### Departmental Summary Table

<table>
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<tr>
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<td>552,025</td>
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<td>4,410,087</td>
<td>(0)</td>
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<td>$150,987,141</td>
<td>$150,987,141</td>
<td>$25,608,684</td>
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<tr>
<td><strong>Expenditures</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
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<td>Salaries &amp; Benefits</td>
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<td>$73,326,892</td>
<td>$12,778,144</td>
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<td>44,035,552</td>
<td>47,100,496</td>
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<td>12,530,892</td>
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<td>11,127,978</td>
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<td>2,515,520</td>
<td>4,131,008</td>
<td>4,131,008</td>
<td>1,615,488</td>
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<td>(31,298,248)</td>
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<td>(4,107,712)</td>
<td>(606,999)</td>
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<td>(4,408,730)</td>
<td>(3,801,731)</td>
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<tr>
<td>Total Expenditures</td>
<td>$131,284,383</td>
<td>$117,754,900</td>
<td>$118,935,222</td>
<td>$125,378,457</td>
<td>$150,987,141</td>
<td>$150,987,141</td>
<td>$25,608,684</td>
</tr>
</tbody>
</table>

| Allocated Positions  | 1,163.03      | 1,231.83      | 1,176.95      | 1,212.01      | 1,232.18       | 1,232.18       | 20.17            |
| Total Staffing       | 1,163.03      | 1,231.83      | 1,176.95      | 1,212.01      | 1,232.18       | 1,232.18       | 20.17            |

**2013-14 Budget**
Health & Human Services

The Health & Human Services Department includes the following budget units:

Health & Human Services

- 1100 490 Inmate/Indigent Medical Services
- 1100 525 General Relief
- 1160 516 Department of Health and Human Services (DHHS) Administration

Mental Health Branch

Alcohol & Other Drugs Division

- 1180 425 Alcohol & Other Drugs
- 1180 431 Healthy Moms

Mental Health Division

- 1170 424 Mental Health Administration
- 1170 427 Mental Health Jail Programs
- 1170 475 HumWORKs
- 1170 477 Mental Health Services Act
- 1170 495 Sempervirens/Psychiatric Emergency Services
- 1170 496 Adult Programs
- 1170 497 Children, Youth & Family Services
- 1170 498 Medication Support

Public Health Branch

Administration Division

- 1175 400 Public Health Administration
- 1175 403 Medi-Cal Administrative Activities & Targeted Case Management
- 1175 410 Emergency Medical Services
- 1175 413 Children’s Health
- 1175 419 Communicable Disease Control Program
- 1175 422 Clinic Services
- 1175 428 Immunization Services
- 1175 434 Outside Agency Support
- 1175 435 Public Health Laboratory
- 1175 455 Emergency Preparedness & Response
- 1175 465 Pharmacy

Environmental Health Division

- 1175 406 Environmental Health
- 1175 411 Hazardous Materials
- 1175 430 Local Agency Enforcement
- 1175 432 Local Oversight Program
- 1175 486 Environmental Health Land Use

Healthy Communities Division

- 1175 407 Childhood Lead Poison Prevention Program
- 1175 412 Tobacco Education
- 1175 414 Health Education
- 1175 415 Women, Infants & Children
- 1175 433 Nutrition and Physical Activity
Health & Human Services

- 1175 437 CARE NorCAP
- 1175 449 Fiscal Agent CARE/HOPWA
- 1175 451 Drug Free Community
- 1175 452 Alcohol & Other Drugs Prevention
- 1175 454 Prevention and Early Intervention (Mental Health Services Act)
- 1175 470 Housing Opportunity for People with AIDS (HOPWA) NorCAP
- 1175 488 Family Violence Prevention

Maternal, Child & Adolescent Health (MCAH) Division

- 1175 416 Public Health Field Nursing
- 1175 418 Child Health & Disability Prevention
- 1175 420 Maternal & Child Health Coordinated Services
- 1175 421 California Home Visiting Program
- 1175 426 Nurse Family Partnership
- 1175 460 MCAH Personnel
- 1175 493 California Children’s Service

Social Services Assistance Division

- 1110 515 Title IV-E Waiver
- 1110 517 Temporary Assistance for Needy Families (TANF)
- 1110 518 Foster Care

Social Services Division

- 1160 273 Public Guardian
- 1160 504 Older Adults
- 1160 505 CalWORKs
- 1160 506 In Home Supportive Services (IHSS) Public Authority
- 1160 508 Child Welfare Services
- 1160 511 Social Services Administration
- 1160 599 Veterans Services

Social Services Branch

Employment & Training Development (ETD) Division

- 1190 582 ETD Multi-Project
- 1190 584 Supplemental Displaced Worker
- 1190 586 Rapid Response
- 1190 589 Adult Programs
- 1190 590 Displaced Worker Program
- 1190 597 ETD Operating Staff
In addition, the following budget units, which are no longer in use, are included in summary tables for past years:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>1160 519</td>
<td>TANF-ECF</td>
</tr>
<tr>
<td>1160 509</td>
<td>Shelter</td>
</tr>
<tr>
<td>1170 507</td>
<td>Mental Health Childrens Center</td>
</tr>
<tr>
<td>1170 476</td>
<td>Street Outreach Services Homeless Program</td>
</tr>
<tr>
<td>1175 402</td>
<td>AIDS Information &amp; Education</td>
</tr>
<tr>
<td>1175 404</td>
<td>Adolescent Family Life</td>
</tr>
<tr>
<td>1175 408</td>
<td>Alternative Response Team</td>
</tr>
<tr>
<td>1175 409</td>
<td>HIV/AIDS Public Health Nursing Program</td>
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<tr>
<td>1175 416</td>
<td>Children’s Health</td>
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<tr>
<td>1175 417</td>
<td>Preventative Health Care for the Aging</td>
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<tr>
<td>1175 436</td>
<td>Health Project Lean</td>
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<td>1175 442</td>
<td>Street Outreach</td>
</tr>
<tr>
<td>1175 447</td>
<td>High Risk Prevention Case Management</td>
</tr>
<tr>
<td>1175 448</td>
<td>Bridge Project</td>
</tr>
<tr>
<td>1175 453</td>
<td>Binge Drinking Reduction</td>
</tr>
<tr>
<td>1180 429</td>
<td>Substance Abuse &amp; Crime Prevention Act (Proposition 36)</td>
</tr>
</tbody>
</table>

A Hope Center garden produces flowers and vegetables year round.
Mission

To reduce poverty and connect people and communities with opportunities for health and wellness.

Vision

People helping people live better lives.

Program Discussion

Health and human services in Humboldt County were previously provided by six separate county departments—Mental Health, Public Health, Social Services, Employment Training, Veterans Services and Public Guardian—each with its own administrative and overhead costs. In 1999, the county took the first step toward integration with Assembly Bill (AB) 1259, authored by Assemblywoman Virginia Strom Martin, which allowed the county to partner with relevant state departments to design and implement a single comprehensive county health and human services system. In 2004, AB 1881, authored by Assemblywoman Patty Berg, authorized continuation of Humboldt County’s transformational work, and in 2007, AB 315, also authored by Berg, made the Integrated Services Initiative permanent. Integrated programming has reduced costs and streamlined and improved services to the children, families and adults the County serves.

Goals

1. To deliver coordinated, efficient integrated services for children, families and adults.

2. To focus services on client and community strengths and emphasize prevention, resiliency, recovery and hope.

3. To collaborate with clients in their recovery and tailor services to fit the values and needs identified.

4. To ensure quality and accountability of evidence-based and outcome-driven programs.

5. To value and nurture partnerships with community stakeholders.
Performance Measures

1. Description of Performance Measure: Percentage of clients served through maximized opportunities under the Patient Protection and Affordable Care Act

<table>
<thead>
<tr>
<th>FY 2009-10 Actual</th>
<th>FY 2010-11 Actual</th>
<th>FY 2011-12 Actual</th>
<th>FY 2012-13 Projected</th>
<th>FY 2013-14 Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>0%</td>
<td>10%</td>
<td>10%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Describe why this measure is important and/or what it tells us about the performance of this budget unit: The Department of Health and Human Services’ (DHHS) goal is to implement the federal Patient Protection and Affordable Care Act (ACA), commonly known as health care reform, to bring federal dollars to Humboldt County and improve the health of the community. DHHS will continue to plan for the seamless enrollment into Medi-Cal of an estimated 8,000 to 9,000 currently uninsured low-income residents. Many residents will become eligible for the program in 2014; others potentially eligible under current rules will be served by improved processes and outreach activities. DHHS worked with the County Medical Service Program (CMSP) to transition almost 90% of all CMSP clients into the new Low-Income Health Program Path2Health as a bridge to the ACA’s 2014 Medi-Cal expansion. DHHS will also work to maximize opportunities under the ACA to expand access to mental health and substance use disorder services, and will position DHHS to take advantage of the ACA’s Public Health Prevention Fund to expand the Department’s prevention and wellness activities. This will create new opportunities for improving health and safety and will further protect vulnerable populations.

2. Description of Performance Measure: Percentage of General Relief population provided recovery focused services

<table>
<thead>
<tr>
<th>FY 2009-10 Actual</th>
<th>FY 2010-11 Actual</th>
<th>FY 2011-12 Actual</th>
<th>FY 2012-13 Projected</th>
<th>FY 2013-14 Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>5%</td>
<td>50%</td>
<td>63%</td>
<td>60%</td>
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</tbody>
</table>

Describe why this measure is important and/or what it tells us about the performance of this budget unit: In 2013-14, DHHS plans to provide multi-disciplinary services to General Relief (GR) clients. As many of the GR clients have multiple barriers to recovery, a multi-disciplinary service model has been developed to provide holistic services to each client. The integrated service delivery model includes GR eligibility workers, Social Workers, and both Mental Health and Public Health staff. Proactive case planning and management is provided to improve social, mental and physical outcomes for each client with the goal of transitioning each individual to self-sufficiency. This includes ensuring that GR clients are linked to and follow up with mental health and medical treatment when needed. Employment Services through Employment Training Division are offered once a recipient’s medical and/or mental health conditions stabilize and an assessment indicates the client is employment-ready. These services provide opportunities for improved safety and health and protect vulnerable populations.
3. **Description of Performance Measure**: Percentage of Adult Services population provided services that ensured independence and safety

<table>
<thead>
<tr>
<th>FY 2009-10 Actual</th>
<th>FY 2010-11 Actual</th>
<th>FY 2011-12 Actual</th>
<th>FY 2012-13 Projected</th>
<th>FY 2013-14 Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>0%</td>
<td>10%</td>
<td>70%</td>
<td>75%</td>
</tr>
</tbody>
</table>

*Describe why this measure is important and/or what it tells us about the performance of this budget unit:* In 2013-14, DHHS plans to provide multi-disciplinary, integrated services to Adult Protective Services and In-Home Supportive Services clients. The goal of this program is to provide services that enable disabled children and older, disabled and dependent adults to achieve their highest personal potential in the least restrictive environment possible. The multi-disciplinary service model provides holistic services to each client; the integrated service delivery model includes Social Workers, Mental Health Clinicians and Public Health Nurses. Proactive case planning and case management are provided with the goal of ensuring each individual’s right to pursue the highest level possible of physical, emotional, social, and environmental wellness, safety, and independence. These services provide opportunities for improved safety and health and protect vulnerable populations.

4. **Description of Performance Measure**: Percentage of children in Foster Care who had access to and received Medi-Cal mental health services (measured as the Medi-Cal Mental Health Penetration Rate for Foster Youth)

<table>
<thead>
<tr>
<th>FY 2009-10 Actual</th>
<th>FY 2010-11 Actual</th>
<th>FY 2011-12 Actual</th>
<th>FY 2012-13 Projected</th>
<th>FY 2013-14 Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>25%</td>
<td>53%</td>
<td>70%**</td>
<td>80%</td>
</tr>
</tbody>
</table>

*Describe why this measure is important and/or what it tells us about the performance of this budget unit:* Since FY 2011-12, three federal grants have been secured to support system transformation efforts in children’s mental health and child welfare. These grants will improve the local system of care, positioning Humboldt County to implement the California Statewide Katie A. lawsuit settlement agreement by improving intensive community-based services to children and families involved in or at risk of involvement with Child Welfare Services. During FY 2013-14, new evidence-based practices will be implemented to improve services to youth, address adolescent substance abuse, and improve safety and well-being of children and youth referred to or served by CWS.

This performance measure increases opportunities for improved health and safety. It also allows the Department to enforce laws and regulations to protect economically, emotionally and socially vulnerable populations.

*It is estimated APS EQRO Data for 2012 will be published in Spring 2013.

**Data is dependent on paid claims as processed by the State and published by APS EQRO Healthcare. It becomes available approximately 18 months after the close of the fiscal year.
Operating Divisions Organizational Chart:

- **Director Health & Human Services**
  - **SOCIAL SERVICES BRANCH**
    - Social Services Division
    - General Relief Budget Unit 525
  - **MENTAL HEALTH BRANCH**
    - Assistance Division
    - Employment & Training Division
    - Mental Health Division
    - Alcohol & Other Drugs Division
  - **ADMINISTRATION**
    - Budget Unit 516
  - **PUBLIC HEALTH BRANCH**
    - Public Health Administration Division
    - Environmental Health Division
    - Inmate/Indigent Medical Services Budget Unit 490
    - Maternal Child & Adolescent Health Division
    - Healthy Communities Division
    - Public Health Nursing Division
## 1160 - Social Services Fund

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<tr>
<td><strong>Revenues</strong></td>
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<td></td>
<td></td>
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<td>Charges for Services</td>
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<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
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<td>(To)/From Non-GF Fund Balance</td>
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<td>$0</td>
<td>$55,674</td>
<td>$0</td>
<td>$0</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Supplies &amp; Services</td>
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<td>$814,183</td>
<td>$102,320</td>
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<td>$369,668</td>
<td>$98,291</td>
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<td>$0</td>
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<td>$0</td>
<td>$0</td>
<td>$(2,239)</td>
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<tr>
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<td>$(3,331,773)</td>
<td>$(3,247,086)</td>
<td>$(3,848,400)</td>
<td>$(3,848,400)</td>
<td>$601,314</td>
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<tr>
<td>Total Expenditures</td>
<td>$1,435,675</td>
<td>$0</td>
<td>$0</td>
<td>$55,674</td>
<td>$0</td>
<td>$0</td>
<td>$(55,674)</td>
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<td>33.00</td>
<td>35.00</td>
<td>35.00</td>
<td>35.00</td>
<td>35.00</td>
<td>0.00</td>
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<td>Temporary (FTE)</td>
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<td>6.00</td>
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<td>38.00</td>
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<td>36.57</td>
<td>41.00</td>
<td>41.00</td>
<td>4.43</td>
</tr>
</tbody>
</table>
**DHHS Administration (1160 516)**

**Purpose**

The Health and Human Services Administration budget unit provides management and administrative support to the remainder of the Department of Health and Human Services (DHHS).

**Recommended Budget**

The recommended budget for FY 2013-14 for DHHS Administration is $3,848,400, excluding expense transfers, a decrease of $29,314 or 0.76% from FY 2012-13. This decrease in salaries and benefits is due to increasing salary reimbursements, the sharing of salary costs, with other DHHS budget units.

**Recommended Personnel Allocation**

For DHHS Administration, the total positions recommended for FY 2013-14 are 35 FTE with no frozen positions. A 1.0 FTE Payroll/Personnel Specialist was deleted and a 1.0 FTE Department Information Systems Analyst was added.

**Board Adopted**

The Board adopted this budget as recommended.

**Program Discussion**

In 2000, the Humboldt County Board of Supervisors created DHHS, which combined the formerly separate departments of Social Services, Mental Health, Public Health, Employment and Training, Veterans Services, and Public Guardian. AB 315 (Chapter 264, Laws of 2007) made DHHS a permanent agency. DHHS’s mission is to reduce poverty and connect people and communities to opportunities for health and wellness.

**2012-13 Accomplishments**

1. Continued to implement strategies for increased integration within DHHS to ensure higher service levels to children, families and adults that protect vulnerable populations.

2. Continued ramp-up of the Transition Age Youth division to protect a vulnerable population, integrating the service capacity of appropriate staff from all three DHHS branches: Social Services, Public Health and Mental Health.

3. Began implementation of national health care reform, known as the Affordable Care Act (ACA), which will provide health coverage for thousands of currently uninsured county residents and provide community-appropriate levels of service.
2013-14 Objectives

1. To continue ACA implementation, including Medi-Cal expansion activities slated for 2014, to provide community-appropriate levels of service.

2. To launch Regional Host Call Center activities for Region 6 for Covered California by providing eligibility and enrollment services for entitlement programs. (Covered California is the name of California’s ACA program). These services will provide community-appropriate levels of service. This initiative will add an estimated 45 additional jobs for providing enrollment services on behalf of other counties.

3. To continue implementation of the department’s Strategic Space Plan, including the construction phase of the new Children and Families Building for Koster Street. The building will co-locate multiple programs serving children and families, which will create opportunities for improved health and safety.

“Fostering Educational Dreams” luncheon attended, left to right, by College of the Redwoods President Kathryn Smith, Humboldt State University President Rollin Richmond, DHHS Director Phillip R. Crandall and Superior Court Judge Joyce Hinrichs.
## 2013-14 Budget

### Health & Human Services

#### 1180 - Alcohol & Other Drugs Fund

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fines, Forfeits &amp; Penalties</td>
<td>$98,363</td>
<td>$132,655</td>
<td>$94,353</td>
<td>$53,082</td>
<td>$95,605</td>
<td>$95,605</td>
<td>$42,523</td>
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<td>Other Gov't Agencies</td>
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<td>1,633,550</td>
<td>1,633,550</td>
<td>349,047</td>
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<td>Charges for Services</td>
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<td>41,387</td>
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<td>Other Revenues</td>
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<td>1,750</td>
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<td><strong>To/From Non-GF Fund Balance</strong></td>
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<td>(24,537)</td>
<td>21,617</td>
<td>370,742</td>
<td>0</td>
<td>0</td>
<td>(370,742)</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td>$2,668,270</td>
<td>$1,898,620</td>
<td>$1,741,264</td>
<td>$1,747,821</td>
<td>$1,772,292</td>
<td>$1,772,292</td>
<td>$24,471</td>
</tr>
<tr>
<td><strong>Expenditures</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries &amp; Benefits</td>
<td>$902,438</td>
<td>$1,026,347</td>
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Purpose

In order to provide treatment to those who have alcohol and drug addiction, the Division of Alcohol and Other Drugs Programs (AODP) is committed to providing a recovery oriented environment where individuals can develop the critical skills needed to develop lifestyles free from alcohol and drugs. The division provides assessment, referral, treatment and care coordination for adults and adolescents with substance abuse treatment needs in Humboldt County.

This budget narrative discusses the operations and funding for budget units: Adult and Adolescent Alcohol and Other Drug Treatment Program (425), and Healthy Moms (431). Due to the elimination of Substance Abuse and Crime Prevention Act (SACPA) and Department of Justice fund sources, the SACPA (429) budget unit is proposed to be eliminated in FY 2013-14.

Recommended Budget

The recommended budget for Alcohol & Other Drugs for FY 2013-14 is $2,919,137, excluding expense transfers, a decrease of $1,681. This overall decrease is due to increasing expense transfers to other DHHS budget units. Funding of $10,000 is recommended for fixed assets; additional detail is in the Capital Expenditures table.

Personnel Allocation Changes

The total allocated positions for Alcohol & Other Drugs for FY 2013-14 are 32.45 FTE with 3.0 FTE positions remaining frozen. Two FTEs will be reassigned due to the proposed elimination of SACPA. These reassignments include a 1.0 FTE Substance Abuse Counselor I/II from SACPA (429) to the Adult and Adolescent Alcohol and Other Drug Treatment Program (425) and a 1.0 FTE Administrative Analyst I/II from SACPA (429) to fund 1170 Mental Health Administration (424). The net decrease to this budget grouping is 1.0 FTE.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

Within the Alcohol & Other Drugs Fund, there are two programs: Adult and Adolescent Alcohol and Other Drugs Treatment Program, and the Healthy Moms program. These programs are operated under various mandates.

1180 425 Adult and Adolescent Alcohol & Other Drug Treatment Program

The purpose of the Adult and Adolescent Alcohol and Other Drug Treatment Program is to make treatment available for those with substance abuse disorders, including co-occurring mental health and substance use disorders (COD). Clients are
assessed for treatment, and recommendations are made as to the level of services that would benefit them. Staff provides treatment planning sessions and group treatment. In addition, the staff coordinates with other agencies, including Probation and Social Services, to assist clients in addressing their needs.

The goals and objectives of AODP are to reduce the incidence of alcohol and other drug problems in Humboldt County by developing, administering and supporting prevention and treatment programs. This involves reducing barriers to treatment, and coordinating services within the Mental Health Branch (MHB) of the Department of Health and Human Services (DHHS) and community providers in order to provide the most effective means to meet these goals and objectives.

Some services provided directly by AODP staff include: assessment of individuals for alcohol/drug problems and outpatient treatment through groups; individual intervention ranging from reduction of harmful behaviors to full abstinence; services coordination for COD; treatment screening and referrals; prevention through education and information; and consultation with other community providers. Other services that are related to improving client functioning include individual and family counseling, and parent education.

Residential AODP services are provided through contracts with community providers. They include thirty to ninety day residential treatment for adult men and women as well as social detoxification.

AODP is funded through a variety of sources, including: federal Substance Abuse and Prevention (SAPT) block grant allocation, 2011 State Realignment, Stratham and Seymour funds, and federal Drug Medi-Cal reimbursement. Quarterly reports on the utilization of these funds and an annual cost report are submitted to the Alcohol and Drug Programs division of the State Department of Health Care Services.

The AODP budget for FY 2013-14 is $2,139,054. This represents a decrease of $62,937, or 3%, from FY 2012-13. Total positions include 20.70 FTE permanent positions, of which 2.00 FTE will be held frozen and unfunded. This includes the allocation of 2.0 FTE Substance Abuse Counselor I/II’s for FY 2013-14.

1180 429 Substance Abuse and Crime Prevention Act

Funding previously available through State and federal resources for the SACPA program was eliminated in FY 2012-13.

1180 431 Healthy Moms Program

The Healthy Moms Program provides perinatal treatment as defined by the State Office of Perinatal Substance Abuse (California Health & Safety Code, Sections 300-309.5). A comprehensive alcohol and other drug treatment program for pregnant and parenting women, Healthy Moms provides assessment, group treatment, and mental health treatment for individuals and families. A parent educator provides parenting classes and supervises the on-site daycare.
The Healthy Moms Program funding is from the cost applied SAPT block grant allocation, 2011 State Realignment revenues, and Drug Medi-Cal and Perinatal Medi-Cal federal reimbursement. Other cost applied transfers include Medi-Cal federal financial participation, 2011 State Realignment for Early Periodic Screening, Diagnosis and Treatment (EPSDT), and CalWorks.

The recommended budget for Healthy Moms for FY 2013-14 is $780,083, excluding expense transfers. This represents an increase of $61,256, or 8.5%, from FY 2012-13 due to increasing expense transfers to other DHHS budget units. Full staffing includes 11.75 FTE permanent staff. A 1.0 FTE Senior Substance Abuse Counselor position will be held frozen and unfunded.

**2012-13 Accomplishments**

1. Implemented Seeking Safety, which is a practice recognized by the Substance Abuse and Mental Health Services Administration (SAMHSA) as an effective program for the treatment of individuals with a history of trauma and substance abuse. This practice creates opportunities for improved health and safety.

2. Expanded the Dual Recovery Program, which serves the needs of adults with severe mental illness and serious substance abuse issues. This program uses an evidence based treatment model called Integrated Dual Disorders Treatment. This model is related to positive outcomes such as reduction in severity of psychiatric symptoms, abstinence from abusive substances, and reduction in psychiatric hospitalizations and incarcerations. This program improves safety and health in the community.

**2013-14 Objectives**

1. To implement Moral Reconation Therapy, which is a practice recognized by the SAMHSA as a systematic treatment strategy that seeks to decrease recidivism in juvenile and adult criminal offenders. It has also shown to be efficacious in treating individuals with alcohol and substance abuse issues and creates opportunities for improved safety and health.
### 1190 - Employment Training Fund

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Purpose

The Employment and Training Division (ETD) is Humboldt County's workforce division, helping Humboldt residents at several levels with workforce readiness, labor exchange and job search support, coordinating and funding vocational training programs, and helping employers with placements and subsidized wage and tax credit programs. ETD is the program operator for Workforce Investment Act (WIA) Adult, Dislocated Worker, and Rapid Response programs. ETD is a key partner in the Humboldt County One-Stop Career Center, The Job Market, providing 4.5 positions to the Job Market. ETD also provides job readiness, job search, and job placement support to CalWORKs' Welfare to Work (WtW) program, to DHHS's Transition Age Youth (TAY) Division, and to Probation clients through the Humboldt County Community Correction Resource Center. The purpose of ETD’s provision of services, wherever applied, is to promote an increase in the employment, job retention, earnings, and occupational skills of participants. This, in turn, improves the quality of the workforce, reduces welfare dependency, and improves the productivity and competitiveness of Humboldt County. This service creates opportunities for improved health, safety and self-sufficiency of vulnerable populations.

ETD maintains six budget units: Multi-Project (582), Supplemental Displaced Worker (584), Rapid Response (586), Adult Programs (589), Dislocated Worker Program (590), and Employment & Training Staff (597).

Recommended Budget

The recommended Employment and Training Division budget for FY 2013-14 is $3,552,186, excluding expense transfers, an increase of $202,002, or 6%, from the previous year. This is primarily the result of increased funding from State and federal sources. Funding of $18,750 is recommended for fixed assets; additional detail is included in the Capital Expenditures table.

Recommended Personnel Allocation

For the Employment & Training Division, the total positions allocated for FY 2013-14 is 28 FTE with no frozen positions. There are no changes from the previous fiscal year.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

1190 582 ETD Multi-Project

The ETD Multi-Project budget contains funds from current competitive workforce grant awards. Current grants include:

- Workforce Investment Act (WIA) Youth Program – ETD provides technical assistance to the Youth Program Operators within the five contracted regions of
Employment & Training Division

Phillip Crandall, Health & Human Services Director

the County, helping to ensure appropriate completion of WIA eligibility, supportive service expenditures, performance outcomes, and State reporting requirements.

The budget for FY 2013-14 is $18,445, excluding expense transfers, a decrease of $6,745, or 26.7%, which is due to reduced WIA Youth funds and completion of the youth grant.

1190 584 Supplemental Displaced Worker

The Supplemental Displaced Worker fund is for WIA additional assistance awards that allow ETD to provide assistance in case of large layoff(s) or plant closure(s). ETD has one such application currently under review at the State and has included the funds with likelihood of their being awarded:

- WIA Dislocated Worker Additional Assistance Grant for Forest Product Workers – a grant written to provide training and re-employment services to workers laid-off from California Redwood Company and Wayne Bare Trucking.

The recommended budget for FY 2013-14 is $400,000, excluding expense transfers. This represents an increase of $400,000 over FY 2012-13, as no funding was available in the prior year.

1190 586 Rapid Response

Rapid Response (RR) is a service for businesses affected by a significant layoff or business closure. For the dislocated employees, RR provides information about safety-net supports, WIA job training programs, and assistance finding new work. For the employer, the RR program provides business expertise to possibly avert a layoff or closure, or assistance with a layoff to assure for pro-active job supports for the affected workers. RR action and support is taken in partnership with the North Coast Small Business Development Center.

The recommended budget for FY 2013-14 is $45,656, excluding expense transfers, a slight increase of $466 from the previous fiscal year.

1190 589 Adult Programs

WIA Adult Program services include comprehensive assessment, employment plan development, vocational training, job search assistance, case management, and supportive services for low-income adults.

The recommended budget for FY 2013-14 is $470,233, excluding expense transfers, an increase of $65,233, or 16.1%, over FY 2012-13. Despite a decrease of 5.31% in the WIA FY 2013-14 Adult allocation, the increase represented here is from a fund transferred from the Dislocated Worker (590) program to Adult as allowed by WIA to better serve actual client compositions.
Employment & Training Division

1190 590 Dislocated Worker Programs

The WIA Dislocated Worker (DW) Program provides comprehensive assessment, employment plan development, job vocational training, search assistance, case management, and supportive services to workers who have lost their jobs due to a company closing or significant downsizing.

The recommended budget for FY 2013-14 is $174,203, excluding expense transfers, a decrease of $230,797 from FY 2012-13. The bulk of this decrease is reflective of the transfer of DW funds to the WIA Adult program (589) and due also in small part to a 2.38% reduction in the FY 2013-14 DW WIA allocation.

1190 597 Employment and Training Division Staff

This is the primary budget unit for the Employment and Training Division. It includes all staffing costs associated with the provision of WIA Core, Intensive and Training services, as well as workforce services provided by ETD to the CalWORKs and TAY Divisions of DHHS, to the Probation Department, and for staff directed to any current competitive grant projects.

ETD provides WIA core and intensive services through the County’s One-Stop Career Center at The Job Market, including labor market information, initial assessment of skill levels, job search and placement assistance, WIA program information, eligibility guidelines and next-step guidance. WIA intensive and training services are provided from ETD’s main offices on 6th Street in Eureka. Services include workshops, vocational case management, comprehensive assessments, vocational counseling, career planning, and development of individual service strategies identifying employment goals. Training services are delivered through Individual Training Accounts that are set up for participants who have been approved to receive training funds. Participant training costs are reflected in budget units corresponding with the participant’s eligibility, i.e., 582, 584, 589 or 590.

CalWORKs, TAY and Probation funded services provided by ETD include full assessments, supervised job search activities, case management, and job development for subsidized wage programs. These activities help clients meet participation requirements and obtain unsubsidized employment.

The recommended budget for FY 2013-14 is $2,443,649, excluding expense transfers, a slight increase of $1,737 from FY 2012-13.

2012-13 Accomplishments

1. Expanded job development and job search supports for CalWORKs to help more clients return to work to support business and workforce development. At last measure in December 2012, 45% of WtW clients entered employment during or within 90 days of WtW services being provided.

2. Added activities that ensure clients have the opportunity to meet their required work participation
rates 100% of the time to support workforce development.

3. Achieved a 65% entered employment rate across WIA Core, Intensive and Training Services, exceeding the State goal of 60.7% to support workforce development.

4. Met the State goal of 82% with an 82.7% retention rate for all WIA programs as measured one year after services and initial employment to support workforce development.

5. Achieved average earnings of $17,573 for adult clients who entered employment, exceeding the State goal of $14,450 to support self-reliance of citizens.

2013-14 Objectives

1. To meet or exceed negotiated WIA program performance measures to create opportunities to protect vulnerable populations and provide community-appropriate levels of service:
   a. Achieve a 65% entered employment rate across WIA Core, Intensive and Training Services;
   b. Secure a 82% retention rate for all WIA program services one year after employment;
   c. Achieve average earnings of $18,000 for adult clients who entered employment.

2. To continue to improve workforce support for the other DHHS divisions served by ETD, including CalWORKs, General Relief and Transitional Age Youth programs, to help more individuals to return to work and support self-reliance of citizens, thereby improving the County’s employment rate, as well as ensure clients are meeting program activity and outcome requirements in order to support business and workforce development.

3. To maintain DHHS/ETD’s services and excellent performance record at the Job Market as one of two remaining key partners, along with the California Employment Development Department, in sustaining the County’s One-Stop Job Services Center in order to provide community-appropriate levels of service.

4. To successfully migrate to the new California State Workforce Service Network Software that will be available in early 2014 to provide for and maintain infrastructure. This should enable better service response for clients and improved integration and collaboration between One-Stop partners once finally using one unified client tracking and case management system.

5. To continue to design and refine a workforce program that serves the County’s Community Corrections Resource Partnership and Center and helps more ex-offenders become productive members of the community to support self-reliance of citizens.
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| Allocated Positions     | 33.00          | 33.00          | 33.00          | 33.00          | 33.00          | 33.00 0.00              |
| Temporary (FTE)          | 0.00           | 0.00           | 0.00           | 0.40           | 0.80           | 0.80 0.40              |
| **Total Staffing**      | 33.00          | 33.00          | 0.00           | 33.40          | 33.80          | 33.80 0.40             |
**Purpose**

The Environmental Health Division’s mission is to prevent illness and injury caused by unsafe or unsanitary conditions through inspections, the review of facility plans, and enforcement activities. Authority: Title 17 of the California Health and Safety Code.

This narrative includes discussion of funding and operations of five Environmental Health budget units: Consumer Protection (406), Hazardous Materials Program (411), Local Enforcement Agency (430), Local Oversight Program (432), and Land Use (486).

**Recommended Budget**

The recommended Environmental Health budget for FY 2013-14 is $3,031,918, including a $19,908 General Fund contribution. The overall increase is $50,384, or 1%, from the previous year. The General Fund contribution has increased by $18,493 for the agricultural handler’s hazardous materials fee as approved by the Board of Supervisors on May 14, 2013. The overall increase in the budget is a result of increased salary and benefit and insurance costs. Funding of $5,000 is recommended for fixed assets; additional detail on the projects is included below and in the Capital Expenditures table.

**Recommended Personnel Allocation**

The total positions allocated for Environmental Health for FY 2013-14 is 33 FTE. Of these 33 FTE, 3 FTEs are recommended to be frozen. There are no changes from the previous fiscal year.

**Board Adopted**

The Board adopted this budget as recommended.

**Program Discussion**

The Environmental Health Division’s services include food facility inspections, vector (rodent/insect) control activities, rabies control, household garbage complaint investigations, inspections of pools and spas, monitoring of recreational waters, inspection and consultation to businesses that handle and store hazardous materials, provision of technical and funding advice to first responders at hazardous materials incidents, inspection of solid waste facilities and operations, investigation of complaints of roadside dumping and nuisance dumping sites, inspection and testing of state small water systems, and review and inspection of onsite sewage disposal systems.

The Environmental Health Division’s programs are organized under three operational units, each managed by a Supervising Environmental Health Specialist. The program units include Hazardous Materials, Consumer Protection, and Land Use.
1175 406  Consumer Protection

The Consumer Protection program’s mission is to create opportunities for improved safety and health and prevent illness and injury caused by unsafe or unsanitary conditions through inspections of food facilities, pools, and substandard housing; the review of food facility and pool construction plans; water system testing; public education; and enforcement activities.

The Consumer Protection program consists of several elements, which include: food facility inspections, body art facility inspections, organized camp inspections, vector control activities, jail inspections, rabies control, household garbage complaint investigations, public pool and spa inspections, safe drinking water supply, and monitoring of recreational waters.

The Consumer Protection Program is home to the allocated positions for Environmental Health. Total positions recommended for FY 2013-14 are 33.0 with 3.0 positions recommended as frozen. The recommended budget for FY 2013-14 is $935,847, an increase of $5,104, or 1%, from the prior year.

1175 411  Hazardous Materials Program

Within the Hazardous Materials Unit is the Certified Unified Program Agency (CUPA) for Humboldt County and its cities. The purpose of the CUPA is to create opportunities for improved safety and health through preventing or mitigating damage to the health and safety of persons and the environment from the release, or threatened release, of hazardous materials.

The CUPA provides inspection and consultation to businesses that handle hazardous materials, investigates hazardous materials complaints from the public, and provides technical and funding advice to responders at hazardous materials incidents. In response to concerns raised by the agricultural community, the General Fund will provide the hazardous material fee for agricultural handlers, for a period of two years, with six or fewer hazardous materials and waste.

In the event of significant noncompliance, the CUPA may enforce hazardous materials laws and regulations through an administrative enforcement procedure under authority of the Health and Safety Code, or refer cases to the District Attorney. This program is supported through business fees and State grants. In addition, the program applies annually for equipment and training funds through the CUPA Forum Board.

The Hazardous Materials Program’s budget for FY 2013-14 is $892,244, excluding contributions from the General Fund. This is an increase of $18,069, or 2%, from the prior year.

1175 430  Local Enforcement Agency

Within the Land Use Unit, the Local Enforcement Agency (LEA) program includes mandated activities to ensure that solid waste handling and disposal occur in a manner that creates opportunities for improved safety and health of the public and environment.
This program collaborates and coordinates with local and state agencies, including the Department of Resources Recycling and Recovery (known as CalRecycle and formerly as the California Integrated Waste Management Board), Humboldt Waste Management Authority, the incorporated cities, the County Public Works Department, waste haulers, the business community, and surrounding counties. In addition to its mandated activities, this program ensures efficient operation of solid waste facilities to minimize public health risk and nuisance conditions. It inspects solid waste facilities and operations, including closed, illegal or abandoned landfills. It investigates complaints of roadside dumping and nuisance dumping sites, and works with the Code Enforcement Unit.

The majority of funding for this program is derived through a tipping fee per ton of solid waste disposed at solid waste transfer stations in Humboldt County. Facility permit fees, project review fees and an annual grant of approximately $20,000 from CalRecycle make up the remainder of the funding.

The Local Enforcement Agency’s budget for FY 2013-14 is $437,006, an increase of $16,502, or 4%.

1175 432 Local Oversight Program

Within the Hazardous Materials Unit is the Local Oversight Program (LOP). The purpose of the LOP is to create opportunities for improved safety and health through the cleanup and closure of contaminated underground petroleum storage tank sites.

The LOP provides guidance to responsible parties for sites in Humboldt County that have been contaminated by petroleum from leaking underground storage tanks. This guidance is to assist responsible parties in complying with the underground storage tank corrective action requirements and become eligible for cleanup funding. Local guidance and State funding help expedite site closure.

The LOP is funded through an annual contract with the California Water Resources Control Board. The recommended budget for FY 2013-14 is $349,791, an increase of $3,094, or 1%, from the prior year.

1175 486 Land Use Program

The Land Use Program creates opportunities for improved safety and health and prevents environmental degradation through the implementation and enforcement of State and local regulations pertaining to onsite wastewater treatment and private water source development. The program works in conjunction with the Planning and Building Department, reviewing a variety of projects to ensure wastewater and water supply requirements are incorporated into development permits issued through each Division.

Staff working in the Land Use Program consults with engineers, contractors and property owners to ensure that new onsite wastewater systems are properly designed, installed, and operated. Failing onsite wastewater systems are also addressed through the Land Use Program “Repair Permit” process. The Land Use Program collaborates with the North Coast Regional
Environmental Health

Water Quality Control Board on all commercial development projects that generate a large daily wastewater flow.

The Land Use Program is responsible for administering a growing, State-mandated “Non-Standard Sewage Disposal System” monitoring program which requires billing, issuance of operating permits, and periodic inspections of nearly 900 systems.

The construction and destruction of water wells is overseen through a Land Use Program permit process, as is the operation of septic pump trucks. The Land Use Program responds to sewage spills and complaints from the public. This program is funded through permit fees and Health Realignment.

The Land Use Program’s budget for FY 2013-14 is $414,630, an increase of $9,621, or 2%, from the prior year.

2012-13 Accomplishments

1. Completed the closure of 25 LOP former underground storage tank sites for improved safety and health.

2. Ensured all Humboldt County body art facilities are permitted and inspected, and artists are registered, pursuant to recent requirements imposed by Chapter 638, Laws of 2011 (HSC 11932). This exemplifies the enforcement of law and regulations to protect the practitioners and their clients from the transmission of infectious diseases.

3. Transitioned all hazardous materials facilities’ electronic records to the State’s electronic database called “California Environmental Reporting System” to foster transparent, accessible, welcoming and user friendly services, and create opportunities for improved safety and health.

4. Completed 1,637 food facility inspections to enforce laws and regulations that protect consumers and create opportunities for improved safety and health.

5. Completed 910 inspections for hazardous material, waste and containment program elements to enforce laws and regulations that protect residents. Some facilities had concurrent inspections for multiple program elements.

2013-14 Objectives

1. To complete the cleanup and closure of 35 LOP former underground storage tank sites for improved safety and health.

2. To ensure all cottage food operations are registered or permitted, and operating in accordance with the requirements of the Health and Safety Code, which will encourage new local enterprise and ensure proper operations of markets.
3. To complete 1,700 routine food facility inspections, thereby creating opportunities for improved safety and health and protecting consumers.

4. To complete 800 routine hazardous material inspections to enforce laws and regulations that protect the public and the environment.
## General Relief (1100 525)

Phillip Crandall, Health & Human Services Director

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| **Expenditures**    |               |               |               |               |                |                 |                  |
| Other Charges       | $2,774,047    | $2,870,325    | $2,964,470    | $2,601,276    | $2,734,792     | $2,734,792      | $133,516         |
| Total Expenditures  | $2,774,047    | $2,870,325    | $2,964,470    | $2,601,276    | $2,734,792     | $2,734,792      | $133,516         |

| Allocated Positions | 0.00          | 0.00          | 0.00          | 0.00          | 0.00           | 0.00            | 0.00             |
| Temporary (FTE)     | 0.00          | 0.00          | 0.00          | 0.00          | 0.00           | 0.00            | 0.00             |
| **Total Staffing**  | 0.00          | 0.00          | 0.00          | 0.00          | 0.00           | 0.00            | 0.00             |
General Relief (1100 525)

Phillip Crandall, Health & Human Services Director

Purpose

In 1931, with increasing poverty and unemployment brought on by the Great Depression, the State Legislature amended the Pauper Act of 1901 to provide that “Every county and every city shall relieve and support all paupers, incompetent, poor, indigent persons, and those incapacitated.”

Recommended Budget

The General Relief (GR) budget for FY 2013-14 is $2,735,369, which is essentially the same as FY 2012-13. Recovered funds are estimated to decrease by approximately $250,000. The County’s General Fund contribution is $2,335,369, an increase of $210,000, or 9.9%, from FY 2012-13. This increase is the result of reduced recovery of funds from General Relief clients.

Recommended Personnel Allocation

There are no positions allocations for the GR budget unit. Staff is provided by approximately 17 FTE who provide staff support for GR through Social Services Administration budget unit 511.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

The GR program is mandated under Welfare and Institutions Code Section 17000 and provides repayable aid in cash and in-kind for the subsistence needs of the County’s indigent persons, when such need cannot be met by personal or another resource. While such assistance is reimbursable, employable persons assigned to work-for-relief projects can fulfill their obligation to repay the County to the extent that the number of hours worked at minimum wage equals the amount of aid received. Some of the aid is recovered through liens placed on pending Supplemental Security Income (SSI) – State Supplemental Payment claims. Other recovery methods include intercepting federal and State tax returns and placing liens on real property.

The County General Fund provides 85% of the funding for the GR program. The remaining 15% of annual operating expenses comes from aid that is recovered through liens.

In 2006, the County added a Transportation Assistance Program (TAP), which has successfully provided relocation services for several indigent individuals and/or families who may have been eligible for GR or other government assistance. The Board of Supervisors established maximum monthly GR allowances of $303 for individuals and $405 for couples in 2001.
2012-13 Accomplishments

1. Continued to expedite enrollment for SSI for those GR customers who are experiencing a long-term disability that renders customers unable for work in order to protect vulnerable populations and create opportunities for improved health and safety. For FY 2012-2013, a total of 146 GR customers were granted SSI.

2. Continued coordinated services between GR and ETD. All GR customers who are able to work were referred to ETD for assessment and job readiness services to support workforce development. For FY 2012-13, 25% of the total number of customers assigned completed work readiness assessment and 20% completed Job Search activities.

4. Increased the number of TAP applications received by 6% over the previous year to protect vulnerable populations.

2013-14 Objectives

1. To enhance the multi-disciplinary team process to improve screening of individuals who are truly experiencing a long-term disability and unable to work as well as provide community-appropriate services.

2. To expedite enrollment for SSI for those who are experiencing a long term disability that renders them unable to work, thereby supporting self-reliance of citizens.

3. To enhance the linkage between GR and ETD for those individuals who are able to work to support self-reliance of citizens.

4. To enhance TAP outreach to agencies, such as law enforcement, to engage new partners.

Blender bikes demonstrate that nutrition and exercise can be fun.
### 1175 - Public Health Fund

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<td><strong>$2,799,118</strong></td>
<td><strong>$2,665,452</strong></td>
<td><strong>$2,682,940</strong></td>
<td><strong>$3,314,316</strong></td>
<td><strong>$3,314,316</strong></td>
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Healthy Communities

Purpose

The Health Education Division has become the Healthy Communities Division. This new name better describes the program scope, which includes health promotion efforts at all levels of the spectrum of prevention. The mission of the Healthy Communities Division is to help communities create social and physical environments that make the healthy choice the easy choice for everyone. The Healthy Communities Division provides health education – a basic service of local health departments in California, mandated under Title 17 of the California Administrative Code.

The Healthy Communities Division creates opportunities for improved safety, health and enterprise, and aims to protect economically vulnerable populations. Programs improve the community’s health by providing information, education and outreach services, and includes the federally-funded Women, Infant and Children’s (WIC) Program.

This narrative includes discussion on funding and operation of twelve Healthy Communities budget units: Childhood Lead Program (407), Tobacco Education Program (412), Public Health Education (414), Women Infants and Children Supplemental Nutrition Program – WIC (415), Nutrition and Physical Activity (433), Comprehensive AIDS Resources Emergency – Nor-CAP (437), Fiscal Agent (449), Drug Free Communities (451), Alcohol & Other Drug Prevention (452), MHSA-PEI Suicide Prevention and Stigma/Discrimination (454), HOPWA – Nor-CAP Housing Opportunity for People with Aids Act (470), and Domestic Violence Prevention (488).

Recommended Budget

The recommended budget for Healthy Communities for FY 2013-14 is $4,326,629, excluding expense transfers, an increase of $32,848, or 1%. This is primarily the result of increased funding from State and federal sources.

Recommended Personnel Allocation

The total positions allocated for Healthy Communities are 50.43 FTE with 4.80 FTE recommended as frozen.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

The Healthy Communities Division works to change the community’s knowledge, attitudes and behaviors in order to prevent disease and promote health. Healthy Communities services include alcohol, tobacco and other drug prevention services; HIV, hepatitis and other communicable disease prevention; chronic disease prevention, through WIC nutritious food coupons, nutrition and physical activity education and promotion; family violence and injury and suicide prevention and stigma/discrimination reduction.
The purpose of the Childhood Lead Program is to prevent health problems and cognitive deficits in children through age five caused by exposure to lead in their environments. The program provides case management services to lead-exposed children, environmental assessments, and educational activities designed to reduce children’s exposure to lead and the consequences of exposure to lead. Examples of program activities include: educational outreach to parents at health fairs and other community events, education of health professionals to increase the numbers of children tested for lead exposure, and targeted assessment of children’s environments for lead exposure.

The recommended budget for the Childhood Lead Program for FY 2013-14 is $63,064, a decrease of $2,167, or 3%, from the prior year level of $65,231.

**1175 412 Tobacco Education Program (TEP)**

The Tobacco Education Program implements effective tobacco use prevention, reduction and cessation programs to reduce death and disease related to tobacco abuse.

This program, known as Tobacco-Free Humboldt, includes the following activities: collaboration with local organizations on policies to restrict smoking to designated areas, working with the American Cancer Society to build community capacity for tobacco cessation services including provision of “tobacco quit kits” to service providers, and coordinating the collaborative workgroup Tobacco Education Network.

The budget for the Tobacco Education Program FY 2013-14 is $150,000, a decrease of $5,000, or 3%, from the prior year level of $155,000.

**1175 414 Health Education**

This budget unit provides the administrative oversight for all Healthy Communities programs. The program supports improved cultural competency for Public Health through the work of an Interpreter/Translator and other community collaborative efforts.

The program supports injury prevention efforts, which utilize a data driven, collaborative approach to reduce injuries and deaths involving children. Programs focus on education related to impaired driving prevention, pedestrian and bicycle safety, and water safety.

The program also provides health promotion efforts and harm reduction services for people experiencing addiction, homelessness and/or mental health challenges. Activities focus on HIV, Hepatitis C, and overdose prevention and referral. The program provides needle exchange services through a mobile outreach program. Staff also supports coordination with other local needle exchange programs and registration of local pharmacies into the “Disease Prevention Demonstration Project” (SB 41, Chapter 736, Laws of 2011) to sell syringes over the counter.
Healthy Communities

CA4Health is the new branding for the Community Transformation Grant funded chronic disease prevention program. CA4Health applies work within four strategic directions: (1) Tobacco Free Living – focus on smoke free multi unit housing, (2) Healthy Eating and Active Living – focus on reducing access to sugar sweetened beverages, (3) High Impact Evidence-based Clinical and Preventive Services – focus on chronic disease self-management program, and (4) Healthy and Safe Physical Environments – focus on safe routes to schools. The program seeks to achieve reductions in health disparities, specifically among low income residents, involve community residents and engage youth.

The Redwood Crossing Guard Program is a collaborative program with the Humboldt County Department of Public Works and Humboldt Partnership for Active Living through funding from the federal Safe Routes to School Projects Non-Infrastructure grant program. The Redwood Crossing Guard Program provides education, encouragement, and support for adult crossing guards in Humboldt County’s elementary and middle schools.

The total budget for Healthy Communities for FY 2013-14 is $745,796, a decrease of $222,918, or 23%, from the prior year level of $968,714. This decrease is due to an anticipated reduction in State Aid Health Realignment funding. Total positions for FY 2013-14 are 36.60 with 3.80 FTE frozen.

1175 415 Women, Infant and Children’s Supplemental Nutrition Program (WIC)

The WIC Program’s core role is to provide support to economically vulnerable populations, including pregnant women, infants and young children. This is accomplished through the issuance of checks for specific nutritious foods, through nutrition education, and through support to breastfeeding women.

During FY 2012-13, the program continued successful partnerships with the Well Child Dental Visit clinics co-located at three WIC clinic sites. WIC has partnered with the Child Passenger Safety Program to host car seat classes and car seat installation at the Eureka site.

WIC received a second State WIC grant for the Breastfeeding Peer Counselor Program. Breastfeeding is shown to improve children’s overall health outcomes. The program matches first-time breastfeeding moms with Peer Counselors for support, education and encouragement. All Peer Counselors have successfully breastfed at least one of their own children.

The WIC Program partners with Food for People through the Farmer’s Market Nutrition Program to make fresh produce accessible to more WIC clients. The WIC program continues to explore other opportunities to provide services to outlying communities to ensure all eligible residents can access WIC services.

The total budget for the WIC Program for FY 2013-14 is $1,456,000, an increase of $183,500, or 14%, from the prior
Healthy Communities

Phillip Crandall, Health & Human Services Director

year level of $1,272,500. This increase is primarily due to federal WIC grant funding. These increased funds are mainly directed towards WIC information technology upgrades. Total positions for FY 2013-14 are 13.83 FTE with 1.0 FTE, an HHS Program Services Coordinator, frozen.

1175 433 Nutrition and Physical Activity

Nutrition, Education, and Obesity Prevention (NEOP) promotes improved nutrition and physical activity behaviors through education, advocacy, tracking and promoting existing policy, and environmental changes.

Activities are community based with a focus on youth and the low-income population. The Communities of Excellence in Nutrition, Physical Activity, and Obesity Prevention project takes a look at select low-income neighborhoods to measure the nutrition environment and identify opportunities for improvement.

The program engages local leaders and community members through a variety of partnerships, including the Food Policy Council, Community Nutrition Action Plan partners, Humboldt CAN - Community for Activity and Nutrition, North Coast Growers, and local neighborhood groups. Staff coordinates training of trainers, food demonstrations, Cal Fresh Outreach, and nutrition education at Farmers’ Markets and the local food bank sites. Activities also include promotion of physical activity and active public transportation, including Safe Routes to Schools. This program provides Harvest of the Month through a collaboration with Humboldt County Office of Education.

The Nutrition and Physical Activity Program budget for FY 2013-14 is $767,516, excluding expense transfers, an increase of $147,472, or 23%, from the prior year level of $296,000. This is due to an increase in NEOP grant funding.

1175 437 CARE - NorCAP Comprehensive AIDS Resources Emergency Act and Program: Case Management

The goal of the CARE Act is to provide medical and support services for unmet and underserved needs of people living with HIV in Humboldt County. The purpose of the CARE program is to prolong the health and productivity of people living with HIV and to interrupt the transmission of HIV in Humboldt County. Services include supportive services, non-medical case management, health education, risk reduction education, partner notification, and housing assistance. North Coast AIDS Project staff provides services to people living with HIV and their HIV negative partners.

The CARE-NorCAP Program budget for FY 2013-14 is $176,963, excluding expense transfers, a decrease of $27,231 or 13%, from the prior year level of $204,194. This change is mainly due to a decrease in federal funding.
Healthy Communities

1175 449 Fiscal Agent

This budget provides the financial tools needed to monitor and facilitate Housing Opportunity for People with AIDS (HOPWA) Programs. The Fiscal Agent acts as the liaison between state and local health providers. The State allocates funds to support HIV/AIDS program activities, while the Fiscal Agent works at the community level ensuring program compliance. Humboldt County NorCAP HOPWA applies for and receives funding from this account, which is detailed in 1175-470.

This budget unit also includes the Project HIV/AIDS Re-housing Team (HART), which is a Housing and Urban Development-based program. The goal of Project HART is to provide permanent supportive housing for people living with HIV who are chronically homeless. Project HART provides support and case management assistance with assessing housing needs, seeking stable housing, developing independent living skills, and provides ongoing financial assistance for rent.

The Fiscal Agent’s budget for FY 2013-14 is $47,057, a decrease of $11,854, or 20%, from the prior year level of $58,911 due to reduced federal funding.

1175 451 Drug Free Communities

The goal of the Drug-Free Communities (DFC) Support Program is to reduce substance use among local youth through environmental prevention strategies. DFC staff works in collaboration with members of the Humboldt County Allies for Substance Abuse Prevention (ASAP Coalition) to plan and implement grant activities. Prevention efforts focus on reducing youth access to alcohol and other drugs, changing social norms that are permissive of youth substance use, and reducing youth-reported past 30-day use of alcohol and other drugs.

The grant operates on a federal fiscal year and the full project period is September 30, 2010 to September 29, 2014. The continuation application for year three has been submitted to the funder.

The Drug Free Communities Program budget for FY 2013-14 is $137,500, a decrease of $63,580, or 31%, from the prior year level of $201,080 due to reduced federal funding.

1175 452 Alcohol and Other Drug Prevention

The Alcohol and Other Drug (AOD) Prevention Program’s goal is to improve the health and well-being of the community by reducing the abuse of alcohol and other drugs though primary prevention efforts.

With a focus on environmental prevention strategies, the program works to reduce the availability of alcohol to youth and reduce injury and death associated with AOD impaired driving. Prevention efforts are designed to increase youth perceptions of risks associated with alcohol and other drug use and foster resiliency skills. Friday Night Live, another component of the program, is a school based action group for youth that encourages positive youth development.
The Alcohol and Other Drug Prevention Program budget for FY 2013-14 is $202,515, an increase of $13,949, or 7%, from the prior year level of $188,566.

**1175 454 MHSA-PEI Suicide Prevention and Stigma/Discrimination Reduction**

The Suicide Prevention and Stigma/Discrimination Reduction Programs are built around a Public Health approach addressing suicide prevention and stigma/discrimination reduction on a population-wide basis, utilizing universal prevention strategies and selective/indicated prevention strategies.

This program implements State recommended promising practices related to suicide prevention. The program provides workforce training and develops/maintains a system of suicide prevention by strengthening linkages to services.

Elements of the Stigma/Discrimination Reduction program include education for DHHS staff, medical providers, community agencies and the public who have direct contact with mental health consumers.

The Mental Health Services Act – Prevention and Early Intervention Program budget for FY 2013-14 is $348,138, a decrease of $6,949, or 2%, from the prior year level of $341,189.

**1175 470 HOPWA - Nor-CAP Housing Opportunities for People with AIDS Act**

The HOPWA program is responsible for assessing the housing needs of people living with HIV, and assuring that services are provided. The goal of the HOPWA program is to prevent homelessness among people living with HIV/AIDS in Humboldt County.

This program provides financial assistance with direct housing costs (rent, mortgage, utilities, etc.). Services include case management assistance with housing needs.

The HOPWA – NorCAP budget was previously combined with the Fiscal Agent and the CARE – NorCAP program. Due to State reorganization of HIV/AIDS programs, this budget unit has been dedicated to support the North Coast AIDS Project.

The HOPWA – NorCAP Program budget for FY 2013-14 is $49,393, an increase of $16,832, or 51%, from the prior year level of $32,561 due to increased federal funding.

**1175 488 Family Violence Prevention**

The Family Violence Prevention Program’s (FVPP) goal is to prevent family violence through the education of individuals, organizations, and the community.

The FVPP provides training, coordination, education and other services to CalWORKS/HumWORKS staff and clients. The program also utilizes universal prevention strategies such as
The Silent Witness Project to raise awareness about the devastation caused by domestic violence and promote help-seeking behaviors. Additionally, the program emphasizes cultural competency in all activities, including special training for service providers.

The Family Violence Prevention Program budget for FY 2013-14 is $133,749, a decrease of $6,411, or 4%, from the prior year level of $140,160.

2012-13 Accomplishments

1. Implemented 6 two-day suicide intervention skills trainings for DHHS workforce and community partners to protect vulnerable populations and maintain evidence-based practices for suicide prevention.

2. Decreased the percentage of high school students reporting that they accessed alcohol from a person over 21 from 61 percent to 50 percent, thereby protecting vulnerable populations and reducing youth access to alcohol.

3. Provided nutrition education activities reaching well over 600 income eligible individuals in qualifying communities in support of local and regional “Re-Think Your Drink” healthy beverage education effort. This created opportunities for improved safety and health.

4. Invited civic engagement and awareness of available services by providing technical assistance and support to community based groups focused on common goals, including physical activity and nutrition, tobacco prevention, domestic violence prevention, safe routes to schools, and alcohol and other drug prevention.

2013-14 Objectives

1. To implement evidence-based alcohol and other drug prevention curricula in 20 junior high school classrooms reaching 600 students in Humboldt County to protect vulnerable populations and to push back the age of initiation of use of alcohol, tobacco, and other drugs.

2. To continue coordination of evidence-based practices for suicide prevention by implementing at least 3 two-day suicide intervention skills trainings for DHHS workforce and community partners. This will assist in providing more community-appropriate levels of service.

3. To invite civic engagement and awareness of available services, continue to provide technical assistance and support to 4-6 community based groups focused on common goals, including physical activity and nutrition, tobacco prevention, domestic violence prevention, safe routes to schools, and alcohol and other drug prevention.

4. To protect residents, 1-2 jurisdictions in Humboldt County will adopt policies that eliminate smoking in
indoor and outdoor multi-unit housing common areas, building entrances, outdoor dining areas and/or parks.

Social Services staff.
### Inmate/Indigent Medical Care (1100 490)

Phillip Crandall, Health & Human Services Director

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<td>$3,070,465</td>
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| **Expenditures**    |                |                |                |                |                 |                 |                   |
| Other Charges       | $2,834,949     | $2,885,494     | $2,899,888     | $2,985,583     | $3,070,465      | $3,070,465      | $84,882           |
| **Total Expenditures** | $2,834,949 | $2,885,494 | $2,899,888 | $2,985,583 | $3,070,465 | $3,070,465 | $84,882 |

| Allocated Positions | 0.00           | 0.00           | 0.00           | 0.00           | 0.00            | 0.00            | 0.00              |
| Temporary (FTE)     | 0.00           | 0.00           | 0.00           | 0.00           | 0.00            | 0.00            | 0.00              |
| **Total Staffing**  | 0.00           | 0.00           | 0.00           | 0.00           | 0.00            | 0.00            | 0.00              |

2013-14 Budget

Health & Human Services

Page D-40
**Inmate/Indigent Medical Care (1100 490)**

**Phillip Crandall, Health & Human Services Director**

**Purpose**

Inmate medical services are required to be provided by the facility administrator pursuant to Section 1200, Title 15, of the California Administrative Code. The County provides those services via contract with a private firm. Section 17000 of the California Welfare & Institutions Code mandates indigent health care. The County Medical Services Program (CMSP) is the primary system designed to address medical care needs for adult indigent persons in Humboldt County. Adult indigent persons are defined as adults who cannot afford to pay for medical care and have no third party payment provider. The State-legislated CMSP participation fee is funded in this budget unit.

**Recommended Budget**

The recommended budget for FY 2013-14 is $3,070,465, an increase of $85,091 from the prior year. This increase is the result of additional costs for the California Forensic Medical Group’s (CFMG) contract, which has an annual Consumer Price Index adjustment of 1.35%.

**Recommended Personnel Allocation**

There are no position allocations for the Inmate Medical budget unit. Staffing to provide medical care is provided through a contract with CFMG.

**Board Adopted**

The Board adopted this budget as recommended.

**Program Discussion**

The Inmate/Indigent Medical Services budget is used to account for expenditures directed toward medical care provided to inmates of the County Jail and Juvenile Hall, and to adult indigent persons residing in the County. Through a contract, CFMG provides these services to jail inmates.

The County has dedicated its Tobacco Settlement receipts to fund the Inmate/Indigent Medical Care program. Annual Tobacco Settlement revenues fluctuate slightly, but are budgeted at $1.2 million. Beginning in calendar year 2008 and continuing through 2017, the County will also receive an additional payment from the Tobacco Settlement, known as the “Strategic Contribution Fund”. This increment is dedicated to tobacco education per Board action in 2008.

In 2010, the Board of Supervisors approved a discount prescription card program. This program provides a royalty to the County for every prescription filled. Any revenue received from this program is to be used to offset the costs of inmate/indigent health care. Projected revenue for FY 2013-14 is $8,500.
### Maternal, Child & Adolescent Health/
**Public Health Nursing**

Phillip Crandall, Health & Human Services Director

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| **Expenditures**        |                |                |                |                |                |                |                  |
| Salaries & Benefits     | $2,907,645     | $1,483,769     | $1,323,769     | $1,617,663     | $1,617,663     | $1,617,663     | $293,894         |
| Supplies & Services     | 2,196,839      | 1,317,130      | 1,705,735      | 1,637,615      | 2,171,714      | 2,171,714      | 534,099          |
| Other Charges           | 3,808,900      | 3,963,736      | 4,490,186      | 3,986,711      | 4,994,238      | 4,994,238      | 1,007,527        |
| Fixed Assets            | 1,175          | 2,484          | 10,079         | 2,500          | 0              | 0              | (2,500)          |
| Expense Transfer        | 0              | (1,650,887)    | (2,473,104)    | (2,316,315)    | (3,698,251)    | (3,698,251)    | (1,381,936)      |
| **Total Expenditures**  | $8,914,559     | $5,116,232     | $4,511,013     | $4,634,280     | $5,085,364     | $5,085,364     | $451,084         |

| **Allocated Positions** | 116.38         | 104.15         | 104.15         | 99.55          | 98.75          | 98.75          | (0.80)           |
| **Temporary (FTE)**     | 0.70           | 0.60           | 0.50           | 0.70           | 0.00           | 0.00           | (0.70)           |
| **Total Staffing**      | 117.08         | 104.75         | 104.65         | 100.25         | 98.75          | 98.75          | (1.50)           |
**Maternal, Child & Adolescent Health/ Public Health Nursing**

**Purpose**

Maternal, Child, and Adolescent Health and Public Health Nursing Division (MCAH/PHN) programs protect economically vulnerable populations and provide prevention and early intervention services that are prioritized according to documented population needs. Target populations include children under the age of 21, medically fragile individuals, individuals at risk of institutionalization, individuals in jeopardy of negative health or psycho-social outcomes, and individuals with a communicable disease.

MCAH/PHN programs provide community-appropriate levels of service and address access to care issues for targeted groups; nursing case management for medically and socially at-risk infants, children, adults and families; support for pregnant women and their families; perinatal and child oral health; perinatal substance use; newborn risk assessment; fetal, infant and child death review; perinatal and child nutrition; and the well-being of infants and children challenged by poverty and substance abuse.

MCAH and PHN programs work collaboratively with community partners to address issues and solve problems. Statutory authority comes from Title 17 of the California Health and Safety Code.

**Phillip Crandall, Health & Human Services Director**

This narrative includes discussion on the funding and operation of seven Maternal Child and Adolescent Health/Public Health Nursing budget units: Public Health Field Nursing Services (416); Child Health & Disability Prevention (CHDP, 418); Maternal Child & Adolescent Health (MCAH, 420); MCH California Home Visiting Program (421); Nurse Family Partnership (426); Maternal Health Personnel Program (460); and California Children’s Services (CCS) (493).

**Recommended Budget**

The total budget for MCAH/PHN for FY 2013-14 is $8,783,615, excluding expense transfers, a decrease of $168,256, or 1.8%. This decrease is primarily due to program integration and maximizing federal and State resources through increased expense transfers to other DHHS budget units.

**Recommended Allocation Changes**

For MCAH/PHN the total allocated positions for FY 2013-14 are 99.75 FTE with 6.50 FTE positions frozen.

**Board Adopted**

The Board adopted this budget as recommended.
Program Discussion

Services in this budget grouping include general, prenatal, infant, child and adolescent public health activities and services. Community health status assessment, assuring the provision of health services to vulnerable populations through collaborative activities, and policy development related to the health and well-being of women, infants and children are core MCAH/PHN functions. PHN staff participates in disaster response, tuberculosis prevention and control, communicable disease investigation and prevention, flu and community immunization clinics, and Well Child Dental Visits.

1175 416 Public Health Field Nursing Services

Public Health Field Nursing (PHN) services include PHN case management for medically and socially at-risk infants, children, adults and families, anticipatory guidance for prevention and wellness, sudden infant death syndrome prevention, resource and referral, disaster response, communicable disease control and liaison to Family Resource Centers and community providers. PHN service teams include Public Health Nurses and Community Health Outreach Workers. PHN Field Nursing case management services are home-based and incorporate the evidence based parent training SafeCare curriculum for families with children ages 0-5 who are at-risk or have been reported for neglect or abuse.

Field Nursing staff manages offices in Garberville and Willow Creek to support and provide community-appropriate levels of Public Health Nursing services.

The Public Health Field Nursing Program budget, excluding expense transfers, is $3,706,963 for FY 2013-14. This year’s budget is a decrease of $219,111, or 5%, due to increasing expense transfers to other DHHS budget units.

1175 418 Child Health & Disability Prevention (CHDP)

The CHDP Program assures a fully functioning network of pediatric care providers for low-income families, and links families to health insurance products including Medi-Cal, Healthy Families, and CalKids. The CHDP Health Care Program for Children in Foster Care works with the Children and Family Services integrated team to assess, provide referrals, document, and evaluate the health status of children in foster care.

The Child Health and Disability Program has a budget, excluding expense transfers, of $928,311, a decrease of $80,103, or 7%, due to foster care costs being shifted to Social Services.
Maternal, Child & Adolescent Health/
Public Health Nursing

Phillip Crandall, Health & Human Services Director

1175 420 Maternal Child & Adolescent Health (MCAH)

The MCAH Program addresses prenatal, infant, child and adolescent health and safety issues through collaborative work with community partners and direct service. Areas of focus include: health disparities, perinatal substance use, safe sleeping, breastfeeding promotion, perinatal mood disorders; and access to and early entry into prenatal care, preconception care, and perinatal and child oral health.

The MCAH Program budget, excluding expense transfers, is $713,869 for FY 2013-14, an increase of $197,504 from the prior year due to CalFresh reimburseable activities.

1175 421 MCAH California Home Visiting Program

In FY 2011-12, the MCAH Division of the Department of Health and Human Services received additional funding to expand the already existing Nurse Family Partnership (NFP) program through the California Home Visiting Program (CHVP).

Humboldt County was selected to expand NFP evidence-based practice services through CHVP in conjunction with Del Norte and Siskiyou counties as a Tri-County Consortium. The Tri-County Consortium provides Humboldt, Del Norte and Siskiyou counties the sufficient population base and opportunity to implement the NFP program. The expansion of NFP through CHVP supports 50 additional families in Humboldt County, 25 families in Del Norte County and 25 families in Siskiyou County.

The NFP regional expansion through CHVP creates opportunities for improved safety and health for a vulnerable population. It matches service availability with residents’ needs, ensures sustainability of services and promotes quality services by building regional cooperation.

CHVP NFP expansion services have the same quantifiable and measurable three and five year NFP benchmarks that demonstrate improvements in maternal and child health, childhood injury prevention, school readiness and achievement, crime or domestic violence, family economic self-sufficiency, and coordination with community resources and supports.

The MCAH California Home Visiting Program budget for FY 2013-14 is $908,565. The funding has remained stable from the prior year.

1175 426 Nurse Family Partnership

Nurse Family Partnership (NFP) is an evidence-based maternal and child health program providing nurse home visiting services for first-time, low-income mothers. Program evidence shows that mothers who work with a nurse are active and involved parents who are present for their children. Reduced child abuse rates, increased maternal self-sufficiency, and
better school achievement leading to improved economic well-being are also proven outcomes for these mothers. The program began enrolling clients in July 2009. With the CHVP expansion, Humboldt NFP is now serving 149 families. The Nurse Family Partnership Program budget is $705,654, excluding expense transfers, for FY 2013-14, a decrease of $16,844, or 2%, from the prior year.

1175 460 MCAH Personnel Program

This budget serves as a personnel budget only. The budget includes 29.35 full time employees for FY 2013-14. The total adopted salaries budget is $2,061,273, a decrease of $122,772, or 5%, from the prior year due to a high vacancy rate.

1175 493 California Children’s Services

California Children’s Services (CCS) local administration plays a role in protecting economically vulnerable populations through the provision of eligibility determination and care coordination for over 643 children with special health care needs. CCS serves infants, children and youth up to age 21 who have special health care needs, or who are at risk for disabling conditions. Pediatric occupational and physical therapy services for approximately 113 children are provided at the CCS Medical Therapy Unit located at Humboldt County Office of Education’s Glen Paul School.

The California Children’s Services Program budget is $820,253, excluding expense transfers, for FY 2013-14, a decrease of $17,346 from the prior year.

2012-13 Accomplishments

1. Implemented the California Home Visiting Program/Nurse Family Partnership Expansion program as an early entry county in September 2012, currently serving additional clients in Humboldt County, Del Norte County and Siskiyou County. CHVP provides services to and protects vulnerable populations, and supports self-reliance of citizens.

2. Implemented NetSmart’s “Insight for Public Health” electronic health record system for nursing services in March 2013. The implementation of NetSmart allows the County to manage resources to ensure sustainability of services.

3. Implemented SafeCare evidence-based parenting curriculum for eligible families at risk. Field Nursing’s Public Health Nurses and Community Health Outreach Workers provide the SafeCare evidence based home visiting parent training curriculum for families with children ages 0-5 who are at-risk or have been reported for neglect or abuse. Staff training was completed in December 2012. Following home visiting certification, CHOWs began home visiting services in April 2013.
The SafeCare curriculum creates opportunities for improved safety and health and protects vulnerable populations.

2013-14 Objectives

1. To increase NFP throughout the tri-county area through marketing, community outreach, community advisory boards, obstetric providers, family resource center administrators, and other county agencies serving children and families. This will protect vulnerable populations.

2. To complete implementation of NetSmart’s “Insight for Public Health” throughout nursing services. Develop reporting methodology for nursing evaluation and program outcomes. Insight will enable effective management of resources to ensure sustainability of services.

3. To improve transition to adult services for youth with chronic disabling health care conditions who exit the CCS system at age 21 by researching and implementing evidence-based models for transition of care, expanding program resources by developing partnerships and liaison with local Transitional Age Youth programs and services, and creating a handout or informational booklet for those clients. This supports self-reliance of citizens and protects vulnerable populations.

4. To continue to implement the SafeCare home visiting curriculum by serving families with young children who are at risk of abuse or neglect by working closely with referral sources within County departments and engaging the community in providing referrals, and completing the Train the Trainer training for local sustainability and expansion of the program into the community. This will protect vulnerable populations and create opportunities for improved safety and health.

Youth receives a vaccination.
## Mental Health Branch

**Phillip Crandall, Health & Human Services Director**

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</table>
Purpose

The Department of Health and Human Services Mental Health Branch is responsible for overseeing and directing behavioral health treatment and support services for Humboldt County. To protect economically, emotionally and socially vulnerable populations, the Mental Health Branch provides and coordinates an array of clinical services for Humboldt County Medi-Cal clients with specialty mental health needs; and oversees crisis, acute and disaster related mental health services to all Humboldt County residents regardless of payer status. To provide community appropriate levels of service, the Mental Health Branch administers managed care contracts for behavioral health services with private for-profit and non-profit agencies and provides a comprehensive system of care for people who have serious mental illness, to the extent resources are available.

This narrative includes discussion on funding and operation of eight Mental Health Branch budget units: the Mental Health Administration Unit (424), Mental Health Jail Programs / Community Corrections Resource Center (427), HumWORKs (475), Mental Health Services Act (477), Sempervirens/Psychiatric Emergency Services (495), Adult Outpatient Programs (496), Children, Youth, and Family Services (497), Medication Support Services (498). The budget unit for Mental Health Children’s Center (507) is proposed to be eliminated in FY 2013-14.

Recommended Budget

The total budget for the Mental Health budget grouping is $45,581,743, or $37,549,356 excluding expense transfers. Excluding expense transfers, this is an increase of $980,234, or 2.7%, from the previous year. This change is primarily due to salary, benefit, and insurance increases. Funding of $1,123,358 is recommended for fixed assets; additional detail is included in the Capital Expenditures table.

Recommended Personnel Allocation

The total allocated positions for Mental Health for FY 2013-14 are 319.50 FTEs with 27.10 FTE positions frozen. The position allocation for FY 2013-14 proposes an increase of 0.20 FTE for a Psychiatric Nurse position.

Also for FY 2013-14, 2.0 FTE will be reassigned due to the proposed elimination of SACPA. These reassignments include: a 1.0 FTE Administrative Analyst I/II from SACPA (429) to Mental Health Administration (424), and a 1.0 FTE Social Worker IV from Mental Health (424) to Social Services (511). In addition, an additional 1.50 FTE Case Manager I/II positions will be frozen in FY 2013-14.

Board Adopted

The Board adopted this budget as recommended.
The Mental Health Branch Administration Unit is responsible for overseeing and directing behavioral health treatment and treatment support services for Humboldt County. These activities include:

- Fostering and supporting integrated, holistic, accessible service delivery systems and community partners
- Interfacing with principal funding sources (e.g., State and federal authorities, third party insurers)
- Overseeing an array of clinical services for Humboldt County Specialty Mental Health Medi-Cal
- Overseeing crisis, acute and disaster related mental health services to all Humboldt County residents regardless of payer status
- Administering contracts for behavioral health services with private for-profit and non-profit agencies

Revenues and personnel costs for all the Mental Health programs listed in this narrative are budgeted in the Administration Unit. Costs for insurance, County operating charges and DHHS administration are allocated to budget units based on program staffing levels (FTEs).

The Mental Health Branch is primarily funded by Mental Health / Behavioral Health Realignment funds, Mental Health Services Act funds, Medi-Cal reimbursement and private

insurance. Other revenues include 2011-Public Safety Realignment, and Federal Substance Abuse Mental Health Services Administration (SAMHSA) block grant and System of Care grant. The County General Fund contributes $394,899, or 1%, of the total budget.

The budget for the Administration Unit for FY 2013-14 is $29,516,969, excluding expense transfers, an increase of $801,806, or 2.8%, from FY 2012-13 due to 2011 Realignment revenue. All other budget units in the Mental Health budget grouping are cost applied to budget unit 424. Position changes for FY 2013-14 include: an increase of 0.20 FTE for a Psychiatric Nurse position; and reassigning a 1.0 FTE Administrative Analyst I/II from SACPA (429) to Mental Health Administration (424) and a 1.0 FTE Social Worker IV from Mental Health (424) to Social Services (511).

A multidisciplinary team of staff provides a variety of services for County Jail inmates. Staffing allocations and related personnel expenditures for the Jail Mental Health Program are included in the Mental Health Administration budget (424). The following services are provided, to promote self-reliance of citizens, in addition to mental health evaluation, assessment, and referral:

- Development of treatment plans and follow up progress reports to the court for individuals deemed incompetent to stand trial.
Psychiatric evaluation and medication support treatment.

Psychiatric nursing services for medication and psychiatric follow up.

Evaluations to determine inmates’ ability/appropriateness for work assignments.

Limited advocacy and brokerage services.

Coordination of transfers to Psychiatric Emergency Services and/or Sempervirens.

Suicide prevention and intervention assessments.

Debriefing meetings with emergency personnel and correctional staff following critical events.

Participation and facilitation of yearly training of correctional officers about mental health and suicide prevention/intervention.

Participate in hostage negotiation in coordination with law enforcement.

The Mental Health Jail Program’s budget for FY 2013-14 is $327,349, a zero percent change from FY 2012-13. These expenditures include services and supplies and other charges related to both Jail Mental Health and Outpatient mental health services provided through a collaborative program with the Probation Department that will support needs of the probation population. This does not include staffing expenses which are contained in the Mental Health Administration budget (424).

Staging for FY 2013-14 is estimated to cost $1,083,171. A portion of the Mental Health Jail Program is financed from the County General Fund.

**1170 475  Mental Health - HumWORKs**

HumWORKs/Behavioral Health Services (BHS) is a multi-disciplinary program which provides assessment, consultation and treatment services to CalWORKs recipients experiencing mental health, substance abuse and/or domestic violence issues in their lives. The program promotes self-reliance of citizens while protecting economically vulnerable populations. BHS assists participants in removing/minimizing barriers to employment by teaching a variety of life skills. The use of these skills can open the door to recovery and successful long-term employment. Services are part of each participant’s Welfare to Work Activities and are developed in consultation and coordination with Social Services Branch CalWORKs and the Employment & Training staff.

HumWORKs’ total budget for FY 2013-14 is $141,557, an increase of $14,198, or 11%, from FY 2012-13. This increase is due to the A-87 cost allocation.
1170 477  Mental Health Services Act (MHSA)

Mental Health Services Act programs promote recovery based programming that reduces the long term negative impacts on individuals and families from untreated mental illness and promotes the prevention of mental illness from becoming severe and disabling. These services in the County are intended to protect vulnerable populations, provide community-appropriate levels of service, promote self-reliance of citizens and foster transparent, accessible, welcoming and user friendly environments.

MHSA provides the following recovery focused, integrated services to clients:

- The Hope Center.
- Crisis Intervention Team training.
- Outpatient Services, including Rural Outreach Services Enterprise, Comprehensive Community Treatment, Older and Dependent Adults Expansion, and the Transition Age Youth Partnership Program
- Medication support services, including Telemedicine Services in Willow Creek and Garberville

To outreach to vulnerable populations, increased mobile access is provided with efforts focused on reducing barriers to treatment and increased medication support to rural areas through teleconferencing.

1170 495  Mental Health-Psychiatric Emergency Services (PES) and Acute Psychiatric Hospitalization-Sempervirens

Mental Health’s Emergency Psychiatric Services program provides:

- 24 hour, seven-day crisis intervention services in a psychiatric emergency room setting.
- 23 hour crisis stabilization to prevent the need for inpatient hospitalization.
- Psychiatric inpatient services in a federally certified psychiatric health facility, Sempervirens, the only inpatient psychiatric unit within a 300 mile radius.

These programs are financed primarily from designated State mental health realignment revenue funds, Mental Health Services Act, and revenues from service billings to Medi-Cal Federal Financial Participation (FFP), Medicare, private insurance, and patient fees.

These programs are staffed with psychiatrists, psychiatric registered nurses, licensed clinical social workers, an activity therapist, and support staff. Those patients in need of Psychiatric Emergency Services (PES) are provided crisis intervention and/or crisis stabilization services to assess the
emergent situation, short-term treatment to stabilize their condition, and arrangements for after-care services necessary to prevent relapse or decomposition of their condition. The patient is admitted to Sempervirens or the nearest available inpatient hospital specializing in age-appropriate care, if the patient’s condition cannot be stabilized while in PES.

Sempervirens is a 16 bed locked psychiatric hospital that provides a safe environment for those people who meet the criteria outlined in Section 5150 of the California Welfare & Institutions Code. These individuals are considered to be in imminent danger to themselves or others, or they are unable to provide for their own food, clothing and shelter due to mental illness. Sempervirens hospital staff provides psychiatric assessment, medications counseling (individual and family), and rehabilitative activities to assist the individual in learning new ways to cope with his/her illness and assist with their recovery. Upon admission, staff develops a multidisciplinary treatment plan with the patient, identifying the problem that led to the hospitalization and the individual goals to assist the person with his/her recovery.

Sempervirens / Psychiatric Emergency Services’ total budget for FY 2013-14 is $1,151,794, an increase of $135,080, or 13%, from FY 2012-13. Increased costs include pharmacy contracts and professional services to maintain client health and safety.

1170 496 Adult Behavioral Health and Recovery Outpatient Programs

Through County operated programs and contracts with community providers, Adult Behavioral Health and Recovery Services offers an array of services to severely mentally ill adults and Medi-Cal beneficiaries that meet specialty mental health service criteria.

These programs are financed from designated State mental health realignment funds, Mental Health Services Act, revenues from service billings to Medi-Cal Federal Financial Participation, private insurance, patient fees, and grant funding. The following services are provided within a coordinated and integrated System of Care model of service delivery:

- Walk-in and telephone access.
- Clinical services, including mental health evaluation, assessment, and referral; brief individual and group therapy; case management; mental health rehabilitation; community outreach and education; and client and family education.
- Residential placement coordination for those who require skilled levels of care to prevent or transition from acute psychiatric hospitalization, as well as residential care and transitional housing options along a continuum of independence.
Mental Health Branch

Services are provided by a multi-disciplinary staff and clinical teams comprised of licensed mental health clinicians, case managers, crisis specialists, peer support counselors, mental health workers, and vocational counselors who work in collaboration with psychiatrists, nurses, and support staff.

The Adult Outpatient Programs’ budget for FY 2013-14 is $1,799,358, an increase from the prior year of $110,287, or 7%.

1170 497 Mental Health - Children, Youth & Family Services (CYFS)

Children’s Mental Health, a part of DHHS Children & Family Services (C&FS), provides a full array of services to seriously emotionally disturbed children and Medi-Cal beneficiaries who meet specialty mental health service criteria, per State and federal mandates. Coordinated services are provided through County operated programs and community-based contract providers and are delivered through an integrated Children & Family Services System of Care model. Services include assessment; individual, group and family therapy; case management; medication support; therapeutic behavioral services; and crisis intervention. To enhance accessibility, services are provided at four certified sites in Eureka, in homes and the field, schools, and at a variety of community sites in coordination with the other DHHS Children & Family Services, contract providers and community partners.

In 2008, DHHS launched a program designed to identify and meet the behavioral health needs of children and youth in foster care to impact the poor outcomes seen nationally for this high risk population. Also in 2008, DHHS partnered with state youth advocacy organizations to create the Humboldt County Transition Age Youth Collaboration (HCTAYC) to assist Humboldt County in improving capacity for welcoming youth-serving programs which integrate health, mental health, housing, vocational and educational components. HCTAYC was instrumental in the development of the Transition Aged Youth (TAY) Division that was launched in 2011.

In 2010, DHHS moved Mental Health, Public Health, and Social Services programs serving children and families into one integrated C&FS administrative structure. Children’s Mental Health is one component of the C&FS structure. This integration process will result in greater protection of vulnerable populations through the use of accessible “upstream” (prevention and early intervention) programs and community education.

There are three significant changes that will impact children’s mental health services in FY 2013-14. First, as of October 1, 2012, DHHS was awarded a 4-year, $4 million federal System of Care Expansion grant to help transform the system so that it will be more family and youth friendly, community based, and cost effective, with positive outcomes in preventing or reducing the long term impact of children’s mental health needs. Second, a statewide lawsuit called Katie A has settled. As a result, California counties are now responsible for implementing improved intensive community based services to children and families involved in child welfare. Staff from the Children’s Center, closed in May 2013, will be reassigned to support this effort. DHHS is well positioned to implement this system transformation because of the integrated C&FS
structure and the resources provided through the System of Care grant. Third, California is shifting families enrolled in the Healthy Families insurance program to Medi-Cal. As a result, a number of children and youth in the community will have increased access to early intervention mental health services through the contracted Medi-Cal mental health provider network. This will increase the number of children receiving Medi-Cal mental health services. The State has provided a small increase in 2011 Realignment in the amount of $271,191. This is an estimate of the match required for the expansion of mental health services due to the transition of children from the current State Children’s Health Insurance Program (S-CHIP), known as the Healthy Families Program, to the California Medi-Cal program. This amount has been estimated by the State based on county Medi-Cal penetration rates.

This program creates opportunities for improved health and safety and protects vulnerable populations. It matches service availability to community-appropriate levels of services geared toward children and families. These services support the self-reliance of citizens and help ensure that resources are sustainably managed through prevention and early intervention efforts. Children’s Mental Health services fosters transparent, accessible, welcoming, and user friendly services by adopting a family-driven, youth-guided approach and maximizes use of available funding sources to benefit Humboldt County needs.

The total budget for CYFS in FY 2013-14 is $1,454,284, an increase of $113,444, or 8%, from FY 2012-13.

1170 498 Mental Health - Medication Support Services

The Mental Health Outpatient Medication Clinics, located at two sites in Eureka, provide ongoing psychiatric medication support services utilizing a team approach. Each team consists of a psychiatrist and a registered nurse, and in many cases, a case manager and/or a clinician may also be assigned.

The Outpatient Medication Clinic staff works closely with a vast variety of community providers to identify those clients who have been stable, no longer need specialty mental health services, and could receive their medications from their primary care physician (PCP) or health clinic. The Outpatient Medication Clinic nursing staff work with PCPs to coordinate care of existing Mental Health clients who need collaborative care to treat medical as well as psychiatric concerns. A referral process for PCPs to have psychiatric consultation exists so that the client is seen sooner by the psychiatrist, preventing the need for a higher level of care or service and maintaining the client in the community setting.

For clients who are unable to pay for their medication costs, efforts are made to provide clients with sample medications or drug company indigent medications when applicable. Medi-Cal has changed its formulary to require Treatment Authorization Requests (TAR) and Prior Authorization (PA) for commonly prescribed medications, which oftentimes causes a delay in obtaining medications for patients at risk. These costs are paid by the Medication Support Services until TARs and PAs are authorized by Medi-Cal.
In addition, Medication Support Services incurs costs for medications to provide continuity of care for Jail clients released from the Humboldt County Correctional Facility, clients released from Psychiatric Emergency Services, and Sempervirens with a limit of a two week supply.

The total budget for FY 2013-14 for Medication Support Services is $169,289, a decrease of $92,546, or 35%, from FY 2012-13. Temporary staffing costs have decreased through employment of permanent staff psychiatrist/MDs.

**1170 507 Children’s Center**

For FY 2013-14, the Children’s Center budget unit 507 is being eliminated in order to provide contracted shelter services for youth. These services will be paid from Social Services.

### 2012-13 Accomplishments

1. Added an array of mental health and alcohol and other drug services to the Community Corrections Resource Center as a key partner in the implementation of AB109/criminal justice realignment. These services support the needs of citizens and create opportunities for improved safety and health for this population.

2. Implemented Moral Reconation Therapy, which is a practice recognized by the Substance Abuse and Mental Health Services Administration (SAMHSA) as a systematic treatment strategy that seeks to decrease recidivism in juvenile and adult criminal offenders.

3. Implemented Seeking Safety, which is a practice recognized by the SAMHSA as an effective program for the treatment of individuals with a history of trauma and substance abuse.

4. Provided Crisis Intervention Training collaboratively with law enforcement agencies, to promote the education and cooperation of law enforcement in recovery and clinical goals in working with the mentally ill population. This has assisted in enforcing laws and regulations to protect residents and vulnerable populations.

5. Received a $4 million federal grant over four years from the SAMHSA to expand the children’s system of care for children who have mental health challenges and are involved in multiple systems, such as child welfare or probation. This supports the County strategic framework by seeking and securing outside funding sources to benefit Humboldt County needs, supporting business and workforce development through training and infrastructure necessary to transform business as usual and protecting vulnerable populations.

### 2013-14 Objectives

1. To develop Behavioral Health Treatment teams, keeping with Health Care Reform and Behavioral Health Care Models, to address co-occurring health concerns, mental health and substance abuse issues in a timely manner to create opportunities for improved safety and health. And to
improve person centered care and increase clients’ participation in their own wellness.

2. To implement electronic health records, which will provide an opportunity to improve quality of care and client safety. It will also enable cost savings, decrease workplace inefficiencies, and manage resources to ensure sustainability of services.

3. To continue to expand efforts to provide evidence based practices by increasing the number of consumers served by existing evidence based practices and establishing additional evidence based practices in the Community Corrections Resource Center and the Older Adults Mental Health Program to create opportunities for improved safety and health.

4. To implement a transformation process using the four-year System of Care Expansion Implementation Grant to improve outcomes for children who have serious emotional disturbances and their families by protecting vulnerable populations.

Sempervirens Psychiatric Health Facility staff consists of physicians, nurses, mental health workers, activity therapists and clinicians.

Mental Health Branch

Phillip Crandall, Health & Human Services Director

2013-14 Budget

Health & Human Services

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### Public Health Administration

Phillip Crandall, Health & Human Services Director

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| **Expenditures**           |                |                |                |                |                |                 |                  |
| Salaries & Benefits        | $2,076,294     | $2,204,039     | $1,920,682     | $2,036,334     | $2,133,928     | $2,133,928      | $97,594          |
| Supplies & Services        | 1,273,484      | 1,822,959      | 1,673,124      | 1,733,824      | 1,577,657      | 1,577,657       | (156,167)        |
| Other Charges              | 2,836,737      | 3,202,718      | 2,387,065      | 2,407,128      | 2,813,101      | 2,813,101       | 405,973          |
| Fixed Assets               | 23,601         | 12,000         | 38,579         | 605,451        | 50,000         | 50,000          | (555,451)        |
| Expense Transfer           | 0              | 0              | (361,737)      | (1,728,501)    | (916,785)      | (916,785)       | 811,716          |
| General Fund Contribution  | 0              | 0              | (589,711)      | (654,711)      | (654,711)      | (654,711)       | 0                |
| **Total Expenditures**     | $6,210,116     | $7,241,716     | $5,068,002     | $5,054,236     | $5,003,190     | $5,003,190      | ($51,046)        |
| **Allocated Positions**    | 52.30          | 52.30          | 52.30          | 57.30          | 57.30          | 57.30           | 0.00             |
| **Temporary (FTE)**        | 4.45           | 2.00           | 3.00           | 0.45           | 1.15           | 1.15            | 0.00             |
| **Total Staffing**         | 56.75          | 54.30          | 55.30          | 57.75          | 58.45          | 58.45           | 0.70             |
Public Health Administration

Purpose

Public Health Administration enforces laws and regulations to protect residents, creates opportunities for improved safety and health and protects vulnerable populations.

This narrative includes discussion on funding and operation of 11 individual Public Health Administration budget units: Public Health Administration (400), Medi-Cal Administrative Activities and Targeted Case Management Claims Administration (403), Emergency Medical Services (410), Children’s Health (413), Communicable Disease Control Program (419), Clinic Services (422), Immunization Program (428), Outside Agency Support (434), Public Health Laboratory (435), Local Public Health Preparedness and Response (455), and Public Health Pharmacy (465).

Recommended Budget

The total budget for Public Health Administration for FY 2013-14 is $6,574,686, a decrease of $1,976,567, or 23%. This decrease is primarily due to the following:

- Reducing Pharmacy services, a reduction of $97,228.
- Medi-Cal Administrative Activities/Targeted Case Management revenue will go directly to the program budgets and no longer pass through the Medi-Cal Administrative Activities/Targeted Case Management budget unit, a reduction of $658,449.
- Transferring allowable staff costs to be claimed through Social Services for services provided for Cal Fresh, Cal WORKs, Medi-CAL, etc., which increases the salary and benefits reimbursement line and decreases total costs by $710,935.
- Reduction in realignment, $119,161.
- Reduction in Cal-FRESH funding, $386,175.
- Increase in the Public Health Lab budget of $44,526.

Funding of $50,000 is recommended for fixed assets; additional detail is included in the Capital Expenditures table.

Recommended Allocation Changes

The total positions allocated for FY 2013-14 is 47.50 with 1.0 FTE position remaining frozen.

Board Adopted

The Board adopted this budget as recommended.
Program Discussion

1175 400 Public Health Administration

Public Health Administration has overall responsibility for administration of all programs carried out by the Department of Health and Human Services’ Public Health Branch. The Public Health Director and the Public Health Officer are in this budget. The Public Health Director plans, coordinates, and directs the work of the Public Health staff through the Deputy Director and program managers. The Health Officer provides overall medical oversight and direction to Public Health staff.

Public Health Administration also provides support in the areas of epidemiology, data interpretation and health trends. The Vital Statistics program registers births and deaths occurring in Humboldt County and transmits all required information regarding births and deaths to the State of California’s Office of Vital Records. This program also processes permits for disposition of human remains in Humboldt County.

The budget for Public Health Administration for FY 2013-14 is $3,288,811, excluding expense transfers, a decrease of $736,483, or 18%, from the prior year level due to the sharing of salary costs with other DHHS budget units.

1175 403 Medi-Cal Administrative Activities/Targeted Case Management Claims Administration

The Medi-Cal Administrative Activities (MAA)/Targeted Case Management (TCM) Coordination and Claims Administration program provides administrative, programmatic and fiscal oversight and support to MAA and TCM program participants on a countywide basis. The Department of Health and Human Services (DHHS) serves as the Local Governmental Agency (LGA) for MAA and TCM claiming on behalf of Humboldt County. Public Health protects economically vulnerable populations through this funding source.

The LGA draws down Federal Financial Participation revenues for DHHS and other participating organizations (such as Adult Probation) to decrease local costs for eligible services and to assist in maintaining service levels. Services include case management, referrals, and program planning for Medi-Cal services and outreach. These payments help Public Health work towards improved health and safety of the community.

The budget for FY 2013-14 for MAA/TCM is $157,808, excluding expense transfers, a decrease of $658,449, or 80%. The decreased budget is a result of a new procedure that will allow MAA/TCM funds to pass directly to the program for which the service is claimed.
Public Health Administration

1175 410  Emergency Medical Services

The Emergency Medical Services Program protects economically vulnerable populations by assuring payment for their emergency medical care. This fund reimburses physicians, surgeons and hospitals for patients who are unable to pay for their own emergency medical services, and the fund also provides funding to North Coast Emergency Medical Services. This program works with emergency care providers, informing them of the Emergency Medical Services Fund, the guidelines to receive reimbursement, and methods used to obtain funds.

The budget for Emergency Medical Services for FY 2013-14 is $545,155, a status quo budget. Funding has remained consistent from the prior year.

1175 413  Children’s Health

This budget unit and program will be incorporated into Public Health Administration within 1175 400.

The Children’s Health Initiative (CHI) Coalition will continue to meet and is led by a steering committee made up of organizations with a direct and substantive role in the funding and day-to-day management of the CHI program. Members of the steering committee include: Humboldt County Board of Supervisors, DHHS, First 5 Humboldt, St. Joseph Health System, Humboldt County Office of Education, Humboldt Area Foundation, United Way, and the North Coast Clinics Networks.

Public Health staff conducts outreach, enrollment, utilization and retention of children in health insurance programs, and uses the C4Yourself online enrollment program to simplify the health insurance enrollment process. Staff work with families to help them establish a healthcare home so there is improved access to preventive healthcare.

During FY 2013-14, many changes will result from the implementation of the Affordable Care Act. The CHI will remain active and available to respond to healthcare program changes that impact local families. There is no recommended budget for CHI in FY 2013-14.

1175 419  Communicable Disease Control Program

Communicable Disease nursing staff creates opportunities for improved safety and health by working closely with the Health Officer and the local medical community to investigate infectious disease outbreaks and to prevent the spread of any communicable disease. Recent investigations include rabies, chlamydia, meningitis and measles. The Tuberculosis (TB) Control Program provides Public Health Nursing services to control and prevent the spread of TB in the community.

The budget for FY 2013-14 for Communicable Disease Control Program is $313,753, a decrease of $28,669, or 8%, from the prior year level of $342,422 due to reduced State Chlamydia funding.
Clinic Services protects vulnerable populations by providing child and adult immunizations, foreign travel immunizations, flu vaccinations, tuberculosis testing, sexually transmitted disease screening and treatment, and lice and scabies diagnosis and treatment.

The budget for Clinic Services Program for FY 2013-14 is $666,474, excluding expense transfers, an increase of $11,453, or 1%, from the prior year level of $655,021.

Immunization Program protects vulnerable populations by completing countywide quality assurance oversight for childhood vaccine inventory and accountability, administration and storage. This program also provides free vaccines for children through Public Health’s Clinic Services. The Immunization Program Coordinator routinely completes local trainings and is the liaison to the State immunization program.

The budget for the Immunization Program for FY 2013-14 is $118,513, an increase of $1,195, or 1%, from the prior year level of $117,318.

Outside Agency Support provides assistance to non-County agencies. This helps provide for and maintain infrastructure of these outside agencies.

Area Agency on Aging was established in 1980 as a 501(c) (3) private nonprofit corporation. Humboldt and Del Norte counties had considered and declined a joint powers arrangement as the administrative agency of choice, but committed to provide cash match support to the Agency to guarantee it meets its federal mandate on behalf of the senior citizen population of Humboldt and Del Norte counties. For FY 2013-14, $35,000 was budgeted to support the Agency.

North Coast Emergency Medical Services funds in the Outside Agency Support budget provide a portion of the local match for North Coast Emergency Medical Services (NCEMS), a Joint Powers Agency (JPA) overseeing pre-hospital care in Humboldt, Del Norte and Lake counties. The Humboldt County pro-rata share for the JPA is $36,999. The FY 2013-14 NCEMS budget is therefore $36,999 and is funded through Public Health realignment.

Hazardous Materials Response Team (HMRT) is an important element of the County’s ability to effectively manage emergencies involving the discharge of hazardous materials into the North Coast environment, thus improving the health and safety of its residents. The team is supported through a Joint Powers Agreement consisting of cities plus Humboldt and Del Norte counties and the Yurok Tribe. The budget includes $34,732 for support of this program in FY 2013-14.
Public Health Administration

Tobacco Education/Prevention and Early Intervention

The California Master Settlement Agreement is used to fund services and activities not funded by the California Department of Public Health’s Tobacco Grant (Fund 412). The Program targets youth in the classroom with the evidence-based programs of TNT (Towards No Tobacco) and Project Alert. The budget includes $65,000 for support of this program in FY 2013-14.

The total budget for Health Outside Agency Support for FY 2013-14 is $106,731. Funding has remained consistent from the prior year.

1175 435 Public Health Laboratory

The Public Health Laboratory creates opportunities for improved safety and health by providing State and federally certified laboratory support for identification of communicable disease organisms and other services related to community health for governmental agencies, citizens and private agencies. In addition, the Public Health Laboratory is part of the Laboratory Response Network (LRN) that has unique resources to handle highly infectious agents and the ability to identify specific agent strains.

The Public Health Laboratory assists the Environmental Health Division and private citizens in maintaining the safety of domestic drinking water systems through the provision of water testing. The Lab also provides testing and monitoring of bacteria levels in State Parks, County Parks and beach waters. The Lab also functions as part of California State *Vibrio parahaemolyticus* control plan by testing local and other shellfish to ensure that they are safe for human consumption.

The budget for Public Health Laboratory for FY 2013-14 is $611,818, excluding expense transfers, an increase of $34,664, or 6%, from the prior year level of $577,154 due to 2011 Realignment funding.

1175 455 Local Public Health Preparedness and Response Program

The Local Public Health Preparedness and Response Program creates opportunities for improved health and safety. Its goals are to plan and prepare for public health emergencies; develop a seamless response to such emergencies; strengthen the public health system infrastructure capacity needed to accurately and rapidly detect, control and prevent illness and injury resulting from terrorism, infectious disease outbreaks and other health threats and emergencies; and ensure that rapid and secure communication exists between public health and public/private sectors during an event.

The Public Health Preparedness and Response Program has a budget of $683,880 for FY 2013-14, a decrease of 12% from the prior year level of $759,924 due to reduced bioterrorism grant funding.
1175 465 Public Health Pharmacy

DHHS and PH Administration are in the process of analyzing the need for the Public Health Pharmacy and evaluating if it should be closed. Responsive to changes occurring through healthcare reform, Mental Health is identifying other possible mechanisms to secure medications and other pharmaceuticals for both its inpatient and outpatient populations.

The budget for the Public Health Pharmacy for FY 2013-14 is $16,743, a decrease of $97,228, or 85%, from the prior year level of $113,971.

2012-13 Accomplishments

1. Completed the Humboldt County Community Health Assessment document, a requirement for Public Health Accreditation. The process invited civic engagement and awareness of available services and will help Public Health identify and prioritize communities’ public health priorities. This will ensure Public Health provides community appropriate levels of service.

2. Worked with Humboldt County sentinel labs (hospital, community, Humboldt State University and emergency room labs) to safely package, ship and refer possible select agents to the Public Health Laboratory. The level of competence of microbiology staff on ruling out and referring possible select agents was increased through training, thus creating opportunities for improved safety and health.

3. Provided administrative oversight, between January and April of 2013, for the implementation of a comprehensive electronic health record system for use by clinic, nursing, maternal/child health and billing staff to increase staff efficiency and track measurable outcomes. This provided for needed infrastructure.

4. Began negotiations to contract with the top four insurance providers operating in Humboldt County to become an in-network preferred provider for Public Health Clinic services. This will help manage resources to ensure sustainability of services.

2013-14 Objectives

1. To provide rapid detection of mycobacterium tuberculosis by Polymerase Chain Reaction testing, thereby decreasing turn-around times and providing high quality laboratory test results for the community. This will create opportunities to improve safety and health.

2. To continue to develop contractual relationships with the top four medical insurance providers to be an in-network provider. This will help manage resources to ensure sustainability of services.

3. To combine two existing community emergency preparedness groups (the Community Disaster Committee and the Hospital Preparedness Program Partnership Committee) into one group for the purpose...
of avoiding duplication, assuring enhanced communication, and to better plan for emergencies inclusive of all partners that provide healthcare. This creates opportunities for improved safety and health.

4. To formally apply for Public Health Accreditation by January 1, 2014. This will invite civic engagement and awareness of available services and help Public Health identify and prioritize communities’ public health priorities. This will ensure Public Health provides community appropriate levels of service.
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Purpose

The Social Services Assistance Section provides assistance payments to Humboldt County’s children and families to create opportunities for improved health and safety and to protect vulnerable populations. This narrative includes discussion on funding and operation of three Social Services budget units: SB 163 Wraparound Program (515), Temporary Assistance to Needy Families (517) and Foster Care (518).

Recommended Budget

The total Social Services Assistance budget for FY 2013-14 is $24,121,223, excluding expense transfers, an increase of $327,016, or 1%. This change is primarily due to changes in the State cost rates and does not indicate a change in services.

Recommended Personnel Allocation

There are no recommended position allocations for the Social Services Assistance budget grouping for FY 2013-14.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

1110 515 SB 163 Wraparound Program

The Senate Bill (SB) 163 Wraparound Program was established in 1999. The Child Welfare Services Division, Children Youth and Family Services Division, and the County Probation Department provide local services and placement options to high-needs children who would otherwise require placement in more costly out-of-County residential treatment facilities. The goal of this program is to provide services to youth in the community that stabilize and re-connect the youth and family to the appropriate community support systems. In this way, the SB 163 Wraparound program aims to use local resources to ensure continuity for the clients in the program.

The budget for SB 163 Wraparound for FY 2013-14 is $865,171, excluding expense transfers. This is the same funding level as last fiscal year. The County General Fund provides $142,999, or 16.5%, of this amount.

1110 517 Temporary Assistance to Needy Families (TANF)

In 1996, the United States Congress made sweeping changes to national welfare policy and placed new emphasis on the goals of work and personal responsibility. With the passage of this reform, the program formerly known as Aid for Dependent Children was changed to Temporary Assistance to Needy Families (TANF).
The State of California implemented legislation which created the CalWORKs program with the passage of the Welfare-to-Work Act of 1997 (Chapter 270, Laws of 1997). The Act’s mandates are outlined in the California Welfare and Institutions Code, Sections 11200-11489. The program’s primary purpose is to provide cash grants to needy families with dependent children who meet specific income and resource levels. TANF funding also includes payments for severely emotionally disabled children.

The total budget for TANF for FY 2013-14 is $11,798,500, excluding expense transfers. There is no change from the prior fiscal year. The County General Fund contributes $244,000, or 2.0%, of this amount.

1110 518 Foster Care

The Foster Care program provides payments for children placed in foster care. The program is mandated by Section 11400 of the California Welfare and Institutions Code. Costs covered by this allocation include both the Foster Care and Aid to Adoption programs, which include placements for both Social Services dependent children as well as Probation wards.

The cost of foster care placements is variable according to the type of placement, the age of the child, where he/she is placed, whether he/she is federally eligible or not, and need. The State sets the rates, and can adjust the rate according to the cost of living.

The Foster Care program provides family homes for children and youth who are unable to remain with their families. Foster parents, relative caregivers and non-related extended family members provide a safe and nurturing home for these vulnerable children and youth while services are provided to the birth parents to address the concerns that brought the child or youth into the child welfare system.

The Adoption Assistance Program makes payments to the parent who has adopted a child who either was in the Child Welfare System or at risk of being in the Child Welfare System if the adoption did not occur. Children who are in this program are not eligible to return to their biological families. The initial payment rate is determined by State law and cannot exceed the rate the child would receive if in regular foster care.

While the cost of Aid to Adoptions has increased significantly in prior years due to the number of children in the program, they are minor when compared with the costs of maintaining these children in residential treatment facilities with regular foster care payments. The State has made significant efforts to facilitate the adoption of hard-to-place children, as many of these children in the past would not have been adopted due to multiple physical, emotional, and developmental problems.

The budget for FY 2013-14 for Foster Care is $11,457,552, an increase of $327,016 from FY 2012-13. This increase is due to the State raising care rates and assumes that service levels will be held the same as in the prior fiscal year. The County General Fund contributes $220,000, or 2.0%, of the total amount.
2012-13 Accomplishments

1. Implemented Senate Bill 1041, which contained significant changes for CalWORKs families. One of the most significant changes is the addition of limiting Welfare-to-Work services for aided parents to 24 months and allowing these parents more flexibility in selecting services within the program to create opportunities for improved health and safety.

2. Completed the development of effective outcome measures for the SB 163 Wraparound program to ensure that program integrity is maintained. This will create opportunities for improved health and safety and protect vulnerable populations.

3. Developed post-permanency supports for children and their adoptive families and children and their legal guardians. This will create opportunities for improved health and safety and protect vulnerable populations.

2013-14 Objectives

1. To complete the development of effective outcome measures for the SB 163 Wraparound program to ensure that program integrity is maintained. This will create opportunities for improved health and safety and protect vulnerable populations.

2. To continue to develop more supports for children and their adoptive families, legal guardians, foster families, relative caregivers, and biological families. This will create opportunities for improved health and safety and protection of vulnerable populations.

3. To work with families in becoming stable and self-sufficient by maximizing the limited time to access services through CalWORKs.
### 2009-10 Budget

#### Social Services Branch

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Purpose

This narrative includes discussion on funding and operation of eight Social Services budget units: Public Guardian-Conservator (273), Adult Protective Services/Older Adults (504), CalWORKs (505), In-Home Supportive Services Public Authority (506), Child Welfare Services (508), Children’s Center (509), Social Services Administration (511) and Veterans Services (599).

Recommended Budget

The total budget for the Social Services Branch for FY 2013-14 is $90,864,859, excluding expense transfers, an increase of $5,998,397, or 7%, due to Health Care Reform and Medi-Cal Call Center expansion. In addition, the General Fund Contribution is recommended to increase by $152,137, or 5%. Funding of $2,923,900 is recommended for fixed assets; additional detail on the projects is in the Capital Expenditures table.

Personnel Allocation Changes

The total position allocations for this budget grouping for FY 2013-14 are 549.60 with zero positions frozen. This represents an increase of 8.0 FTE from FY 2012-13.

The recommended position changes for FY 2013-14 include: allocating 5.0 FTE Social Worker IVs; allocating a 1.0 FTE Social Worker Supervisor as part of the Adoptions program that was brought under Social Services administration in July 2012, and 2.0 FTE Administrative Analysts. These positions are recommended due to 2011 Realignment, which included Adoptions, which was not a program the County was responsible for previously. It has been determined that this additional responsibility requires additional staff.

Board Adopted

The Board adopted the Social Services (1160-511) budget with a reduced General Fund contribution of $18,863.

Program Discussion

The Social Services Branch of the Department of Health and Human Services (DHHS) provides three basic types of programs: Income Maintenance Programs, Social Services Programs, and Employment Services. These programs create opportunities for improved safety and health and protect the most vulnerable populations. All staff is paid through the Social Services Administration budget unit 511 except for Veterans (599) and Public Guardian (273).

Income Maintenance Programs

Income Maintenance administers legally mandated public assistance programs on behalf of the federal, State and local governments. These programs include CalFresh (formerly known as Food Stamps), Medi-Cal, Path2Health, the County Medical Services Program (CMSP), Adoptions Assistance
Program, and Foster Care Assistance. These programs provide financial support for poor, dependent children, needy families and other individuals, as required by regulation, statutes and local resolutions and create opportunities for improved safety and health.

**Social Services Programs**

The Social Services Programs are mandated at the federal and/or State level. Child Welfare Services program components include emergency response, family maintenance, family reunification, and permanent placement. Currently, many programs are working in concert with the other branches of DHHS to provide a matrix of needed services for children at risk as well as their families. Child Welfare Services continues its commitment to protect the community’s children by designing programs to prevent family problems from escalating into crisis situations.

Adult Protective Services and In-Home Supportive Services/Personal Care Services Program (IHSS) protect the other vulnerable population in the community: adults at risk due to age or disability. This is a growing population, so costs to the County are anticipated to increase significantly in future years.

**Employment Services**

The CalWORKs Division includes Employment Services as well as income maintenance for families. This Division offers a seamless delivery of services from the day clients apply for aid until they become independent and self-sufficient community members. These programs are mandated at the federal and State level and create opportunities for improved safety and health.

**1160 273 Public Guardian-Conservator**

The Office of the Public Guardian has two separate basic services provided to the public. The LPS (Lanterman-Petris-Short) Conservatorship/Probate Guardianship programs require a Superior Court appointment. The Representative Payee program is initiated through the Social Security Administration (SSA). The SSA requires recipients who cannot manage their funds throughout the entire month to have a payee.

Individual persons are referred to the Public Guardian-Conservator through a multitude of local service providers due to a specific disorder or medical condition. Mental Health Conservatorships are reserved for persons requiring involuntary mental health treatment and often controlled-egress psychiatric facilities. Probate Guardianships are for individuals substantially unable to provide for personal needs of health, food, clothing or shelter and/or unable to manage financial resources or resist fraud. Through these services the Public Guardian-Conservator is able to safeguard the lives and assets of those in our community most at risk and create opportunities for improved safety and health.

The Public Guardian-Conservator’s position allocation is 8.0 FTE. The budget for the Public Guardian for FY 2013-14 is
$784,803, excluding expense transfers, an increase of $37,336, or 5%. The County General Fund contributes $530,003, or 68%.

1160 504  Adult Protective Services (APS)

APS is mandated to conduct timely investigations of alleged physical, sexual or financial abuse, abandonment, isolation, abduction, neglect or self-neglect, or hazardous living conditions involving elders (age 65 or older) and dependent adults (physically or mentally impaired 18-64 years old). Elders and dependent adults identified at risk are provided short term intensive case management in order to ensure the situation is stabilized, the elder or dependent adult safe and linked to community resources. Participation with APS is voluntary in situations where client capacity is confirmed. In the course of the investigation, APS may provide funds temporarily when needed for personal care assistance, shelter, food, clothing, or prescription medication and transportation assistance and other services. Expenditures for APS are cost applied to the Social Services Administration budget (511) on a quarterly basis.

The budget for APS for FY 2013-14 is $1,058,066, an increase of $2,916, or 0.27%, from FY 2012-13.

1160 505  California Work Opportunity and Responsibility to Kids Program (CalWORKs)

The CalWORKs program began in January 1998 as part of California’s Welfare Reform Program. CalWORKs programs are funded through allocations received from the California Department of Social Services. This funding covers the costs of the following programs and services: mental health services, alcohol and drug treatment (provided primarily through the HumWORKs program), Stage One childcare program, and work experience and on-the-job training programs. CalWORKs continues the collaborative project with the Multiple Assistance Center to provide CalWORKs case management services to homeless families who are Welfare-to-Work participants. The project includes goals for outcomes of self-sufficiency and permanent housing for CalWORKs families enrolled in the program.

Furthermore, CalWORKs in Humboldt County has developed a Linkages program and is expanding the scope of that program to provide families with service options to make them successful in CalWORKs as well as Child Welfare Services. The County’s programs have been successful in moving CalWORKs recipients off cash assistance and maintaining employment to remain self-sufficient. This creates opportunities for improved safety and health. Caseloads have either steadily declined or remained static in recent years. Expenditures for CalWORKs are cost applied to the Social Services Administration budget (511) on a quarterly basis.

The budget for CalWORKS for FY 2013-14 is $9,339,722, a decrease of $7,500 from FY 2012-13.
1160 506  In-Home Supportive Services (IHSS)  
Public Authority

The function of the Public Authority is to serve as the employer of record for providers of IHSS for the purpose of collective bargaining of wages and terms and conditions of employment. The Public Authority provides assistance to recipients through the establishment and maintenance of a Care Provider Registry. The Public Authority investigates the qualifications and background of potential care providers to be enrolled on the Registry. Through an established referral process, the Public Authority sends care provider names to recipients who conduct the interview and hiring process. The Public Authority identifies relevant training in the community and refers both care providers and recipients accordingly. This budget unit is for IHSS administration only; it does not provide for payments to care providers.

The IHSS program provides assessment and authorization of hours to help pay for domestic and personal care services provided to income eligible disabled adults or adults over 65 and disabled children so they can remain safely at home. IHSS is considered an alternative to out-of-home care, such as nursing homes or board and care facilities. The IHSS recipient selects and hires the care provider of their choice. Services authorized include assistance with meal preparation, laundry, shopping errands, bathing, transportation, etc. The IHSS Quality Assurance component provides review and oversight to ensure IHSS program integrity. Due to state budget shortfalls, IHSS recipients will receive an 8% reduction in authorized services in FY 2013-14.

The budget for IHSS for FY 2013-14 is $78,200, an increase of $14,530, or 22.8%, from FY 2012-13. This increase is a result of moving operational costs out of the Social Services Administration budget for better tracking of the program’s costs.

1160 508  Child Welfare Services

Child Welfare Services’ mission is to protect children from abuse, neglect and exploitation, and to promote the health, safety and nurturing of children, recognizing that a caring family is the best and most appropriate environment for raising children. Child Welfare Services responds to reports of many types of abuse to children within the community. This includes general neglect, emotional abuse, severe neglect, physical abuse, exploitation, and sexual abuse. Staff continues to focus on family crisis prevention, as well as protection of the County’s children, and seeks to ensure permanency for all children. This ensures the safety and protection of this vulnerable population.

Funding for Child Welfare Services (CWS) is through State and federal allocations. The budget for FY 2013-14 is $5,170,310, an increase of $835,500, or 19.3%, more than FY 2012-13. This increase is primarily due to incorporating the Children’s Center budget into the CWS budget (see below).
**Social Services Branch**

**1160 509  Children’s Center**

For FY 2013-14, the Children’s Center budget unit 509 is being eliminated in order to provide contracted shelter services for youth. These services will be paid from the Child Welfare Services 508 budget unit.

**1160 511  Social Services Administration**

Social Services is continuing to implement the national health care reform initiative known as the Affordable Care Act. This includes increased community partnerships and outreach promoting prevention and reducing long-term health care costs. Social Services will continue to implement the new service center model and call center system to meet the needs of this vulnerable population. Social Services has re-established the position of Community Liaison to provide direct outreach and linkage to medical providers to ensure timely enrollment of individuals and families in health benefit coverage.

The Social Services Administration budget includes staffing and centralized administrative costs for the other programs. Costs are then charged out to the individual programs. The administrative cost for income maintenance programs (excluding General Relief) and the department’s generic allocated administrative costs are also included in this budget unit. The majority of all Social Services branch staffing reside in this budget unit.

In recent years, the United States Department of Agriculture has encouraged increased enrollment outreach. In California, that outreach has been linked to program name and rule changes. In Humboldt County, CalFresh Outreach funds have been used to partner with a broad range of community based organizations, and to promote and link food access to good nutrition and overall population health.

The Social Services budget’s total position allocation for FY 2013-14 is 538.60 with zero positions frozen. The total budget for Social Services for FY 2013-14 is $74,214,550, excluding expense transfers, an increase of $5,802,488, or 8%, from FY 2012-13 due to Health Care Reform and Medi-Cal Call Center expansion. The County’s General Fund contribution is $2,043,822, or 2%, of the budget.

**1160 599  Veterans Services**

The Veterans Service Office (VSO) assists the County’s veteran community by providing free claims assistance and information and referral to local, State and federal programs. The VSO is active in community outreach and refers veterans and their dependents to services and benefits, including homeless and other emergency assistance, disability benefits and entitlements, education, health care, counseling, and rehabilitation services. For the latest reporting period, more than $6 million came into Humboldt County in the form of new or one-time veteran’s benefits. This represents a 16 percent increase over the previous year.

The Veterans Services’ position allocation for FY 2013-14 is 3.0 FTE. The budget for FY 2013-14 is $219,208, excluding
expense transfers. The County General Fund contributes $158,388, or 72.25%, of that amount.

2012-13 Accomplishments

1. Continued the integrated Transition Age Youth structure with full time staffing dedicated to service delivery to young adults in multiple service areas in coordination with DHHS Mental Health and Public Health staff to create opportunities for improved health and safety and protect vulnerable populations.

2. Continued to expand CalFresh nutrition access and education services in Humboldt County by partnering with community based organizations and other community partners to create opportunities for improved health and safety and protect vulnerable populations.

3. Implemented a Customer Service Center and task based approach to case management to ensure that the demand for services can be met in an expeditious manner to create opportunities for improved health and safety. A key component of the Customer Service Center is the new Call Center and expanded business hours at both the Call Center and main campus.

4. Enriched the experience of a child in the Child Welfare System by encouraging communication between birth families and foster parents, thus creating opportunities for improved safety and health of the vulnerable children in Child and Family Services.

2013-14 Objectives

1. To ensure services are used for resources to children and families which will mediate family crisis interventions in combination with Mental Health and Public Health programs. This will match service availability with residents’ needs and provide community-appropriate levels of service when needed.

2. To assign staff members to programs as needed to promote children’s safety and well-being in their homes of origin and in foster care homes, or returned to their home of origin as soon as possible in accordance with the safety of the child. This will create opportunities for improved health and safety and protect vulnerable populations.

3. To continue CalFresh Outreach partnership contracts with the goal of de-stigmatizing CalFresh, increasing CalFresh enrollment, linking CalFresh benefits to healthy eating and life choices, and strengthening the local food safety net.

4. To become a Regional Host Call Center for the other Region 6 counties to facilitate enrollment in health benefit programs as California implements the Affordable Care Act.
5. To continue to work on improving the County’s Work Participation Rate and to increase the number of families and individuals that exit the CalWORKs/Welfare to Work program for unsubsidized employment.
Volunteer Public Health employees cleaned up and replanted the area around the I Street clinic in Eureka.