$1,616,000 to \$13,304,000 from the Adopted Budget of \$14,920,000. This 10.8% decrease is primarily due to the following:

- -\$1,941,000 – decrease in charges for services provided as explained above;
- +\$325,000 – increase in AB 3632 reimbursement for services provided to Special Education Students.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Children's Mental Health Programs (cont'd)

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

FY 2011-12 Recommended expenditures will increase \$707,000 to \$13,688,000, from the Estimated Actual of \$12,981,000. This 5.5% increase is as follows:

- +\$375,000 – increase in Children's services provided through Contractors;
- +\$322,000 – increase in Contractors on Payroll and Extra Help (\$130,000), increase in retirement related costs (\$140,000) and other salary and benefit related costs.

FY 2011-12 Recommended revenues will increase \$1,504,000 to \$14,808,000 from the Estimated Actual of \$13,304,000. This 11.3% increase is the result of:

- +\$2,117,000 – increase of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) funding (State funding of Children's MH services) which has generally matched 45% of costs. ARRA has replaced a portion of this funding but ARRA will terminate on June 30, 2011 and thereafter, the EPSDT rate will increase. FY 2010-11 was also negatively impacted by an over accrual of EPSDT in FY 2009-10;
- -\$1,042,000 – decrease in funds received through ARRA based on expiration of program at June 30, 2011;
- +\$811,000 – increase in Medi-Cal services due to increased efficiencies at the clinics and \$375,000 increased services provided by Community Based Organizations (CBO's);
- -\$400,000 – decrease in AB 3632 funding for residential services provided to Special Education Students.

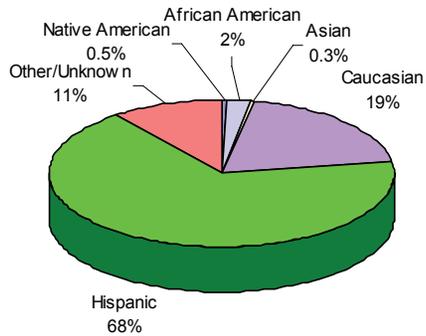
ALCOHOL, DRUG & MENTAL HEALTH SVCS
Children's Mental Health Programs (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
Clinic Services				
Increase the social, emotional and life skill functioning of children receiving services at the Lompoc Children's Clinic as shown by a reduction in psychiatric hospitalization rate by 50%, from an average of 2 to 1 monthly.	100%	50%	50%	50%
	1	1	1	1
	1	2	2	2
Increase the social, emotional and life skill functioning of children receiving services at the Santa Barbara Children's Clinic as shown by a reduction in psychiatric hospitalization rate by 60%, from an average of 5 to 3 monthly.	40%	60%	40%	60%
	2	3	2	3
	5	5	5	5
Increase the social, emotional and life skill functioning of children receiving services at the Santa Maria Children's Clinic as shown by a reduction in psychiatric hospitalization rate by 50%, from an average of 4 to 2 monthly.	100%	50%	25%	50%
	2	2	1	2
	2	4	4	4
Services to Other Departments				
To ensure timely and effective service delivery to 92% of an estimated 30 children, referred for medication evaluation from juvenile justice system, will see a psychiatrist within 10 business days of referral.	93%	92%	83%	92%
	37	22	30	28
	40	24	36	30
Provide high quality mental health services to stabilize children in their family homes and hold new out-of-home placements at a level 13 or 14 residential care facility to less than 5 per year.	70%	100%	0%	100%
	4	5	0	5
	5	5	5	5

	Actual FY 09-10 Pos.	Adopted FY 10-11 Pos.	Est. Actual FY 10-11 Pos.	Recommended FY 11-12 Pos.
Position Detail				
Clinic Services				
Psychiatrist	3.0	3.3	3.3	3.8
Program Manager	--	1.0	1.0	--
Regional Manager	--	--	--	1.0
Team Supervisor	3.0	3.0	3.0	3.0
Clinical Psychologist	3.0	2.0	2.0	2.0
Admin Office Pro	11.5	6.0	6.0	6.5
Psychiatric Nurse Practitioner	2.0	2.0	2.0	2.0
Psych. Technician	16.0	7.0	7.0	7.0
Case Worker	1.0	1.0	1.0	1.0
	4.0	5.0	5.0	1.5
Sub-Division Total	43.5	30.3	30.3	27.8
Services to Other Departments				
Psychiatrist	0.4	--	--	--
Program Manager	1.0	--	--	1.0
Team Supervisor	--	1.0	1.0	1.0
Clinical Psychologist	2.0	2.0	2.0	2.0
Admin Office Pro	1.0	0.6	0.6	1.0
Psychiatric Nurse Practitioner	1.0	0.8	0.8	--
	9.0	5.0	5.0	6.0
Sub-Division Total	14.4	9.4	9.4	11.0
Division Total	57.9	39.6	39.6	38.8

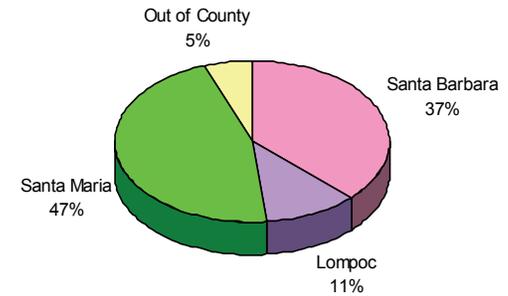
ALCOHOL, DRUG & MENTAL HEALTH SVCS
Children's Mental Health Programs (cont'd)

Child MH Clients Ethnicity FY 2009-10
2,723 Unduplicated Clients



ADMHS is committed to addressing cultural competence by hiring bilingual, multicultural staff. Note: FY 2010-11 data are not available at time of publication.

Child MH Clients Region of Service FY 2009-10
2,723 Unduplicated Clients



ADMHS continues to partner with regional prevention, intervention and treatment service providers to ensure that needed resources are equitably distributed across the County. Note: FY 2010-11 data are not available at time of publication.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Alcohol & Drug Programs

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
ADP - Program Administration	\$ 1,108,546	\$ 1,238,138	\$ 996,212	\$ 920,260
ADP - Treatment Services	8,633,117	7,978,781	8,728,512	8,774,041
ADP - Prevention Services	752,346	666,224	436,144	537,329
ADP - Drinking Driver Services	58,575	37,588	37,517	54,594
ADP - Other Services	4,960	--	--	--
Operating Sub-Total	10,557,544	9,920,731	10,198,385	10,286,224
Less: Intra-County Revenues	(2,100,577)	(1,121,408)	(2,032,828)	(2,007,528)
Expenditure Total	8,456,967	8,799,323	8,165,557	8,278,696
<i>Other Financing Uses</i>				
Operating Transfers	732,837	372,530	475,253	275,160
Designated for Future Uses	528,984	253,266	359,890	120,500
Division Total	\$ 9,718,788	\$ 9,425,119	\$ 9,000,700	\$ 8,674,356

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	1,214,379	1,174,509	1,091,134	1,077,223
Overtime	(1)	2,000	2,000	8,119
Benefits	571,670	552,795	511,738	564,663
Salaries & Benefits Sub-Total	1,786,048	1,729,304	1,604,872	1,650,005
Services & Supplies	8,771,496	8,191,427	8,593,513	8,636,219
Operating Sub-Total	10,557,544	9,920,731	10,198,385	10,286,224
Less: Intra-County Revenues	(2,100,577)	(1,121,408)	(2,032,828)	(2,007,528)
Expenditure Total	\$ 8,456,967	\$ 8,799,323	\$ 8,165,557	\$ 8,278,696

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Source of Funds Summary				
<i>Departmental Revenues</i>				
Interest	(17,074)	\$ --	(10,776)	(5,000)
Federal & State Revenues	5,908,263	5,948,187	6,245,721	6,570,131
Other Charges for Services	3,948,751	3,706,408	4,012,791	3,713,387
Miscellaneous Revenue	81,996	140,000	114,897	135,740
Revenue Sub-Total	9,921,936	9,794,595	10,362,633	10,414,258
Less: Intra-County Revenues	(2,100,577)	(1,121,408)	(2,032,828)	(2,007,528)
Revenue Total	7,821,359	8,673,187	8,329,805	8,406,730
<i>General Fund Contribution</i>	97,465	91,611	91,611	77,869
<i>Other Financing Sources</i>				
Operating Transfers	362,701	193,230	205,523	--
Use of Prior Fund Balances	1,437,263	467,091	373,761	189,757
Division Total	\$ 9,718,788	\$ 9,425,119	\$ 9,000,700	\$ 8,674,356

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
ADP - Program Administration	8.0	6.9	7.0	7.9	7.0	6.2	6.6	5.3
ADP - Treatment Services	13.0	9.2	9.0	6.9	9.0	8.7	7.0	8.6
ADP - Prevention Services	3.0	1.8	3.0	1.9	3.0	1.0	1.0	1.0
ADP - Drinking Driver Services	--	0.3	--	0.2	--	0.2	--	0.2
Total Positions	24.0	18.3	19.0	17.0	19.0	16.2	14.6	15.0

SERVICE DESCRIPTION

The Alcohol and Drug Program provides and contracts for prevention, intervention and treatment services that build upon individual, family and community strengths and assets in order to overcome problems related to alcohol misuse and other drug abuse.

Significant Changes (FY 2010-11 Adopted Budget to FY 2010-11 Estimated Actual)

Estimated Actual expenditures increased \$277,000 to \$10,198,000 from the Adopted Budget of \$9,921,000. This 2.8% increase is primarily the result of:

- +\$346,000 – increases in Community Based Organization (CBO) service contracts due to the implementation of three SAMHSA grant projects which will increase services to 400 adults and children per year;
- -\$124,000 – decrease in Salary & Benefit expenses due to unfilled positions;
- +\$50,000 – increase in network provider contracts due to increased CalWORKs treatment services.

Estimated Actual revenues increased \$568,000 to \$10,363,000 from the Adopted Budget of \$9,795,000. This 5.8% increase is primarily the result of:

- + \$440,000 – increase in Federal grant funding from three newly awarded Substance Abuse and Mental Health Services Administration (SAMHSA) grants available beginning 10/1/2010;
- + \$454,000 – increase in CalWORKs funding due to an increase in the allocation from the Department of Social Services;
- - \$251,000 – decrease in Drug Medi-Cal revenues due to lower than budgeted approved claims;
- - \$140,000 – decrease in intrafund transfer of indirect administrative costs.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

FY 2011-12 Recommended expenditures will increase \$88,000 to \$10,286,000 from the Estimated Actual of \$10,198,000. This 0.9% increase is the result of:

- +\$45,000 – increase in salaries and benefits
- +\$42,000 – due to programs resulting from the SAMHSA grant.

FY 2011-12 Recommended revenues will increase \$51,000 to \$10,414,000 from the Estimated Actual of \$10,363,000. This less than 1% change is as follows:

- - \$284,000 – decrease in Federal ARRA–Offender Treatment Program grant funding due to the elimination of this grant;

ALCOHOL, DRUG & MENTAL HEALTH SVCS

Alcohol & Drug Programs (cont'd)

- + \$228,000 – increase in Federal SAMHSA grant funding due to fully functioning programs for the entire fiscal year;
- + \$177,000 – increase in Drug Medi-Cal (DMC) revenues due to an increase in projected claiming activities.

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
To ensure County residents are receiving high quality services at local programs, conduct an average of 50 quality assurance agency reviews each year.	37	50	50	50
To support client efforts to become self-sufficient, the department will increase the average number of new CalWORKs assessments completed from 23 to 24 per month.	95% 23 24	100% 24 24	96% 23 24	100% 24 24
In order to engage clients into a successful recovery program, the department will ensure that 95% of the clients receiving detoxification services will complete a minimum of 5 days of treatment.	91% 443 485	95% 546 574	83% 362 436	95% 461 485
To promote the health and well-being of children, ensure that 100% of an estimated 25 children born to women receiving perinatal alcohol and drug treatment services will be drug-free.	45% 17 38	100% 25 25	100% 28 28	100% 25 25
In order to prevent future incarceration from probation clients, the department will ensure that 80% of 120 Juvenile Probation clients who receive an assessment will enroll in treatment.	91% 101 111	80% 64 80	82% 98 120	80% 96 120

ALCOHOL, DRUG & MENTAL HEALTH SVCS

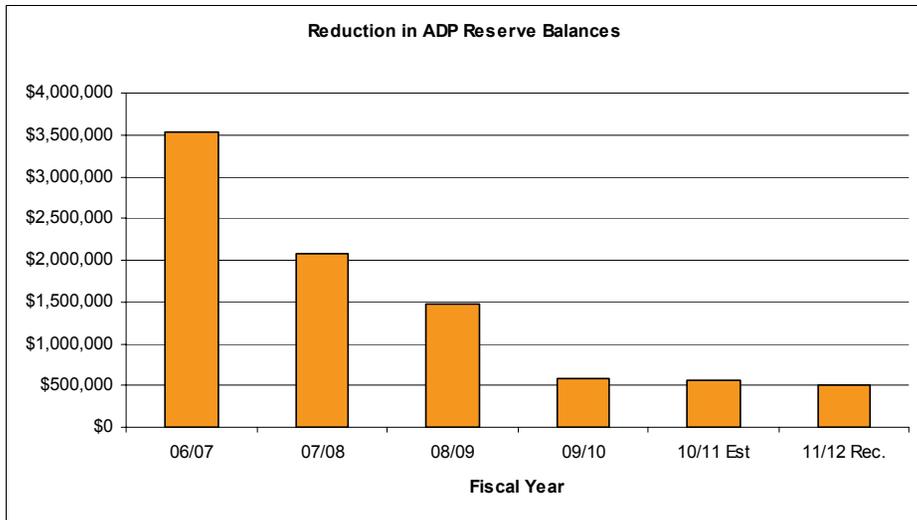
Alcohol & Drug Programs (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
--	--------------------	---------------------	-------------------------	-------------------------

Recurring Performance Measures

An estimated 50% of 129 high risk youth, ages 10 and over, will be assessed to have improved ability to avoid alcohol or other drugs at their annual anniversary date of participation in the mentoring program.

	66%	51%	80%	50%
	85	38	90	65
	129	75	112	129



Over the past few years, ADP has been able to rely on reserve accounts to mitigate the impact of declining revenue. The previous reserve balance is now all but exhausted and will not be available to fund ongoing operations.

	Actual FY 09-10 Pos.	Adopted FY 10-11 Pos.	Est. Actual FY 10-11 Pos.	Recommended FY 11-12 Pos.
--	----------------------------	-----------------------------	---------------------------------	---------------------------------

Position Detail

ADP - Program Administration

Division Chief	1.0	1.0	1.0	--
Team/Project Leader	1.0	--	--	1.0
Cost Analyst	1.0	--	--	1.0
Admin Office Pro	3.0	3.0	3.0	2.0
Accountant	--	1.0	1.0	0.6
Computer Systems Specialist	--	--	--	1.0
Department Business Specialist	1.0	1.0	1.0	1.0
Alcohol & Drug Service Specialist	1.0	1.0	1.0	--
Sub-Division Total	8.0	7.0	7.0	6.6

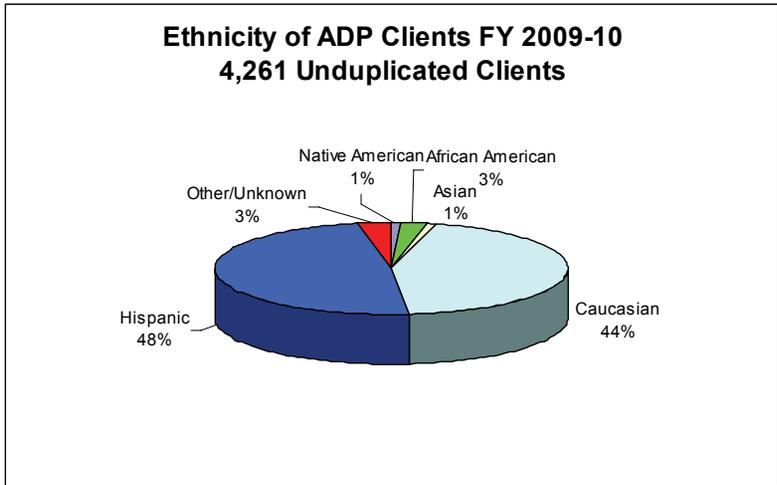
ADP - Treatment Services

Team Supervisor	2.0	2.0	2.0	1.0
Cost Analyst	--	1.0	1.0	--
Admin Office Pro	1.0	--	--	--
Accountant	1.0	--	--	--
Computer Systems Specialist	1.0	1.0	1.0	--
Practitioner	4.0	2.0	2.0	2.0
Rehab Specialist	1.0	--	--	--
Alcohol & Drug Service Specialist	3.0	2.0	2.0	4.0
Sub-Division Total	13.0	8.0	8.0	7.0

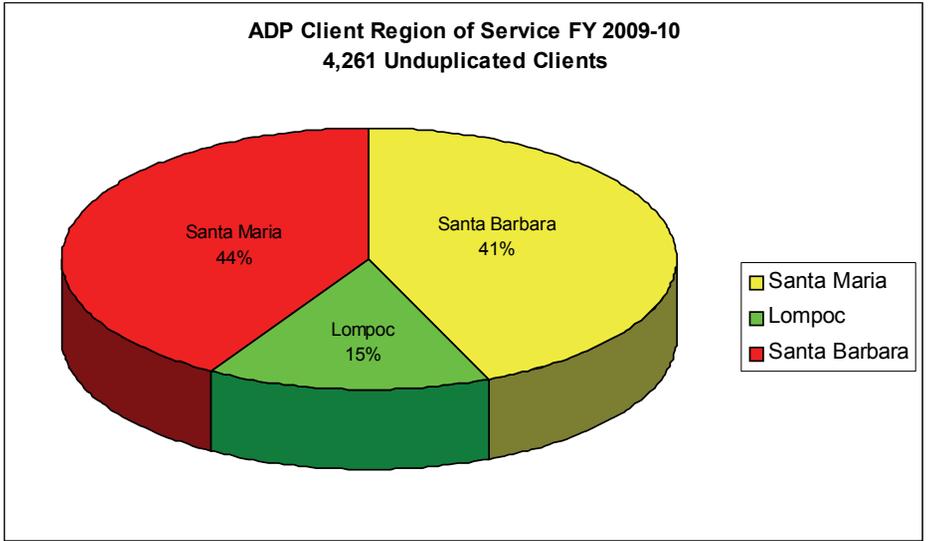
ADP - Prevention Services

Team Supervisor	1.0	1.0	1.0	--
Alcohol & Drug Service Specialist	2.0	2.0	2.0	1.0
Sub-Division Total	3.0	3.0	3.0	1.0
Division Total	24.0	19.0	19.0	14.6

ALCOHOL, DRUG & MENTAL HEALTH SVCS
Alcohol & Drug Programs (cont'd)



The Department strives to provide culturally and linguistically appropriate services to meet the needs of the diverse ethnic groups in Santa Barbara County. Note: FY 2010-11 data are not available at time of publication.



Over half of clients receive services in North and Central County. As such, the Department continues to strive to meet the capacity to provide high quality services to this population. Note: FY 2010-11 data are not available at time of publication.

ADP SOURCE OF REVENUES (Dollars in Thousands)

	Actual 2006- 07	Actual 2007-08	Actual 2008-09	Actual 2009-10	Est. 2010-11	Rec. 2011- 12
Drug Medi-Cal	2,991	2,943	2,837	3,231	3,369	3,546
Substance Abuse Pre- vention & Treatment (SAPT) Federal Block Grant	2,553	2,554	2,557	2,559	2,559	2,525
Reserves	1,273	1,372	963	750	158	190
SACPA*	2,328	1,920	1,875	363	205	-
Grants	1,588	1,827	1,709	1,800	2,162	2,127
All Other	1,582	1,550	1,466	1,218	1,910	2,026
Total Revenues	12,315	12,166	11,407	9,921	10,363	10,414

*The State's Substance Abuse Crime Prevention Act (SACPA) funding stream of approximately \$2 million per year has been eliminated.

ALCOHOL, DRUG & MENTAL HEALTH SVCS
QA/Compliance

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Use of Funds Summary				
<i>Operating Expenditures</i>				
QA/Compliance/Placement	\$ 4,690,919	\$ 5,008,740	\$ 4,582,574	\$ 4,790,046
Operating Sub-Total	4,690,919	5,008,740	4,582,574	4,790,046
Less: Intra-County Revenues	(3,560)	--	--	--
Expenditure Total	4,687,359	5,008,740	4,582,574	4,790,046
<i>Other Financing Uses</i>				
Designated for Future Uses	--	51,380	51,380	--
Division Total	\$ 4,687,359	\$ 5,060,120	\$ 4,633,954	\$ 4,790,046

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Character of Expenditures				
<i>Operating Expenditures</i>				
Regular Salaries	1,013,746	1,206,550	971,953	1,089,558
Overtime	973	4,131	2,519	2,500
Extra Help	29,704	12,775	--	12,617
Benefits	372,265	513,073	463,326	516,323
Salaries & Benefits Sub-Total	1,416,688	1,736,529	1,437,798	1,620,998
Services & Supplies	3,274,231	3,272,211	3,144,776	3,169,048
Operating Sub-Total	4,690,919	5,008,740	4,582,574	4,790,046
Less: Intra-County Revenues	(3,560)	--	--	--
Expenditure Total	\$ 4,687,359	\$ 5,008,740	\$ 4,582,574	\$ 4,790,046

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Source of Funds Summary				
<i>Departmental Revenues</i>				
Federal & State Revenues	\$ 3,269,849	\$ 2,653,038	\$ 1,579,186	\$ 2,095,369
Other Charges for Services	1,420,211	2,404,482	2,334,971	2,044,639
Miscellaneous Revenue	859	2,600	157,513	500
Revenue Sub-Total	4,690,919	5,060,120	4,071,670	4,140,508
Less: Intra-County Revenues	(3,560)	--	--	--
Revenue Total	4,687,359	5,060,120	4,071,670	4,140,508
<i>General Fund Contribution</i>				
Division Total	\$ 4,687,359	\$ 5,060,120	\$ 4,633,954	\$ 4,790,046

	Actual FY 09-10		Adopted FY 10-11		Est. Actual FY 10-11		Recommended FY 11-12	
	Pos.	FTE	Pos.	FTE	Pos.	FTE	Pos.	FTE
Position Summary								
<i>Permanent</i>								
QA/Compliance/Placement	13.4	11.6	14.0	13.5	14.0	11.5	13.0	11.9
Total Permanent	13.4	11.6	14.0	13.5	14.0	11.5	13.0	11.9
<i>Non-Permanent</i>								
Contract	--	0.5	--	0.5	--	0.5	--	0.5
Extra Help	--	0.4	--	0.2	--	0.3	--	0.1
Total Positions	13.4	12.5	14.0	14.1	14.0	12.3	13.0	12.5

SERVICE DESCRIPTION

The Quality Assurance/Compliance Division supports the Local Mental Health Plan, is mandated by the Performance Contract with the State Department of Mental Health and focuses on the following areas: service delivery capacity, utilization review, regulatory compliance oversight, beneficiary access, clinical quality issues, continuity of care and provider appeals.

Significant Changes (FY 2010-11 Adopted to FY 2010-11 Estimated Actual)

Estimated Actual Expenditures decreased \$426,000 to \$4,583,000 from the Adopted Budget of \$5,009,000. This 8.5 % decrease is due to:

- -\$299,000 – decrease in salaries and benefits due to the assignment of 1 FTE dedicated to MHSA programs and one unfilled position;
- -\$116,000 – decrease in contractor services due to a reduction in need for residential placement services as specialty MHSA programs is initiated.

Estimated Actual revenues decreased \$988,000 to \$4,072,000 from the Adopted Budget of \$5,060,000. This 19.5% decrease is primarily due to the following:

- -\$562,000 – reduction in realignment revenue used as matching funds replaced by General Fund Contribution.(see Source of Funds Summary);
- -\$426,000 – decrease in expenditures thereby requiring less funding.

Significant Changes (FY 2010-11 Estimated Actual to FY 2011-12 Recommended Budget)

FY 2011-12 Recommended expenditures will increase \$207,000 to \$4,790,000 from the Estimated Actual of \$4,583,000. This 4.5% increase is the result of:

- +\$183,000 – increase in salaries, benefits and retirement costs;
- +\$34,000 – increase in services provided through contractors.

FY 2011-12 Recommended revenue will increase \$69,000 to \$4,141,000 from the Estimated Actual of \$4,072,000. This 1.7% increase is the result of:

- +\$400,000 – increase in grant funds from Individuals with Disabilities Education Act (IDEA) for residential services (pass-through funds for Department of Social Services);
- -\$217,000 – decrease in funds received through the American Recovery and Reinvestment Act based on expiration of program at end of FY 2010-11.
- -\$157,000 – decrease in contract settlements (settlements are not recorded until amounts are known).
- -\$137,000 – decrease in Medi-Cal-funded services;
- +\$116,000 – increase in realignment revenues to balance divisional expenditures;
- +\$64,000 – increase in Medi-Cal Quality Assurance reimbursement.

ALCOHOL, DRUG & MENTAL HEALTH SVCS

QA/Compliance (cont'd)

	Actual FY 09-10	Adopted FY 10-11	Est. Actual FY 10-11	Recommended FY 11-12
Recurring Performance Measures				
To ensure timely and appropriate intervention to the public, provide face-to-face same day assessment to 100% of an estimated 200 clients who contact the Access Team with urgent mental health treatment needs.	91% 165 181	100% 200 200	87% 152 174	100% 200 200
In order to reduce costs, increase efficiency and HIPAA security, all closed clinical health records will be digitally imaged from paper-based to electronic health record within 90 days of case closing	100% 4,159 4,159	100% 1,350 1,350	100% 1,069 1,069	100% 2,500 2,500
To ensure employee competence in the area of service documentation, provide MediCal compliance training to an estimated 550 ADMHS and partner agency staff annually.	100% 128 128	100% 550 550	125% 690 550	100% 550 550
To preserve hospital resources for all community members in need, process 100% of an estimated 70 MediCal Treatment Authorization Requests (TARS) per year within 14 calendar days of receipt.	89% 75 84	100% 70 70	82% 56 68	100% 70 70

	Actual FY 09-10 Pos.	Adopted FY 10-11 Pos.	Est. Actual FY 10-11 Pos.	Recommended FY 11-12 Pos.
Position Detail				
QA/Compliance/Placement				
Psychiatrist	0.4	--	--	--
Division Chief	--	1.0	1.0	--
Program Manager	1.0	1.0	1.0	1.0
Psychiatric Nurse Sr.	2.0	2.0	2.0	2.0
Quality Assurance Coordinator	1.0	1.0	1.0	1.0
Admin Office Pro	5.0	4.0	4.0	4.0
Department Business Specialist	1.0	1.0	1.0	1.0
Medical Records Administrator	1.0	1.0	1.0	1.0
Practitioner	2.0	3.0	3.0	3.0
Sub-Division Total	13.4	14.0	14.0	13.0
Division Total	13.4	14.0	14.0	13.0

