

Responses to Findings and Recommendations In the Grand Jury Report,
"Mental Health Care for the Homeless: Who Cares?"

Findings

F1: The current fragmented system of homeless services fails to serve the homeless and their mental health and substance abuse challenges nor the Sacramento County community and its taxpayers.

Board of Supervisor's Response:

The Board of Supervisors disagrees partially with the finding because the services needed to support people experiencing homelessness, especially those living with behavioral health issues, is bigger than any one governmental entity.

Homelessness is a symptom of challenges in many social safety nets, many of which are outside of government. While the County strives to provide access to services and treatment, the private market and the decision to access services and treatment play the biggest roles. Most notably, the lack of affordable, accessible housing is key to helping people end their homelessness and connect into social services; the primary driver of housing availability is the private market.

The County has made efforts to streamline County services for those experiencing homelessness, including creating a new Department of Homeless Services and Housing (DHS) and increasing access to behavioral health services for those experiencing homelessness by embedding clinicians and peers into outreach teams, and opening 11 community-based CORE (Community Outreach Recovery Empowerment) centers with outreach capacity geographically spread out throughout the County. Each CORE site includes an outpatient clinic, a peer operated walk-in wellness center that anyone can access, and outreach staff to engage with the unhoused proximal to their location. All CORE sites are able to directly admit individuals into their programs and have access to flexible housing funds to assist those they serve with housing resources. The Mental Health Urgent Care program expanded operations to 24 hours, 7 days a week and the Board of Supervisors approved the development of a second Mental Health Urgency Care in the FY 2023-24 budget. Three new Full Service Partnership (FSP) programs have opened. While these access points increase opportunities for engagement with the behavioral health system, except for in limited circumstances, these services must be voluntarily accessed by the participants.

F2: The County lacks a comprehensive strategic plan to include the mental health and substance abuse issues that face the homeless.

Board of Supervisor's Response:

The Board of Supervisors disagrees wholly with the finding. June of 2022, the County Board of Supervisors, the Sacramento City Council, and the Sacramento Countywide Continuum of Care (CoC) Board all adopted the Sacramento Local Homelessness Action Plan (LHAP) which is a three year, cross-jurisdictional unified approach to addressing homelessness across Sacramento County. The LHAP includes a strategy specifically about connecting homeless populations to behavioral health services as well as key activities with timelines and measurable goals for each of four sub-strategies under this strategy.¹

F3: The current strategic plan, the Homeless Action Plan published by SSF, has not been successful in addressing the mental health and substance abuse needs of the homeless because goals are not quantified, accountability is not assigned, and performance is not monitored.

Board of Supervisor's Response:

The Board of Supervisors disagrees wholly with the finding. As described in the previous response, in June of 2022, the County Board of Supervisors, the Sacramento City Council, and the Sacramento Countywide Continuum of Care (CoC) Board all adopted the Sacramento Local Homelessness Action Plan (LHAP) which is a three year, cross-jurisdictional unified approach to addressing homelessness across Sacramento County. The LHAP includes a strategy specifically about connecting homeless populations to behavioral health services as well as key activities with timelines and measurable goals for each of four sub-strategies under this strategy.¹

F4: The County does not have a senior executive position that holds budget and policy implementation authority for all homeless services provided in the County, including mental health and substance abuse programs.

Board of Supervisor's Response:

The Board of Supervisors disagrees wholly with the finding. The County has an existing Deputy County Executive (DCE) position over Social Services;

Chevon Kothari currently serves in this position. This DCE oversees the following social services departments, including budgets, policies and programs administered by each department:

- Department of Health Services (DHS), which includes Behavioral Health, Public Health, Primary Health
- Department of Human Assistance (DHA)
- Department of Child, Family and Adult Services (DCFAS)
- Department of Homeless Services and Housing (DHSB)
- Environmental Management Department (EMD)
- Child Support Services (CSS)

Ms. Kothari also serves as the County's lead for coordination with the First Five Commission, the Sacramento Housing and Redevelopment Agency (SHRA) and the Sacramento Employment Training Association (SETA).

F5: Lack of measurable process and outcome metrics correlated with funding and expenses of homeless mental health and substance abuse programs has resulted in lost opportunities to fund those programs that demonstrate the most success.

Board of Supervisor's Response:

The Board of Supervisors disagrees wholly with the finding. Mental Health Services Act (MHSA) Full-Service Partnership programs have measurable outcomes demonstrating the success in reducing homelessness. The other outpatient programs all have access to flexible housing funds to support individuals they serve. Reports are published annually in accordance with the MHSA legislation and requirements.

The County pursues and takes advantage of all available funding opportunities. In FY 2022-23, Behavioral Health invested \$59 million in housing and services for unhoused individuals. For example, the County recently applied for and received \$43 million in Behavioral Health Bridge Housing, which is a new unique funding source specifically targeting transitional housing solutions for individuals receiving behavioral health services.

Given that over 90% of Behavioral Health services are delivered through community providers (contracts), the Behavioral Health Services (BHS) division actively monitors and works with providers to ensure goals and outcomes are being met. It is important to note that there is a historically unprecedented number of Behavioral Health initiatives being introduced in

the State of California, both currently and over the last three years. Sacramento County has been engaged in all of the new initiatives because we recognize that untreated serious mental illness is a risk factor for homelessness. The County remains open to all new initiatives and works closely across other County departments and community providers to ensure successful implementation of these measures.

F6: Lack of transparency in financial reporting of mental health and substance abuse services and access to other funding for the homeless is not publicly available and reduces public trust.

Board of Supervisor's Response:

The Board of Supervisors disagrees partially with the finding.

The Board of Supervisors disagrees with the finding of the lack of financial reporting. The Mental Health Services Act (MHSA) plan is published annually demonstrating how funds are used and the performance of the funded programs, including those programs serving people experiencing homelessness.

In relation to the finding around public availability of data on funding, while the MHSA plan is publicly available, it does not break down funding specific to the homeless population. However, the Department of Homeless Services and Housing (DHS), recently completed and published a full accounting across County departments on funding allocated in FY 2022-23 to homeless programs. Behavioral health services were included in this analysis, but a specific breakout of behavioral health services was not a part of the public presentation. Staff recommend that in subsequent reports (at least annually), behavioral health allocations be called out specifically.

F7: There are too many boards, committees, and government entities which create waste and redundancy in the planning and distribution of mental health and substance abuse treatment resources.

Board of Supervisor's Response:

The Board of Supervisors disagrees partially with the finding. While the Board agrees there are many boards and committees with overlapping areas, they do not create waste and redundancy in the planning and distribution of resources. Existing boards and committees provide specific

functions and expertise and inform the entire system on multiple levels. Additionally, the County is actively working to prevent redundancies.

There are four different advisory boards/committees that provide direction and oversight to Behavioral Health, those are:

- Mental Health Board
- Alcohol and Drug Advisory Board,
- MHSA Steering Committee
- Youth Advisory Board

Each board/committee provides direction within a specific area of funding, service, or population of focus. All provide valuable information to the Board of Supervisors and the Department regarding service delivery. The boards/committees meet frequently, though that does not impede Behavioral Health from providing critical services to the community. All boards/committees require individuals with lived-experience, helping to better inform service delivery.

In addition to these behavioral health focused boards and committees, within the homeless system of care, the Sacramento Continuum of Care (CoC) is a 30+ member Board, that includes representatives from organizations serving individuals experiencing homelessness or who were formerly homeless and other interested, relevant organizations within Sacramento County. The Sacramento CoC covers all the cities, towns and unincorporated areas of Sacramento County. The CoC has multiple subcommittees, including a lived expertise committee, who provided on-going input on the development of the Local Homelessness Action Plan (LHAP), including the behavioral health strategy, and will continue to provide input and direction during implementation.

The Human Services Coordinating Council (HSCC), which includes members from many of the other advisory boards/committees, is working to determine strategies to avoid duplicative work by multiple advisory bodies researching the same issues and not coordinating how that is done.

F8: Mental health and substance abuse issues among the homeless are aggravated by poor government planning.

Board of Supervisor's Response:

The Board of Supervisors partially disagrees with the finding.

The County agrees there are significant challenges in meaningfully coordinating funding and the expectations of our various funders at the local, State and Federal levels; however, mental health and substance abuse issues are exacerbated by the lack of affordable housing, over which the County has very limited control.

At the County level, the County is continually evaluating funding and program goals based on available information to inform decision making. In making decisions about funding for Behavioral Health beds, the County commissioned a RAND study to ensure that investments were strategic. The results of this study informed priorities for applying for Behavioral Health Continuum Infrastructure Program funds for a Mental Health Rehabilitation Center, a youth crisis facility, and Substance Use Disorder Residential bed capacity.

In spite of the pandemic, Behavioral Health moved forward with a transformational redesign of the mental health delivery system to better meet the needs of the community. This resulted in 11 CORE sites, 3 new FSP contracts, and expanded hours of operation for the Mental Health Urgent Care program as described in an earlier response. \$20 million in Prevention and Early Intervention funding was delivered to a broad array of Community Based Organizations with a range of interventions specifically addressing the unique needs of various culturally diverse communities within Sacramento County.

Treating mental illness and substance use disorders in the unhoused population cannot happen without all system supports, across the State, City, and CoC in alignment. A recent study conducted at University of California, San Francisco, concluded that homelessness was the result of high housing costs and low income. Mental health and substance abuse issues are aggravated by the lack of affordable housing. In the past four years, the County has increased funding in Behavioral Health from \$367 million in FY2018-19 to \$675 million in FY 2023-24, which is an 84% increase.

F9: The outreach teams (County HEART teams, Sacramento PD IMPACT Team) are poorly supported and understaffed which results in lost opportunities to positively engage the homeless to accept mental health and substance abuse treatment and other services.

Board of Supervisor's Response:

The Board of Supervisors disagrees wholly with the finding.

The County HEART teams as well as the County's contracted homeless navigators (staffed through a local community-based organization) are supported by leadership of both DHS and DSHS. County staff meet weekly with the outreach teams to discuss deployment, strategize on service connections and 'case conference' around client needs. The teams are funded to allow for sufficient follow-up time with clients and provided flexible funding to help address immediate needs and coordinate transitions from homelessness to shelter and/or housing. In a recent review of the first six months of co-deployment of HEART teams with the City Department of Community Response (DCR), 96% of people engaged by the HEART teams were enrolled in behavioral health services. The HEART teams were just developed in the FY 2022-23 budget; when the teams were initially funded, there was a ramp up time to hire, but teams are fully staffed now, and able to meet community needs.

The HEART teams have been in service for just over a year. While initial outcomes from their efforts are good, the County will continue to assess for additional needs and adjust responses accordingly.

The Board cannot comment on the support and staff for the Sacramento Police Department.

Sheriff's Response:

The Sheriff sent his response to the presiding judge in a separate correspondence per Penal Code section 933.05 and 933(c). The response has been included as part of the Board's report as Attachment 3.

F10: Poor communication between law enforcement and outreach teams erodes the trust of and negatively impacts the mental health of the unhoused population.

Board of Supervisor's Response:

The Board of Supervisors disagrees partially with the finding.

As leadership in the Sheriff's office changed, including re-establishing the full Homeless Outreach Team (HOT), and outreach responsibility has shifted to the new Department of Homeless Services and Housing (DSHS), there were some opportunities for better coordination. The Sheriff is a response-oriented department, which sometimes can be challenging to overlay intensive services which, to be most effective, require time to establish

rapport and trust; however, in recent months, leadership in DSHS meets weekly with the Sergeant of the HOT and County Park Rangers to discuss needs of people living in encampments in the unincorporated County. County staff also meet with City of Sacramento Police IMPACT team when requested to coordinate deployment support from County behavioral health within the City of Sacramento. In the other cities, County staff are available as requested to deploy behavioral health outreach teams with locally funded navigators.

Top leadership of the County and the City of Sacramento also meet regularly to identify challenges and ensure resources are being adequately distributed to each of the organization's respective teams.

Sheriff's Response:

The Sheriff sent his response to the presiding judge in a separate correspondence per Penal Code section 933.05 and 933(c). The response has been included as part of the Board's report as Attachment 3.

F11: There is a shortage of mental health professionals which continues to exacerbate the inability of the County to meet the need for mental health services for the homeless.

Board of Supervisor's Response:

The Board of Supervisors agrees. There is a Statewide / Nationwide behavioral health workforce crisis.

Recognizing this challenge, the County has worked to remain competitive with historically rapid increases in compensation for the behavioral health workforce, while increasing recruitment and retention strategies.

For County contracted providers, the provider contract rates were increased 35% since the pandemic.

The following are increases in compensation for County Behavioral Health Workforce positions for Senior Mental Health Counselors (SMHC) and Mental Health Counselors (MHC):

- All Classification Salary Increases: 4% in FY 2022-23 + 4% in FY 2023-24
- Equity Increases for SMHC and MHC: 7% in FY 2022-23 + 3% in FY 2023-24
- Incentive Pay of 2.5% for employees with 10 years of full-time service

Additionally, team specific incentives were established or increased for employees assigned to the following groups:

- Wellness Response Team (new special pay): 10%
- Mobile Crisis Unit: Increased from 5% to 10%
- Community Support Team, Homeless Encampment Unit (new special pay): 5%

Before factoring in any team or longevity pay, the total two-year compensation increases for SMHC and MHCs is 18%.

RECOMMENDATIONS

R1: The County should complete a comprehensive strategic plan to address homelessness by July 1, 2024, to improve mental health and substance abuse services for the homeless, to include timelines and measurable goals and objectives, building on The Homeless Action Plan, using templates and examples from other communities and organizations such as the California State Association of Counties.

Board of Supervisor's Response:

The recommendation has been implemented.

In June of 2022, the County Board of Supervisors, the Sacramento City Council, and the Sacramento Countywide Continuum of Care (CoC) Board all adopted the Sacramento Local Homelessness Action Plan (LHAP) which is a three year, cross-jurisdictional unified approach to addressing homelessness across Sacramento County. The LHAP includes a strategy specifically about connecting homeless populations to behavioral health services as well as key activities with timelines and measurable goals for each of four sub-strategies under this strategy.¹

While the LHAP serves as the community wide comprehensive plan, there are additional collaborative spaces. Most notably, on December 2, 2022, the City Council and County Board of Supervisors both adopted the Partnership Agreement to address homelessness within the City of Sacramento. Among other things, the Partnership Agreement commits the County to create and fund additional outreach capacity to provide clinical assessment and linkages to County behavioral health services as well as to stand up an additional Community Outreach Recovery Empowerment (CORE) center in the central city (bringing the total CORE centers to eleven countywide). The partnership agreement also requires bi-annual reports on progress towards these goals at publicly noticed meetings of both the City Council and County Board of Supervisors.

In addition, the Board of Supervisors signed on to a proposal, AT HOME, presented by the California State Association of Counties (CSAC) that would call for greater coordination by jurisdictions within a region - a plan that ultimately informed the State Budget and Homeless, Housing and Prevention (HHAP) funding requirements.

¹ https://sacramentostepsforward.org/wp-content/uploads/2023/04/Year-One-Activities-2023_LHAP_FINAL-FINAL.pdf Strategy 6 (Ensure adequate behavioral health services), along with the key activities, timelines and measurable goals can be found starting on page 26.

R2: The County should immediately begin to develop and implement an interim plan that incorporates all or some of the recommendations in this report and will result in measurable improvement in the delivery of mental health and substance abuse services in the short term.

Board of Supervisor's Response:

This recommendation has been implemented.

As detailed in R1, the County has an existing comprehensive strategic plan with measurable outcomes. Therefore, there is no need for an interim plan.

R3: The County should appoint a new Deputy County Executive position by January 1, 2024, that holds budget and policy implementation authority for all homeless services provided in the County, including mental health and substance abuse programs, and to the extent possible, authority over other governmental entities.

Board of Supervisor's Response:

This recommendation has been implemented.

The County has an existing Deputy County Executive (DCE) position over Social Services; Chevon Kothari currently serves in this position. This DCE oversees the following social services departments, including budgets, policies and programs administered by each department:

- Department of Health Services (DHS), which includes Behavioral Health, Public Health, Primary Health
- Department of Human Assistance (DHA)
- Department of Child, Family and Adult Services (DCFAS)
- Department of Homeless Services and Housing (DHSB)
- Environmental Management Department (EMD)
- Child Support Services (CSS)

Ms. Kothari also serves as the County's lead for the First Five Commission, the Sacramento Housing and Redevelopment Agency (SHRA) and the Sacramento Employment Training Association (SETA). Given that services and supports to the unhoused span across multiple Departments and entities, the County believes this is the right position to oversee all of these complimentary Departments.

R4: The County should dedicate funds in the 2023-2024 budget for innovative solutions that may not be supported by the County's flow of external funding (Ex: more CRBH sites, outreach teams, substance free transitional housing, board and care facilities).

Board of Supervisor's Response:

This recommendation has been implemented.

In the past four years, the County has increased funding in Behavioral Health from \$367 million in FY 2018-19 to \$675 million in FY 2023-24, which is an 84% increase. This includes funding for the full array of behavioral health services from Prevention, Early Intervention up through outpatient programs and including substance use disorder residential and mental health acute and subacute beds.

In FY 2023-24, the Board of Supervisors approved \$78 million in new Behavioral Health Services (BHS), adding 23 positions and expanding contracted services by over \$51 million dollars. An additional \$23.5 million was included specifically to expand sub-acute adult beds and youth crisis care and residential beds. As a result of investments of the FY 2023-24 budget, the County contracted to open up 11 CORE centers within the County and city jurisdictions, including an additional investment of \$7,380,000 to add the 11th site and incorporating community navigators into the CORE sites, specifically focused on outreach and engagement to the unhoused population.

BHS is always looking for innovative best-practices to support the needs of the community. Over the last three years, BHS has leveraged MHSA funding across the entire behavioral health continuum of care to fund innovative practices. As an example, the County recently applied for and received over \$43 million in Behavioral Health Bridge Housing, which is a new unique funding source specifically targeting transitional housing solutions for individuals receiving behavioral health services.

In addition to the specific investments in the Behavioral Health system, the County's overall commitment to expansion of funding and services to support people experiencing homelessness has increased significantly. Of the \$300 million that Sacramento County received in American Rescue Plan Act (ARPA) funding, \$94 million (31%) has been dedicated to homeless and housing programs and services, the largest allocation across all funding categories. In addition, the Board of Supervisors recently created the new Department of Homeless Services and Housing (DHS), consolidating many services and programs that serve homeless populations under one

department to increase coordination with community partners and to improve transparency and accountability.

DHSH will oversee over \$50 million in funding to community organizations to provide outreach, shelter and re-housing services. While DHSH will be the County's lead for homeless services, other County departments will remain involved in delivering services and supports to this complex issue. Overall, in FY 2022-23, the County allocated over \$177 million to provide services to address the homeless crisis throughout Sacramento County.

R5: The County should immediately begin a process to establish and track outcome data related to the treatment of mental health and substance abuse for the homeless.

Board of Supervisor's Response:

This recommendation has been implemented.

The Behavioral Health Services (BHS) division releases an annual Mental Health Services Act (MHSA) report, which provides a comprehensive summary of activity and services provided across all of BHS.

Additionally, over the coming years, the Social Health Information Exchange (SHIE) is expected to go live, which presents an opportunity to better highlight outcomes and metrics across all participating providers, including BHS. The SHIE will leverage multiple data sources, including HMIS, the BHS case management systems, and data from Managed Care Plans to better evaluate outcomes across populations. Given the significant investment in the SHIE, it will be important to leverage what is already in development rather than creating an alternative system or reporting mechanism.

Finally, the Local Homelessness Action Plan (LHAP) includes a strategy for increasing access to behavioral health services for people experiencing homelessness. The LHAP includes measurable outcomes and requires regular reporting on progress towards meeting these goals.

R6: The County should track funding and spending specific to support homeless, including treatment for mental health and substance abuse, and post this information at least quarterly on the County website in a manner that is easily accessible to the public by the end of 2023.

Board of Supervisor's Response:

This recommendation will not be implemented, due to the timeline requested to post quarterly information.

As part of the FY 2023-24 discussion, the Department of Homeless Services and Housing (DHS) prepared an analysis of allocations for programs and services that address homelessness across all departments in FY 2022-23 and has committed to doing this annually to help aid in budget recommendations. In subsequent years, in addition to adding information from external partners (such as SHRA and SSF), this analysis will include more specific call outs and analysis of behavioral health funding supporting housing development and re-housing efforts.

As previously noted, the MHSAs annual report also incorporates information on funding specific to behavioral health services, including information on programs serving people experiencing homelessness.

R7: Elected officials should immediately take a more active role to lead, coordinate, and consolidate various advisory boards and committees to assume direct accountability for improved outcomes in mental health and substance abuse prevalence and result in a reduction of duplicate efforts, administrative costs, and inefficiency.

Board of Supervisor's Response:

This recommendation has been implemented.

Elected members of the Board of Supervisors do take an active role in accountability for outcomes of County lead programs. Board members regularly engage with staff, community members and boards and commission around designing, funding and implementation of programs. County staff are responsible for programmatic outcomes and report up through departmental leadership to the Board of Supervisors. The County agrees that continually monitoring and evaluating outcomes is essential to ensure the needs of the unhoused population are being met. Beyond existing reports such as the MHSAs Annual Report, the Department of Homeless Services and Housing (DHS) published a report on all funding allocated to homeless services across the County, helping policy-level decisions on services. The County's development of the Social Health Information Exchange is in part aimed at providing a more robust mechanism to coordinate service delivery and also provide more comprehensive information around outcomes. Developing better outcome measures and

tracking is a continual work in progress, as the challenges and needs of the unhoused community evolve.

R8: Sacramento County should immediately fully staff a total of six HEART teams and the City of Sacramento should immediately establish at least two additional IMPACT Team within Sacramento PD to increase engagement with County and City homeless encampments and improve access to mental health and substance abuse treatment services.

Board of Supervisor's Response:

This recommendation has been implemented.

As part of the City/County Partnership Agreement, the County committed to dedicating ten HEART team members (both clinicians and peer advocates) to work in the City of Sacramento to participate as part of multi-disciplinary teams lead by the City's Department of Community Response. Additional HEART staff work in the unincorporated County and within the shelter system. The Board of Supervisors approved an additional six HEART team positions in the FY 2023-24 budget, bringing the total to 20 encampment team members. This creates ten HEART teams, with a counselor and a peer comprising one team.

The HEART team is constantly interviewing and working to fill all vacant positions. At the time of this writing, there are seven vacant positions, including the six positions that were added in the FY 2023-24 budget. Hiring is on-going for the team and it is expected that the majority of positions will be filled by December 2023.

It is also important to note that the HEART is one part of the BHS continuum providing direct service to the unhoused community. The Board of Supervisors approved the addition of community navigators to all CORE centers in the FY 2023-24 budget, expanding critical linkages to those in encampments or otherwise unhoused within the geographic area of the CORE center.

The Board cannot comment on the City's decision to establish additional IMPACT teams.

R9: Law enforcement should communicate at least weekly with all outreach teams to collaborate in decisions as to which encampments to clear and when, and post this information on a shared web site to increase the trust of the homeless and support offered by outreach teams.

Board of Supervisor's Response:

This recommendation requires further analysis.

The Board of Supervisors is fully committed to integration of outreach teams with law enforcement. Contracted outreach staff and HEART outreach staff regularly work with County Park Rangers on outreach in priority areas within the Parkway system and as part of a response team when there is inclement weather, dangerous conditions, or the area needs to be cleared for construction, fire fuel mitigation, etc.

These same outreach teams remain committed to similar partnerships with the Sacramento County Sheriff's office. Currently, DSHS staff and Sheriff's HOT members meet frequently to share priority areas and plan for coordinated deployment, as appropriate.

Sheriff's Response:

The Sheriff sent his response to the presiding judge in a separate correspondence per Penal Code section 933.05 and 933(c). The response has been included as part of the Board's report as Attachment 3.

R10: A communication plan should be developed to timely inform all stakeholders and staff of goals, actions, and events related to planning and execution of homeless mental health and substance abuse services.

Board of Supervisor's Response:

This recommendation has been implemented.

Staff of the Department of Homelessness and Housing (DSHS) and Health Services (DHS) have multiple vehicles for regular reporting on policies, programs and outcomes.

The Local Homelessness Action Plan (LHAP) is a living document, regularly updated and shared in formal and informal venues with the public and local elected officials. The DSHS makes an annual presentation to the Board of Supervisors on outcomes and investments to address homelessness, to include progress under the LHAP.

Additionally, the City/County Partnership Agreement requires bi-annual public reports and a publicly noticed presentation to both the City Council and County Board of Supervisors.

Finally, the Mental Health Services Act (MHSA) plan requires an annual report which is heard in open session at the Board of Supervisors.

R11: The County should continue to improve incentives and hiring of mental health professionals to meet the demand for mental health services in the County.

This recommendation has been implemented.

As previously noted, there is a State and national behavioral health workforce shortage. Recognizing the need to attract strong candidates, in April 2023, the Board of Supervisors approved accelerating equity increases to behavioral health clinical staff and approved a referral incentive program for existing staff who refer successful candidates to the County.

The total compensation for Senior Mental Health Counselors (SMHC) and Mental Health Counselors (MHC) has been increased by 18% over the last two years, before factoring in any incentive or longevity pay increases.

The County continues to monitor and adjust team specific incentive pays for behavioral health workers serving in a few different community-based settings or programs. As previously noted, incentives for the following teams were established or increased over the last two years:

- Wellness Response Team (new special pay): 10%
- Mobile Crisis Unit: Increased from 5% to 10%
- Community Support Team, Homeless Encampment Unit (new special pay): 5%

In order to ensure that behavioral health contracted providers are also able attract strong candidates, the County has increased contract provider rates by approximately 35% since the beginning of the COVID-19 pandemic.

In addition to this, County Behavioral Health and Correctional Health have been working with the Department of Personnel Services to conduct hiring fairs and attend more career events on college campuses to increase our outreach efforts for key positions.