Departmental Summary Table	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Attributable to Department	$115,129,730	$124,072,244	$113,127,169	$118,727,528	$141,117,208	$141,117,208	$22,389,680
General Fund Support	8,036,121	8,153,964	4,011,859	3,875,135	3,848,413	3,848,413	(26,722)
(To)/From Non-GF Fund Balance	6,679,310	(941,825)	552,025	(3,667,441)	500,000	640,000	4,307,441
Total Revenues	$129,845,161	$131,284,383	$117,691,053	$118,935,222	$145,465,621	$145,605,621	$26,670,399
Expenditures							
Salaries & Benefits	$55,148,728	$55,865,123	$57,129,296	$58,181,896	$67,826,240	$67,826,240	$9,644,344
Supplies & Services	44,769,097	40,360,317	44,940,688	44,035,552	59,212,860	59,212,860	15,177,308
Other Charges	47,454,198	42,543,000	53,140,499	50,958,081	61,167,471	61,167,471	10,209,390
Fixed Assets	594,168	275,144	1,427,038	1,165,653	3,045,220	3,465,220	2,299,567
Expense Transfer	(18,121,030)	(7,759,201)	(34,571,081)	(31,298,248)	(41,549,485)	(41,829,485)	(10,531,237)
General Fund Support	0	0	(4,311,540)	(4,107,712)	(4,236,685)	(4,236,685)	(128,973)
Total Expenditures	$129,845,161	$131,284,383	$117,754,900	$118,935,222	$145,465,621	$145,605,621	$26,670,399
Allocated Positions	1,160.70	1,163.03	1,231.83	1,176.95	1,190.05	1,190.05	13.10
Total Staffing	1,160.70	1,163.03	1,231.83	1,176.95	1,190.05	1,190.05	13.10

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 419 Communicable Disease Control Program
- 1175 422 Clinic Services
- 1175 428 Immunization Services
- 1175 434 Outside Agency Support
- 1175 435 Public Health Laboratory
- 1175 455 Emergency Preparedness& Response
- 1175 465 Pharmacy

Environmental Health Division

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

Health Education Division

- 1175 407 Childhood Learning Program
- 1175 412 Tobacco Education
- 1175 414 Health Education
- 1175 415 Women, Infants & Children
- 1175 433 Nutrition and Physical Activity
- 1175 437 CARE NorCAP

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

Maternal, Child & Adolescent Health (MCAH) Division

- 1175 408 Alternative Response Team (ART)
- 1175 416 Public Health Field Nursing
- 1175 418 Child Health & Disability Prevention
- 1175 420 Maternal & Child Health Coordinated Services
- 1175 426 Nurse Family Partnership
- 1175 460 MCAH Personnel
- 1175 493 California Children's Service

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

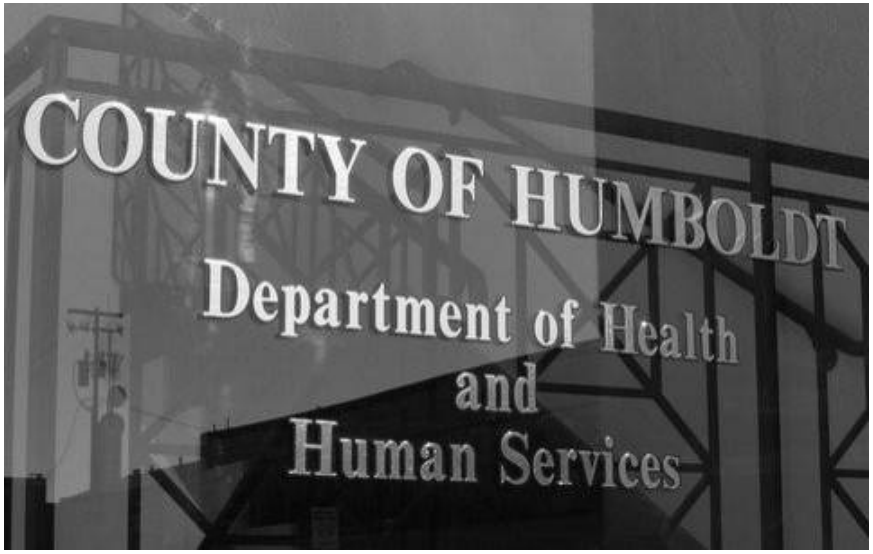
- 1110 515 Title IV-E Waiver
- 1110 517 Temporary Assistance for Needy Families (TANF)
- 1110 518 Foster Care

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 599 Veterans Services

In addition, the following budget units, which are no longer in use, are included in summary tables for past years:

- 1160 519 TANF-ECF
- 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 mission of the Humboldt County Department of Health and Human Services is to reduce poverty and connect people and communities with opportunities for health and wellness.

The Departments vision is: People helping people to live better lives.

Program Discussion

The Department of Health and Human Services has historically strived to maximize its resources, both fiscal and staffing, towards the "integration" of State programs and initiatives. This has created some promising practices for serving children, families, adults and older adults in the context of their community and culture in a holistic manner. Additionally these practices allow the Department to protect economically, emotionally and socially vulnerable populations.

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 Assemblymember Virginia Strom-Martin. 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 began Phase II, which was authored by Assemblywoman Patti Berg and authorized continuation of Humboldt County's transformational work. In October 2007, Governor Schwarzenegger signed Assembly Bill 315 (Berg) making DHHS a permanent agency.

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 goals are continued (2011-2016) with AB 315. The 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 deliver coordinated, efficient integrated services for children, families and adults.
2. To focus services on client and community strengths and emphasize prevention, resiliency, recovery and hope.
3. To collaborate with clients in their recovery and tailor services to fit the values and needs identified.
4. To ensure quality and accountability of evidence-based and outcome-driven programs.
5. To value and nurture partnerships with community stakeholders.

Performance Measures

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

FY 2008-09 Actual	*FY 2009-10 Actual*	*FY 2010-11 Actual*	*FY 2011-12 Projected*	*FY 2012-13 Estimate*
N/A	*N/A*	*0%*	*10%*	*10%*

Describe why this measure is important and/or what it tells us about the performance of this budget unit: The Department of Health and Human Services' goal is to implement the Patient Protection and Affordable Care Act (Act), commonly known as health care reform, in the most efficient and optimal manner to maximize federal funding potential and improve the health of our community. The Department will continue to strategically plan for seamless enrollment into Medi-Cal of an estimated 8,000-9,000 currently uninsured low income residents not covered by Medi-Cal or CMSP. Many residents will be newly eligible for the program in 2014; others potentially eligible under current rules will be served by improved processes and outreach activities. DHHS worked with the County Medical Service Program (CMSP) to transition almost 90% of all CMSP clients into the new Low Income Health Program Path2Health as a bridge to the Act's 2014 expansion on Medi-Cal. DHHS will also work to maximize opportunities under the Act to expand access to mental health and substance use disorder services, and will position the Department to take full advantage of the Act's Public Health Prevention Fund to expand the Department's prevention and wellness activities. This will create opportunities for improved safety and health and protect vulnerable populations.

2. Description of Performance Measure: Percentage of General Relief population provided recovery focused services				
FY 2008-09 Actual	*FY 2009-10 Actual*	*FY 2010-11 Actual*	*FY 2011-12 Projected*	*FY 2012-13 Estimate*
N/A	*N/A*	*5%*	*50%*	*50%*
Describe why this measure is important and/or what it tells us about the performance of this budget unit: DHHS plan for 2012-2013 is to provide multi-disciplinary services to General Relief (GR) clients. As many of the GR clients have multiple barriers to recovery, a multi-disciplinary service model has been developed to provide holistic services to each client. The integrated service delivery model includes GR eligibility workers, Social Service Social Workers, Mental and Public Health staff. Proactive case planning and management is provided to improve social, mental and physical outcomes for each client with the goal of moving each client off of aid to become self-sufficient. This includes ensuring that GR clients are linked to and follow up with mental health treatment and medical treatment when needed. These services provide opportunities for improved safety and health and protect vulnerable populations.				

3. Description of Performance Measure: Percentage of Adult Services population provided services that ensured independence and safety				
FY 2008-09 Actual	*FY 2009-10 Actual*	*FY 2010-11 Actual*	*FY 2011-12 Projected*	*FY 2012-13 Estimate*
N/A	*N/A*	*0%*	*10%*	*70%*
Describe why this measure is important and/or what it tells us about the performance of this budget unit: DHHS plan for 2012-13 is to provide multi-disciplinary, integrated services to Adult Protective Services and In-Home Supportive Services clients. The goal of the program is to provide services which enable elders, disabled and/or dependent adults and disabled children to live to their highest personal potential in the least restrictive environment. The multi-disciplinary service model provides holistic services to each client. The integrated service delivery model includes Social Service Social Workers, Mental Health Clinicians and Public Health Nurses. Proactive case planning and case management is provided with the goal of ensuring the individual's right to pursue the highest potential of physical, emotional, social, and environmental wellness, safety, and independence. These services provide opportunities for improved safety and health and protect vulnerable populations.				

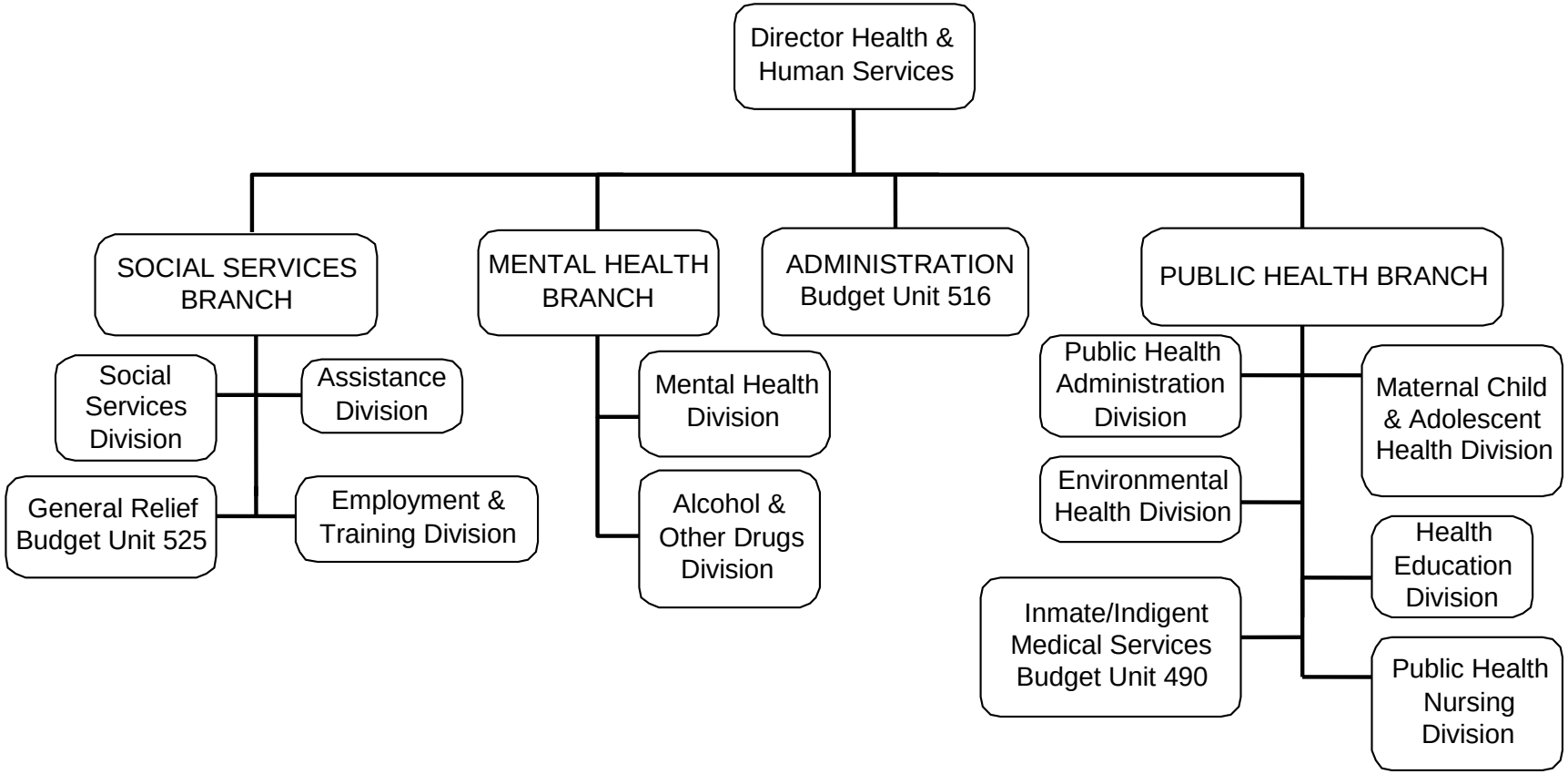
4. Description of Performance Measure: Percentage of children in Foster Care who had access to and received mental health services (measured as the Medi-Cal Mental Health Penetration Rate for Foster Youth)

FY 2008-09 Actual	*FY 2009-10 Actual*	*FY 2010-11 Actual*	*FY 2011-12 Projected*	*FY 2012-13 Estimate*
N/A	*N/A*	*25%*	*70%***	*80%*

Describe why this measure is important and/or what it tells us about the performance of this budget unit: DHHS remains committed to a holistic approach in working with children, youth and their families. In 2010, DHHS integrated child welfare services and children's mental health services within a single organizational structure. As integration proceeds, Public Health nurses will be incorporated within this same organizational structure. The integrated structure facilitates a more seamless provision of services to children and youth in Child Welfare Services. During 2011-12, a Transition Aged Youth (TAY) Division was implemented based on a plan developed in partnership with youth. In addition, two federal grants were secured to facilitate system transformation efforts. During 2012-13, evidence based practices will be implemented to improve youth service delivery, address adolescent substance abuse, and improve safety and wellbeing of children and youth referred to or served by Child Welfare Services. These projects will lead to improved outcomes and greater program efficiency. In addition, federal grants related to reducing long-term foster care and expansion of a children's system of care will facilitate further systemic transformation toward effective and efficient service delivery. This performance measure leads to opportunities for improved safety and health. It also allows the department to enforce laws and regulations to protect economically, emotionally and socially vulnerable populations.

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

Operating Divisions Organizational Chart:



1160 - Social Services Branch	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Charges for Services	$1,252,044	$1,430,381	$0	$0	$0	$0	$0
Other Revenues	0	0	0	0	0	0	0
(To)/From Non-GF Fund Balance	25	5,294	0	0	0	0	0
Total Revenues	$1,252,069	$1,435,675	$0	$0	$0	$0	$0
Expenditures							
Salaries & Benefits	$1,590,525	$1,838,383	$1,707,696	$2,355,241	$2,878,246	$2,878,246	$523,005
Supplies & Services	675,341	684,739	703,059	702,934	728,000	728,000	25,066
Other Charges	102,316	105,761	98,348	273,599	271,468	271,468	(2,131)
Expense Transfer	(1,116,113)	(1,193,208)	(2,509,103)	(3,331,773)	(3,877,714)	(3,877,714)	(545,941)
Total Expenditures	$1,252,069	$1,435,675	$0	$0	$0	$0	$0
Allocated Positions	31.00	31.00	33.00	35.00	35.00	35.00	0.00
Temporary (FTE)	0.00	0.00	5.00	2.03	6.00	6.00	3.97
Total Staffing	31.00	31.00	38.00	37.03	41.00	41.00	3.97

Purpose

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

Recommended Budget

The recommended budget for DHHS Administration is $3,877,714, an increase of $394,472 or 10% from FY 2011-12. Most of this increase is due to an accounting change that impacted expense transfers. The increase net of this change was $32,955 or 1% and is primarily due to changes in benefit and insurance costs. Full staffing includes 35 FTE with no staffing changes from FY 2011-12.

Board Adopted

The Board adopted this budget as recommended.

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 "People helping people live better lives," DHHS is committed to reduce poverty and connecting people and communities to opportunities for health and wellness.

2011-12 Accomplishments

1. Continued 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. This has improved the Department's ability to create opportunities for improved safety and health and protect vulnerable populations.

2. Began operations of the Transition Age Youth Unit, integrating the service capacity of appropriate staff from all three DHHS branches. This has improved the Department's ability to create opportunities for improved safety and health as well as protect vulnerable populations.

3. Continued to implement initiatives of the Cultural Competency and Client Diversity Committee and made appropriate training programs available to increase cultural competency within the agency. This has improved the Department's ability to create opportunities for improved safety, health and protect vulnerable populations.

4. Continued to develop fiscal and statistical tools to monitor program outcomes to ensure efficiency and effectiveness. This has improved the Department's ability to create opportunities for improved safety, health and protect vulnerable populations.

5. Continued to evaluate and track Evidence Based Practices (EBP) outcomes to ensure adherence to program quality standards. This has improved the Department's ability to create opportunities for improved safety, health and protect vulnerable populations.

2012-13 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. This will continue to improve the Department's ability to create opportunities for improved safety, health and enterprise.

2. To continue launch of the operations of the Transition Age Youth Unit, integrating the service capacity of appropriate staff from all three DHHS branches. This will continue to improve the Department's ability to create opportunities for improved safety, health and protect vulnerable populations.

3. To implement initiatives of national health care reform, known as the Affordable Care Act, including promoting healthy lifestyles and increased prevention services. This allows the Department to create opportunities for improved safety and health.

1180 - Alcohol & Other Drugs Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Fines, Forfeits & Penalties	$536,712	$98,363	$132,655	$94,353	$147,387	$147,387	$53,034
Other Govt'l Agencies	2,195,082	2,343,017	1,777,038	1,580,256	1,644,781	1,644,781	64,525
Charges for Services	247,060	230,734	12,524	44,127	41,387	41,387	(2,740)
Other Revenues	100,455	739	940	911	3,000	3,000	2,089
(To)/From Non-GF Fund Balance	67,462	(4,583)	(24,537)	21,618	0	0	(21,618)
Total Revenues	$3,146,771	$2,668,270	$1,898,620	$1,741,264	$1,836,555	$1,836,555	$95,291
Expenditures							
Salaries & Benefits	1,426,842	902,438	1,026,347	$1,276,975	$1,329,804	$1,329,804	$52,829
Supplies & Services	1,150,025	1,102,630	1,072,956	990,675	1,089,433	1,089,433	98,758
Other Charges	666,585	663,202	688,355	432,629	509,081	509,081	76,452
Expense Transfer	(96,681)	0	(889,038)	(959,015)	(1,101,763)	(1,101,763)	(142,748)
Total Expenditures	$3,146,771	$2,668,270	$1,898,620	$1,741,264	$1,836,555	$1,836,555	$95,291
Allocated Positions	33.45	33.45	33.45	30.45	33.45	33.45	3.00
Temporary (FTE)	0.50	0.40	1.30	0.00	0.00	0.00	0.00
Total Staffing	33.95	33.85	34.75	30.45	33.45	33.45	3.00

Purpose

In order to protect economically vulnerable populations, the Division of Alcohol and Other Drugs Programs (AODP) provides community-appropriate levels of service by promoting the self-reliance of citizens, fostering transparent, accessible, welcoming and user friendly structures. The division offers its 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).

Recommended Budget

The recommended budget for the Alcohol and Other Drugs is $1,836,555, an increase of $95,557 from FY 2011-12. This increase is primarily due to changes in contracted program services, benefit and insurance costs. Three positions will remain unfunded and frozen due to prior year budget reductions. This is an increase of one position from FY 2012-13, which is a Senior Substance Abuse Counselor position in budget unit 425.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

Within the Alcohol & Other Drugs Fund there are 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. These programs are operated under various mandates.

1180 425 Adult and Adolescent Alcohol & Other Drug Treatment Program

The purpose of the Adult and Adolescent Alcohol and Other Drug Treatment Program (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 and outpatient treatment through groups; individual intervention ranging from reduction of harmful behaviors to full abstinence, services coordination for COD, treatment screening and referrals, prevention through education and information, and consultation with other community providers. Other services that are related to improving client functioning include individual and family counseling, and parent education.

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

The AODP adopted budget for FY 2012-13 is $1,835,055. This represents an increase of $95,557 or 5% from FY 2011-12. Full staffing includes 19.70 FTE permanent positions; of these positions, 2.00 FTE will be held frozen and unfunded.

1180 429 Substance Abuse and Crime Prevention Act

Funding previously available through State and federal resources for the Substance Abuse and Crime Prevention Act (SACPA) program has been completely eliminated in the FY 2012-13 budget. The SACPA program 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. The SACPA population will be served to the extent that resources are available.

The SACPA budget for FY 2012-13 includes personnel and overhead expenditures related to 2.0 FTE. These positions will be funded through expense transfer from other DHHS programs.

1180 431 Healthy Moms Program

The Healthy Moms Program provides perinatal treatment as defined by the State Office of Perinatal Substance Abuse (California Health & Safety Code, Sections 300-309.5). A comprehensive alcohol and other drug treatment program for pregnant and parenting women, Healthy Moms provides assessment, group treatment, and mental health treatment for individuals and families. A parent educator provides parenting classes and supervises the on-site daycare.

The Healthy Moms Program funding is from cost applied transfer from Alcohol and Other Drug (AODP) fund sources:

federal Substance Abuse and Prevention (SAPT) block grant allocation, 2011 State Realignment, and Drug Medi-Cal and Perinatal Medi-Cal federal reimbursement. Other cost applied transfers include Medi-Cal federal financial participation, Early Periodic Screening, Diagnosis and Treatment (EPSDT), and Cal Works.

The Healthy Moms program's adopted budget for FY 2012-13 is $718,827. This represents an increase of $37,270 or 5% from FY 2011-12. Full staffing includes 11.75 FTE permanent staff. One Senior Substance Abuse Counselor position will be held frozen and unfunded.

2011-12 Accomplishments

1. Implemented the Dual Recovery Program which serves the needs of severely mentally ill adults with serious substance abuse issues. This program focuses on decreasing the long term deleterious impact of co-occurring disorders that result in utilization of restrictive services, such as jail or inpatient locked treatment, and end in early mortality. The treatment modality selected for this program was the Integrated Dual Diagnosis Treatment, which is a practice recognized by the Substance Abuse and Mental Health Services Administration as an effective program. This program will aid in the protection of emotionally and socially vulnerable populations.

2012-13 Objectives

1. To implement the Seeking Safety treatment program which will serve the vulnerable population of adults who have experienced trauma and suffer from substance abuse. It has long been known that Post Traumatic Stress Disorder and substance abuse disorders are closely linked. Without the treatment of both disorders, the outcomes for these clients are poor with increased legal and medical problems, suicidality, poor social and work functioning and higher chances of future trauma. An integrated treatment model addresses both of these disorders simultaneously and helps the clients with many positive outcomes including improving their health and safety in the community.

2. To implement evidence based model for adolescent treatment in a community setting to reduce the need for out-of-county placement and increase positive outcomes. This will aid in the protection of vulnerable populations.

1190- Employment Training Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Use of Money & Property	$0	$1,213	$0	$0	$0	$0	$0
Other Govt'l Agencies	2,863,295	4,475	0	30,825	111,548	111,548	80,723
Charges for Services	0	2,798,069	0	24,912	0	0	(24,912)
Other Revenues	3,110	224	135	0	0	0	0
(To)/From Non GF Fund Balance	(45,386)	59,741	(87,788)	(1,593)	0	0	1,593
Total Revenues	$2,821,019	$2,863,722	($87,653)	$54,144	$111,548	$111,548	$57,404
Expenditures							
Salaries & Benefits	$1,540,407	$1,462,174	$1,533,738	$1,440,600	$1,658,807	$1,658,807	$218,207
Supplies & Services	239,644	242,123	195,263	139,829	282,956	282,956	143,127
Other Charges	2,073,948	2,202,301	2,180,822	1,401,081	1,345,421	1,345,421	(55,660)
Fixed Assets	0	8,762	2,600	0	35,000	35,000	35,000
Expense Transfer	(1,032,980)	(1,051,638)	(4,000,076)	(2,927,366)	(3,210,636)	(3,210,636)	(283,270)
Total Expenditures	$2,821,019	$2,863,722	($87,653)	$54,144	$111,548	$111,548	$57,404
Allocated Positions	26.00	29.00	29.00	29.00	28.00	28.00	(1.00)
Temporary (FTE)	2.00	2.00	2.00	0.00	0.00	0.00	0.00
Total Staffing	28.00	31.00	31.00	29.00	28.00	28.00	(1.00)

Purpose

The Employment and Training Division (ETD) is Humboldt County's workforce division, helping Humboldt residents at several levels with workforce readiness, labor exchange and job search support, coordinating and funding vocational training programs, and helping employers with placements and subsidized wage and tax credit programs. ETD is the program operator for Workforce Investment Act (WIA) Adult, Dislocated Worker and Rapid Response programs; ETD is a key partner in the Humboldt County One-Stop Career Center, The Job Market, providing 4.5 positions to the Center, including the One-Stop Manager; and ETD provides job readiness, job search and job placement supports to CalWORKs Welfare to Work (WtW) program, to DHHS' new Transition Age Youth Division and to the Humboldt County Probation Department.

The purpose of ETD's provision of services, wherever applied, is to promote an increase in the employment, job retention, earnings, and occupational skills of participants. This, in turn, improves the quality of the workforce, reduces welfare dependency and improves the productivity and competitiveness of Humboldt County as well as creates opportunities for improved health and safety and the protection of vulnerable populations.

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

Recommended Budget

The total Employment and Training Division budget for FY 2012-13 is $3,322,184, a decrease of $112,421 or 3% from the previous year. This is primarily the result of reduced funding from State and federal sources. Due to the elimination of a program one vacant Employment Training Program Coordinator position was eliminated in budget unit 597.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

1190-582 ETD Multi-Project

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

- WIA Youth Program – ETD provides technical assistance to the Youth Program Operators within the five contracted regions of the County helping to ensure for appropriate completion of WIA eligibility, supportive service expenditures, performance requirements; and
- Employment Development Department Youth Career Technical Education Grant – ETD again is providing technical assistance, as above, in proper program

management to the North Coast Veterans Resource Center and Eureka City Schools who are performing on these grants.

The total baseline budget for FY 2012-13 is $25,190, a decrease of $100,538 or 80% due to reduction in grant funding.

1190-584 Supplemental Displaced Worker

The Supplemental Displaced Worker fund is for WIA additional assistance awards that allow ETD to provide assistance in case of large layoff(s) or plant closure(s). ETD has none at this time. This represents a budget decrease of $351,169 from FY 2011-12.

1190-586 Rapid Response

Rapid Response (RR) is a service for both employees and businesses affected by a significant layoff or business closure. For the dislocated worker RR provides information about safety-net supports and help to get back to work. For the employer, the RR program helps with business expertise to possibly avert a layoff or closure; or at the minimum, assistance in the layoff process to assure for pro-active job supports for the affected workers. Rapid Response action and support is taken in partnership with the Small Business Development Center.

The total baseline budget for FY 2012-13 is $45,190, a decrease of $39,418 or 46.5% from FY 2011-12.

1190-589 Adult Programs

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

The total baseline budget for FY 2012-13 is $405,000, an increase of $22,800 or 6% from FY 2011-12.

1190-590 Dislocated Worker Programs

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

The total baseline budget for FY 2012-13 is $405,000, an increase of $38,850 or 10.6% from FY 2011-12.

1190-597 Employment and Training Division Staff

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

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

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

The total baseline budget for FY 2012-13 is $2,441,804, an increase of $384,901 or 18.7% from FY 2011-12. This increase is primarily due to increased services to Probation as a result of Public Safety Realignment and CalWORKS programs.

2011-12 Accomplishments

1. Expanded partnerships and service by offering enhanced workforce services to the CalWORKs division and first-time services to the TAY Division and the Probation Department. This protects vulnerable populations.

2. Completed the Clean Energy Workforce Training Grant, training 94 adults and 72 youth participants in "green" construction skills, with each participant gaining building-trades green certifications and work experience to create opportunities for improved health and safety and protect vulnerable populations. 42% entered employment as of the grant end date.

3. Achieved a 75.1% entered employment rate across WIA Core, Intensive and Training Services under new Integrated Service Design model this supports workforce development and protects vulnerable populations.

4. Secured an 85.3% retention rate for *all* WIA program services one year after employment to support self-reliance of citizens.

5. Achieved average earnings of $19,715 for adult clients who entered employment. This supports the self-reliance of citizens.

2012-13 Objectives

1. To meet or exceed negotiated WIA program performance measures to create opportunities for

protect vulnerable populations and provide community appropriate levels of service.

2. To continue to improve workforce support for CalWORKs clients helping more individuals return to work sooner, thereby improving the County's CalWORKs work participation rate to create opportunities to protect vulnerable populations.

3. To work with the other One-Stop Operators to fully implement the 2012-13 revised Job Market strategic plan that adjusts services and partner roles to best respond to unilateral fiscal and human resource reductions across the system to support business and workforce development.

4. To successfully migrate to the new California State Workforce Service Network Software that will be available in fall 2012, replacing ETD's existing client registration, tracking and case management system which will enable the Department to provide community-appropriate levels of service.

5. To expand and continue to improve remote services – adding a satellite in Garberville and providing more workshops, one-on-one vocational counseling and providing labor exchange and job search supports to Eastern, Northern and Southern Humboldt communities to enable the program to provide community-appropriate levels of service.

1175 - Public Health Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Licenses & Permits	$183,801	$164,422	$169,818	$123,483	$175,200	$175,200	$51,717
Other Govt'l Agencies	836,875	504,584	84,776	511,497	777,133	777,133	265,636
Charges for Services	1,607,167	1,782,492	1,778,484	1,926,187	1,917,214	1,917,214	(8,973)
Other Revenues	45,169	32,387	34,812	57,814	104,751	104,751	46,937
General Fund Contribution	0	0	1,415	0	1,415	1,415	1,415
(To)/From Non-GF Fund Balance	(95,315)	(22,735)	405,771	7,071	0	0	(7,071)
Total Revenues	$2,577,697	$2,461,150	$2,475,076	$2,626,052	$2,975,713	$2,975,713	$349,661
Expenditures							
Salaries & Benefits	$652,473	$667,536	$665,841	$710,660	$768,732	$768,732	$58,072
Supplies & Services	460,594	422,062	352,041	358,714	543,087	543,087	184,373
Other Charges	1,464,630	1,371,552	1,429,156	1,547,521	1,636,469	1,636,469	88,948
Fixed Assets	0	0	24,447	12,228	31,240	31,240	19,012
Intrafund Transfer	0	0	3,591	(3,071)	(3,815)	(3,815)	(744)
Total Expenditures	$2,577,697	$2,461,150	$2,475,076	$2,626,052	$2,975,713	$2,975,713	$349,661
Allocated Positions	33.00	33.00	33.00	33.00	33.00	33.00	0.00
Temporary (FTE)	0.40	0.00	0.00	0.45	0.40	0.40	(0.05)
Total Staffing	33.40	33.00	33.00	33.45	33.40	33.40	(0.05)

Purpose

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

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

Recommended Budget

The total Environmental Health budget for FY 2012-13 is $2,975,713, an increase of $36,786 or almost 1% from the previous year. This is primarily the result of increased benefit and insurance costs. Four positions still remain frozen and unfunded.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

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

1175 406 Consumer Protection

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

The Consumer Protection program consists of several elements, which include: food facility inspections, substandard

housing, environmental lead assessments, organized camp inspections, vector control activities, jail inspections, rabies control, household garbage complaint investigations, public pool and spa inspections, safe drinking water supply, and monitoring of recreational waters.

The Consumer Protection Program has a baseline budget, for FY 2012-13 of $930,743, an increase of $12,864 from the prior year.

1175 411 Hazardous Materials Program

Within the Hazardous Materials Unit is the Certified Unified Program Agency (CUPA) for Humboldt County and its cities. The purpose of the CUPA is to 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 and State grants. In addition, the program applies annually for equipment and training funds through the CUPA Forum Board.

The Hazardous Materials Program has a baseline budget for FY 2012-13 of $872,760, an increase of $13,664 from the prior year.

1175 430 Local Enforcement Agency

Within the 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. In addition, the program

receives an annual grant of approximately $19,000 from CalRecycle.

The Local Enforcement Agency has a baseline budget for FY 2012-13 of $420,504, a decrease of $3,416 from the prior year.

1175 432 Local Oversight Program

Within the Hazardous Materials Unit is the 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 become eligible for cleanup funding. Local guidance and State funding help expedite site closure.

The Local Oversight Program is funded through an annual contract with the California Water Resources Control Board. The baseline budget for FY 2012-13 is $364,697. Funding has remained consistent from the prior year.

1175 486 Land Use Program

The Land Use Program protects public health and prevents environmental degradation through the implementation and enforcement of State and local regulations pertaining to onsite wastewater disposal and private water source development. The program works in conjunction with the Planning and Building Department, reviewing a variety of projects to ensure wastewater and water supply requirements are incorporated into development permits issued through each Division. Staff working in the Land Use Program consults with engineers and contractors to ensure that new onsite wastewater systems are properly designed, installed, and operated. Failing onsite wastewater systems are also addressed through the Land Use Program “Repair Permit” process. The Land Use Program collaborates with the North Coast Regional Water Quality Control Board on all commercial development projects that generate a large daily wastewater flow.

The Land Use Program is responsible for administering a growing, State-mandated “Non-Standard Sewage Disposal System” monitoring program which requires billing, issuance of operating permits and periodic inspections of nearly 800 systems.

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

The Land Use Program has a baseline budget for FY 2012-13 of $405,009, an increase of $13,674 from the prior year.

2011-12 Accomplishments

1. Completed the cleanup and closure of 11 Local Oversight Program former underground storage tank sites, completed 409 routine hazardous materials and 131 agricultural facility inspections to enforce laws and regulations to protect the public.

2. Updated the Consumer Protection Program webpage to provide information to foster transparent, accessible, welcoming and user-friendly services to operators and the public.

3. Responded to 512 citizen complaints and 192 service requests to enforce laws and regulations that protect residents. Complaints include failing septic systems, household garbage, food establishments, substandard housing, roadside dumping, rabies, hazardous materials storage and spills, vector problems (rodents, mosquitoes, and vermin), drinking water, lead paint, pool and recreational health and methamphetamine labs.

4. Established a funding source for the clean-up of illegal roadside hazardous waste dump sites in Humboldt County using Supplemental Environmental Project funds from environmental violators to manage resources to ensure sustainability of services.

5. Improved staff proficiency on EnvisionConnect database for improved report writing, inspection and permit tracking and time study capabilities to maintain infrastructure.

2012-13 Objectives

1. To complete the cleanup and closure of Local Oversight Program former underground storage tank sites to enforce laws and regulations to protect the public.

2. To ensure all Humboldt County body art facilities are permitted and inspected and artists are registered, pursuant to the new Health and Safety Code requirements that protect the practitioner and client from the transmission of infectious diseases. This exemplifies the enforcement of law and regulations to protect residents.

3. To transition all hazardous materials facility electronic records to the State's electronic database called "California Environmental Reporting System" to foster transparent, accessible, welcoming and user friendly services.

4. To complete 1,700 routine food facility inspections to enforce laws and regulations that protect consumers.

5. To complete 600 routine hazardous materials inspections to enforce laws and regulations that protect the public and the environment.

1100 - General Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Other Revenues	$647,496	$658,726	$656,424	$502,728	$650,000	$650,000	$147,272
General Fund Support	2,126,551	2,211,599	2,308,046	2,180,796	2,085,369	2,085,369	(95,427)
Total Revenues	$2,774,047	$2,870,325	$2,964,470	$2,683,524	$2,735,369	$2,735,369	$51,845
Expenditures							
Other Charges	$2,774,047	$2,870,325	$2,964,470	$2,683,524	$2,735,369	$2,735,369	$51,846
Total Expenditures	$2,774,047	$2,870,325	$2,964,470	$2,683,524	$2,735,369	$2,735,369	$51,846
Allocated Positions	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Temporary (FTE)	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Staffing	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Purpose

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

Recommended Budget

The General Relief recommended budget for FY 2012-13 is $2,735,369, an increase of $51,828 from the previous year. Recovered funds are estimated to increase by approximately the same amount. The County's General Fund contribution is $2,085,369, an increase of $1,828 from FY 2011-12.

Board Adopted

The Board adopted this budget as recommended.

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

The County General Fund provides 76.2% of the funding for the GR program. The remaining 23.8% 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. 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.

2011-12 Accomplishments

1. Integrated Employment and Training Division (ETD) with the General Relief Program by providing employment assessments, job search assistance and community service placements in order to support the self-reliance of citizens.

2. Continued to utilize a multi-disciplinary team approach to ensure that individuals with mental health and medical needs were linked with appropriate resources allowing the Department to provide community-appropriate levels of support.

3. Continued to utilize the Transportation Assistance Program (TAP) to assist individuals in relocating to areas outside of Humboldt County, in which they had existing support systems or where they had found employment, thus creating opportunities for improved safety and health.

4. Provided shelter during inclement weather months for children, families and dependent adults. Case management services were provided by DHHS staff to assist in locating and securing permanent housing with the goal of protecting vulnerable populations.

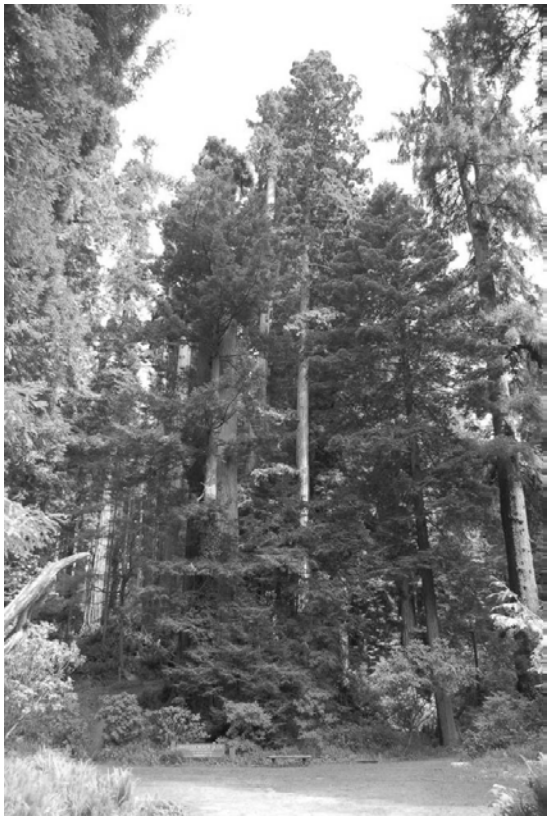
2012-13 Objectives

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

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

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

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



1175 - Public Health Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Other Govt'l Agencies	$1,406,589	$1,795,383	$1,342,979	1,952,820	$2,920,355	$2,920,355	$967,535
Charges for Services	558,831	261,396	183,555	317,327	326,836	326,836	9,509
Other Revenues	207,485	236,194	306,909	209,516	14,889	14,889	(194,627)
(To)/From Non-GF Fund Balance	(54,652)	55,545	965,675	185,789	0	0	(185,789)
Total Revenues	$2,118,253	$2,348,518	$2,799,118	$2,665,452	$3,262,080	$3,262,080	$596,628
Expenditures							
Salaries & Benefits	$0	$0	$0	$976,084	$1,105,802	$1,105,802	$129,718
Supplies & Services	570,333	642,404	973,683	781,402	1,249,679	1,249,679	468,277
Other Charges	508,404	385,444	714,624	1,557,383	1,938,300	1,938,300	380,917
Fixed Assets	1,039,516	1,320,670	1,730,787	13,322	0	0	(13,322)
Intrafund Transfer	0	0	54,417	(662,740)	(1,031,701)	(1,031,701)	(368,961)
General Fund Contribution	0	0	(674,393)		0	0	0
Total Expenditures	$2,118,253	$2,348,518	$2,799,118	$2,665,452	$3,262,080	$3,262,080	$596,628
Allocated Positions	36.40	37.40	50.83	51.83	50.43	50.43	(1.40)
Temporary (FTE)	0.40	1.00	1.10	0.85	0.00	0.00	(0.85)
Total Staffing	36.80	38.40	51.93	52.68	50.43	50.43	(2.25)

Purpose

Health Education is a core function of Public Health and is mandated under Title 17 of the California Adminstrative Code. Health Education creates opportunities for improved safety, health and enterprise and aims to protect economically vulnerable populations. Health Education improves the community's health by providing information, education and outreach services, and includes the federally-funded Women, Infant and Children's (WIC) Program.

This narrative includes discussion on funding and operation of 12 Health Education budget units: Childhood Lead Program (407), Tobacco Education Program (412), Public Health Education (414), Women Infants and Children Supplemental Nutrition Program – WIC (415), Nutrition and Physical Activity (433), Comprehensive AIDS Resources Emergency – Nor-CAP (437), Fiscal Agent (449), Drug Free Communities (451), Alcohol & Other Drug Prevention (452), MHSA-PEI Suicide Prevention and Stigma/Discrimination Reduction (454), Housing Opportunities for People With AIDS (470), and Family Violence Prevention (488).

Recommended Budget

The total Health Education budget for FY 2012-13 is $3,262,080, a decrease of $153,892. This change is primarily due to revenues being recorded as intrafund transfers in the adopted budget. If transfers are excluded the budget actually increased $157,237 or almost 5% from the previous year. This is primarily the result of increased State and federal funding and is discussed further below. As a result of prior year budget reductions 2.8 positions will remain frozen and unfunded for FY 2012-13.

As a result of prior year budget reductions 2.80 FTE positions will remain unfunded and frozen for FY 2012-13. This is a reduction of over six positions from FY 2011-12. This change is the result of 1.8 FTE positions being disallocated and 4.9 FTE previously frozen positions being funded and unfrozen.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

The Health Education Division works to change the community's knowledge, attitudes and behaviors in order to prevent disease and promote health. Health Education services include alcohol, tobacco and other drug prevention services; HIV, hepatitis and other communicable disease prevention; chronic disease prevention through WIC nutritious food coupons, nutrition and physical activity education and promotion; family violence and injury and suicide prevention and stigma/discrimination reduction.

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 Childhood Lead Program has a baseline budget, excluding transfers, for FY 2012-13 of $65,231. Funding has remained consistent from the prior year.

1175 412 Tobacco Education Program (TEP)

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

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

The Tobacco Education Program has a baseline budget, excluding transfers, for FY 2012-13 of $155,000, an increase of $3,332 from the prior year level of $151,668.

1175 414 Health Education

This budget unit 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 proper use of child safety seats, impaired driving prevention, pedestrian and bicycle safety, and water safety.

The program also provides health promotion efforts and harm reduction services for people experiencing addiction, homelessness and/or mental health challenges. Activities focus on HIV, Hepatitis C, and overdose prevention and referral. The program provides coordination with local needle exchange programs and registration of local pharmacies into the "Disease Prevention Demonstration Project (SB1159) to sell syringes over the counter.

A new focus area is the Community Transformation Chronic Disease Prevention program with four strategic directions: Tobacco Free Living – focus on smoke free multi unit housing, Healthy Eating and Active Living – focus on reducing access to sugar sweetened beverages, High Impact Evidence-based Clinical and Preventive Services – focus on chronic disease self management program, and Healthy and Safe Physical Environments – focus on safe routes to schools. The program seeks to achieve reductions in health disparities, specifically among low income residents, involve community residents and engage youth.

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

Health Education has a baseline budget for FY 2012-13 of $968,714, a decrease of $4,998 from the prior year level of $973,712.

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

The WIC Program's core roles are to provide support to economically vulnerable populations including pregnant women, infants and young children through the issuance of checks for specified nutritious foods and to promote health through nutrition education.

During FY 2011-12, the program continued successful partnerships with the Well Child Dental Visit clinics co-located at three WIC clinic sites. Focused outreach activities to recruit and enroll clients throughout the service area began in June of 2010 and continue with special emphasis on the large Family Resource Center network throughout the County and with childcare providers via the Changing Tides program.

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

The WIC Program operates a mobile WIC clinic in a lower income neighborhood of West Eureka, utilizing the County-owned Mobile Engagement Vehicle. The WIC program continues to explore other opportunities to provide services to outlying communities to ensure all eligible residents can access WIC services.

The WIC Program has a baseline budget for FY 2012-13 of $1,318,131, a decrease of $58,509 from the prior year level of $1,376,740.

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 supports Humboldt CAN - Community for Activity and Nutrition, a community collaborative promoting physical activity, healthy eating and active public transportation, including Safe Routes to Schools.

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 and a youth engagement program in schools. Additionally, the Communities of Excellence in Nutrition, Physical Activity, and Obesity Prevention (CX3) project takes a look at select low-income neighborhoods to measure the nutrition environment and identify opportunities for improvement.

Staff participates with Community Nutrition Action Plan (CNAP) partners and North Coast Growers to provide food demonstrations, Cal Fresh Outreach, and tasting and nutrition education at Farmers' Markets and the local food bank.

The Nutrition and Physical Activity Program has a baseline budget for FY 2012-13 of $620,044, an increase of $120,781 from the prior year level of $517,263. This increase is due to additional funding for nutrition education through the CalFresh program.

1175 437 CARE – Nor-CAP 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 CARE-NorCAP Program has a baseline budget for FY 2012-13 of $204,194, a decrease of $7,896 from the prior year level of $212,090.

1175 449 Fiscal Agent

This budget provides the financial tools needed to monitor and facilitate the HIV- CARE Housing Opportunity for People with AIDS (HOPWA) Programs. The Fiscal Agent acts as the liaison between State and Local Health Providers. The State

allocates funds to support HIV/AIDS program activities, while the Fiscal Agent works at the community level ensuring program compliance. Humboldt County NorCAP HOPWA applies for and receives funding from this account, which is detailed in 1175-470.

This budget unit also includes Project HART, which is a HUD based program to provide housing assistance for people living with HIV.

The Fiscal Agent's baseline budget for FY 2012-13 is $58,911, an increase of $8,024 from the prior year level of $50,887. This increase is primarily due to additional grant funding for Project HART.

1175 451 Drug Free Communities

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

The grant operates on a federal fiscal year and the full project period is 9/30/2010-9/29/2014. The continuation application for year three has been submitted to the funder.

The Drug Free Communities Program has a baseline budget for FY 2012-13 of $201,080. Funding has remained consistent from the prior year.

1175 452 Alcohol and Other Drug Prevention

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

With a focus on environmental prevention strategies, the program works to reduce the availability of alcohol to youth and reduce injury and death associated with AOD impaired driving. Prevention efforts are designed to increase youth perceptions of risks associated with alcohol and other drug use and foster resiliency skills. Friday Night Live, another component of the program, is a school based action group for youth that encourages positive youth development.

The Alcohol and Other Drug Prevention Program has a baseline budget for FY 2012-13 of $188,566, an increase of $3,277 from the prior year level of $185,289.

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

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

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

Elements of the Stigma/Discrimination Reduction program include education for DHHS staff, medical providers, community agencies and the public who have direct contact with mental health consumers.
The Mental Health Services Act – Prevention and Early Intervention Program has a baseline budget for FY 2012-13 of $344,189, an increase of $68,718 from the prior year level of $275,471. This increase is due to additional program funding.

1175 470 HOPWA – Nor-CAP 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 is one of several organizations that are granted funds out of 1175-449.

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

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

The HOPWA – NorCAP Program has a baseline budget for FY 2012-13 of $32,561, a decrease of $2,206 from the prior year level of $34,767.

1175 488 Family Violence Prevention

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

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

The Family Violence Prevention Program has a baseline budget for FY 2012-13 of $140,160, an increase of $23,496 from the prior year level of $116,664. This increase is the result of Cal Fresh program funding.

2011-12 Accomplishments

1. Invested in County employees by coordinating a team of trainers to implement five two-day skills based trainings for DHHS workforce and community partners in order to improve capacity of professionals throughout Humboldt County who come into contact with populations at risk for suicide.

2. Raised attendance to include 100% of 12 sector representatives at each quarterly meeting of the Humboldt County Alcohol, Tobacco and Other Drug Prevention Coalition (ATODPC) to increase civic engagement. ATODPC also successfully completed the requirements for graduation from the National Coalition Academy sponsored by the Community Anti-Drug Coalitions of America. This will enable the Department to provide community-appropriate levels of service.

3. Reduced the overall automobile collision rate for the 16-20 year-old population from the 2008 federal base year total of 13.3% to 10.6% by September 30, 2011, thereby improving public safety.

4. Reduced the Had Been Drinking (HBD) drivers under age 21 in injury collisions by more than 20% from the 2008 federal base year total of 14 to 9 by September 30, 2011 to improve public safety.

2012-13 Objectives

1. To protect vulnerable populations, continue coordination of evidence-based practices for suicide prevention by implementing at least 3 two-day suicide intervention skills trainings for DHHS workforce and community partners.

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

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

4. To decrease the percentage of high school students reporting that they accessed alcohol from a person over 21 from 61% to 56%, thereby protecting vulnerable populations

5. To provide a minimum of six nutrition education activities to reach 600 income eligible individuals in qualifying communities in support of local and regional “Re-Think Your Drink” healthy beverage education

effort. This will create opportunities for improved safety and health

1100 - General Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Other Govt'l Agencies	$1,471,873	$1,217,253	$1,173,261	$1,196,439	$1,215,245	$1,215,245	$18,806
Other Revenues	0	880	8,420	9,110	8,500	8,500	(610)
General Fund Support	1,261,138	1,616,816	1,703,813	1,694,340	1,761,629	1,761,629	67,289
Total Revenues	$2,733,011	$2,834,949	$2,885,494	$2,899,888	$2,985,374	$2,985,374	$85,486
Expenditures							
Other Charges	$2,733,011	$2,834,949	$2,885,494	$2,899,888	$2,985,374	$2,985,374	$85,486
Total Expenditures	$2,733,011	$2,834,949	$2,885,494	$2,899,888	$2,985,374	$2,985,374	$85,486
Allocated Positions	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Temporary (FTE)	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Staffing	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Purpose

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

Recommended Budget

The recommended budget for FY 2012-13 is $2,985,374, an increase of $101,679 from the prior year level. The increase is the result of additional costs for the California Forensic Medical Groups contract which has an annual Consumer Price Index (CPI) adjustment.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

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

The County has dedicated its Tobacco Settlement receipts to fund the Inmate/Indigent Medical Care program. Annual Tobacco Settlement revenues fluctuate slightly, but are budgeted at $1.3 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.

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 is be used to offset the costs of inmate/indigent health care. Projected revenue for FY 2012-13 is $8,500.

1175 - Public Health Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Use of Money & Property	$0	$0	$1,750	$4,550	$4,200	$4,200	$2,450
Other Govt'l Agencies	6,084,813	6,271,303	2,888,131	3,478,284	5,646,315	5,646,315	2,758,184
Charges for Services	1,617,226	1,729,454	41,441	35,059	37,000	37,000	(4,441)
Other Revenues	33,783	63,589	92,083	19,905	27,135	27,135	(64,948)
(To)/From Non-GF Fund Balance	1,708,714	850,213	2,092,827	973,215	0	0	(2,092,827)
Total Revenues	$9,444,536	$8,914,559	$5,116,232	$4,511,014	$5,714,650	$5,714,650	($2,157,775)
Expenditures							
Salaries & Benefits	$3,440,329	$2,907,645	$1,483,769	$778,117	$1,997,598	$1,997,598	$513,829
Supplies & Services	2,586,339	2,196,839	1,317,130	1,705,735	2,191,752	2,191,752	874,622
Other Charges	3,417,868	3,808,900	3,963,736	4,490,186	4,660,312	4,660,312	696,576
Fixed Assets	0	1,175	2,484	10,079	0	0	(2,484)
Intrafund Transfer	0	0	(1,650,887)	(2,473,104)	(3,135,012)	(3,135,012)	(1,484,125)
Total Expenditures	$9,444,536	$8,914,559	$5,116,232	$4,511,014	$5,714,650	$5,714,650	$84,589
Allocated Positions	117.38	116.38	104.15	104.15	100.55	100.55	(3.60)
Temporary (FTE)	0.22	0.70	0.60	0.50	0.75	0.75	0.15
Total Staffing	117.60	117.08	104.75	104.65	101.30	101.30	(3.45)

Purpose

Maternal, Child, and Adolescent Health and Public Health Nursing Division (MCAH/PHN) programs protect economically vulnerable populations and provide 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/PHN programs provide community-appropriate levels of service and address access to care issues for targeted groups; nursing case management for medically and socially at-risk infants, children, adults and families; support for pregnant women and their families; perinatal and child oral health; perinatal substance use; newborn risk assessment; fetal, infant and child death review; perinatal and child nutrition; and the well-being of infants and children challenged by poverty and substance abuse. MCAH and PHN programs work collaboratively with community partners to address issues and solve problems. Statutory authority comes from Title 17 of the California Health and Safety Code.

This narrative includes discussion on the funding and operation of seven Maternal Child and Adolescent Health/Public Health Nursing budget units:

- Alternative Response Team (ART, 408)
- Public Health Field Nursing Services (416)
- Child Health & Disability Prevention (CHDP, 418)
- Maternal Child & Adolescent Health (MCAH, 420)
- MCH California Home Visiting Program (421)
- Nurse Family Partnership (426)
- Maternal Health Personnel Program (460)
- California Children's Services (CCS, 493)

Recommended Budget

The total MCAH/PHN budget for FY 2012-13 is $5,714,650, an increase of $463,820. This change is primarily due to the new MCAH California Home Visiting Program.

As a result of prior year budget reductions 5.8 FTE positions will remain unfunded and frozen for FY 2012-13. This is a reduction of over ten positions from FY 2011-12. This change is the result of 3.6 FTE positions being disallocated and 6.5 FTE previously frozen positions being funded and unfrozen in budget units 416 and 460.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

Services in this budget grouping include general, prenatal, infant, child and adolescent public health activities and

services. Community health status assessment, assuring the provision of health services to vulnerable populations through collaborative activities, and policy development related to the health and well-being of women, infants and children are core MCAH/PHN functions. PHN staff participate in Disaster Response as assigned, flu and community immunization clinics and Well Child Dental Visits.

1175 408 Alternative Response Team (ART)

This budget unit and program have been incorporated into Public Health Field Nursing Services within 1175 416.

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. Field Nursing Services staffs and manages two outstation sites to support and provide community-appropriate levels of service in Garberville and Willow Creek. Field Nursing also provides 6 to 12 months of intensive home-based services to families at risk of child maltreatment. Services are provided by a team of Public Health Nurses, Community Health Outreach Workers and a Mental Health Clinician. In FY 2012-13, Field Nursing Community Health Outreach Workers will implement SafeCare, an evidence-based program for families with young children who are at risk of abuse or neglect.

The Public Health Field Nursing Program has a baseline budget, excluding transfers, of $3,856,221 for FY 2012-13. This year's baseline budget is an increase of $295,031 over the combined prior year funding for the Alternative Response Team (408) and Public Health Field Nursing Services (416) of $3,561,190. The increase is primarily due to additional funding from CalFresh for nursing outreach.

1175 418 Child Health & Disability Prevention (CHDP)

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

The Child Health and Disability Program has a baseline budget, excluding transfers, of $1,008,414, an increase of $132,639 from the prior year level of $875,775. Due to increased State and federal funding.

1175 420 Maternal Child & Adolescent Health (MCAH)

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

The MCAH Program has a baseline budget, excluding transfers, of $516,366 for FY 2012-13, an increase of $30,801 from the prior year level of $485,565.

1175 421 MCAH California Home Visiting Program

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

Humboldt County was selected to provide CHVP in conjunction with Del Norte and Siskiyou County as the Tri – County Consortium.

The CHVP has chosen the NFP evidence-based program model. CHVP will have the same quantifiable and measurable 3 and 5 year benchmarks that demonstrate: improvements in maternal and child health, childhood injury prevention, school readiness and achievement, crime or domestic violence, family economic self-sufficiency, and coordination with community resources and supports as the NFP program.

The expansion of NFP through CHVP will support 50 additional families in Humboldt County, 25 families in Del Norte County and 25 families in Siskiyou County. The Tri-County Consortium will allow Humboldt, Del Norte and Siskiyou counties the opportunity to launch the NFP program, as they would not have a large enough population base to launch the program on their own.

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

The MCAH California Home Visiting Program has a baseline budget of $908,565 for FY 2012-13. This is an increase of $465,486 from the prior year level of $443,079, which was the start-up and a partial year for the program.

1175 426 Nurse Family Partnership

Nurse Family Partnership (NFP) is an evidence-based community health program providing nurse home-visiting

service for first time, low-income mothers. Program evidence shows that mothers who work with a nurse are active and involved parents who are present for their children. Reduced child abuse rates, increased maternal self-sufficiency, and better school achievement leading to improved economic well-being are also proven outcomes for these mothers. The program began enrolling clients in July 2009 and now serves over 100 families. Plans are in place to increase the NFP program to allow enrollment expansion to approximately 120 clients over the next year.

The Nurse Family Partnership Program has a baseline budget of $722,498 for FY 2012-13, an increase of $265 from the prior year level of $722,763.

1175 460 MCAH Personnel Program

This budget serves as a personnel budget only. It is budgeted for over twenty-six full time employees for FY 2012-13. The total adopted salaries budget is $2,184,045, an increase of $192,090 from the prior year level of $1,991,955. This change is due to 2.0 FTE positions being funded and increased benefit and insurance costs. 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 plays a role in protecting economically vulnerable populations through the provision of care coordination for over 750 eligible children with special health care needs. CCS serves infants, children and youth up to age 21 who have special health care needs, or who are at risk for disabling conditions. Pediatric occupational and physical therapy services for approximately 150 children are provided at the CCS Medical Therapy Unit located at Humboldt County Office of Education's (HCOE) Glen Paul School.

The California Children's Services Program has a baseline budget of $1,837,599 for FY 2012-13, an increase of $176,405 from the prior year level of $1,661,194. This increase is primarily due to additional CalFresh program for outreach services.

2011-12 Accomplishments

1. Received 357 eligible referrals for the Nurse Family Partnership, of which 192 first time mothers were enrolled, with 123 babies born. The program engagement rate of 54% rate has remained stable. Nine clients and their infants have met program completion criteria and have "graduated." Federal funding for regional expansion has been awarded to Humboldt County as the lead county. This program protects vulnerable populations and supports self-reliance of citizens.

2. Secured funding and contracts for vendor services to implement an electronic documentation system for nursing and other public health client services. The transition to "paperless" documentation is in progress. Going paperless will allow the Division to manage resources to ensure the sustainability of services.

3. Improved the transition to adult health care services for enrolled youth with chronic disabling health conditions by increased communication and coordination with Special Care Medical Centers and local community care centers to ensure that transitions from pediatric to adult services are made in an organized manner. The local Special Care Center visiting specialist physicians developed relationships with local adult physician specialists to facilitate referrals and care. CCS staff was provided training in the gradual transition care model from pediatric to adult care services. Local pediatricians are kept informed and prompted by CCS staff regarding implementing this model of care transition. This supports self-reliance of citizens.

2012-13 Objectives

1. To implement the California Home Visiting Program/Nurse Family Partnership Expansion program with 50 additional clients in Humboldt County, 25 in Del Norte County and 25 in Siskiyou County. Continue to monitor program growth and seek funding as needed to support client curriculum needs. This will allow for the continued provision of community-appropriate levels of services.

2. To implement the NetSmart electronic documentation system for nursing services, monitor staff efficiencies, develop and track measureable outcomes for all nursing programs. Better managing these resources will help ensure sustainability of services.

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

4. To implement SafeCare services for eligible families at risk; continue to identify and provide training for all staff for Best Practice techniques within all nurse home visiting programs. This creates opportunities for improved safety and health.

1170 - Mental Health Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Other Govt'l Agencies	$14,257,135	$15,770,891	$12,276,023	$15,606,895	$18,780,061	$18,780,061	$3,173,166
Charges for Services	13,366,750	13,368,771	12,068,958	14,678,621	11,886,673	11,886,673	(2,791,948)
Other Revenues	227,169	130,918	52,490	38,628	13,051	13,051	(25,577)
General Fund Contribution	340,195	341,081	0	0	0	0	0
(To)/From Non-GF Fund Balance	1,007,178	(524,297)	1,468,555	(3,025,293)	0	0	3,025,293
Total Revenues	$29,198,427	$29,087,364	$25,866,026	$27,298,850	$30,679,785	$30,679,785	$3,380,935
Expenditures							
Salaries & Benefits	$17,800,635	$18,787,572	$19,734,983	$20,470,672	$22,791,400	$22,791,400	$2,320,728
Supplies & Services	15,048,683	13,651,143	12,942,015	12,847,172	16,521,325	16,521,325	3,674,153
Other Charges	1,915,593	2,070,533	2,265,409	2,834,981	2,761,149	2,761,149	(73,832)
Fixed Assets	36,593	92,471	180,119	140,782	612,680	612,680	471,898
Intrafund Transfer	(5,603,077)	(5,514,355)	(9,256,500)	(8,548,638)	(11,611,870)	(11,611,870)	(3,063,232)
General Fund Contribution	0	0	0	(446,119)	(394,899)	(394,899)	51,220
Total Expenditures	$29,198,427	$29,087,364	$25,866,026	$27,298,850	$30,679,785	$30,679,785	$3,380,935
Allocated Positions	322.70	323.70	323.70	322.70	318.70	318.70	(4.00)
Temporary (FTE)	10.20	17.90	17.90	10.08	13.40	13.40	3.32
Total Staffing	332.90	341.60	341.60	332.78	332.10	332.10	(0.68)

Purpose

The Department of Health and Human Services Mental Health Branch is responsible for overseeing and directing behavioral health treatment and support services for Humboldt County. To protect economically, emotionally and socially vulnerable populations, the Mental Health Branch provides and coordinates an array of clinical 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. To provide community appropriate levels of service, the Mental Health Branch administers managed care contracts for behavioral health services with private for-profit and non-profit agencies and provides a comprehensive system of care for people who have mental illness, to the extent resources are available.

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

Recommended Budget

The total Mental Health budget grouping for FY 2012-13 is $30,679,785, an increase of $1,697,480 or 6%. This change is primarily due to increased benefit and insurance costs. Full staffing includes 318.70 FTE permanent staff.

As a result of prior year budget reductions 32.1 FTE positions will remain unfunded and frozen for FY 2012-13. This is a reduction of seven positions from FY 2011-12. This change is the result of 4.0 FTE previously frozen positions being disallocated and 3.0 FTE frozen positions being funded and unfrozen.

1170 424 Mental Health Administration

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

- Fostering and supporting integrated, holistic, accessible service delivery systems 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 behavioral health services with private for-profit and non-profit agencies

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

The Mental Health Branch is primarily funded by Mental Health Realignment funds, Mental Health Services Act funds, Medi-Cal reimbursement and private insurance. Projected growth in personal income tax and sales tax revenues contribute to an increase in Mental Health Services Act (MHSA) and Realignment revenues for FY 2012-13. New revenues include 2011-Public Safety Realignment. The County General Fund contributes $394,899 or 1% of the total budget.

The adopted budget for the Administration Unit for FY 2012-13 is $30,679,785, an increase of $1,697,480 or 5% from FY 2011-12. All other budget units in the Mental Health budget grouping are cost applied to budget unit 424.

1170 427 Mental Health Jail Programs

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

- Development of treatment plans and follow up progress reports to the court for individuals deemed incompetent to stand trial
- Psychiatric evaluation and medication support treatment
- Psychiatric nursing services for medication and psychiatric follow up
- Evaluations to determine inmates' ability/appropriateness for work assignments
- Limited case management services
- Coordination of transfers to Psychiatric Emergency Services and/or Sempervirens
- Suicide prevention and intervention assessments
- Debriefing meetings with emergency personnel and correctional staff following critical events
- Participation and facilitation of yearly training of correctional officers about mental health and suicide prevention/intervention

Mental Health Jail Programs adopted budget for FY 2012-13 is $327,729. These expenditures include services and supplies and other charges related to both Jail Mental Health and Outpatient mental health services provided through a collaborative program with the Probation Department that will

support needs of newly identified probation population. This does not include staffing expenses which are contained in the Mental Health Administration budget (424). Staffing for FY 2012-13 is estimated to cost $1,078,502.

A portion of the Mental Health Jail Program is financed from the County General Fund. A supplemental budget request was submitted to restore funding and maintain service levels for Jail clients. This request was recommended for funding in the amount of $95,023 and is included in the appropriation amount noted above.

1170 475 Mental Health – HumWORKS

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

HumWORKS adopted budget for FY 2012-13 is $127,359, an increase of $17,088, or 15% from FY 2012-13. This increase is due to additional CalWORKs program support.

1170 477 Mental Health Services Act (MHSA)

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

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

- The Hope Center
- Crisis Intervention Team training
- Outpatient Services including Rural Outreach Services Enterprise (ROSE), Comprehensive Community Treatment (CCT), Older and Dependant Adults Expansion, Alternative Response Team, Transition Age Youth Partnership Program
- Medication support services including Telemedicine Services in Willow Creek and Garberville

To outreach to vulnerable populations increased mobile access is provided with efforts focused on reducing barriers to

treatment and increased medication support to rural areas through teleconferencing.

Mental Health Services Act total adopted budget for FY 2012-13 is $2,993,145, an increase of $107,715 or 3%, from FY 2011-12.

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
- 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 decomposition of their condition. The patient is admitted to Sempervirens or the nearest available inpatient hospital specializing in age-appropriate care, if the patient's condition cannot be stabilized while in PES.

Sempervirens is a 16 bed locked psychiatric hospital that provides a safe environment for those people who meet the criteria outlined in Section 5150 of the California Welfare & Institutions Code. These individuals are considered to be in imminent danger to themselves or others, or they are unable to provide for their own food, clothing and shelter, due to mental illness. Sempervirens hospital staff provides psychiatric assessment, medications counseling (individual and family), and 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.

Sempervirens / Psychiatric Emergency Services adopted budget for FY 2012-13 is $1,016,714, an increase of $157,034, or 18% from FY 2011-12. Increased costs include security guard supervision to maintain client health and safety.

1170 496 Adult Behavioral Health and Recovery Outpatient Programs

Through County operated programs and contracts with community providers, Adult Behavioral Health and Recovery Services (ABHRS) 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.

Adult Outpatient Programs adopted budget for FY 2012-13 is $1,689,071, a decrease from prior year of $64,778 or 3%.

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

Children's Mental Health, part of DHHS Children & Family Services (C&FS) since spring 2010, provides a full array of services to seriously emotionally disturbed children and Medi-Cal beneficiaries who meet specialty mental health service criteria. Coordinated services are provided through County operated programs and community-based contract providers and are delivered through an integrated Children & Family Services System of Care model. Services include assessment; individual, group and family therapy; case management; medication support; therapeutic behavioral services; and crisis intervention. To enhance accessibility, services are provided at three certified sites in Eureka, in homes and the field, schools, and at a variety of community sites in coordination with the other DHHS Children & Family Services, contract providers and community partners.

Some County operated program community sites include Child Welfare Services, Public Health, Juvenile Hall, and the

Northern California Regional Facility. 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 in 2008 and continues in order to impact the poor outcomes seen nationally for this extremely high-risk population.

Also, since 2008, a second major initiative united several local and statewide transition age youth organizations into the Humboldt County Transition Age Youth Collaboration (HCTAYC) to assist Humboldt County in improving capacity for welcoming youth-serving programs which integrate health, mental health, housing, vocational and educational components. HCTAYC was instrumental in the development of the Transition Aged Youth (TAY) Division that was launched in 2011.

The third major initiative, begun in 2010, is the integration of DHHS Mental Health, Public Health, and Social Services programs serving children and families into one integrated Children & Family Services (C&FS) administrative structure. Children's Mental Health is one component of the new C&FS structure. This integration process will result in greater protection of vulnerable populations through the use of accessible "upstream" (prevention and early intervention) programs and community education.
This program creates opportunities for improved health and safety and protects vulnerable populations. It matches service availability to community-appropriate levels of services geared toward children and families. These services support the self-reliance of citizens and help ensure that resources are sustainably managed through prevention and early intervention efforts. Children's Mental Health services fosters transparent, accessible, welcoming, and user friendly services by adopting a family-driven, youth-guided approach and maximizes use of available funding sources to benefit Humboldt County needs.

The adopted budget for Children Youth and Family Services in FY 2012-13 is $777,920, an increase of $226,328, or 41%, from FY 2011-12. Expenditure transfers for reimbursement of expanded mental health services in the C&FS program primarily contributed to this increase.

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 utilizing a team approach. Each team consists of a psychiatrist and a registered nurse, and in many cases, a case manager and/or a clinician may also be assigned.

The Outpatient Medication Clinic staff works closely with a vast variety of community providers to identify those clients who have been stable, no longer need specialty mental health services, and could receive their medications from their primary care physician (PCP) or health clinic. 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.

For clients who are unable to pay for their medication costs, efforts are made to provide clients with sample medications or drug company indigent medications when applicable. Medi-Cal has changed its formulary to require Treatment Authorization Requests (TAR) and Prior Authorization (PA) for commonly prescribed medications, which often times cause a delay in obtaining medications for patients at risk. These costs are 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, clients released from Psychiatric Emergency Services and Sempervirens with a limit of a two week supply.

The adopted budget for FY 2012-13 for Medication Support Services is $261,835, an increase of $35,589 or 15% from FY 2011-12. This increase is partially due to increased costs associated with Public Safety Realignment.

1170 507 Mental Health - Children's Center

The Department of Health and Human Services Children's Center provides temporary shelter and treatment services to Humboldt County children, ages six to eighteen, when no other safe and appropriate placement is available. The Children's Center is a braided-funding program within Children & Family Services with funding and licenses/site certifications from both Community Care Licensing, a Division of the California Department of Social Services, and the State Department of Mental Health. Mental Health services available on site include assessment; individual, group and family therapy; case management; rehabilitation services; and medication support services.

The children placed at the Children's Center often have multiple complex needs and a history of trauma. They have moderate to severe emotional and behavioral problems that require the commitment and flexibility of an integrated and coordinated system of care including mental health, Public Health nurses, Child Welfare Services social workers, education, and other community-based agencies. Children placed at the Center may be dependents of the court, youth in protective custody, or those whose emotional and behavioral status interferes with stable placement.

Mental Health staff assesses the children upon admission and, in coordination with an interdisciplinary team as well as the children themselves, develop an individualized treatment plan with goals that will prepare them for a return to safe, less restrictive community placements such as with family or foster

parents. Staff also provides after-care services to help make the transition to community placement as seamless as possible for the child and family.

The Children's Center creates opportunities for improved health and safety of children and protects vulnerable populations. It matches service availability to community-appropriate levels of services geared at children and families. These services help ensure that resources are sustainably managed through effective cross-discipline approaches. The Children's Center fosters transparent, accessible, welcoming and user friendly services by incorporating youth feedback through HCTAYC.

The primary operating budget for the Children's Center is shown in the Social Services budget (509). The Mental Health Children's Center budget unit (507) covers the operating expense costs, insurance, and overhead costs for the Mental Health staff. The adopted budget for this portion of the Children's Center for FY 2012-13 is $97,267, an increase of $38,661 or 66% from FY 2011-12. In addition to increases for insurance and administration, rising costs of transportation contribute to this increase.

2011-12 Accomplishments

1. Developed a Behavioral Health Care Model of services for adults and children which addresses co-occurring health concerns of mental health, substance misuse and physical health care issues in a timely, seamless and comprehensive manner allowing Mental Health to provide community-appropriate levels of service.

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

3. Continued projects to increase and enhance options for housing, including independent, transitional and supportive living environments. This will help protect economically vulnerable populations.

4. Received a one-year federal Substance Abuse and Mental Health Services Administration (SAMHSA) System of Care Expansion Planning grant to plan for further expansion of a children's system of care along a continuum from prevention through intervention. This grant will enable us to continue to provide community-appropriate levels of service.

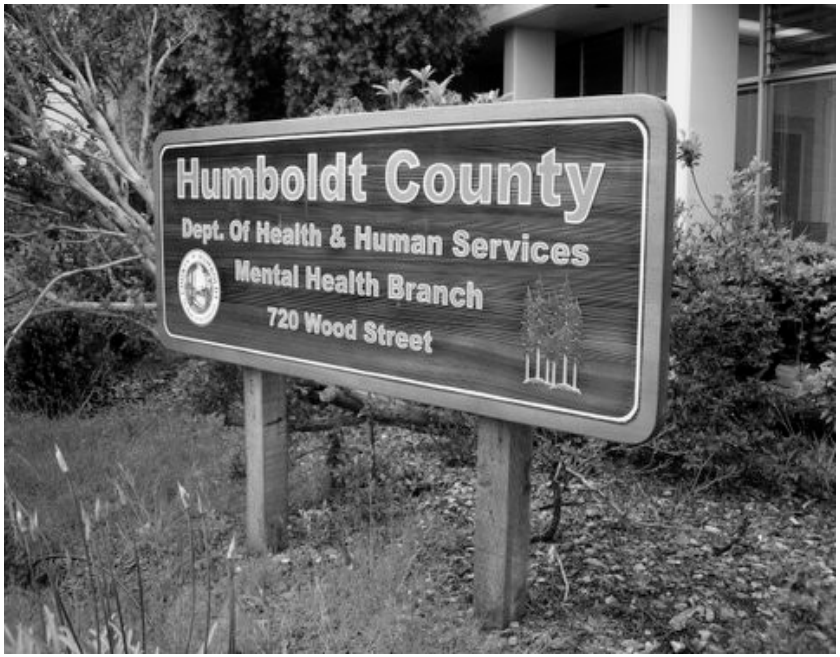
5. Implemented the Integrated Dual Diagnosis Treatment program, which is a practice recognized by the Substance Abuse and Mental Health Services Administration (SAMHSA) as an effective program for the severely mentally ill and adults with serious substance abuse issues.

2012-13 Objectives

1. To provide appropriate levels of services to the newly identified population of probationers through a collaborative program with the Probation Department that will support needs of the citizens and create opportunities for improved safety and health of this population.

2. To work in conjunction with a local developer to facilitate the provision of three units of housing for the seriously mentally ill who are homeless or at risk of homelessness and to provide supportive services so that clients will remain housed. This will enable Mental Health to protect vulnerable populations.

3. To continue development and implementation of the cross-disciplined TAY Division, including training staff in the use of the evidence-based Transition to Independence Process (TIP) model to holistically serve youth and young adults who are at risk of becoming seriously mentally ill with impaired functioning thereby protecting vulnerable populations.



1175 - Public Health Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Licenses & Permits	$10,929	$10,946	$10,350	$11,493	$10,455	$10,455	($1,038)
Use of Money & Property	0	23,412	4,000	0	0	0	0
Other Govt'l Agencies	3,429,967	5,288,922	5,468,742	3,412,259	4,839,027	4,839,027	1,426,768
Charges for Services	709,042	634,279	1,111,663	781,225	1,017,893	1,017,893	236,668
Other Revenues	372,357	40,640	646,961	38,431	24,100	24,100	(14,331)
General Fund Contribution	635,585	645,256	0	0	0	0	0
(To)/From Non-GF Fund Balance	405,094	(433,339)	0	824,595	500,000	640,000	(184,595)
Total Revenues	$5,562,974	$6,210,116	$7,241,716	$5,068,003	$6,391,475	$6,531,475	$1,463,472
Expenditures							
Salaries & Benefits	$2,214,371	$2,076,294	$2,204,039	$1,920,682	$2,698,071	$2,698,071	$777,389
Supplies & Services	1,494,046	1,273,484	1,822,959	1,673,124	2,001,587	2,001,587	328,463
Other Charges	1,827,271	2,836,737	3,202,718	2,387,065	3,165,150	3,165,150	778,085
Fixed Assets	74,600	23,601	12,000	38,579	0	420,000	381,421
Intrafund Transfer	(47,314)	0	0	(361,737)	(818,622)	(1,098,622)	(736,885)
General Fund Contribution	0	0	0	(589,711)	(654,711)	(654,711)	(65,000)
Total Expenditures	$5,562,974	$6,210,116	$7,241,716	$5,068,003	$6,391,475	$6,531,475	$1,463,472
Allocated Positions	52.30	52.30	52.30	52.30	57.30	57.30	5.00
Temporary (FTE)	4.45	2.00	3.00	0.56	0.47	0.47	(0.09)
Total Staffing	56.75	54.30	55.30	52.86	57.77	57.77	4.91

Purpose

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

This narrative includes discussion on funding and operation of 10 individual Public Health Administration budget units: Public Health Administration (400), Medi-Cal Administrative Activities and Targeted Case Management Claims Administration (403), Emergency Medical Services (410), Children's Health (413), Communicable Disease Control Program (419), Clinic Services (422) Outside Agency Support (434), Public Health Laboratory (435), Local Public Health Preparedness and Response (455), and Public Health Pharmacy (465).

Recommended Budget

The total recommended budget for the Public Health grouping for FY 2012-13 is $6,391,475, an increase of $221,393 or 4%. This change is primarily due to increased benefit and insurance costs. Full staffing includes 57.30 FTE permanent staff. As a result of prior year budget reductions 3.80 FTE positions will remain unfunded and frozen for FY 2012-13. Five positions were added, 1.0 FTE Senior Program Manager and 4.0 FTE Administrative Analyst I/II positions. The additional positions are being added as part of a classification review being done by Public Health Administration. It is anticipated that when the review is complete other existing positions will be disallocated resulting in no net increase to staffing levels.

Board Adopted

The Board adopted this budget with an increase of $140,000. This increase will allow for the replacement of the failed heating system at the Public Health Building. The total cost of this expenditure was $420,000, which was partially offset by an intrafund transfer of $280,000.

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 of the Department of Health and Human Services. 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 has a baseline budget, excluding transfers, for FY 2012-13 of $3,468,647, an increase of $787,592 or 29% from the prior year level of $2,681,055. The increase is primarily due to higher administrative costs that were incorrectly budgeted in previous years.

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

The Medi-Cal Administrative Activities (MAA)/Targeted Case Management (TCM) Coordination and Claims Administration program provides administrative, programmatic and fiscal oversight and support to MAA and TCM program participants on a countywide basis. The Department of Health and Human Services (DHHS) serves as the Local Governmental Agency (LGA) for MAA and TCM claiming on behalf of Humboldt County. Public Health protects economically vulnerable populations through this funding source.
The LGA draws down Federal Financial Participation revenues for DHHS, and other participating organizations (such as Adult Probation) to decrease local costs for eligible services and assist in maintaining service levels. Services include case management, referrals, and program planning for Medi-Cal services and outreach. These payments help Public Health to work towards improved health and safety of the community.

MAA/TCM has a baseline budget, excluding transfers, for FY 2012-13 of $816,257. Funding has remained consistent from the prior year.

1175 410 Emergency Medical Services

The Emergency Medical Services Program protects economically vulnerable populations by assuring payment for their emergency medical care. This fund reimburses physicians, surgeons and hospitals for patients who 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.

Emergency Medical Services has a baseline budget excluding transfers, for FY 2012-13 of $545,155. Funding has remained consistent from the prior year.

1175 413 Children's Health

The Children's Health Initiative (CHI) protects the County's most economically vulnerable children, who are from families with incomes below 100% of the Federal Poverty Level. CHI began in August 2005 with a coalition of local agencies whose mission was to create opportunities for improved health by ensuring that all Humboldt County children from birth through age 18 have health insurance and access to 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 steering committee include: Humboldt County Board of Supervisors, DHHS, First 5 Humboldt, St. Joseph Health System, Humboldt County Office of Education, Humboldt Area Foundation, the McLean Foundation, United Way and the North Coast Clinics Networks.

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 Cal Fresh eligibility. Staff works with families to help them establish a healthcare home so there is improved access to preventive healthcare.
The Children's Health Initiative Program has a baseline budget, excluding transfers, for FY 2012-13 of $266,446, an increase of $21,854 from the prior year level of $244,592.

1175 419 Communicable Disease Control Program

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

The Communicable Disease Control Program has a baseline budget, excluding transfers, for FY 2012-13 of $342,422, a decrease of $18,322 from the prior year level of $360,744.

1175 422 Clinic Services

Clinic Services protect vulnerable populations by providing child and adult immunizations, foreign travel immunizations, flu vaccinations, tuberculosis testing, sexually transmitted disease screening and treatment and lice and scabies diagnosis and treatment.

The Clinic Services Program has a baseline budget, excluding transfers, for FY 2012-13 of $655,021, a decrease of $101,099 from the prior year level of $756,120.

1175 428 Immunization Program

The Immunization Program completes county-wide quality assurance oversight for childhood vaccine inventory and accountability, administration and storage. This program also provides free vaccines for children through Public Health's Clinic Services. The Immunization Program Coordinator

routinely completes local trainings and is the liaison to the State immunization program.

The Immunization Program has a baseline budget, excluding transfers, for FY 2012-13 of $117,318, a decrease of $5,638 from the prior year level of $122,956.

1175 434 Outside Agency Support

The Outside Agency Support budget provides assistance to non-County agencies.

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. For FY 2012-13, $35,000 was budgeted to support the Agency.

North Coast Emergency Medical Services

Funds in the Outside Agency Support budget provide a portion of the local match for North Coast Emergency Medical Services (NCEMS), a Joint Powers Agency (JPA) overseeing pre-hospital care in Humboldt, Del Norte and Lake counties. The Humboldt County pro-rata share for the JPA is $36,999. The FY 2012-13 NCEMS budget is therefore $36,999 and is funded through Public Health realignment.

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, thus improving the health and safety of its residents. The team is supported through a Joint Powers Agreement consisting of cities plus Humboldt and Del Norte counties and the Yurok Tribe. The budget proposal includes $34,732 for support of this program in FY 2012-13.

Tobacco Education/Prevention and Early Intervention

The California Master Settlement Agreement is used to fund services and activities not funded by the California Department of Public Health's Tobacco Grant (Fund 412). The Program targets youth in the classroom with the evidence-based programs of TNT (Towards No Tobacco) and Project Alert. For FY 2012-13, $65,000 is recommended to be budgeted to support this activity.

The overall Health Outside Agency Support has a baseline budget, excluding transfers, of $171,731, an increase of $28,846 from the prior year level of $142,885. This increases is primarily the result of additional funding for tobacco education.

1175 435 Public Health Laboratory

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

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

The Public Health Laboratory has a baseline budget of $582,714 for FY 2012-13, an increase of $16,762 from the prior year level of $565,952.

1175 455 Local Public Health Preparedness and Response Program

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

The Public Health Preparedness and Response Program has a baseline budget of $630,126 for FY 2012-13, a decrease of $65,178 from the prior year level of $695,304.

1175 465 Public Health Pharmacy

The Public Health Pharmacy protects vulnerable populations by purchasing pharmaceuticals for the Mental Health Branch, Sempervirens, Juvenile Hall, the Jail and other County programs at the best possible price. The pharmacist is available for research, education and consultation. Tuberculosis testing kits (for use with staff) are also sold to public school systems.

The Public Health Pharmacy has a baseline budget of $268,971 for FY 2012-13, an increase of $44,370 from the prior year level of $224,601.

2011-12 Accomplishments

1. Completed a draft of the Humboldt County Community Health Assessment, one of three documents required for the Public Health Accreditation process. This health assessment helps Public Health protect vulnerable populations and will be used to plan community-appropriate levels of service.

2. Secured outside funding sources to benefit Humboldt County needs and established parameters for the Centers for Disease Control (CDC) emergency preparedness activity for 2011-2016. This helped Public Health to build interjurisdictional and regional cooperation and facilitated public/private partnerships to solve problems.

3. Completed Sentinel Lab Packaging and Shipping Training for local hospitals thereby creating opportunities for improved health and safety.

4. Developed molecular technique for detection of pathogenic *Vibrio Parahaemolyticus* in oysters, thus supporting the local shellfish industry and providing community-appropriate levels of service.

2012-13 Objectives

1. To formally apply for Public Health Accreditation by June 30, 2013. This will invite civic engagement and awareness of available services and help Public Health identify and prioritize communities' public health priorities. This will ensure Public Health provides community appropriate levels of service.

2. To provide Humboldt County sentinel labs (such as hospital, community, Humboldt State University and emergency room labs) training on ruling out and referring possible select agents to the Public Health Laboratory. This will create opportunities for Public Health to improve safety and health.

3. To implement a comprehensive electronic medical record system for use by clinic, nursing and billing staff to increase staff efficiency and track measurable outcomes. This provides for infrastructure and creates opportunities for improved safety and health.

4. To become in-network insurance providers for the top five insurance companies operating in Humboldt County. This will help manage resources to ensure sustainability of services.

1110 - Social Services Assistance Fund	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Other Govt'l Agencies	$17,820,113	$18,789,240	$18,983,792	$19,323,085	$23,015,208	$23,015,208	$3,692,123
Other Revenues	254,701	169,330	1,007,158	69,999	172,000	172,000	102,001
General Fund Contribution	661,068	661,068	0	0	0	0	0
(To)/From Non-GF Fund Balance	674,866	0	(103,622)	(478,819)	0	0	478,819
Total Revenues	$19,410,748	$19,619,638	$19,887,328	$18,914,265	$23,187,208	$23,187,208	$4,272,943
Expenditures							
Other Charges	19,410,748	19,619,638	20,548,396	$19,522,447	$23,794,207	$23,794,207	4,271,760
General Fund Contribution	0	0	(661,068)	(608,182)	(606,999)	(606,999)	1,183
Total Expenditures	$19,410,748	$19,619,638	$19,887,328	$18,914,265	$23,187,208	$23,187,208	$4,272,943
Allocated Positions	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Temporary (FTE)	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Staffing	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Purpose

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

Recommended Budget

The total Social Services Assistance budget for FY 2012-13 is $23,187,208, an increase of $1,432,705. This change is primarily due to changes in the State cost rates and does not indicate a change in services.

Board Adopted

The Board adopted this budget as recommended.

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 goal of this program is to provide services to our youth in the community that stabilize and re-connect the youth and family to the appropriate community support systems. In this way, the SB 163 Wraparound program aims to use local resources to ensure continuity for the clients in the program.

The baseline budget, excluding transfers, for FY 2012-13 is $865,171; this is the same funding level as last fiscal year. The County General Fund provides $142,999 or 16.5% of this amount.

1110-517 Temporary Assistance to Needy Families (TANF)

In 1996, the United States Congress made sweeping changes to national welfare policy and placed new emphasis on the goals of work and personal responsibility. With the passage of this reform, the program formerly known as Aid for Dependent Children was changed to Temporary Assistance to Needy Families (TANF).

The State of California implemented legislation which created the CalWORKs program with the passage of the Welfare-to-Work Act of 1997 (Chapter 270, Laws of 1997). The Act's

mandates are outlined in the California Welfare and Institutions Code Section 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 baseline budget, excluding transfers, for FY 2012-13 is $11,798,500, an increase of $653,191 or 6% from FY 2011-12. The County General Fund contributes $244,000 or 2.0% of this amount.

1110-518 Foster Care

The Foster Care program provides payments for children placed in foster care. The program is mandated by Section 11400 of the California Welfare and 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.

The Foster Care program provides family homes for children and youth who are unable to remain with their families. Foster parents, relative caregivers and non-related extended family members provide a safe and nurturing home for these vulnerable children and youth while services are provided to the birth parents to address the concerns that brought the child or youth into the child welfare system.
The Adoption Assistance Program makes payments to the parent who has adopted a child who either was in the Child Welfare System or at risk of being in the Child Welfare System if the adoption did not occur. Children who are in this program are not eligible to return to their biological families. The initial payment rate is determined by State law and cannot exceed the rate the child would receive if in regular foster care.

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

The baseline budget for FY 2012-13 is $11,130,536, an increase of $778,364 from FY 2011-12. This increase is due to the State raising care rates and assumes to hold the service levels same as FY 2011-12 without any cuts. The County General Fund contributes $220,000 or 2.0% of the baseline amount.

2011-12 Accomplishments

1. Converted to the C-IV electronic case management system for Medi-Cal, CalFresh, CalWORKs and CMSP recipients to create opportunities for improved health and safety and protect vulnerable populations.

2. Integrated child welfare services and children's mental health into a single organizational structure named Children and Family Services to create opportunities for improved health and safety and protect vulnerable populations.

3. Increased the capacity of the youth oriented programs and increased the collaboration between Children and Family Services and counterparts in the community to create opportunities for improved health and safety and protect vulnerable populations.

2012-13 Objectives

1. To increase the work participation rate for the CalWORKS program and provide work experience for the qualifying participants. This will create opportunities for improved health and safety and protect vulnerable populations.

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

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

1160 - Social Services Branch	2008-09 Actual	2009-10 Actual	2010-11 Actual	2011-12 Actual	2012-13 Request	2012-13 Adopted	Increase/ (Decrease)
Revenues							
Use of Money & Property	$386,797	$103,111	$0	$0	$0	$0	$0
Other Govt'l Agencies	40,871,355	44,556,077	49,971,583	51,995,696	64,729,364	64,729,364	12,733,668
Charges for Services	1,373,714	2,784,102	261,706	205,055	211,500	211,500	6,445
Other Revenues	150,834	332,362	524,401	446,040	645,000	645,000	198,960
General Fund Contribution	3,011,584	2,678,144	0	0	0	0	0
(To)/From Non-GF Fund Balance	3,011,324	(358,360)	(1,210,268)	(2,098,198)	0	0	2,098,198
Total Revenues	$48,805,608	$50,095,436	$49,547,422	$50,548,593	$65,585,864	$65,585,864	$15,037,271
Expenditures							
Salaries & Benefits	$25,912,812	$26,777,337	$28,113,591	$28,252,865	$32,597,780	$32,597,780	$4,344,915
Supplies & Services	22,606,021	20,063,020	26,057,971	24,835,967	34,605,041	34,605,041	9,769,074
Other Charges	10,028,665	3,110,189	11,752,626	10,927,777	15,365,171	15,365,171	4,437,394
Fixed Assets	482,975	144,890	922,578	950,662	2,356,300	2,356,300	1,405,638
Expense Transfer	(10,224,865)	0	(14,621,200)	(11,954,786)	(16,758,352)	(16,758,352)	(4,803,566)
General Fund Contribution	0	0	(2,678,144)	(2,463,893)	(2,580,076)	(2,580,076)	(116,183)
Total Expenditures	$48,805,608	$50,095,436	$49,547,422	$50,548,593	$65,585,864	$65,585,864	$15,037,271
Allocated Positions	483.10	643.10	534.10	500.60	500.60	500.60	0.00
Temporary (FTE)	6.00	13.40	8.40	1.42	6.00	6.00	4.58
Total Staffing	489.10	656.50	542.50	502.02	506.60	506.60	4.58

Purpose

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

Recommended Budget

The total Social Services Division budget for FY 2012-13 is $65,585,864, an increase of $7,839,214, or 13%. This change is due to increases in the CalFresh program, the Building H remodel, software upgrades and insurance costs.

Five new Vocational Assistant positions were added and 12 frozen positions were funded. These positions are needed to support the anticipated increases in the CalFresh program for FY 2012-13.

Board Adopted

The Board adopted this budget as recommended.

Program Discussion

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

Social Services Programs

The Social Services Programs are mandated at the federal and/or state level. Child Welfare Services program components include emergency response, family maintenance, family reunification, and permanent placement. Currently, many programs are working in concert with the other branches

of DHHS to provide a matrix of needed services for children at risk as well as their families. Child Welfare Services continues its commitment to 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 and create opportunities for improved safety and health.

1160 273 Public Guardian-Conservator

The Office of the Public Guardian has two separate basic services provided to the public. The LPS (Lanterman-Petris-Short) Conservatorship/Probate 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 service providers due to a specific disorder or medical condition. Mental Health Conservatorships are reserved for persons requiring involuntary mental health treatment and often controlled-egress psychiatric facilities. Probate Conservatorships are for individuals substantially unable to provide for personal needs of health, food, clothing or shelter and/or unable to manage financial resources or resist fraud. Through these services the Public Guardian-Conservator is able to safeguard the lives and assets of those in our community most at risk and create opportunities for improved safety and health.

The Public Guardian-Conservator budget unit staffing consists on 8.0 FTE. The requested baseline budget, excluding transfers, for FY 2012-13 is $747,467, an increase of $87,048 or 13%. The increase is primarily due to increased operational costs related to software maintenance and support, bank fees and transportation. The County General Fund contributes $495,367 or 66% 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 APS are cost applied to the Social Services Administration budget (511) on a quarterly basis.

The baseline budget for FY 2012-13 is $1,055,150, an increase of $19,558 or 1.9% from FY 2011-12.

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 the TANF reauthorization. Furthermore, CalWORKs in Humboldt County has developed a Linkages program and is expanding the scope of that program to provide families with service options to make them successful in CalWORKs as well as Child Welfare Services. The County's programs have been successful in moving CalWORKs recipients off cash assistance and maintaining employment to remain self-sufficient. This creates opportunities for improved safety and health. Caseloads have either steadily declined or remained static in recent years. Expenditures for CalWORKs are cost applied to the Social Services Administration budget (511) on a quarterly basis. The 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 fifth year in FY 2012-13.

The baseline budget for FY 2012-13 is $9,347,222, an increase of $1,479,756, or 18.8%, from FY 2011-12. The increase is the result of working closely with the Employment Training and Development Department in an effort to increase the work participation rate.

1160-506 In-Home Supportive Services (IHSS) Public Authority

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. This budget unit is for IHSS administration only it does not provide for payments to care providers.

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 baseline budget, excluding transfers, for FY 2012-13 is $63,670, a decrease of $201,330 or 76% less than FY 2011-12. This decrease is a result of the contract with Area 1 Agency on Aging ending and the services now being provided through Social Services Administration.

1160-508 Child Welfare Services

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

Funding for Child Welfare Services is through State and federal allocations. The baseline budget, excluding transfers, for FY 2012-13 is $4,104,810, an increase of $8,770 or 0.2% more than FY 2011-12.

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 for up to six children while maintaining a structured, safe, and nurturing environment for this economically, emotionally, and physically vulnerable population. This creates opportunities for improved safety and health of children.
Funding for the Children's Center will continue to be provided through the Child Welfare Services allocation and includes mental health clinician salaries.

The baseline budget, excluding transfers, for FY 2012-13 is $757,500, an increase of $6,000 or 0.8% from FY 2011-12.

1160-511 Social Services Administration

Social Services is continuing to implement the national health care reform initiative known as the Affordable Care Act. This includes increased community partnerships and outreach promoting prevention and reducing long-term health care costs. Social Services will continue to implement the new service center model and call center system to meet the needs of this venerable population.

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 majority of all Social Services branch staffing resided in this budget unit. FY 2012-13 staffing level is 489.60 FTE.

The baseline budget, excluding transfers, for FY 2012-13 is $68,182,062, an increase of $7,491,843 or 12% from FY 2011-12. The primary factors contributing to the increase are benefit and insurance costs, CalFresh outreach, Building H remodel and ETD services for CalWORKs. The County's General Fund contribution is $1,824,118 or 2.67% of the budget.

1160-599 Veterans Services

The Veterans Service Office (VSO) assists the County's veteran community by providing free claims assistance and information and referral to local, State and federal programs. The VSO is active in community outreach and refers veterans and their dependents to services and benefits, including homeless and other emergency assistance, disability benefits and entitlements, education, health care, counseling, and rehabilitation services.

The baseline budget, excluding transfers, for FY 2012-13 is $206,411. The County General Fund contributes $145,591 or 70.53% of that amount.

2011-12 Accomplishments

1. Continued expansion of services to emancipating youth ensuring that youth have access to higher education, housing, employment, financial literacy and permanent, supportive connections as they move into adulthood. This creates opportunities for improved health and safety and protects vulnerable populations.

2. Incorporated nutritional information into the CalFresh outreach program to create opportunities for improved health and safety and protect vulnerable populations.

3. Implemented State mandated migration of Information Technology systems within the basic benefit eligibility

programs to create opportunities for improved health and safety and protect vulnerable populations.

4. Initiated planning and development of County administered Adoptions Programs for children and their adoptive families and children and their legal guardians, including enhancing post-adoption services through utilization of existing Children and Family Services staff. This will create opportunities for improved safety and health, as well as protect vulnerable populations.

5. Began implementation of the evidence-based model Transition to Independence Process for use at the Transition Aged Youth Division which will enhance the quality of the workforce and the outcomes for youth and young adults.

2012-13 Objectives

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

2. To significantly expand the CalFresh nutrition access and education services in Humboldt County through DHHS staff as well as community partners to create opportunities for improved health and safety and protect vulnerable populations.

3. To upgrade information services and physical infrastructure in various eligibility units to ensure that the demand for services can be met in an expeditious manner to create opportunities for improved health and safety.

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