## Departmental Summary Table

<table>
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<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
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<td>8,036,121</td>
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<td>7,904,158</td>
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<td>7,758,206</td>
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<td>6,679,310</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td><strong>Total Revenues</strong></td>
<td>$115,109,422</td>
<td>$117,358,176</td>
<td>$129,845,161</td>
<td>$146,474,536</td>
<td>$148,011,603</td>
<td>$150,083,833</td>
<td>$150,074,083</td>
<td>$2,062,480</td>
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<tr>
<td><strong>Expenditures</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries &amp; Benefits</td>
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<td>$47,963,642</td>
<td>$55,148,728</td>
<td>$63,891,057</td>
<td>$63,477,814</td>
<td>$64,253,183</td>
<td>$64,253,183</td>
<td>$775,369</td>
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<td>11,189,397</td>
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<td>(1,057,721)</td>
<td>(18,121,030)</td>
<td>(2,859,080)</td>
<td>(2,854,035)</td>
<td>(13,421,653)</td>
<td>(13,421,653)</td>
<td>(10,567,618)</td>
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<td>General Fund Support</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>(325,952)</td>
<td>(325,952)</td>
<td>(325,952)</td>
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<tr>
<td><strong>Total Expenditures</strong></td>
<td>$115,109,422</td>
<td>$117,358,176</td>
<td>$129,845,161</td>
<td>$146,474,536</td>
<td>$148,011,603</td>
<td>$150,083,833</td>
<td>$150,074,083</td>
<td>$2,062,480</td>
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<table>
<thead>
<tr>
<th></th>
<th>2006-07</th>
<th>2007-08</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
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<tbody>
<tr>
<td><strong>Allocated Positions</strong></td>
<td>1,094.76</td>
<td>1,106.02</td>
<td>1,160.70</td>
<td>1,163.03</td>
<td>1,333.03</td>
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<td><strong>Total Staffing</strong></td>
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<td>1,106.02</td>
<td>1,160.70</td>
<td>1,163.03</td>
<td>1,333.03</td>
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</table>
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  DHHS Administration

### Mental Health Branch

#### Alcohol & Other Drugs Division
- 1180 425  Alcohol & Other Drugs
- 1180 429  Substance Abuse & Crime Prevention Act (Proposition 36)
- 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
- 1170 496  Adult Programs
- 1170 497  Children, Youth & Family Services
- 1170 498  Medication Support
- 1170 507  Children’s Center

### 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 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

#### Health Education Division
- 1175 407  Childhood Learning Program
- 1175 412  Tobacco Education
- 1175 414  Health Education
- 1175 433  Nutrition and Physical Activity
- 1175 437  CARE NorCAP
- 1175 449  Fiscal Agent CARE/HOPWA
- 1175 452  Alcohol & Other Drugs Prevention
- 1175 454  Prevention and Early Intervention (Mental Health Services Act)
# Health & Human Services

Phillip Crandall, Health & Human Services Director

- 1175 470 HOPWA NorCAP
- 1175 488 Family Violence Prevention

## Maternal, Child & Adolescent Health (MCAH) Division
- 1175 415 Women, Infants & Children
- 1175 408 Alternative Response Team (ART)
- 1175 418 Child Health & Disability Prevention
- 1175 420 Maternal & Child Health Coordinated Services
- 1175 460 MCAH Personnel
- 1175 493 California Children’s Services

## Public Health Nursing Division
- 1175 416 Public Health Field Nursing
- 1175 419 Communicable Disease Control Program
- 1175 422 Clinic Services
- 1175 426 Nurse Family Partnership
- 1175 428 Immunization 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

### 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 IHSS Public Authority
- 1160 508 Child Welfare Services
- 1160 509 Children’s Center
- 1160 511 Social Services Administration
- 1160 519 TANF - ECF
- 1160 599 Veterans Services
In addition, the following budget units, which are no longer in use, are included in summary tables for past years:

- 1170 476 Street Outreach Services Homeless Program
- 1175 402 AIDS Information & Education
- 1175 404 Adolescent Family Life
- 1175 408 Alternative Response Team
- 1175 409 HIV/AIDS Public Health Nursing Program
- 1175 417 Preventative Health Care for the Aging
- 1175 436 Health Project Lean
- 1175 442 Street Outreach
- 1175 447 High Risk Prevention Case Management
- 1175 448 Bridge Project
- 1175 451 Safe and Drug-Free Schools
- 1175 453 Binge Drinking Reduction
Mission

The Humboldt County Department of Health and Human Services is committed to work in coordination with public and private providers to:

- Improve administrative functioning.
- Improve service coordination and access, thereby improving individual, family and community functioning.
- Promote, develop and maintain a continuum of services that encourage prevention and early intervention activities.
- Link these activities to more intensive services.

Vision

Humboldt County is a nurturing, supportive, healthy environment for its children, families, adults and communities.

Program Discussion

Since 1999, Humboldt County has strived to maximize its resources, both fiscal and staffing, towards the “integration” of State Department programs and initiatives, some of which are promising practices towards serving children, families, adults and older adults in the context of their community and culture in a holistic manner.

Humboldt County began Phase I of this Health and Human Services Agency assisted Integrated Services Initiative in February 1999 through legislation (AB 1259) introduced by Assemblywoman Virginia Strom-Martín. The purpose of AB 1259 was to allow Humboldt County, with the assistance and participation of the appropriate State departments, to implement an integrated and comprehensive County health and human services system. In 2004, AB 1881, which was authored by Assemblywoman Patti Berg, authorized continuation of Humboldt County’s transformational work.

As a result of ongoing Integrated Planning across Humboldt County Mental Health, Social Services and Public Health Branches, Humboldt County’s State Health and Human Services Agency liaison/California Department of Social Services representative, State Department of Mental Health liaison, Board of Supervisors, and Health and Human Services Executive Committee Members, that occurred in 2004-05, the Department has established (2005-2009) AB 1881 Goals.

These Phase II goals have been formatted in age span “categories” to facilitate the next steps required towards developing critical integration structures and processes. These categories are listed below:

1. Strategic Plan goals that are linked to “Across Age Span” populations.
2. Strategic Plan goals that are primarily targeted at children, youth and family populations.

3. Strategic Plan goals that are primarily targeted at Adult/Older Adult populations.

Goals

1. To design a plan to improve medical and dental access, mental health services access and treatment for all children and youth.

2. To design and implement Integrated services model for Incapacitated General Assistance population across Mental Health/Social Services Branches.

3. To design and implement services for shared In-Home Supportive Services/Adult Protective Services/Mental Health/Public Health Branches.

4. To transition to a fully integrated Children and Family Services system that utilizes multi disciplinary workforce to provide a wide array of services to youth and their families in Humboldt County.

Performance Measures

<table>
<thead>
<tr>
<th>Description of Performance Measure: Provide outreach and enroll eligible children into the Children’s Health Initiative.</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2006-07</td>
</tr>
<tr>
<td>------------</td>
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<tr>
<td>10%</td>
</tr>
</tbody>
</table>

Describe why this measure is important and/or what it tells us about the performance of this budget unit: One of the Department of Health and Human Services (DHHS) Strategic Plan goals for 2009-2010 continues to be the design of a plan to improve medical and dental access, mental health services access and treatment for all children and youth. In 2008, DHHS continued its enrollment of children in cooperation with other interested stakeholders in the Children’s Health Initiative (CHI) to achieve the purpose of ensuring health insurance coverage for all Humboldt County children. In 2008-2009, DHHS intensified its programs to make sure that the children of Humboldt County receive a continuum of services from pre-birth to transition ages of the early twenties. Programs such as Nurse Family Partnership (NFP) and TAY outreach represent this continuity. During the same period DHHS significantly increased the collaboration among its three branches in the area of foster care management. In FY 2009-10 Nurse Family Partnership increased its enrollment significantly and served over 40 mothers with new infants.
2. Description of Performance Measure: Percentage of adults and older adults with serious mental health issues identified who have a comprehensive multi-service assessment and treatment plan developed and monitored.

<table>
<thead>
<tr>
<th>FY 2006-07</th>
<th>FY 2007-08 Actual</th>
<th>FY 2008-09 Actual</th>
<th>FY 2009-10 Estimate</th>
<th>FY 2010-11 Projected</th>
</tr>
</thead>
<tbody>
<tr>
<td>25%</td>
<td>35%</td>
<td>40%</td>
<td>70%</td>
<td>90%</td>
</tr>
</tbody>
</table>

Describe why this measure is important and/or what it tells us about the performance of this budget unit: The goal for this performance measure remains to be the design and implementation of integrated community based services across the Social Services, Public Health, and Mental Health Branches to support and reinforce maximum independence for all adults and older adults with serious mental health issues. DHHS continues to enhance the already existing collaboration between Social Services and Public Health by integrating Mental Health into a co-located, cross-branch, multi-disciplinary team. During FY 2008-09 DHHS made concrete commitments to the integration of the adult services in Social Services, Public Health, and Mental Health Branches by laying the administrative and program foundation work for the planned co-location within the next five years. FY 2009-10 witnessed the development of the planning for the fully integrated Adult Services and these plans will be further developed in FY 2010-11.

3. Description of Performance Measure: Percentage of the General Relief population with mental health issues will have a comprehensive multi-service assessment and treatment plan developed and monitored.

<table>
<thead>
<tr>
<th>FY 2006-07</th>
<th>FY 2007-08 Actual</th>
<th>FY 2008-09 Actual</th>
<th>FY 2009-10 Estimate</th>
<th>FY 2010-11 Projected</th>
</tr>
</thead>
<tbody>
<tr>
<td>10%</td>
<td>30%</td>
<td>50%</td>
<td>70%</td>
<td>85%</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: The goal for this performance measure is to design and implement an integrated services model for incapacitated General Relief applicants across Social Services and Mental Health Branches. The branches have worked on the development of co-located, integrated cross-branch team and the strides that have been made in the FY 2008-09 and have been expanded in FY 2009-10. FY 2010-11 plans are to fully link more clients with these comprehensive services.
4. **Description of Performance Measure:** Percentage of the General Relief population with mental health issues will have a comprehensive multi-service assessment and treatment plan developed and monitored.

<table>
<thead>
<tr>
<th></th>
<th>FY 2006-07</th>
<th>FY 2007-08 Actual</th>
<th>FY 2008-09 Actual</th>
<th>FY 2009-10 Estimate</th>
<th>FY 2010-11 Projected</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>5%</td>
<td>10%</td>
<td>30%</td>
<td>60%</td>
<td></td>
</tr>
</tbody>
</table>

Describe why this measure is important and/or what it tells us about the performance of this budget unit: The goal for this performance measure is to design and implement an integrated services model for children and their families to fully be brought into the wide array of services provided by the three branches that make up the DHHS agency. FY 2009-10 was the year that agency management worked on the blue print for the transition from branch collaboration model to full integration model and embarked on preliminary co-location trials. FY 2010-11 will be the year that the agency will accelerate co-location of service delivery as well as integration of service planning, compliance, and performance tracking measures.
Operating Divisions Organization Chart:

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

### FY 2010-11 Recommendations

DHHS is an integrated agency and uses Federal and State funds to provide services across disciplines. In order to provide services across disciplines, various intra-agency fund transfers occur between the three branches of DHHS. During FY 2009-
10 the DHHS Financial Services Unit worked with the Auditor's Office to redefine the intra-agency fund transfers and to update these fund transfers according to the changing requirements from the State Controller's Office. As a result, beginning in FY 2010-11 intra-agency fund transfers are noted under the Expense Transfer series of accounts in related budget units.

The proposed FY 2010-11 budget for DHHS Administration is $2,509,103, an increase of $47,416 from FY 2009-10.

Program Discussion

In August 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. In October 2007 Governor Arnold Schwarzenegger signed Assembly Bill 315 (Berg), making DHHS a permanent agency.

Under the concept “Working Together for a Healthy Community,” DHHS is committed to working in coordination with public and private providers to:

1. Improve administrative functioning;

2. Improve service coordination and access to improve individual, family, and community functioning;

3. Promote, develop, and maintain a continuum of services that encourage prevention and early intervention activities; and

4. Link these activities to more intensive services.

2009-10 Accomplishments

1. Started the DHHS Children and Families Programs Integration to achieve streamlined services base for child and family oriented programs in three branches.

2. Started the expanded subsidized employment and temporary benefits initiatives under the Temporary Assistance for Needy Families - Emergency Contingency Fund (TANF ECF) program through the American Recovery and Reinvestment Act (ARRA) in DHHS, County Departments and the community partner networks.

3. Restructured the Office of Client and Cultural Diversity (OCCD) to define cultural diversity as a priority for DHHS.

4. Increased the activities of the Training, Education, and Supervision Unit (TES) to ensure quality continuing education for DHHS professional staff.

5. Initiated the expansion of the Evidence Based Practices (EBP) within DHHS through the adoption of two new EBP programs.
2010-11 Objectives

1. To continue to develop and implement strategies for increased integration within DHHS to ensure higher service levels to the community through Children and Families Program Integration, and Adult Services Integration.

2. To continue to look for ways to increase cooperation with community partners to reach underserved populations through increased DHHS leadership in community collaboration and networks.

3. To continue to implement initiatives and training programs to increase cultural competency within the agency.

4. To continue to develop fiscal and statistical tools to monitor program outcomes to ensure efficiency and effectiveness.

5. To continue to evaluate and track EBP outcomes to ensure adherence to program quality standards.
### Revenues

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<tr>
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<td>325,657</td>
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<td>36,500</td>
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<td>5,600</td>
<td>5,600</td>
<td>6,600</td>
<td>6,600</td>
<td>1,000</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td><strong>$2,973,061</strong></td>
<td><strong>$3,039,310</strong></td>
<td><strong>$3,146,771</strong></td>
<td><strong>$3,317,232</strong></td>
<td><strong>$3,355,557</strong></td>
<td><strong>$2,002,270</strong></td>
<td><strong>$2,002,270</strong></td>
<td><strong>($1,353,287)</strong></td>
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### Expenditures

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</thead>
<tbody>
<tr>
<td>Salaries &amp; Benefits</td>
<td>$1,326,272</td>
<td>$1,381,497</td>
<td>$1,426,842</td>
<td>$1,344,168</td>
<td>$1,397,347</td>
<td>$1,217,175</td>
<td>$1,217,175</td>
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<tr>
<td>Supplies &amp; Services</td>
<td>1,331,537</td>
<td>1,103,209</td>
<td>1,150,025</td>
<td>1,318,617</td>
<td>1,304,923</td>
<td>1,077,392</td>
<td>1,077,392</td>
<td>(227,531)</td>
</tr>
<tr>
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<td>666,585</td>
<td>654,447</td>
<td>653,287</td>
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<td>682,477</td>
<td>29,190</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
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<td>Expense Transfer</td>
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<td>0</td>
<td>(974,774)</td>
<td>(974,774)</td>
<td>(974,774)</td>
</tr>
<tr>
<td><strong>Total Expenditures</strong></td>
<td><strong>$2,973,061</strong></td>
<td><strong>$3,039,310</strong></td>
<td><strong>$3,146,771</strong></td>
<td><strong>$3,317,232</strong></td>
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<td><strong>$2,002,270</strong></td>
<td><strong>$2,002,270</strong></td>
<td><strong>($1,353,287)</strong></td>
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</tr>
</thead>
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<tr>
<td>Allocated Positions</td>
<td>33.45</td>
<td>33.45</td>
<td>33.45</td>
<td>33.45</td>
<td>33.45</td>
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<tr>
<td>Temporary (FTE)</td>
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<td>0.40</td>
<td>0.40</td>
<td>1.30</td>
<td>1.30</td>
<td>0.90</td>
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<td>33.45</td>
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<td>33.95</td>
<td>33.85</td>
<td>33.85</td>
<td>34.75</td>
<td>34.75</td>
<td>0.90</td>
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</table>
Purpose

The Division of Alcohol and Other Drugs Programs (AODP) is comprised of services with the goal of providing assessment, referral, treatment and care coordination for adults and adolescents with substance abuse treatment issues in Humboldt County.

This budget narrative discusses the operations and funding for three budget units: Alcohol and Other Drugs (425), Substance Abuse and Crime Prevention Act (429), and Healthy Moms (431).

FY 2010-11 Recommendations

The proposed budget for the Alcohol and Other Drugs budget grouping is $2,002,270, a decrease of $1,353,287 from FY 2009-10. A change in accounting practices which reclassified some revenues to cost applied expenditure accounts contributed $974,774 toward the decrease. The expenditure decrease to operating accounts was $378,513. Alcohol and Other Drugs Programs budget levels have not remained comparable to the prior year, as the funding for Substance Abuse and Crime Prevention Act Program (SACPA) or Prop 36, has been abruptly eliminated from this fiscal year’s State budget. Details of that major budget change are detailed below.

Program Discussion

Within the Alcohol & Other Drugs Fund, the three programs – Adult and Adolescent Alcohol & Other Drugs Treatment Program, the Substance Abuse Crime Prevention Act of 2000 (Proposition 36), and the Healthy Moms program – operate 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 (AODP) 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 such as Probation and Social Services to assist clients in addressing impairments that have led to intervention by law enforcement, social service agencies, and public health.

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), Department of Health and Human Services (DHHS) and among contractors, community partners, and
other resources in the health and human resource network 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, outpatient treatment through groups, and 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.

AODP is funded through a variety of sources including: Federal Substance Abuse and Prevention (SAPT) funds, the State General Fund, Stratham and Seymour funds, and Drug Med-0Cal funds. Quarterly reports on the utilization of these funds and an annual cost report are submitted to the State Department of Alcohol and Drug Programs (ADP).

Proposed full staffing will include 19.70 FTE permanent staff and 0.80 FTE extra help positions, with 3.0 FTE to be held vacant. The total proposed budget for FY 2010-11 is $1,777,541. Some revenues have been reclassified to cost applied lines in this fiscal year budget; expenditure comparison to FY 2009-10 is a decrease of $24,256.

1180-429 Substance Abuse and Crime Prevention Act

The Substance Abuse and Crime Prevention Act (SACPA) program funding, which was eliminated in FY 2009-10, provided for assessment, case management, and referral to treatment of individuals found eligible for services under the Crime Prevention Act and referred to the program by the courts or the California Department of Corrections.

SACPA was funded through State-allocated funds from the Substance Abuse Treatment Trust Fund and from drug testing funds under the Substance Abuse Treatment and Testing Accountability Program. The Board of Supervisors designated the Humboldt County Department of Health and Human Services (DHHS) as the lead agency in administering the collaboration with law enforcement to fulfill this voter mandate.

When SACPA funding was eliminated from the State budget for FY 2009-10, staff positions were transferred to other MHB – AOD programs. DHHS, MHB-AOD applied for and was granted a California Emergency Management Agency for Offender Treatment Recovery Act Program grant for 18 months, from October 2009 through March 2011. Additional funding exists through another State allocation for the Offender Treatment Program. Combined, projected funds are less than 50% of the previous years’ funding for this population. The SACPA population will be served to the extent that resources are available.
Projected roll-over funds from SACPA trust have been included in the proposed budget for FY 2010-11. The 2.0 FTE positions allocated to Prop 36 budget unit are being held vacant. Proposed budget is $233,229, a decrease of $371,671 from FY 2009-10.

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.

Proposed full staffing would include 11.75 FTE permanent staff and 0.50 FTE extra help positions, with 1.60 FTE to be held vacant. The total proposed budget for Healthy Moms Program FY 2010-11 is $683,123. Some revenues have been reclassified to cost applied lines in this fiscal year budget; expenditure comparison to FY 2009-10 is an increase of $55,739.

2009-10 Accomplishments

1. Continued to more fully integrate holistic services which promote utilization of DHHS and community partner resources, including employment, housing, and educational opportunities.

2010-11 Objectives

1. To further efforts to integrate AOD and MH services into a holistic behavioral health focus so holistic needs for clients with dual issues are served in a consistent and coordinated manner, to the extent that resources allow.

2. To promote, to the extent that resources allow, through focused educational and supervisory efforts, the identification and appropriate treatment for those with co-occurring mental health and substance use needs.
3. To continue to promote integrated treatment services for Probation-referred clients with AOD and/or MH needs, to the extent that resources are available.
## 1190 - Employment Training Fund

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| Allocated Positions | 25.00 | 25.00 | 26.00 | 29.00 | 29.00 | 29.00 | 29.00 | 0.00 |
| Temporary (FTE) | 2.00 | 0.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | 0.00 |
| Total Staffing | 27.00 | 25.00 | 28.00 | 31.00 | 31.00 | 31.00 | 31.00 | 0.00 |
Purpose

The Employment and Training Division (ETD) is the Humboldt County program operator for Workforce Investment Act (WIA) Adult and Dislocated Worker programs. ETD also is a key partner in the Humboldt County One-Stop Career Center, The Job Market, providing 6 full-time staff to the Center, including the One-Stop Manager. In addition, the Division is actively involved with the WIA Rapid Response program coordinated by the County’s Economic Development Division of Community Development Services. ETD also provides services to CalWORKs Welfare to Work (WtW) participants referred for specific CalWORKs activities and Cal-Learn participants to ensure that they complete high school.

The purpose of ETD’s provision of WIA, CalWORKs and Cal-Learn services 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.

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).

FY 2010-11 Recommendations

During FY 2009-10 the DHHS Financial Services Unit worked with the Auditor's Office to redefine the intra-agency fund transfers and to update these fund transfers according to the changing requirements from the State Controller's Office. Beginning in FY 2010-11 intra-agency fund transfers are noted under the Expense Transfer series of accounts.

Fixed asset purchases for FY 2010-11 include 17.5 computers to replace outdated and worn equipment. Also proposed is $20,000 to replace carpet in the offices at the Employment and Training Division.

Program Discussion

1190-582 ETD Multi-Project

The ETD Multi-Project supports clients in various ways with funding from several grants. These currently include:

- The Disability Navigator Program – which assists disabled persons to access One-Stop Services or any other employment-related services;
- An out of school youth service grant – services that provide out of school youth with assistance to return to school or find employment;
- The New Start Program – a program that assists parolees with re-entry services related to work readiness, job search skills and placement support;
- An American Recovery and Reinvestment Act (ARRA) veteran grant – to assist returning vets with retraining, job search skills and placement support;
- Dislocated Worker Additional Assistance Funds; and
Employment & Training Division

- Staff Support for the Job Market Services Satellite office located at College of the Redwoods.

The total proposed budget for FY 2010-11 is $441,393, a reduction of $217,091, or 33%, from FY 2009-10.

1190-584 Supplemental Funding

The Supplemental Fund provides comprehensive assessment, employment plan development, job search assistance, case management, and supportive services to recently laid-off workers and entry-level workers interested in preparing for an apprenticeship in a skilled trade. Once a participant has obtained employment, follow-up case management services are provided for up to one year. Each year, these funds must be applied for depending on available grants, anticipated layoffs and/or job development in the local area. A grant secured in January 2009 for Retail Sales related layoffs ends in December 2010.

Additionally in 2009, the County applied for and received funds from the Employment Development Department under a California Clean Energy Workforce Training grant targeted at dislocated and under-employed workers in the building trades, to help “green up” their skills and enhance their re-employment opportunities.

The total proposed budget for FY 2010-11 is $640,029, a reduction of $249,971, or 28%, from FY 2009-10.

1190-586 Rapid Response

Rapid Response is a service for both employees and businesses affected by a significant layoff or complete closure of a business. The purpose of Rapid Response is to assist employees with the layoff or closure process and may include services that are intended to avert the layoff or closure. Affected employees are provided information about the services that are available to help them with their re-employment efforts including unemployment insurance benefits, food stamp programs, Medi-Cal, housing resources, how to register for re-employment services, starting a business, and relocation assistance. There is enhanced focus on services through the One Stop System, and Rapid Response monies support system-wide improvements. Rapid Response action and support is taken in partnership with the Community Development Department’s Economic Development Division and the Small Business Development Center.

In FY 2009-10 additional Rapid Response formula dollars were received as a result of ARRA. In addition, an ARRA Rapid Response Additional Assistance grant contributed additional funds. As a result of the ARRA funds received, the total proposed budget for FY 2010-11 is $391,202, an increase of $287,835, or 378%, from FY 2009-10.

1190-589 Adult Programs

Adult Program Services include comprehensive assessment, employment plan development, job search assistance, case management, training referrals/support, and supportive services for adults who have barriers to employment. In addition to
WIA Adult formula funds previously allocated, ARRA Adult formula funds were also granted that were not previously allocated.

The total proposed budget for FY 2010-11 is $500,000, an increase of $11,500, or 2%, from FY 2009-10.

**1190-590 Dislocated Worker Programs**

Dislocated Worker (DW) Programs provide comprehensive assessment, employment plan development, job search assistance, case management, training referrals/support, and supportive services to people who have lost their jobs due to companies closing or downsizing. In addition to WIA DW formula funds previously allocated, ARRA DW formula funds were also granted that were not previously allocated.

The total proposed budget for FY 2010-11 is $550,000, an increase of $144,000, or 35%, from FY 2009-10.

**1190-597 Employment and Training Division Staff**

This is the primary budget unit for the Employment Training Division. It includes all staffing costs associated with provision of WIA Core, Intensive and Training services as provided under the new and fully integrated service model, well as CalWORKs and Cal-Learn vocational counseling services.

Staff provide Core services through the County’s one-stop system 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. Intensive services include vocational case management, comprehensive assessments, vocational counseling, career planning, and development of individual service strategies identifying employment goals, achievement objectives and services that are necessary for participants to achieve their goals. Training Services are delivered through Individual Training Accounts that are set up for participants who have an approved training plan. Participant progress during training and subsequent job placement/retention is monitored by staff. Participant training costs are reflected in budget units corresponding with the participant’s eligibility, i.e., 582, 584, 589 or 590.

CalWORKs-funded services provided by ETD staff include Supervised Job Search activities and job development, placement and case management for On-The-Job Training. These activities help clients meet participation requirements and obtain unsubsidized employment. Cal-Learn-funded case management offered by ETD staff augments assistance provided through the CalWORKs component serving pregnant and parenting participants 19-years of age or younger who have not graduated high school.

The total proposed budget for FY 2010-2011 is $817,425, an increase of $17,425, or 2%, from FY 2009-10.
2009-10 Accomplishments

1. Continued preparation for Implementation of Integrated Service Delivery Model that provides improved services to Core and Intensive services clients at all of The Job Market sites.

2. Utilized ARRA funds to the maximum benefit of Humboldt County.

3. Achieved a 78% enter employment rate for program completers.

4. Secured a 92% retention rate for program clients for at least one year after termination.

5. Achieved average quarterly earnings of $15,900 for program completers upon entering employment.

2010-11 Objectives

1. To continue to refine and enhance Integrated Service model with additional workshops to support clients in work readiness and job search skills, new employment networking groups, and enhanced coaching tools.

2. To enhance services to support parolees with re-entry into the workforce via customized training and supportive service dollars for interview clothes and procuring right to work documents.

3. To train at least 60 adults and 60 youth participants in “green” construction skills, with each participant securing a minimum of 2 new industry-standardized, building-trades green certifications, and 4 weeks of work experience.

4. To achieve a 72% entered employment rate across WIA Core, Intensive and Training Services under new Integrated Service Design model.

5. To secure an 80% retention rate for all WIA program services one year after employment.
### Revenues

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Purpose

The Environmental Health Division’s mission is to prevent illness and injury caused by unsafe or unsanitary conditions through inspections, 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 Agency Enforcement (430), Local Oversight Program (432), and Land Use (486).

Budget Reductions

The proposed FY 2010-11 budget for the Environmental Health budget grouping proposes to hold 4.0 FTE vacant and unfunded in budget unit 406. This is a result of an 18% decrease in realignment revenue. These positions include:

- 3.0 FTE Environmental Health Specialist I/II
- 1.0 FTE Vector Control Officer

Fixed Asset purchases include five laptop computers at a cost of $3,800 per computer to be used out in the field.

Fee revenue for standard sewage and water well permits is anticipated to decline by 25% based on the economic downturn as it is related to the housing market.

Program Discussion

The Environmental Health Division’s services include food facility inspections, vector (rodent/insect) control activities, jail inspections, 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 programs are organized under three operational units each managed by a Supervising Environmental Health Specialist. The program units include Hazardous Materials, Consumer Protection, and Solid Waste/Land Use.

1175-406 Consumer Protection

The Consumer Protection program’s mission is to prevent illness and injury caused by unsafe or unsanitary conditions through inspections of food facilities, pools, and substandard housing, review of food facility and pool construction plans, water systems testing, public education, and enforcement activities.
Environmental Health

The Consumer Protection program consists of several elements including food facility inspections, substandard housing, environmental lead assessments, organized camps, vector control activities, jail inspections, rabies control, household garbage complaint investigations, pools and spas, safe drinking water supply, and monitoring of recreational waters.

The total FY 2010-11 budget for the Consumer Protection Program is $854,968, a decrease of $55,824, or 6%, from the prior year of $910,792.

1175-411 Hazardous Materials Program

Within the Hazardous Materials Unit is the Certified Unified Program Agency (CUPA) for Humboldt County and cities within the County. The purpose of the CUPA is to prevent or mitigate damage to the health and safety of Humboldt County 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 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. Additional funding comes from a grant funded by the California Environmental Protection Agency totaling $111,194 to support the Aboveground Storage Tank program from January 1, 2008 through June 30, 2011.

The total proposed FY 2010-11 budget for Hazardous Materials programs is $759,125, an increase of $43,497, or 6%, from its prior-year level of $715,628.

1175-430 Local Enforcement Agency

Within the Solid Waste/Land Use Unit, the Local Enforcement Agency (LEA) program includes mandated activities to assure that solid waste handling and disposal occur in a manner that protects public health, safety and the environment.

This program collaborates and coordinates with local planning 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 assures 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. The total proposed FY 2010-11 budget for the Local Enforcement Agency program is $519,701, an increase of $3,883, or 1%, from its prior year level of $515,818.

### 1175-432 Local Oversight Program (LOP)

The purpose of the LOP is to provide local oversight for 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 be eligible for cleanup funding. Local guidance and State funding help promote more rapid site closure.

The LOP is funded through an annual contract with the California Water Resources Control Board. The total proposed FY 2010-11 budget for the Local Oversight Program is $340,887, an increase of $33 from the prior-year level of $340,854.

### 1175-486 Land Use Program

The Land Use Program lends support to the Community Development Services Department to ensure that land use permit entitlements granted by the County prevent health hazards and mitigate environmental degradation resulting from improperly planned developments. The Land Use Program protects public health through evaluating the proper placement, design, construction and operation of onsite sewage disposal systems.

The program reviews adopted land use development projects referred by the Community Development Services’ Planning Division, and construction projects referred by the Building Inspection Division in regard to liquid waste and drinking water supply. The program coordinates with the North Coast Regional Water Quality Control Board for adopted projects with large on-site waste water disposal quantities. The program reviews and approves the design and construction of new on-site sewage disposal systems, as well as repairs to failed systems. It inspects the ongoing operation and maintenance of non-standard onsite sewage disposal systems, permits and inspects septic tank vehicles, drinking water well construction and destruction, and responds to sewage spills and complaints from the public.

This program is funded through permit fees and Health Realignment. The total proposed FY 2010-11 budget for the Land Use program is $461,717, a decrease of $74,724, or 14%, from its prior-year level of $536,441.

### 2009-10 Accomplishments

1. Responded to 604 service requests. Service requests include failing septic, household garbage, food establishments, substandard housing, roadside...
Environmental Health

Phillip Crandall, Health & Human Services Director

2010-11 Objectives

1. To train staff and go live on the integrated web-based permit processing database, *On Track*, between DHHS Environmental Health Division, Community Development Services and Public Works Land Use Division.

2. To complete cleanup and closure of eleven (11) Local Oversight Program sites.

3. To meet the new provisions of the California Code of Regulations that all Registered Environmental Health Specialists (REHS) obtain contact training hours for maintenance of their registration. Establish an approved accrediting agency for REHS contact hours with the Department or Division.

2010-11 Budget

Health & Human Services
Purpose

In 1931, with increasing poverty and unemployment brought on by the 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.”

FY 2010-11 Recommendations

During FY 2009-10 the General Relief program expanded its coverage to an increased number of recipients in need of behavioral health services. During the same period, the number of applications for the General Relief program have also increased due to the significant downturn in the economy. Therefore, the proposed budget for FY 2010-11 includes a $200,000 increase in the General Fund contribution.
Program Discussion

The General Relief (GR) program is mandated under Welfare and Institutions Code Section 17000 and provides repayable aid in cash and in-kind for the subsistence and 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 – State Supplemental Payment claims. Other recovery methods include intercepting State tax returns and placing liens on real property.

The County General Fund provides 76% of the funding for the GR program. The remaining 24% of annual operating expenses comes from aid that is recovered through liens.

Approximately 17 full-time employees provide staff support for GR through Social Services Administration budget unit 511. The net County cost for FY 2010-11 is $2,264,719. In November 2006, the County added a Transportation Assistance Program 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 February 2001.

2009-10 Accomplishments

1. Increased behavioral health services to meet the needs of the program participants.

2. Increased public health field nursing services to clients to address appropriate needs.

2010-11 Objectives

1. To continue to provide behavioral health and work experience services to program participants.

2. To continue to provide public health field nursing services to clients.

3. To increase application processing activity for prospective clients.
### 2010-11 Budget

**Health & Human Services**

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<td>$2,866,724</td>
<td>$2,348,518</td>
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| **Expenditures** |                |                |                |                 |                   |                 |                  |                  |
| Salaries & Benefits | $1,158,744 | $541,003 | $570,333 | $739,465 | $724,465 | $642,404 | $642,404 | ($82,061) |
| Supplies & Services | 1,264,649 | 670,031 | 508,404 | 952,890 | 1,029,998 | 385,444 | 385,444 | (644,554) |
| Other Charges | 1,047,341 | 925,919 | 1,039,516 | 1,073,156 | 1,108,261 | 1,320,670 | 1,320,670 | 212,409 |
| Fixed Assets | 11,936 | 5,217 | 0 | 4,000 | 4,000 | 0 | 0 | (4,000) |
| Expense Transfer | (718,331) | (3,921) | 0 | 0 | 0 | 0 | 0 | 0 |
| **Total Expenditures** | $2,764,339 | $2,138,249 | $2,118,253 | $2,769,511 | $2,866,724 | $2,348,518 | $2,348,518 | ($518,206) |

| **Allocated Positions** | 33.90 | 34.40 | 36.40 | 37.40 | 37.40 | 37.40 | 37.40 | 0.00 |
| Temporary (FTE) | 0.40 | 0.53 | 0.40 | 1.00 | 1.00 | 0.00 | 0.00 | (1.00) |
| **Total Staffing** | 34.30 | 34.93 | 36.80 | 38.40 | 38.40 | 37.40 | 37.40 | (1.00) |
Purpose

Health Education is a core function of Public Health and is mandated under Title 17 of the California Administrative Code. Health Education improves the community’s health by providing information, education and outreach services.

This narrative includes discussion on funding and operation of 10 Health Education budget units: Childhood Lead Program (407), Tobacco Education Program (412), Public Health Education (414), Nutrition and Physical Activity (433), Comprehensive AIDS Resources Emergency – Nor-CAP (437), Fiscal Agent (449), Alcohol & Other Drug Prevention (452), MHSA-PEI Suicide Prevention and Stigma/Discrimination Reduction (454), Housing Opportunities for People With AIDS (470), Family Violence Prevention (488).

FY 2010-11 Recommendations

The proposed FY 2010-11 budget for the Health Education budget grouping, will hold 8.1 FTE positions vacant and unfunded in budget unit 414. This is a result of a 28% decrease in realignment, Federal Medi-cal administrative activities (MAA) and grant revenue. These positions include:

- 1.0 FTE Office Assistant I/II
- 1.0 FTE Program Services Coordinator
- 1.0 FTE Public Health Nutritionist Supervisor
- 0.5 FTE Mental Health Clinician

A grant in the amount of $220,044 from the California Office of Traffic Safety for Youth Safe Driving program has ended for FY 2010-11.

Program Discussion

Health Education services include alcohol, tobacco and other drug prevention services; HIV, hepatitis and other communicable disease prevention; chronic disease prevention through nutrition and physical activity education and promotion; family violence and injury prevention and suicide prevention and stigma/discrimination reduction.

1175-407 Childhood Lead Program

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 proposed budget for FY 2010-11 is $54,604, an increase of $365 from the prior year level of $54,239.

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 provide monthly tobacco cessation classes and “tobacco quit kits” to medical providers, implementation of evidenced based curriculum in the schools, and coordinating the collaborative workgroup Tobacco Education Network.

The proposed budget FY 2010-11 is $150,000, a decrease of $40,000, from its prior year level of $190,000. The State Tobacco allocation is $150,000 and has remained flat for over ten years. However, in FY 2009-10 there was $40,000 in “roll over” funds from FY 2008-09 to supplement the FY 2009-10 budget.

1175-414 Health Education

The Health Education Division works to change the community’s knowledge, attitudes and behaviors in order to prevent disease and promote health. This program provides the administrative oversight for all Health Education 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 young driver safety, proper use of child safety seats, impaired driving prevention, 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 coordination with local needle exchange programs and registration of local pharmacies into the Disease Prevention Demonstration Project (SB1159) to sell syringes over the counter.

The proposed FY 2010-11 budget is $835,265, a decrease of $327,500, or 28%, from the prior year level of $1,162,765.

1175-433 Nutrition and Physical Activity

This program promotes improved nutrition and physical activity behaviors through education, advocacy, policy development, and environmental changes. The program provides leadership for community collaboration around and integration of nutrition, physical activity, and the built environment.
Activities are community based with a special focus on youth and the low-income population. Network for a Healthy California funds local nutrition education at retail markets serving low income families.

The California Endowment’s Safe Sustainable Transportation Grant supports community collaborative efforts to reduce obesity and increase pedestrian safety. The program identifies barriers that limit people’s use of active modes of transportation and works to reduce those barriers.

This budget now also reflects Project Lean, which previously resided in budget unit 436. This program was funded through a Federal Block Grant which has been discontinued.

The proposed FY 2010-11 budget for Nutrition and Physical Activity is $229,010, a decrease of $56,790, or 20%, from prior year level of $285,800.

**1175-437   CARE - 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 direct (medical), supportive services, case management, health education, risk reduction education, and psychosocial services. North Coast AIDS Project staff provides the health education, case management, and HIV transmission risk reduction to people living with HIV and their HIV negative partners.

Previously, the CARE – NorCAP budget resided within budget units 402, 442, 447, 448, and 470. Due to State reorganization of HIV/AIDS programs this budget unit has been dedicated to support the North Coast AIDS Project.

The proposed FY 2010-11 is $160,544, an increase of $21,228, or 15%, from FY 2009-10.

**1175-449   Fiscal Agent**

This budget provides the financial tools needed to monitor and facilitate the HIV- CARE/HOPWA programs. The Fiscal Agent acts as the liaison between the 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.

Previously, the Fiscal Agent budget resided within budget unit 470. Due to State reorganization of HIV/AIDS programs this budget unit has been dedicated to support the Fiscal Agent responsibly.

The proposed FY 2010-11 budget is $83,935, an increase of $35,779, or 74%, from FY 2009-10.
Health Education

1175-452 Alcohol and Other Drug Prevention

The Alcohol and Other Drug (AOD) Prevention Programs 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.

Through 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 proposed FY 2010-11 budget is $185,489, a decrease of $1,984 from prior year level of $187,473.

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.

FY 2010-11 is this program’s second year. The proposed budget is $499,565, an increase of $113,380, or 29%, from the prior year level of $386,185. Funding is provided through the Mental Health Services Act.

1175-470 HOPWA – Housing Opportunities for People with AIDS Act

The HOPWA program is responsible for assessing the 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 proposed FY 2010-11 budget for the HOPWA program is $17,917.

**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 promotes, supports, and improves early childhood development from birth through five years of age by training on “How Can I Help? Keeping Children Safe from Abuse and Violence A Training Resource Manual” to childcare providers and other community partners as well as continuing to promote family violence prevention activities throughout the County.

The proposed FY 2010-11 budget for the Family Violence Prevention Program remains at the same level as the prior year of $132,189.

**2009-10 Accomplishments**

1. Increased seat belt use rate at local high schools by 5 percentage points from 89.9% to 95.0% during the 2009-10 academic year.

2. Provided Suicide Prevention training QPR (Question Persuade Refer) to over 200 community gatekeepers and service providers.

3. Provided ongoing leadership for Binational Health Week including the 3rd annual Festejando Nuestra Salud health fair that served approximately 600 Spanish speakers.

4. Maintained and utilized the Silent Witness project in more than 6 community events to promote awareness related to Family Violence prevention.

**2010-11 Objectives**

1. To reduce the overall collision rate for the 16-20 year old population and reduce the percentage of Had Been Drinking (HBD) drivers under age 21 involved in fatal and injury collisions.

2. To reduce tobacco litter in a minimum of 2 downtown areas, youth sports areas or parks in Humboldt County. Assist at least 2 jurisdictions in Humboldt County to adopt policies that eliminate smoking in indoor and outdoor multi-unit housing common areas, building entrances, outdoor dining areas and/or parks.

3. To complete implementation and evaluation of Pilot project encouraging County Employees to use active modes of transportation.
## Inmate/Indigent Medical Care (1100 490)

Phillip Crandall, Health & Human Services Director

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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.

FY 2010-11 Recommendations

The proposed budget for FY 2010-11 provides for no increase in the expenses. Contract negotiations were undertaken to hold California Forensic Medical Group’s (CFMG) contract reimbursement rate flat for FY 2010-11. The County’s current contract with CFMG, set to expire June 30, 2010, has a clause for an annual increase based upon the Western Urban Medical Consumer Price Index.

On April 13, 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 will be used to offset the costs of inmate/indigent health care.

There is an anticipated loss of a state funding program that covers the cost of HIV medications for inmates in correctional facilities. The County proposes to assist CFMG in providing these medications through the Public Health Pharmacy.

The proposed budget for FY 2010-11 includes an increase of $9,750, due to a 15% reduction in the contribution to tobacco education, as well as, an additional $500 due to royalties received from the discount prescription card program.

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.

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 $1.3 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” (SCF). This increment is dedicated to tobacco education per Board action in 2008.
## 1175 - Public Health Fund

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*Maternal, Child & Adolescent Health*

Phillip Crandall, Health & Human Services Director

2010-11 Budget

Health & Human Services

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Maternal, Child & Adolescent Health

Phillip Crandall, Health & Human Services Director

Purpose

Maternal, Child, and Adolescent Health Division (MCAH) programs are prevention and early intervention-based services that are prioritized according to documented population needs. Target populations include women of child-bearing age, fathers, adolescents, children and infants. MCAH programs address access to care issues for the target groups; support for pregnant women and their families; perinatal and child 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. Statutory authority comes from Title 17 of the California Health and Safety Code.

This narrative includes discussion on the funding and operation of seven Maternal Child and Adolescent Health budget units: Alternative Response Team (408), Adolescent Family Life Program (404), Women, Infants, and Children (415), Child Health & Disability Prevention (418), Maternal Child & Adolescent Health (420), Maternal Health Personnel Program (460), and California Children’s Services (493).

FY 2010-11 Recommendations

The proposed FY 2010-11 budget for the Maternal, Child and Adolescent Health grouping, proposes to hold 7.15 FTE vacant and unfunded in Budget unit 460 for FY 2010-11 as a result of a decrease in realignment revenue:

- 0.60 FTE Office Assistant I/II
- 1.0 FTE Senior Public Health Nurse
- 1.75 FTE Physical Therapist
- 1.0 FTE Health Program Coordinator
- 2.0 FTE Health Client Service Worker
- 0.80 FTE Public Health Nutritionist

Budget unit 404 Adolescent Family Life is proposed to be eliminated in FY 2010-11 as no State General Fund dollars will be available for the program.

Program Discussion

Services in this budget grouping include general, perinatal, 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 functions.

1175-404 Adolescent Family Life Program

During FY 2009-10 the Adolescent Family Life Program (AFLP) was provided by a contract with the California Department of Public Health, Maternal Child and Adolescent Health Program. The goals of the program were to insure healthy pregnancy outcomes to teens, promote positive parenting, reduce the incidence of repeat pregnancy, promote completion of education goals, and reduce the incidence of child abuse/ neglect. Every teen that had given birth in the
Maternal, Child & Adolescent Health

Phillip Crandall, Health & Human Services Director

County received individual one-to-one outreach with a minimal service of consultation, resources and referral if the client is not interested in committing to AFLP participation. Initially AFLP case management could be provided to the age of 21 years if engaged before the age of 18.

As of the beginning of the FY 2009-10 - no State General Fund dollars will be available for the program. Also the State has changed the age group eligibility criteria leaving most of the AFLP clients (those ages 18 and 19) outside the new guidelines. Public Health Branch plans to continue similar services to those clients under various other existing programs and transition the clients within the first three months of the FY 2010-11. Therefore, this budget has been eliminated.

1175-408 Alternative Response Team (ART)

ART provides 6 to 12 months of intensive home based services to families at risk of child maltreatment. These families are referred to ART by Child Welfare Services (CWS). Services are provided by a team of Public Health Nurses, Community Health Outreach Workers and a Mental Health Clinician. ART is a cornerstone of CWS Differential Response.

The proposed FY 2010-11 budgets for the ART program is $972,278, a 7% decrease from its prior year level of $1,049,703.

1175-415 Women, Infants and Children (WIC)

During FY 2009-10 the main WIC administrative office and clinic was relocated to 317 2nd St. in Eureka. This move provided more physical space including a conference/classroom and staff offices. An added benefit is that WIC is now co-located with Public Health Field nursing staff, Nurse Family Partnership program staff and the Healthy Kids Humboldt outreach staff. The site is also more accessible to public transit lines.

The WIC Program received additional funds for caseload growth in FY 2009-10 to meet the increased demand for services during the past year and to permit caseload growth. One time Federal Stimulus funding (ARRA) was awarded to Humboldt County Health and Human Services WIC in FY 2009-10 to encourage increased collaboration between WIC and other Public Health Branch programs. As a result, Child Passenger Safety Program and Well Child Dental Visit now have regularly scheduled activities co-located at WIC clinics. A Community Health Outreach Worker (CHOW) position was established to provide focused outreach, recruitment and enrollment to clients throughout the service area.

The proposed FY 2010-11 budget for the WIC program is $1,487,344, an increase of 60% from FY 2009-10. This includes funds received through the Social Services Branch for collaborative support staff and associated costs for CalWorks clients.
1175-418  Child Health & Disability Prevention

The Child Health and Disability Prevention (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, provides referrals, document and evaluate the health states of children in foster care.

The proposed FY 2010-11 budget for the CHDP program is $849,624, an increase of 2% from prior fiscal year. The budget proposal includes funding from Social Services Branch – Child Welfare Services.

1175-420  Maternal Child & Adolescent Health (MCAH)

The MCAH program falls under the umbrella of the MCAH Division. Program staff addresses perinatal, infant, child and adolescent health and safety issues through collaborative work with community partners and direct service. Areas of focus include: access to and early entry into prenatal care, health disparity, preconception care, perinatal substance use, injury prevention, perinatal and child oral health, breastfeeding promotion, and perinatal mood disorders.

The proposed FY 2010-11 budget for the MCAH program is $480,460 an increase of $2,694, or 1%, from its prior year level of $477,766.

2009-10 Accomplishments

1. Obtained grant funding and Medi-Cal reimbursement to sustain and expand the Children’s Oral Health Program.

2. Increased administrative efficiencies, and decreased local costs while maintaining the safety net of medical services for children with handicapping conditions and chronic disease.

1175-460  MCAH Personnel Program

This budget serves as a Personnel budget only. It is budgeted for 32.75 full time employees for FY 2010-11, status quo from the prior Fiscal Year. Salaries are reimbursed from other budget units to this budget unit; therefore the net cost is zero.

1175-493  California Children’s Services

California Children’s Services (CCS) local administration provides eligibility determination and care coordination for over 750 children. 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 150 children are provided at the CCS Medical Therapy Unit located at Humboldt County Office of Education (HCOE) Glen Paul School.

The total proposed FY 2010-11 budget for the CCS program is $1,686,272, an increase of $41,201, or 3%, from its prior year level of $1,645,071.
<table>
<thead>
<tr>
<th>Maternal, Child &amp; Adolescent Health</th>
<th>Phillip Crandall, Health &amp; Human Services Director</th>
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<tr>
<td>3. Implemented the Hoopa School Readiness Initiative</td>
<td>2. To continue participation in the integration of services with Children and Families Services.</td>
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<td>providing Public Health Nursing oversight to support school readiness, health and developmental screening for children 0-5 years in collaboration with Eastern Humboldt community partners.</td>
<td>3. To explore expansion of Well Child Dental Clinics to isolated/outlaying communities by involvement and training of community-based organizations.</td>
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<td>4. Completed the MCAH 5-Year Community and Capacity Needs Assessment; meeting the state and federal requirements to identify priority needs for MCAH program direction</td>
<td>4. To research and evaluate “Supportive Father Involvement” projects.</td>
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### 2010-11 Objectives

1. To improve transition to adult services for youth with chronic disabling health care conditions who exit the CCS system at age 21.
## Mental Health Division

### Phillip Crandall, Health & Human Services Director

### 2010-11 Budget

#### Health & Human Services

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### 1170 - Mental Health Fund

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#### Allocated Positions

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Purpose

The Department of Health and Human Services, Mental Health Branch, is responsible for overseeing and directing mental health treatment and treatment support services for Humboldt County. The Mental Health Branch provides and coordinates an array of clinical operations for Humboldt County Specialty Mental Health Medi-Cal clients; oversees crisis, acute and disaster related mental health services to all Humboldt County residents regardless of payer status; administers managed care contracts for mental health services with private for-profit and non-profit agencies; and provides a comprehensive system of care for the mentally ill, to the extent resources are available.

This narrative includes discussion on funding and operation of nine Mental Health Division budget units: the Mental Health Administration Unit (budget unit 424), Mental Health Jail Programs (budget unit 427), HumWORKs (budget unit 475), Mental Health Services Act (budget unit 477), Sempervirens/Psychiatric Emergency Services (budget unit 495), Adult Outpatient Programs (budget unit 496), Children, Youth, and Family Services (budget unit 497), Medication Support Services (budget unit 498), and Mental Health Children’s Center (budget unit 507).

FY 2010-11 Recommendations

The proposed budget for the Mental Health budget grouping is $30,578,626, a decrease of $2,894,616 from FY 2009-10. A change in accounting practices which reclassified some revenues to cost applied expenditure accounts contributed $5,153,647 toward the decrease. The operating expenditure accounts actually increased by $2,259,031.

Mental Health Managed Care allocation was reduced 38%, or $314,519, in FY 2009-10 and is anticipated to be funded at this reduced level again in FY 2010-11. The Federal government’s American Recovery and Reinvestment Act of 2009 will contribute an estimated 23% in increased Federal Financial Participation for cost reimbursement for Specialty Mental Health services to Medi-Cal beneficiaries through December 30, 2010.

Mental Health Services Act (MHSA) funds for an Information Technology project have been approved by the State Department of Mental Health and the Innovation program proposal has been submitted for approval. These one-time funds have been included in this proposed budget; the increase from the prior year for Mental Health Services Act revenues is 50% or $2,021,143.

The Governor’s May Revision proposal redirects realignment funds from county mental health to social services programs. The impacts of this proposal would be devastating to the Mental Health Division. The proposed budget does not include provisions for the realignment shift. When the State budget is finalized, staff will make budget and program revisions as required.
**Program Discussion**

**1170-424 Mental Health Administration**

The Mental Health Branch Administration Unit is responsible for overseeing and directing mental health treatment and treatment support services for Humboldt County. These activities include:

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

Revenues and staffing costs for all the Mental Health programs listed in this narrative are budgeted in the Administration Unit. The Mental Health Branch is primarily funded by Mental Health Realignment Funds, Mental Health Services Act funds, Medi-Cal reimbursement and private insurance. The County General Fund contributes $325,952, or 1% of the total budget. Proposed full staffing includes 323.70 FTE permanent staff and 17.90 FTE extra help positions, with 38.80 FTE to be held vacant.

The proposed budget for the Administration Unit for FY 2010-11 is $30,578,626. All other budget units in the Mental Health budget grouping are cost applied to budget unit 424. In addition, some revenues have been reclassified to cost applied lines in this fiscal year budget; expenditure comparison to FY 2009-10 is an increase of $2,259,031, primarily due to general salary and benefit adjustments and MHSA one-time funding noted above.

**1170-427 Mental Health Jail Programs**

Mental health clinicians provide a variety of services for County Jail inmates. The following services are provided in addition to a 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
- Court ordered evaluation (4011.6 evaluations)
- Psychiatric evaluation and medication support treatment
- Psychiatric nursing services for medication and psychiatric follow up
- Work recommendations: Evaluations to determine inmates’ ability/appropriateness for work assignments
- Limited case management services
- Coordination of 5150 transfers to SV /PES
- Suicide prevention and intervention assessments
Mental Health Division

- 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

These programs are financed from designated State mental health realignment funds, and the County General Fund.

The total proposed budget for Mental Health Jail Programs for FY 2010-11 is $170,666, a decrease of $45,937, or 21%, from prior fiscal year. This budget decrease is due to program strategies to reduce pharmaceutical expenditures.

1170-475 Mental Health - HumWORKS

Behavioral Health Services/HumWORKS (BHS) is a multi-disciplinary program providing assessment, consultation and treatment services to CalWORK recipients experiencing mental health, substance abuse and/or domestic violence issues in their lives. 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 Employment & Training staff.

The total proposed budget for HumWORKS for FY 2010-11 is $105,624, a decrease of $30,781, or-23% from FY 2009-10, primarily due to reductions in insurance and DHHS Administration.

1170-477 Mental Health Services Act (MHSA)

A number of programs are provided under the County’s MHSA plan. These include:

Rural Outreach Services Enterprise (ROSE) provides mobile access to culturally appropriate services with efforts focused on reducing cultural and ethnic barriers to access that tend to exist in more traditional mental health settings. ROSE links with and provides support to existing community organizations such as Family and Community Resource Centers, community clinics, and Tribal Organizations in order to reach the unserved and underserved populations in rural areas of the County.

The Hope Center (formerly the Wellness Center) provides a safe, welcoming environment based on recovery self-help principles and the resources necessary for people with a mental health diagnosis who are underserved and their families to be empowered in their efforts to be self sufficient. The Hope Center is client run and provides recovery services including peer-to-peer education and support, system navigation, and linkage to services. Outreach efforts are made by Hope Center peer staff and volunteers to underserved people with serious mental health needs.

Comprehensive Community Treatment (CCT) provides, within DHHS, integrated and holistic intensive community services and support (e.g. housing, medical, educational, social, vocational, rehabilitative, or other needed community services) as defined by the partner to achieve recovery. Personal Services Coordinators (PSC’s), including peer clients and peer
family members whenever possible, provide services to partners in the community.

**Outpatient Medication Services Expansion** provides medication support to people with a serious mental illness residing in remote rural areas utilizing video conferencing equipment. It is a service strategy that will enhance existing collaborative efforts with primary health care providers.

**Alternative Response Team (ART) Expansion** is a coordinated approach, integrating State initiatives including MHSA and a Child Welfare Improvement Activity. Initiated in 1996, the ART team is a collaboration between Child Welfare Services (CWS) and Public Health to engage families by strengthening and preserving their capacity to protect and nurture their children. ART provides prevention services in the home for at-risk families with children 0-8 years of age that were referred to CWS but did not meet the criteria for CWS intervention. In September 2006, through MHSA funding, a full time Mental Health Clinician position was added to the interdisciplinary team resulting in a more integrated and holistic service experience to families. Using the evidence based practice, Parent Child Interaction Therapy (PCIT), mental health staff provides screening and assessment services, consultation, parent education, and wellness/recovery/resiliency focused clinical services.

**Older Adults and Dependent Adults Program** provides both clinic-based and in-home services to disabled adults, at risk adults and older adults. The enhanced adult services team expands an existing collaboration between Social Services, Adult Protective Services, In Home Support Services, Public Health Nursing, and a Mental Health Clinician to provide assessment and treatment planning to older and dependent adults with a serious mental illness who are at risk of abuse or neglect or who are in need of support services to remain in their home.

**Crisis Intervention Services (CIS)** staff responds to intervene and prevent hospitalizations and incarcerations. CIS provides crisis support during critical incidents or potential critical incidents involving persons who may have a mental illness or co-occurring disorder. Additional mental health staff will be added to current programs for the purpose of responding to local hospital emergency rooms to assess, engage, and refer clients to appropriate services and supports; and to develop more direct outreach, engagement, and access strategies. Crisis Intervention Team (CIT) is a national model where partnerships between law enforcement, mental health systems, clients of mental health services, and their family members can help in efforts to assist people who are experiencing a mental health crisis and to help them gain access to the treatment system where they are best served.

**The Transition Age Youth (TAY) Partnership Program** serves young adult populations at risk of or experiencing onset of serious psychiatric illness to prevent mental illnesses from becoming severe and disabling. The education component will utilize a universal approach. A newly formed local initiative, Humboldt County Transition Age Youth Collaboration (HCTAYC), comprised of local and members of statewide youth organizations (many focused on youth exiting from the foster care system) has begun to work closely with DHHS to create more comprehensive programs geared toward meeting
Mental Health Division

the housing, educational, medical, psychiatric, and vocational needs of this population.

Integrated Program & Planning Support Structures is a further integration and expansion of a newly developed division at DHHS. To facilitate progress toward MHSA goals, Integrated Program & Planning Support Structures includes the following infrastructure enhancements:

- The Office of Client & Cultural Diversity (OCCD) provides cross-branch leadership to DHHS in the areas of policy and program development related to culturally competent client and family driven services and the reduction of racial, ethnic, and geographic disparities.

- The Research and Evaluation (R&E) Unit includes a full spectrum of evaluation services from data management, data verification, statistical analysis and interpretation, to written progress reports; increasing DHHS capacity for outcomes based program planning and improvement. This data offers a measure of how a program or service affects the community over time.

- The Training, Education and Supervision Unit (TES) continues to build system capacity to develop, coordinate, and integrate resources to provide education and training opportunities to staff, clients, parents, families, community partners, and providers. Clients are indirectly served by these structures. Benefits to clients include:
  - Service provision by staff who have received core, ongoing, and continuing training and evidence based practice training through TES.
  - Use of evaluative services provided through R&E to guide service delivery and evidence based practice targeted toward the identified target populations.
  - Increased access to services and reduced barriers to services as targeted by the OCCD.

The total proposed budget for FY 2010-11 is $3,954,077, an increase of $2,108,691, or 114%, from FY 2009-10.

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.
- Crisis intervention services in the Jail and Juvenile Hall.
An enhanced outpatient team to identify and respond to those clients in community settings who are at risk of requiring psychiatric intervention.

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; 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 a host of 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 decompensation of their condition. If the patient’s condition cannot be stabilized while in PES; the patient is admitted to Sempervirens or the nearest available inpatient hospital specializing in age-appropriate care.

Sempervirens is a 16 bed locked psychiatric hospital that provides a safe environment for those people who meet the criteria outlined in §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 recreational activities to assist the individual in learning new ways to cope with his/her illness and assist with his/her 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.

The total proposed budget for Sempervirens / Psychiatric Emergency Services for FY 2010-11 is $947,759, a decrease of $188,306, or 16% from FY 2009-10. This decrease is due to reduction in appropriation for Locum Tenens expenditure, as Mental Health has the intention to contract with permanent staff Physician/Psychiatrists.

1170-496 Adult Behavioral Health and Recovery Outpatient Programs

Through County operated programs and contracts with community providers, Adult Behavioral Health and Recovery Services (ABxHRS) 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; 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 & education; and client & 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

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 total proposed budget for Adult Outpatient Programs for FY 2010-11 is $1,803,015, an increase of $3,898.

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

CYFS provides a full array of services to seriously emotionally disturbed children and Medi-Cal beneficiaries who meet specialty mental health service criteria. Services are provided through County operated programs and through community-based contract providers. The delivery of services is provided through a coordinated and DHHS integrated System of Care model. Services include assessment; individual, group and family therapy; case management; medication support; therapeutic behavioral services; and crisis intervention. Services are provided at the main clinic site in Eureka and at a variety of outreach sites in coordination with the other DHHS branches, contract providers and community partners.

Some County operated program outreach sites include Child Welfare Services, Public Health, Juvenile Hall, the Northern California Regional Facility, and the Multiple Assistance Center. Some community-based contract providers include Changing Tides Family Services, Remi Vista, Redwood Community Action Agency, and Humboldt Family Service Center. A targeted DHHS integrated focus on assessing and meeting needs for foster care youth began last year, in order to impact the poor outcomes seen nationally for this extremely high-risk population.

A second major initiative began which united several local and statewide transition age youth organizations, HCTAYC, so Humboldt County develops greater capacity for programs integrating health, mental health, housing, vocational and educational components.

The third major initiative is the implementation of Phase-1 to integrate all services for children and families under one umbrella among DHHS: Mental Health, Social Services and Public Health.

The total proposed budget for Children Youth and Family Services for FY 2010-11 is $425,888, a decrease of $61,992, or
13%, from FY 2009-10, primarily due to reductions in insurance and DHHS Administration.

1170-498 Mental Health - Medication Support Services

The Mental Health Outpatient Medication Clinics, located at both Wood Street and CYFS, provide ongoing psychiatric medication support services through a team approach. Each team consists of a psychiatrist and a psychiatric registered nurse, and in many cases, a case manager and/or a clinician may also be assigned. Those individuals receiving outpatient medication support services are assigned to a team. The team determines which client(s) are in most need of seeing the psychiatrist in order to prevent the individual from needing a higher level of service, such as Psychiatric Emergency Services. Thus, clients are triaged by the team according to their individual needs. This team approach has allowed the department to continue to provide medication support services to over 2,000 unique individuals annually by having the registered nurse assist those clients who are more stable and the team psychiatrist treating the more complicated cases.

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. Additionally, the Outpatient Medication Clinic has developed a linkage nurse/case manager with each private provider site. The linkage nurse is responsible for assisting the PCP’s who may need a consult from a psychiatrist for a client who is having difficulties beyond the PCP’s capability. By doing so, 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.

Since the institution of Medicare Part D, Medication Support Services has incurred copayments for those adult and older adults unable to pay due to financial constraints and who are at risk for de-stabilization and hospitalization. In addition, Medication Support Services incurs medication costs for those at risk patients who have reached the Medicare part D “doughnut hole.” 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 the patient may have taken for years, and often times may cause a delay in obtaining medications for patients at risk. These costs have been paid by the Medication Support Services until TAR’s and PA are authorized by Medi-Cal.

In addition, Medication Support Services incurs costs for medications to provide continuity of care for Jail clients released from Humboldt County Correctional Facility, with a limit of a two week supply, until these patients are able to reinstate their Medi-Cal benefits.

The total proposed budget for FY 2010-11 for Medication Support Services is $228,956, a decrease of $21,670, or 8%, from FY 2009-10.
The Department of Health and Human Services Children’s Center provides temporary shelter and treatment services to Humboldt County children, age six or older, for whom no other safe and appropriate placement is available. The residential care components of the program are administered under Title 22, Division 6 of the Community Care Licensing regulations of the California Department of Social Services. Mental Health services, including assessment; individual, group and family therapy; case management; rehabilitation services; and medication support services are certified by the State Department of Mental Health, and are provided and administered through the Mental Health Branch’s Children, Youth and Family Services Division.

The children placed at the Children’s Center have multiple and complex needs, and moderate to severe emotional and behavioral problems that require the commitment and flexibility of an integrated and coordinated system of care which includes Public Health nurses, Child Welfare Services social workers, and appropriate staff and resources from Probation, education, and other community-based agencies. Children placed at the Center may be dependents of the court, youth in protective custody, or may be voluntarily placed by their families due to abuse, neglect and/or abandonment, or maybe those whose emotional and behavioral status interferes with stable placement. Within a treatment program milieu, they are provided with individualized therapeutic services that are designed to reduce the need for hospitalization or other psychiatric emergency services, as well as maintain and sustain stable relationships and community living arrangements.

Mental Health staff assesses the children upon admission and, in coordination with an interdisciplinary and multi-functional integrated team, as well as the children themselves, develops an individualized treatment plan with a set of goals that will prepare them for a return to or transition forward to parents or foster parents. The program focus is on Assessing and addressing the issues that have interfered with the child’s placement success. Staff takes solution-focused approaches with an emphasis on maximizing the strengths and abilities that the children and their families already possess, and, on assisting them in acquiring skills and resources they will need to be more successful in their next placement.

The primary operating budget for the Children’s Center is shown in the Social Services budget (budget unit 509). The Mental Health Children’s Center budget unit (budget unit 507) covers the operating expense costs, insurance, and overhead costs for the Mental Health staff. The total proposed budget for the Children’s Center for FY 2010-11 is $46,949, a decrease of $38,639 from FY 2009-10, primarily due to reductions in 2-110 insurance and DHHS Administration.

2009-10 Accomplishments

1. Continued to promote and develop additional holistic and integrated, co-located programs for youth, TAY, adults and older adults.

2. Worked, in coordination with DHHS and community stakeholders, to develop alternatives for housing the homeless in our community.
3. Supported Phase 1 of the integration of all DHHS programs and services designed to meet the complex needs of children and families in a holistic manner, beginning with a commitment to assess and provide needed services for all youth in the foster care system.

4. Restructured the Adult Behavioral Health and Recovery Services to better coordinate achievement of Recovery and clinical goals for service provision and outcomes.

5. Developed strategies for access, engagement and treatment in behavioral health care models to improve timeliness of services and refine treatment protocols.

2010-11 Objectives

1. To support and promote implementation of Phase-2 Children & Families Services integration of all programs and services for these populations.

2. To complete a coordinated system for a continuum of placement options for seriously mentally ill adults who otherwise would be maintained at locked and costly institutions.

3. To continue to support and promote programs and interventions aimed at increasing positive functional and life skill outcomes for TAY and foster TAY, including the provision of evidence-based practices for those experiencing acute behavioral illnesses, as well as promoting opportunities to participate in educational and vocational community-based offerings.

4. To increase and enhance options for housing, including independent, transitional and supportive living environments.

5. To continue to explore all grant opportunities which would expand services for DHHS and MHB target populations.
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| **Expenditures**         |                |                |                |                  |                  |                |                  |                  |
| Salaries & Benefits      | $2,709,836     | $2,269,219     | $2,214,371     | $2,226,376       | $2,226,376       | $2,204,039     | $2,204,039      | ($22,337)       |
| Supplies & Services      | 1,431,970      | 1,614,892      | 1,494,046      | 1,673,647        | 1,645,134        | 1,533,801      | 1,533,801       | (111,333)       |
| Other Charges            | 1,471,606      | 1,450,776      | 1,827,271      | 2,279,195        | 2,929,607        | 2,324,200      | 2,314,450       | (615,157)       |
| Fixed Assets             | 165,210        | 100,198        | 74,600         | 12,000           | 17,100           | 12,000         | 12,000          | (5,100)         |
| Expense Transfer         | (622,633)      | (3,033)        | (47,314)       | 0                | 0                | 0              | 0               | 0               |
| **Total Expenditures**   | $5,155,989     | $5,432,052     | $5,562,974     | $6,191,218       | $6,818,217       | $6,074,040     | $6,064,290      | ($753,927)      |

Allocated Positions 51.30 51.30 52.30 52.30 52.30 52.30 52.30 0.00
Temporary (FTE) 4.70 4.90 4.45 5.45 3.00 3.00 3.00 0.00
Total Staffing 56.00 56.20 56.75 57.75 55.30 55.30 55.30 0.00
Public Health Administration

Purpose

Public Health Administration has overall responsibility for administration of all programs carried out by the Public Health Branch of the Department of Health and Human Services.

This narrative includes discussion on funding and operation of eight 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), Outside Agency Support (434), Public Health Laboratory (435), Local Public Health Preparedness and Response (455), and Public Health Pharmacy (465).

FY 2010-11 Recommendations

The proposed FY 2010-11 budget for the Public Health Administration budget grouping, proposes to hold 6.0 FTE positions vacant and unfunded in budget units 400 and 435. These positions include:

1.0 FTE  Public Health Lab Director
2.0 FTE  Laboratory Assistant
1.0 FTE  Office Assistant I/II
1.0 FTE  Fiscal Assistant I/II
1.0 FTE  Administrative Analyst I/II

One-time revenues in the amount of $611,808 were received in FY 2009-10 for H1N1 related activities. These funds are not budgeted for in FY 2010-11.

Also proposed is a 15% reduction, or $9,750, in the tobacco settlement funds, known as Strategic Contribution, to tobacco education.

Fixed Asset purchases include $12,000 for ongoing computer replacements.

Program Discussion

1175-400  Public Health Administration

Public Health Administration has overall responsibility for administration of all programs carried out by the Public Health Branch. The Public Health Branch Director and the Public Health Officer are in this budget. The Public Health Branch 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 all 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.
Public Health Administration

The proposed FY 2010-11 budget for Public Health Administration is $2,846,237, a decrease of $27,441 (1%) from its prior year level of $2,873,678.

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. The LGA draws down Federal Financial Participation revenues for DHHS, and other participating organizations (such as Adult Probation and Public Guardian) to decrease local costs for eligible services and assist in maintaining service levels. Services include case management, referrals, and program planning for Medi-Cal services and outreach.

The proposed FY 2010-11 budget for MAA/TCM program is $826,226, a decrease of $73,734, or 8%, from its prior year level of $900,000.

1175-410 Emergency Medical Services

The Emergency Medical Services Program administers the Emergency Medical Services Fund for the County. This fund reimburses physicians, surgeons and hospitals for patients who do not make payment for emergency medical services and 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 proposed FY 2010-11 budget for the Emergency Medical Services Program is the same as in the previous fiscal year, $480,000.

1175-413 Children’s Health

The Children’s Health Initiative (CHI) began in August 2005 with a coalition of local agencies whose mission was to ensure that all Humboldt County children from birth through age 18 have health insurance and are able to access medical, dental and mental health care. The CHI assures coverage through Medi-Cal, Healthy Families, and a third insurance product, Cal Kids, which covers children who are not eligible for publicly funded programs.

The CHI Coalition 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 coalition represent agencies that play significant roles in the development, administration, outreach, enrollment, retention or funding of this program. Members of the steering committee...
Public Health Administration

include: Humboldt County Board of Supervisors, DHHS, First 5 Humboldt, St. Joseph Health System, Humboldt County Office of Education, Humboldt Area Foundation, the Community Health Alliance of Humboldt-Del Norte and the McLean Foundation.

All three branches and DHHS Administration are involved in CHI and other children’s health coverage and access issues. Public Health staff have been instrumental in outreach, enrollment, utilization and retention of children in health insurance programs, and the management of the One-e-App program, which is a web-based application program that simplifies the health insurance enrollment process. One-e-App now also screens for WIC and Food Stamp eligibility.

The proposed FY 2010-11 budget for the Children’s Health program is $245,295, an increase of $8,342 (4%) from its prior year level of $236,739.

1175-434 Outside Agency Support

The Outside Agency Support budget provides assistance to non-county agencies, including Area Agency on Aging, Senior Resource Center, North Coast Emergency Medical Services and the Hazardous Materials Response Team.

Area Agency on Aging

The Area 1 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.

The mission, as defined by the Older Americans Act, is to develop a comprehensive and coordinated delivery system of support services, nutrition services, and senior centers for older persons. The system is intended to:

- Assist individuals to attain maximum independence in a home environment by provision of appropriate social services.
- Remove individual and social barriers to economic and personal independence.
- Provide services and care for the vulnerable elderly, thereby preventing premature and inappropriate institutionalization.

Senior Resource Center

The Senior Resource Center was established in 1974 as a 501(c) (3) private nonprofit corporation. Under its articles of incorporation, the specific and primary purposes for which this charitable corporation was formed are:

- To promote the health and welfare of senior citizens.
Public Health Administration

• To provide funding that supports kitchen and meal services to the elderly.

• To operate and administer direct services and programs that benefit this population.

• To cooperate and assist communities, organizations and other public and private service agencies in their efforts to promote and enhance the general well being of senior citizens.

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). In FY 2006-07, the NCEMS Joint Powers Agreement counties approved a funding augmentation to maintain the level of service provided by NCEMS, which has been experiencing budget shortfalls due to funding reductions from the State. The augmentation is funded with Public Health Realignment funds.

Hazardous Materials Response Team (HMRT)

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. The team is supported through a Joint Powers Agreement consisting of cities plus Humboldt and Del Norte counties.

The proposed FY 2010-11 budget for Outside Agency Support is $189,652, a decrease of $8,878, or 4%, from its prior year level of $198,530. This budget unit also includes a proposed $55,500, a 15% reduction from FY 2009-10 in tobacco settlement funds.

1175-435 Public Health Laboratory

The Public Health Laboratory provides 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.

The program objectives of the Public Health Laboratory are to:

• Support medical professionals in the detection of communicable diseases such as influenza, enteric bacterial diseases, Bordetella, and rabies. Aid in the detection of blood lead in children and the Lyme Disease-causing bacterium in ticks submitted by the public.

• Assist the Environmental Health Division and private citizens in maintaining the safety of domestic water systems.

• Support the State of California to assure the purity of all locally produced shellfish.
• Support the Public Health Branch (PHB) in the investigation and identification of communicable disease outbreaks.

• Enhance the capacity of the laboratory to respond effectively to public health emergencies and bioterrorism threats.

The proposed FY 2010-11 budget for the Public Health Laboratory is $569,719, a decrease of $9,165, or 2%, from its prior year level of $578,884.

1175-455 Local Public Health Preparedness and Response Program

The Public Health Preparedness and Response Program’s 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 proposed FY 2010-11 budget for the Public Health Preparedness and Response Program is $664,975 a decrease of $48,346, or 7%, from its prior year level of $713,321.

2009-10 Accomplishments

1. Mounted comprehensive and successful vaccination and public outreach campaign in response to H1N1 pandemic.

2. Expanded local public health epidemiology capacity and infrastructure using federal pandemic flu funding.

3. Maintained stable health insurance environment for local children through the outreach, enrollment and retention activities of the Children’s Health Initiative (CHI).
2010 - 11 Objectives

1. To broaden the Public Health Laboratory’s scope of testing and services to respond to local needs and enhance revenues.

2. To continue efforts to improve coordinated emergency response between Public Health and tribal entities

3. To assure continued children’s health insurance safety net through the CHI, integrating changes as health care reform unfolds.
## 1175 - Public Health Fund

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| **Expenditures**|                |                |                |                 |                   |                 |                  |                  |
| Salaries & Benefits | $4,154,577     | $2,505,594     | $2,808,283     | $2,852,779      | $2,842,779        | $1,086,856      | $1,086,856       | ($1,755,923)     |
| Supplies & Services | 756,986        | 980,870        | 843,257        | 645,823         | 656,218           | 534,311         | 534,311          | (121,907)        |
| Other Charges    | 1,839,415      | 1,938,563      | 802,663        | 1,339,978       | 1,341,083         | 2,570,193       | 2,570,193        | 1,229,110        |
| Fixed Assets     | 5,376          | 945            | 0              | 6,000           | 4,500             | 0               | 0                | (4,500)          |
| Expense Transfer | (1,773,177)    | 0              | 0              | 10,000          | 10,000            | 0               | 0                | (10,000)         |

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Purpose

Public Health Nursing provides prevention and intervention health services to the community, including Skilled Professional Medical Personnel (SPMP) level case management, disease surveillance, home visits, and immunizations.

This narrative includes discussion on funding and operation of five Public Health Nursing budget units: Public Health Nursing Field Services (416), Communicable Disease Control Program (419), Clinic Services (422), Nurse Family Partnership (426), and the Immunization Program (428).

FY 2010-11 Recommendations

The proposed FY 2010-11 budget for the Public Health Nursing budget grouping, proposes to hold 13.70 FTE positions vacant and unfunded in budget unit 416 as a result of an anticipated 38% decrease in realignment revenue. These positions include:

- 0.20 FTE Assistant County Physician
- 3.0 FTE Community Health Outreach Worker
- 1.0 FTE Licensed Vocational Nurse
- 4.5 FTE Public Health Nurse
- 3.0 FTE Senior Public Health Nurse
- 2.0 FTE Supervising Public Health Nurse

Program Discussion

1175-416 Public Health Field Nursing Services

Public Health Field Nursing Services include Public Health Nursing case management for medically and socially at-risk infants, children, adults and families, anticipatory guidance for prevention and wellness, sudden infant death syndrome (SIDS) prevention, resource and referral, disaster response, communicable disease control and liaison to family resource centers and community providers.

The proposed FY 2010-11 budget for Public Health Nursing is $2,427,026, a decrease of $767,095, or 24%, from its prior year level of $3,194,121 in FY 2009-10.

1175-419 Communicable Disease Control Program

Budget unit 419 has assumed budget unit 409 Tuberculosis Control.

The Tuberculosis (TB) control program provides Public Health Nursing services to control and prevent the spread of TB in the community.

Communicable disease nursing staff work 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 incidents include rabies, Chlamydia, meningitis and whooping cough.
Public Health Nursing

Phillip Crandall, Health & Human Services Director

The proposed budget for FY 2010-11 for Communicable Disease Control is $298,986.

1175-422  Clinic Services

Clinic services include 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 proposed FY 2010-11 budget for Clinic Services is $694,666, a decrease of $173,735, or 20%, from its prior year level of $868,401 in FY 2009-10.

1175-426  Nurse Family Partnership

Nurse-Family Partnership (NFP) is an evidence-based home visiting program with proven results of reducing child abuse and increasing maternal self-sufficiency for first-time, low-income mothers. The program began enrolling clients in July 2009. At capacity, NFP will serve 90 to 100 families.

NFP’s funding sources include realignment, First 5 Humboldt, the National Service Organization (a philanthropy) and TCM.

The proposed budget for FY 2010-11 is $586,908, an 11% increase from FY 2009-10.

1175-428  Immunization Program

The Immunization Program completes county-wide quality assurance oversight for vaccine inventory and accountability, administration and storage. This program also provides free vaccines for children (VFC) through Public Health’s Clinic Services. The Immunization Program Coordinator routinely completes local trainings and is the liaison to the State immunization program.

The proposed FY 2010-11 budget for Immunization Program is $183,774, an increase of $23,400, or 15%, from its prior year level of $160,374 in FY 2009-10.

2009-10  Accomplishments

1. Performed H1N1 pandemic influenza vaccination campaign: oversight of local response, coordinated local vaccine supply, conducted 52 school clinics, four community clinics and various workplace clinics to give over 15,500 shots.

2. Addressed Chlamydia as the most common reportable disease in Humboldt County in 2009 through interventions with high-risk populations.

3. Implemented the Nurse Family Partnership, growing to a caseload of 50 first time mothers in 8 months.

4. Collaborated with state, federal, and local partners to address increase in rabies cases. Nursing investigated all exposures and recommended prophylaxis for 52 people.
2010-11 Objectives

1. To continue to evaluate, expand and assure quality of services in the Public Health Clinic.

2. To maximize revenue from TCM/MAA and Title 19 for case management services through the development of workload and productivity standards for nursing personnel.

3. To develop new initiatives to address hepatitis C and Chlamydia.

4. To achieve maximum caseload of 100 new mothers in Nurse Family Partnership.
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<td>$21,378,572</td>
<td>$21,378,572</td>
<td>$21,378,572</td>
<td>($51,204)</td>
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<tr>
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<td>$19,410,748</td>
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<td>$21,378,572</td>
<td>$21,378,572</td>
<td>($51,204)</td>
</tr>
<tr>
<td>Total Expenditures</td>
<td>$20,678,679</td>
<td>$19,245,476</td>
<td>$19,410,748</td>
<td>$21,429,776</td>
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<td>$21,378,572</td>
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<td>($51,204)</td>
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<tr>
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Purpose

The Social Services Assistance Section provides assistance payments to Humboldt County’s children and families. 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), Foster Care (518), and TANF ECF Expansion (519).

FY 2010-11 Recommendations

Budget unit 517 is anticipating a $51,024 decrease in State Realignment revenue. This is sales tax revenue provided to counties to deliver State mandated programs such as foster care.

Program Discussion

1110-515 SB 163 Wraparound Program

The 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 proposed budget for FY 2010-11 is $940,400 the same as in FY 2009-10. The County General Fund provides $155,434, 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 §§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 include payments for severely emotionally disabled children.

The Special Circumstances/Refugee Aid program provides a nonrecurring cash grant to eligible SSI/SSP recipients related to losses from catastrophe. No funding has been received from Special Circumstances since FY 2003-04, but Social Services is mandated to provide the services if funding is made available. Refugee Aid is a mandated allowance program for refugees who have been paroled into the United States by the U.S. Citizenship and Immigration Services agency.
The proposed budget for FY 2010-11 is $12,106,000 and is the same as in FY 2009-10. The County General Fund contributes $265,254, 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 §11400 of the California Welfare and Institution Code. Costs covered by this allocation includes 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.

Some of the children have significant behavioral issues that require 24-hour supervision in costly institutional settings. The Adoption Assistance Program makes payments to the parent who has adopted a child. 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 proposed budget for FY 2010-11 is $8,332,172 which is a slight decrease from FY 2009-10. The County General Fund contributes $240,380 or 2.8%, of that amount.

2009-10 Accomplishments

1. Increased the CalWorks Work Experience (WEX) program by a factor of two and provided job training for over 120 individuals, positively affecting the Work Participation Rate (WPR) required by Federal statute.

2. Managed and completed the C-IV State mandated IT system conversion with all its components.

3. Increased and managed the capacity of the Transitional Housing Program-Plus (THP+) and provided housing for the qualifying youth in the program.

2010-11 Objectives

1. To manage the post-conversion business practice adaptation to the C-IV system.
2. To increase the WPR rate for the CalWorks program and provide work experience for the qualifying participants.

3. To increase the capacity of the youth oriented programs and increase the collaboration between the Social Services Branch and its counterparts in the community.
### Social Services Fund Revenues

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(To)/From Non-GF Fund Balance: (2,308,072) (3,696,928) 3,011,324 0 0 0 0 0

Total Revenues: $41,606,499 $44,487,312 $48,805,608 $56,135,797 $56,135,797 $69,308,204 $69,308,204 $13,172,407

### Social Services Fund Expenditures

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Total Expenditures: $41,606,499 $44,487,312 $48,805,608 $56,135,797 $56,135,797 $69,308,204 $69,308,204 $13,172,407

### Social Services Fund Staffing

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<th>2008-09</th>
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<th>2010-11</th>
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**Total Staffing**: 466.70 483.60 489.10 487.50 656.50 649.70 649.70 (6.80)
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), Temporary Aid to Needy Families - Emergency Contingency Fund (519) and Veterans Services (599).

FY 2010-11 Recommendations

The proposed budget for the Social Services Division for FY 2010-11 includes a projected $10,654,369 in American Reinvestment and Recovery Act (ARRA) funds. Of these funds, $9,993,301 will be used for subsidized employment. During FY 2009-10, 148 full-time positions were allocated for ARRA. Per ARRA requirements, the Department proposes to dis-allocate 109 vacant positions, leaving 39 full-time and 109 extra-help positions in FY 2010-11.

There is a proposed increase in Federal Welfare Administration revenue of $2,490,251, or 9%, from FY 2009-10. In addition, there is a proposed increase in charges for services due to salary and benefit cost increases for staff associated with the General Relief program.

The Governor’s proposed budget for FY 2010-11 has many proposals that will impact the delivery of social services. The proposal with the greatest impact is the elimination of the CalWORKs program for a savings of $1.1 billion. The May Revise also proposes to cut $750 million from In Home Supportive Services (IHSS).

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. All staff are paid through the Social Services Administration budget unit 511 except for Veterans and Public Guardian.

Income Maintenance Programs

Income Maintenance administers legally mandated public assistance programs on behalf of the Federal, State and local governments. These programs include Food Stamps, Medi-Cal, Aid to Adoptions, Foster Care Assistance, and the County Medical Services Program. These programs provide financial support for poor, dependent children, needy families and other individuals, as required by regulation, statutes and local resolutions.

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 preservation, and permanent placement. Currently,
many programs are working in tandem 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 protection of 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.

**1160-273 Public Guardian-Conservator**

The Office of the Public Guardian has two separate basic services provided to the public. The Conservatorship program requires 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 services providers due to a specific disorder or medical condition. Mental Health Conservatorships are reserved for persons requiring mental health treatment and often controlled-egress psychiatric facilities. Probate Conservatorships are for individuals that have a prominent medical condition that renders the person unable to make daily decisions about his/her care and/or finances.

The proposed budget for FY 2010-01 is $684,090, an increase of $11,647, or 1.7% more than FY 2009-10. The County General Fund contributes $111,530, or nearly 16.3%, of this amount.

**1160-504 Adult Protective Services (APS)**

APS is mandated to conduct prompt investigation of all situations involving elders (age 65 or older) and dependent adults (physically or mentally impaired 18-64 years old) who are reported to be endangered by physical, sexual or financial abuse, abandonment, isolation, abduction, neglect or self-neglect, or hazardous living conditions. In the course of the investigation, APS may need to provide temporary shelter, food, clothing, prescription medication, transportation assistance and other services in order to ensure the elder or dependent adult is safe and no longer at risk. Expenditures for
**Social Services Division**

APS are cost applied to the Social Services Administration budget (511) on a quarterly basis.

The proposed budget for FY 2010-11 is $465,212, a decrease of $44,927, or 8.8% less than FY 2009-10.

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 is currently developing a collaborative project with the local Multiple Assistance Center to provide CalWORKs case management services to homeless families who are welfare to work participants. CalWORKs has set goals for outcomes to meet a standard of self sufficiency and permanent housing for those families enrolled in the program. The program is focused on meeting work participation goals set out in TANF reauthorization through the DRA of 2005. Further, 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. 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 proposed budget for FY 2010-11 is $7,970,366, an increase of $777,200, or 11%, from FY 2009-10. This increase is due to increased services for Mental Health, Alcohol and Other Drug Programs, and child care services. The contract with Redwood Community Action Agency for the Multiple Assistance Center to provide comprehensive housing and life skills training to CalWORKs families will enter its third year in FY 2010-11. There are also professional services costs due to the Welfare-to-Work building expansion.

1160-508  In-Home Supportive Services (IHSS)

The IHSS program provides services to low-income aged, blind, and/or disabled adults and children who are unable to remain safely in their homes without such services. This may 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.

The Public Authority was established as part of a continuum of services. As the employer of record for IHSS care providers, the Public Authority negotiates wages and benefits for IHSS care providers, provides registry services to assist IHSS consumers in finding care providers, and provides access to training for IHSS consumers and care providers.
The Public Authority continues to support the IHSS Advisory Committee in their efforts to recruit providers and educate the public about the issues involved in promoting independent living. Expenditures for the IHSS Public Authority are cost applied to the Social Services Administration budget (511) on a quarterly basis.

The proposed budget for FY 2009-10 is $285,623, a decrease of $42,418, or 12.9% less than FY 2009-10.

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.

Funding for Child Welfare Services is through State and Federal allocations. Expenditures for Child Welfare Services are cost applied to the Social Services Administration budget (511) on a quarterly basis. The proposed budget for FY 2010-11 is $4,001,762, an increase of $355,560, or 9.7% more than FY 2009-10.

1160-509 Children’s Center

The Children’s Center provides temporary shelter and transitional treatment services for children aged 6 to 17 years who are at risk, and/or are victims of abuse, neglect, exploitation, or are emotionally disturbed. The Children’s Center is a facility which provides 24-hour care and supervision to six children while maintaining a structured, safe, and nurturing environment.

Funding for the Children’s Center will continue to be provided through the Child Welfare Services allocation and includes mental health clinician salaries.

Expenditures for the Children’s Center are cost applied to the Social Services Administration budget (511) on a quarterly basis. The proposed budget for FY 2010-11 is $791,382, an increase of $213,528, or 37%, from FY 2009-10.

1160-511 Social Services Administration

The Social Services Administration budget includes staffing and centralized administrative costs for the other programs described below. 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 proposed budget for FY 2010-11 is $68,405,749. The County’s General Fund contribution is $2,408,363 or 4% of the budget.

1160-519 TANF ECF Program

Pursuant to the passage of the American Recovery and Reinvestment Act (ARRA) the Temporary Aid to Needy Families (TANF) program implemented the Emergency Contingency Fund (ECF) expansion program. Under the TANF ECF program, the subsidized employment and temporary benefits programs that existed in the TANF program has been extended to individuals that are 200% below the Federal poverty level in addition to the CalWorks program participants. State of California Department of Social Services manages the fund stream to the County program that is operated by the Social Services branch. The program has started in FY 2009-10 and is expected to continue until September 30, 2010.

The proposed budget for FY 2010-11 is $9,993,301.

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.

The proposed budget for FY 2010-11 is $218,365, an increase of $25,127, or 13% more than FY 2009-10. The County General Fund contributes $158,251, or 72.4%, of that amount.

2009-10 Accomplishments

1. Reorganized Transition Age Youth (TAY) services to work in collaboration with the Humboldt County Transition Age Youth Council (HCTAYC), Mental Health Branch, and Public Health Branch.

2. Launched Food Stamp Services outreach expansion.

3. Completed physical and I.T. infrastructure projects and others planned for completion in the upcoming fiscal year.

4. Developed CMIPS program migration management structure in anticipation of the State migration calendar.

2010-11 Objectives

1. To expand services and collaboration in the Transition Age Youth (TAY) programs to develop fully supported and employment ready youth in the community.

2. To continue the expansion of Food Stamp Services to additional qualifying families.
3. To increase the physical and I.T. infrastructure capabilities in order to fully support the programs for the clients.

4. To fully implement State mandated migration of I.T. systems to ensure continuing funding and accountability.