Full Service Partnerships:

California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness

Contextual Factors and the Relationship to Expenditures and Cost Offsets

UCLA Center for Healthier Children, Youth and Families

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Executive Summary

Proposition 63 (2004) provides increased funding through the Mental Health Services Act (MHSA) to support mental health services for underserved and previously unserved individuals within the context of the public mental health system. Prop 63 funds are distributed to county departments of mental health to implement MHSA components. Components are: Prevention and Early Intervention (PEI); Workforce Education and Training (WET); Capital Facilities and Technological Needs (CF/TN); Innovation (INN); and Community Services and Supports (CSS), which includes the Full Service Partnership (FSP). CSS is designed to serve individuals with severe mental illness (SMI) or serious emotional disturbance (SED). [1]

The focus of this report is the Full Service Partnership (FSP), which is designed to serve Californians in all phases of life who experience the *most* severe mental health challenges because of illness or circumstance. This population has been historically underserved and has substantial opportunity for benefits from improved access and participation in quality mental health treatment and support.

FSP is grounded in earlier efforts, namely Assembly Bill 2034 (AB 2034) [2] and its predecessors. AB 2034 was unique in 1) its focus on serving homeless persons with serious mental illness; 2) the "*housing first*" mandate; 3) flexible funding; and 4) collection and reporting of client and system outcomes in "*real time*." The final analysis of AB 2034 reported a percentage of costs offset of 49.8 percent. [3]

FSP services are a large portion of the Community Services and Supports (CSS) funding allocation from MHSA. CSS was designed to move the public mental health system beyond "*business as usual*" in order to improve access to more-effective services. CSS (particularly FSP) was intended to initiate significant changes in the system of care for individuals with serious emotional disturbance/serious mental illness. [4]

There is a requirement that "*the County shall direct the majority of its Community Services and Supports funds to the Full-Service Partnership Service Category*," [5] and that clients be served with "*whatever it takes.*" The remaining portions of CSS are intended to expand supportive services, such as transportation or vocational training (which are typically unfunded), crisis intervention and treatment.

CSS and FSP services represent a commitment to improving mental health service to those Californians most in need. A recent report has shown FSP services to yield cost benefits statewide, yielding average savings in public cost attributable to the inadequately treated mental illness of FSP participants prior to program services that exceed the cost of those services – there is a cost savings of $1.27 for every Prop 63 dollar spent. The detailed report summarizing statewide findings may be found at:
http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

FSP expenditures per client and cost offsets also vary substantially across counties. This report focuses on identifying those factors that are associated with this variation in expenditures and cost offset, including differences in the array of FSP services provided by counties, characteristics of the participant population, and characteristics of county context. More specifically, this report has the following major information objectives:

- Describe the array of FSP services planned by counties
- Document variation in numbers served and FSP expenditure-per-client across counties for Fiscal Year 09-10

- Describe associations between service, participant, and county factors and FSP expenditure-per-client differences across counties
- Document variation in FSP cost offsets as percentage of FSP expenditures across counties
- Describe associations between service, participant, and county factors and differences in FSP cost offsets across counties

Method

The analysis presented here builds on prior expenditure and cost offset analyses conducted by the UCLA team. Findings from these analyses are presented in the report, *Full Service Partnerships: California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness*. The link to this report was provided on page i. In order to include a county in the FSP Expenditures and Cost Offsets Report, we needed Full Service Partnership expenditures broken out by age group. Per the California Code of Regulations, "*The County shall provide services to all age groups i.e., older adults, adults, transition age youth, and children/youth in the Full Service Partnership Service Category*." [6] Age groups are defined as follows:

- "Children and youth" means individuals from birth through 17 years of age. [7]
- "Transition Age Youth" means youth 16 years to 25 years of age. [8]
- "Adult" means an individual 18 years of age through 59 years of age. [9]
- "Older Adult" means an individual 60 years of age and older. [10]

Accordingly, all findings for this analysis are reported separately by age group. Data collection and measurement procedures used for this analysis include:

- *Expenditures and Cost Offset.* County fiscal reporting varies substantially. In order to collect reliable and accurate data in a standardized format, expenditure data for this analysis were gathered through a web survey. All data were reported by Age Group. Almost all of the counties responded – 47 (81.0%). In addition, calculations were successfully completed for three (3) more counties that did not complete the web survey. These three counties aligned their CSS Plans, Annual Updates, and Revenue and Expenditure Reports (RER) in a consistent manner and broke out FSP programs into discrete age groups. Inclusion of the three (3) additional counties brings the total number of participants to **50** (**86.2**%). FSP Expenditures and Cost Offsets by Age Group for almost all of the counties are included in this report.
- *Services.* Information on the array of services provided in each county was coded from planning documents prepared by the counties. Measures of the number of service options, the number of evidence-based programs, and the number of peer-led programs were constructed from the coded data. Participant and county context measures were constructed from county databases developed for this study. The Community Services and Supports component section of the Three-Year Program and Expenditure Plan [11] (for the purpose of this report, we will refer to the part of the plan that addresses Community Services and Supports as the *CSS Plan*) and the attendant updates (*Annual Updates through FY 10-11*) served as the basis for the initial FSP review and summary conducted by UCLA. The FSP Service Assessment for each county/municipality was conducted using a systematic review and summary tool developed by a consultant formerly employed with a large county department of mental health and directly involved in the evaluation of that county's MHSA program. The focus of the tool was straightforward – with instructions to trained reviewers to indicate whether planned services were present or absent in the CSS Plan and/or Annual Updates.

It is important to note that the estimates of expenditures are conservative. [12] Expenditures that are not clearly attributable to FSP clients have not been included, and cost savings estimates have been indexed to conservative estimates of expenditures. As is widely recognized, estimating the costs of savings attributable to service is complex – from both an expenditure estimate and a savings estimate point of view. At each step in these estimation processes, we have consciously adopted a conservative approach.

All data collection, measurement, and analysis procedures and all measurement results were reviewed by the study Advisory Group. The strategy of document review and summary was selected after discussion with the FSP Evaluation Advisory Group, and by counties. These experts and stakeholders had the opportunity to comment on method and result. Their input was incorporated into data collection, measurement procedures, and analysis. [13]

Description of FSP Services

Differences in services provided may be an important factor in understanding county variation in FSP expenditure per client, and the magnitude of cost offsets in order to subsequently link specific services to specific age groups. Review of the Phase II Deliverable 1 MHSA Cost Report by county department of mental health stakeholders elicited feedback recommending description of Full Service Partnership programs, in order to provide the appropriate context within which to interpret findings.

The strategy of document review and summary was selected after discussion with the FSP Evaluation Advisory Group, due to budget limitations and concerns about county/municipal burden inherent in a site visit/on-site service observation. The draft FSP Service Summary tool was reviewed at an FSP Evaluation Advisory Group meeting, and refined after that meeting. Based on the FSP Service Summary, the following services are offered across the state to FSPs (summarized in Table 1).

Table 1. *Full Service Partnership Services Summary (Fiscal Year 06-07 through FY 09-10)* [14]

Service Strategy Services/strategies indicated with an asterisk (*) represent requirements under the Mental Health Services Act.	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Outreach and Engagement*	53	98.1%	59	100%	59	100%	54	100%
Personal Service Coordinator/Case Manager*	52	96.3%	58	98.3%	59	100%	52	96.3%
General Standards*	54	100%	59	100%	59	100%	54	100%
Outpatient Mental Health Services	51	94.4%	58	98.3%	56	94.9%	50	92.6%
Other Supports	48	88.9%	57	96.6%	56	94.9%	48	88.9%
Specific Positions for Clients/Family Members	51	94.4%	57	96.6%	56	94.9%	51	94.4%
Strategies Involving Peers on Team	50	92.6%	54	91.5%	55	93.2%	50	92.6%
Peers Augmenting Overall Team Capacity	48	88.9%	58	98.3%	57	96.6%	53	98.1%
Housing	40	74.1%	55	93.2%	55	93.2%	43	79.6%
Best practices – Team Composition	33	61.1%	42	77.8%	44	74.6%	43	79.6%
Services for Comorbidity	28	51.9%	49	83.1%	49	83.1%	38	70.4%
Evidence-Based Practices	41	75.9%	45	76.3%	49	83.1%	32	59.3%
Other Practices	30	50.9%	30	50.9%	33	55.9%	26	66.7%
Discharge Coordination	33	61.7%	40	67.8%	37	62.7%	27	50.0%

The data in Table 1 supports the following findings regarding services offered to FSPs:

Outreach and Engagement

- At least one of the required strategies are in place for outreach and engagement in all counties serving TAY, Adults and Older Adults, and nearly all counties serving CYF.

Personal Service Coordinator/Case Manager

- A Personal Service Coordinator/Case Manager for each client (and when appropriate, the client's family) to be the single point of responsibility for that client/family [15] are in place for FSPs in all counties serving Adults, and in nearly all counties serving other age groups.

General Standards

- Incorporation of required MHSA General Standards when providing services to FSPs was documented by all counties.

Outpatient Mental Health Services

- Outpatient mental health services are offered in 92.6 to 98.3 percent of the counties to FSPs, depending upon the age group served.
    - Other support services are offered in 88.9 to 96.6 percent of counties, depending upon the age group served by the FSP

Clients and Family Members on the FSP Team

- The inclusion of consumers/family members on staff was documented for nearly all counties - 94.4 to 96.6 percent of the counties. Up to 98.3 percent of counties (all serve Adults) noted ways in which clients and family members were planned to augment the team, but not all cited specific roles or current employment of peers/parent advocates.

Housing

- Depending upon the age group served by the FSP, housing [16] is offered in 68.5 to 94.9 percent of counties.

Best Practices

- Specific best practices with regard to team composition were cited by 61.1 to 79.6 percent of counties, depending upon the age group served by the FSP team.
- Linkage to substance abuse treatment for FSPs with co-occurring disorders was documented by 51.9 to 83.1 percent of counties, depending upon the age group.
- The majority of counties cited at least one evidence-based practice provided to each of the age groups served by the FSP (59.3 to 83.1%).
- More than half (59.3 to 67.8% of counties, depending upon the age group) document specific practices around discharge planning.

FSP Service Expenditures

FSP services are intended to meet the needs of FSP-targeted clients. This is driven primarily by the policy objective to meet the serious needs of the hardest-to-serve clients – those with severe mental illness. This policy objective includes meeting both the service and the quality-of-life needs of FSP clients and the social outcomes and services needs of California. To address this complex balance between policy objective and client needs, this study has

assessed a broad range of costs to citizens of California that are a consequence of service delivery to mental health clients most in need.

More specifically,

- Fiscal years included in the study period are Fiscal Year 2008-09 (FY 08-09) and FY 09-10. The two fiscal years were selected because:
  - Outcome data are most robust and complete in these two fiscal years, and
  - Revenue and Expenditure Reports in these two fiscal years are broken out by FSP program, allowing a drill-down (with county input) to expenditures by age group.

The *annualized expenditure per FSP client year* is presented below, in Tables 2 through 5.[17] Annualized expenditure is the total expenditure for an FSP client over a year (12 months).[18] The data in Tables 2 and 3 reflect FY 08-09, and the data in Tables 4 and 5 reflect FY 09-10. The statewide total for each age group is provided in Tables 2 and 4, as well as the range among counties from low to high. The statewide average for each age group is provided in Tables 3 and 5, as well as the range among counties from low to high.

Table 2. *Full Service Partnership Services: Numbers Served by Age Group*[19] *(Fiscal Year 08-09)*[20]

	Number Served			Sum of Days			Number of Client Years		
Age Group	**Total**	**Low**	**High**	**Total**	**Low**	**High**	**Total**	**Low**	**High**
CYF	4,296	9	2,223	983,187	1,369	580,545	2,693.7	3.8	1,590.5
TAY	4,593	25	1,257	1,064,015	6,517	333,383	2,915.1	17.9	913.4
Adults	9,640	37	4,176	2,404,022	9,000	1,148,521	6,586.4	24.7	3,146.6
Older Adults	1,388	1	373	344,979	7	98,535	945.1	<.1	270.0

Table 3. *Full Service Partnership Services: Annualized Expenditure per-Client by Age Group*[21] *(Fiscal Year 08-09)*[22]

	Annualized Expenditure per- FSP Client			Daily Expenditure per-FSP Client			FSP Service Expenditure Total		
Age Group	**Average**	**Low**	**High**	**Average**	**Low**	**High**	**Total**	**Low**	**High**
CYF	$21,931.29	$3,759.79	$72,054.99	$60.09	$10.30	$197.41	$59,076,305.79	$86,851.14	$27,863,702.00
TAY	$18,553.96	$6,753.44	$92,470.00	$50.83	$18.50	$253.34	$54,086,655.41	$352,529.77	$21,698,945.60
Adults	$26,737.23	$6,815.18	$64,318.98	$73.25	$18.67	$176.22	$176,102,066.30	$254,338.00	$81,947,433.40
Older Adults	$22,303.26	$14,593.75	$112,063.43	$61.10	$41.06	$307.02	$21,078,807.79	$64,976.01	$5,720,395.00

Tables 4 and 5 display the same type of information about numbers served and expenditures as in Tables 2 and 3, but for Fiscal Year 09-10.

Table 4. *Full Service Partnership Services: Numbers Served by Age Group* [23]
(Fiscal Year 09-10) [24]

Age Group	Number Served			Sum of Days			Number of Client Years		
	Total	Low	High	Total	Low	High	Total	Low	High
CYF	6,348	5	3,165	1,444,331	780	820,496	3,957.1	2.1	2,247.9
TAY	6,623	36	1,702	1,619,816	8,444	477,643	4,437.9	23.1	1,308.6
Adults	12,733	39	4,541	3,456,407	3,630	1,357,732	9,469.6	9.9	3,719.8
Older Adults	1,764	1	406	480,383	365	124,740	1,316.1	1	341.8

Table 5. *Full Service Partnership Services: Annualized Expenditure per-Client by Age Group* [25]
(Fiscal Year 09-10) [26]

Age Group	Annualized Expenditure per- FSP Client			Daily Expenditure per-FSP Client			FSP Service Expenditure Total		
	Average	Low	High	Average	Low	High	Total	Low	High
CYF	$17,481.79	$3,933.95	$54,663.66	$47.90	$10.78	$149.76	$69,177,192.53	$82,641.89	$40,675,886.00
TAY	$13,741.40	$5,584.11	$54,570.82	$37.65	$15.30	$129.51	$60,982,974.12	$287,581.77	$22,853,881.40
Adults	$23,626.13	$5,066.28	$55,558.11	$64.73	$13.88	$261.41	$223,729,986.45	$320,491.79	$113,766,228.00
Older Adults	$18,785.22	$9,538.23	$162,106.00	$51.47	$26.13	$141.99	$24,723,227.99	$43,553.21	$6,412,015.00

The age breakouts reveal that FSP services for Adults comprise most of the expenditures in both fiscal years. Average daily expenditure on FSP clients in each age group varies substantially across counties.

Table 6 displays information about possible factors of service populations, the kinds of services provided by counties, and characteristics of the counties themselves that may contribute to differences between the average county FSP expenditure per client. These county-level factors were subsequently analyzed using multivariate statistics in order to determine the relationship to the average FSP expenditure in each county. Hence, the purpose was comparison of county-level variables (not individual-level variables).

Table 6. *Description of County-Level Variables -*
Total FSP Average Daily Expenditure per County

	CYF Average Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Counties	The number of counties for which we have daily expenditure data. An average for each age group was calculated, in order to produce a county-level variable, to compare with other county-level variables.			
Number of Service Options	The total number of FSP activities/strategies offered in the county (see Appendix B).			
Evidence-Based Services	The total number of FSP evidence-based activities/strategies offered in the county (see Appendix B).			
Peer Services	The total number of FSP activities/strategies led by peers in the county (see Appendix B).			
Penetration Rate	The Penetration Rate is a ratio estimate of the prevalence of serious mental illness/serious emotional disturbance in California (developed by Dr. Charles Holzer from the University of Texas).			
Population Density	Population density was created for each county using county population and square miles of the county.			
Percent County Population Insured	Percent of county population with health insurance.			
Poverty Level	2009 Poverty and Median Income Estimates – Counties; Source: U.S. Census Bureau, Small Area Estimates Branch			
Unemployment Rate	The California Employment Development Department (CA EDD) defines "*Unemployment Rate*" as the number of unemployed divided by the labor force then multiplied by 100.			
Rate of Foreclosures	Rate of foreclosures in the county.			

A series of multivariate analyses were conducted in order to determine the relationship between average expenditure by age group and county factors. Analyses completed included:

- Regression
- General Linear Model
- ANOVA
- MANCOVA

None of the multivariate models yielded meaningful results, resulting in return to examining the correlational matrices produced during the process of conducting multivariate analyses. The results are displayed in Table 7. Table 7 provides information on possible factors of service populations, the kinds of services provided by counties, and characteristics of the counties themselves that may contribute to differences between the average county FSP expenditure per age group. Table 7 displays correlations between select characteristics of services provided (number of service options offered in the county, number of evidence-based options, number of peer led services offered); and characteristics of the county environment [27] (penetration rate, [28] population density, [29] percent of county population with health insurance, [30] poverty level, [31] county unemployment rate, [32] and rate of foreclosures). [33]

Table 7. *Correlations (Pearson's) of FSP Services, and County Characteristics to Total FSP Average Daily Expenditures for Counties (Fiscal Year 09-10)*

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Counties	*34*	*39*	*42*	*31*
Number of Service Options	-0.120	-0.262	-0.011	-0.290
Evidence-Based Services	-0.102	-0.171	0.133	-0.225
Peer Services	-0.070	0.034	0.050	-0.230
Penetration Rate	-0.070	-0.140	0.006	-0.156
Population Density	0.180	-0.177	0.077	-0.078
Percent County Population Insured	0.420*	0.095	-0.067	-0.164
Poverty Level	-0.373*	-0.208	-0.212	0.066
Unemployment Rate	-0.310	0.115	-0.173	0.057
Rate of Foreclosures	-0.179	0.144	-0.264	0.191

**Correlation is significant at the .05 level*

The results displayed in Table 7 highlight the:

1. relatively small degree to which these factors are associated with the average FSP daily expenditure across counties,
2. presence of only one factor that shows a consistent direction of association with the average daily FSP expenditure across all age groups (number of service options – negative correlation for each age group),

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Service Options	-0.120	-0.262	-0.011	-0.290

and

3. degree to which other factors related to the average FSP daily expenditure differ across participant age groups (e.g., unemployment rate is negatively correlated with CYF and Adult Daily expenditure and positively correlated with TAY and Older Adult Daily expenditure. In addition, the correlation is moderate for CYF, and very small for the other age groups)

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Unemployment Rate	-0.310	0.115	-0.173	0.057

With respect to the relatively small magnitude of association as measured by these coefficients, two associations reach a level of statistical significance, but only for CYF expenditures (percent of county population insured and poverty level). Please note that correlation does not equal causation – association merely means that two variables are related to one another, not that one variable changed the other variable in any way:

- **Percent of Population Insured**: Higher percentages of children with insurance were correlated (at .05 significance level) with higher average daily FSP expenditure for CYF.
- **Poverty Level:** Lower percentages of families with children living in poverty were correlated (at .05 significance level) with higher average daily expenditure for CYF.

In order to examine select characteristics of FSP participants (gender, race/ethnicity), [34] additional correlational analyses were conducted. An explanation of the variables used in analysis is provided below, in Table 8, and the results are displayed in Table 9.

Table 8. *Description of FSP-Level Variables - Total FSP Average Daily Expenditure*

	CYF Average Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Gender	The proportion of Caucasian FSPs (by age group) in each county.			
Race	The proportion of FSPs (by age group) in each county that are Male.			

Table 9. *Correlations (Spearman's Rank Order) of FSP Characteristics to FSP Average Daily Expenditures (Fiscal Year 09-10)*

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Counties	*34*	*39*	*42*	*31*
Gender	-0.175	-0.066	0.116	-0.437*
Race	0.458*	0.404*	0.150	0.126

**Correlation is significant at the .05 level (2-tailed)*

The results displayed in Table 9 highlight the:

1. relatively moderate degree to which FSP characteristics are associated with the average FSP daily expenditure for some age groups across counties (compared to county characteristic variables),

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Gender	-0.175	-0.066	0.116	**-0.437*** ←
Race	**0.458*** ↑	**0.404*** ↑	0.150	0.126

2. presence of one factor that shows a consistent direction of association with the average daily FSP expenditure across all age groups (race – proportion of White/Caucasian FSPs – positive correlation for each age group), and

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Race	0.458*	0.404*	0.150	0.126

3. the degree to which gender is largely unrelated to the average FSP daily expenditure, with the exception of Older Adults [35]

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Gender	-0.175	-0.066	0.116	**-0.437*** ←

With respect to the relatively moderate magnitude of association as measured by these coefficients, three associations reach a level of statistical significance. Please note that correlation does not equal causation – association merely means that two variables are related to one another, not that one variable changed the other variable in any way:

- **Race/Ethnicity**: Higher percentages of white (Caucasian) FSPs served by a county were associated with higher average daily FSP expenditure for CYF and TAY (at .05 significance level).

These results are depicted graphically in Exhibits 1 through 2.

Exhibit 1. *Relationship of CYF Race/Ethnicity to FSP Average Daily Expenditures (Fiscal Year 09-10)*

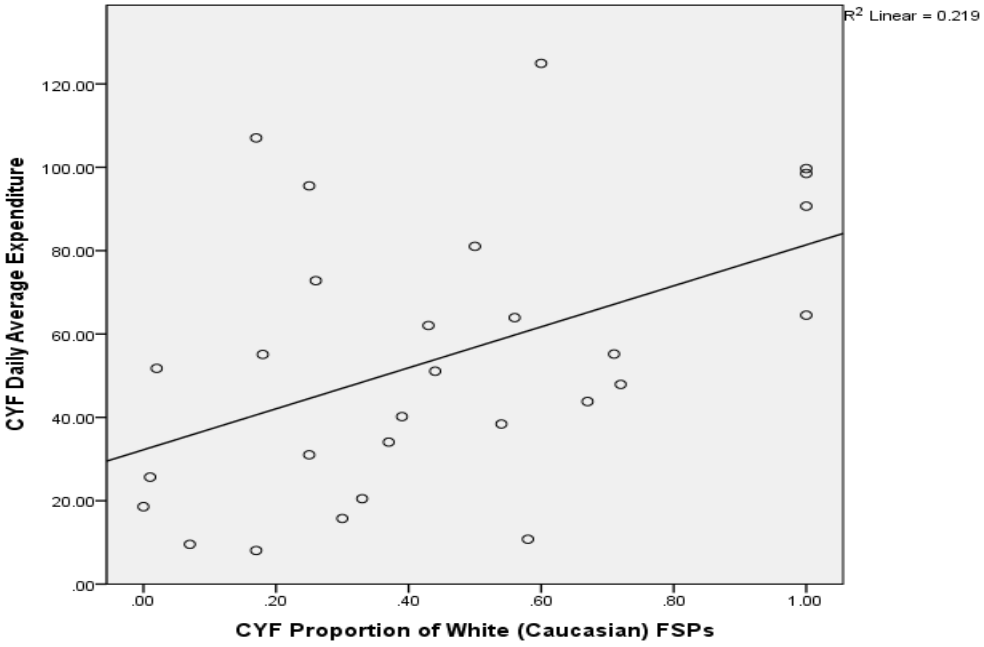
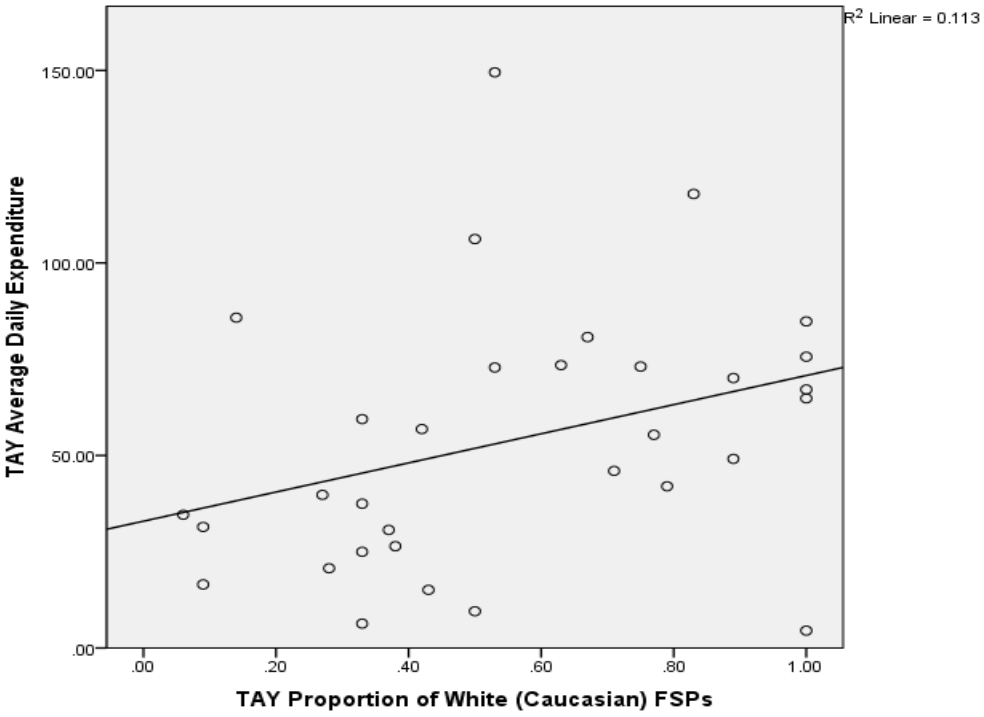


Exhibit 2. *Relationship of TAY Race/Ethnicity to FSP Average Daily Expenditures (Fiscal Year 09-10)*



Cost Offsets of Full Service Partnership Services

Tables 10 through 13 represent service expenditures and costs saved as a result of service for FY 08-09 (Tables 10 and 11) and FY 09-10 (Tables 12 and 13) for new enrollees in FSP. Cost-offset analysis is limited to new enrollees for the following reasons:

- The baseline intake assessment (documented on the Partnership Assessment Form) contains questions about service use in offset categories of interest in the 12 months prior to FSP enrollment.
- The post-FSP period, therefore, should be equivalent to the pre-intake period (no more than 12 months), in order to compare the proverbial "apples to apples."
- Given that the two fiscal years of focus are 08-09 and 09-10, the logical groups for inclusion in analyses were new enrollees in FY 08-09 and new enrollees in FY 09-10.
- Cost offsets are calculated for each individual FSP client (e.g., number of inpatient psychiatric hospitalization days in the 12 months prior to FSP and the 12 months post-FSP enrollment).

More specifically,

- Cost offsets are the total differential between the cost of mental and physical health services, and criminal justice involvement costs in the year prior to entry into FSP services and the average 12-month cost after entry into services. [36] This is the amount of public money in these areas that was saved after these clients had access to service.

Full Service Partnership Cost Offsets by Age Group include:

Physical Health

- Acute Care Inpatient Hospitalization (number of days)
- Skilled Nursing (Non-Psychiatric) (number of days)
- Emergency Room Visits (number of times)

Psychiatric Care

- Inpatient Psychiatric Hospitalization (number of days)
- Long-Term Care (number of days)
- Skilled Nursing (Psychiatric) (number of days)

Criminal Justice Involvement

- Arrests (number of times)
- Division of Juvenile Justice (number of days)
- Juvenile Hall/Camp (number of days)
- Jail (number of days)
- Prison (number of days)

Table 10. *Full Service Partnership Services: Number of New Enrollees by Age Group* [37] *(Fiscal Year 08-09)* [38]

Age Group	Number of New Enrollees FY 08-09			Sum of Days		
	Total	Low	High	Total	Low	High
CYF	2,164	9	2,223	340,323	1,369	580,545
TAY	2,327	25	1,257	371,250	6,517	333,383
Adults	4,315	37	4,176	690,298	9,000	1,148,521
Older Adults	582	1	373	91,220	7	98,535

Table 11. *Full Service Partnership Services: Expenditures and Cost Offsets by Age Group* [39] *(Fiscal Year 08-09)* [40]

Age Group	Total Expenditures for FY 08-09 New Enrollees			Total Cost Offset FY 08-09		
	Total	Low	High	Total	Low	High
CYF	$20,450,009.07	$3,759.79	$72,054.99	$2,428,313.16	$86,851.14	$27,863,702.00
TAY	$18,870,637.50	$6,753.44	$92,470.00	$22,437,417.44	$352,529.77	$21,698,945.60
Adults	$50,564,328.50	$6,815.18	$64,318.98	$41,509,329.01	$254,338.00	$81,947,433.40
Older Adults	$5,573,542.00	$14,593.75	$112,063.43	$5,421,665.55	$64,976.01	$5,720,395.00

Tables 12 and 13 display the same type of information about numbers served, expenditures and cost offsets as in Tables 10 and 11, but for Fiscal Year 09-10.

Table 12. *Full Service Partnership Services: Number of New Enrollees by Age Group* [41] *(Fiscal Year 09-10)* [42]

Age Group	Number of New Enrollees FY 09-10			Sum of Days		
	Total	Low	High	Total	Low	High
CYF	3,101	9	2,223	454,605	1,369	580,545
TAY	2,977	25	1,257	496,190	6,517	333,383
Adults	4,702	37	4,176	868,415	9,000	1,148,521
Older Adults	645	1	373	103,459	7	98,535

Table 13. *Full Service Partnership Services: Expenditures and Cost Offsets by Age Group* [43] *(Fiscal Year 09-10)* [44]

Age Group	Total Expenditures for FY 09-10 New Enrollees			Total Cost Offset FY 09-10		
	Total	Low	High	Total	Low	High
CYF	$21,775,579.50	$3,759.79	$72,054.99	$2,262,842.11	$86,851.14	$27,863,702.00
TAY	$18,681,553.50	$6,753.44	$92,470.00	$27,501,007.94	$352,529.77	$21,698,945.60
Adults	$56,212,502.95	$6,815.18	$64,318.98	$56,120,875.82	$254,338.00	$81,947,433.40
Older Adults	$5,325,034.73	$14,593.75	$112,063.43	$3,857,684.17	$64,976.01	$5,720,395.00

The findings displayed in Tables 10 through 13 support the following conclusions:

- Cost savings over the two-year period are consistent in relative magnitude across age groups. In particular, TAY consumers experienced the greatest cost-related benefits of service. Transition-Age Youth are at high risk for criminal justice and crisis management services, and FSP participation apparently has a significant impact on consequences for this age group.
- Cost offsets are dramatically lower for the CYF age group. This may reflect the more preventive orientation of services for children, which is not as clearly reflected in the short time line of the measured

offsets. Savings for children may appear over a much longer period of time, outside the currently funded study period. In addition, the "*consequence*" nature of the offset categories examined (e.g., criminal justice involvement) is more relevant to older age cohorts. Effects of service are sensitive to life maturation, indicators of service success and the time horizon of measured effects.

- Overall, across all age groups, 75 and 88 percent of FSP expenditures for new enrollees in FY 08-09 and FY 09-10 (respectively) are offset by savings to the public mental health, health and justice systems. Although the argument of cost savings should never be advanced as the primary reason for providing public mental health services, results of this magnitude make a strong case for the wisdom of investing public resources in programs such as the Full Service Partnership.

In summary, this analysis of cost offsets in larger social costs attributable to participation in the FSP program documents positive results. Results for the TAY and Adult age groups, which account for the great majority of clients, are particularly positive. These results are quite favorable when compared with AB 2034, a program charged with serving homeless (or at risk of becoming homeless) TAY and Adults with severe mental illness – the final analysis reported a percentage of costs offset of 49.8 percent.

In addition, an analysis of county contextual variables that may be related to cost offsets was conducted. This analysis (and the multivariate analyses preceding the results shown below) parallels the analysis of average daily FSP expenditures (Table 7). Variable definitions and analysis technique are the same as those described in that section. The dependent variable is total cost offset as a percentage of total cost. Table 14 displays associations, as measured by Pearson's correlation coefficients, between the individual, service, and county environment characteristics identified above, and average cost offset for each county.

The pattern of association for cost offsets is quite different than that identified for expenditures. Table 14 demonstrates the following patterns in association across the age groups.

Table 14. *Correlations (Pearson's) of FSP Services and County Characteristics to Average Cost Offsets for Counties (Fiscal Year 09-10)*

	CYF Average Cost Offset	TAY Average Cost Offset	Adult Average Cost Offset	Older Adult Average Cost Offset
Number of Counties	*34*	*39*	*42*	*31*
Number of Service Options	-0.382*	0.048	-0.011	0.293
Evidence-Based Services	-0.248	0.025	-0.113	0.233
Peer Services	-0.314	-0.077	-0.070	0.100
Penetration Rate	-0.057	-0.351*	0.263	0.292
Population Density	0.103	-0.251	-0.238	-0.236
Percent County Population Insured	0.196	0.095	-0.212	-0.301
Poverty Level	-0.150	-0.208	0.176	0.168
Unemployment Rate	-0.133	0.115	-0.100	-0.030
Rate of Foreclosures	0.083	0.088	0.005	0.019

**Correlation is significant at the .05 level (2-tailed)*

The results displayed in Table 14 highlight the:

1. relatively small degree to which these factors are associated with the FSP average cost offset across counties,
2. presence of only one factor that shows a consistent direction of association with the FSP average cost offset across all age groups (rate of foreclosures – positive correlation with each age group), and

	CYF Average Cost Offset	TAY Average Cost Offset	Adult Average Cost Offset	Older Adult Average Cost Offset
Rate of Foreclosures	0.083	0.088	0.005	0.019

3. degree to which other factors related to the FSP cost offsets differ across participant age groups (e.g., poverty level is negatively correlated with CYF and TAY average cost offset and positively correlated with Adult and Older Adult average cost offset)

Please note that correlation does not equal causation – association merely means that two variables are related to one another, not that one variable changed the other variable in any way:

- **Number of Service Options** is associated with offsets for CYF.
  - The greater number of services offered, the lower average cost offset among CYF (significant at .05 level). In plain language, offering more services for CYF is not associated with greater cost offsets in the near term. However, it is not possible to know the impact after one year – CYF cost offsets may not be likely to appear until many years later, perhaps even into adolescence or young adulthood.
- **Penetration Rate** (ratio estimate of the prevalence of serious mental illness/serious emotional disturbance) is associated with offsets in all but the CYF group, but varies across age groups.
  - For TAY participants, a higher penetration rate is related (at .05 significance level) to lower average cost offset in counties.

In order to examine select characteristics of FSP participants (gender, race/ethnicity), additional correlational analyses were conducted. The results are displayed in Table 15.

Table 15. *Correlations (Spearman's Rank Order) of FSP Characteristics to FSP Average Cost Offset (Fiscal Year 09-10)*

	CYF Total Cost Offset	TAY Total Cost Offset	Adult Total Cost Offset	Older Adult Total Cost Offset
Number of Counties	*34*	*39*	*42*	*31*
Gender	0.298	0.217	0.166	-0.097
Race	-0.025	-0.054	0.142	-0.037

**Correlation is significant at the .05 level (2-tailed)*

The results displayed in Table 15 highlight the relatively small degree to which FSP characteristics are associated with the FSP average cost offset across counties. The descriptive analyses examining participant characteristics suggests that cost offsets are less related to these factors than is daily service expenditure.

Summary

CSS and FSP services represent a commitment to improving mental health service to those Californians most in need. A wide variety of service strategies are offered under FSP (selected highlights below):

- Outreach and Engagement (all counties)
- Personal Service Coordinator (all counties)
- Outpatient Mental Health Services (over 90% of counties)
- Client/Family Member on the Team (95% of counties)

A recent report has shown FSP services to yield cost benefits statewide, yielding average savings in public cost attributable to the inadequately treated mental illness of FSP participants prior to program services that exceed the cost of those services – there is a cost savings of $1.27 for every Prop 63 dollar spent.

FSP expenditures per client and cost offsets vary substantially across counties. The age breakouts reveal that FSP services for Adults comprise most of the expenditures – yet when participant and county characteristics were analyzed in order to determine potential association with FSP expenditures, significant relationships between county and participant characteristics were only identified for CYF, TAY and Older Adults (correlations in the moderate range):

- **Percent of Population Insured**: Higher percentages of children with insurance were correlated with higher average daily FSP expenditure for CYF.
- **Poverty Level:** Lower percentages of families with children living in poverty were correlated with higher average daily expenditure for CYF.
- **Race/Ethnicity**: Higher percentages of white (Caucasian) FSPs served by a county were associated with higher average daily FSP expenditure for CYF and TAY.

Cost savings over the two-year period are consistent in relative magnitude across age groups. In particular, TAY consumers experienced the greatest cost-related benefits of service. Transition-Age Youth are at high risk for criminal justice and crisis management services, and FSP participation apparently has a significant impact on consequences for this age group.

- **Penetration Rate** (ratio estimate of the prevalence of serious mental illness/serious emotional disturbance) is associated with lower average cost offset for TAY across counties.

Cost offsets are dramatically lower for the CYF age group. This may reflect the more preventive orientation of services for children, which is not as clearly reflected in the short time line of the measured offsets. Savings for children may appear over a much longer period of time, outside the currently funded study period. In addition, the "*consequence*" nature of the offset categories examined (e.g., criminal justice involvement) is more relevant to older age cohorts. Effects of service are sensitive to life maturation, indicators of service success and the time horizon of measured effects.

- **Number of Service Options** is associated with offsets for CYF, in that the greater number of services offered, the lower average cost offset among CYF. In plain language, offering more services for CYF is not associated with greater cost offsets in the near term. However, it is not possible to know the impact after one year – CYF cost offsets may not be likely to appear until many years later, perhaps even into adolescence or young adulthood.

Overall, across all age groups, 75 and 88 percent of FSP costs for new enrollees in FY 08-09 and FY 09-10 (respectively) are offset by savings to the public mental health, health and justice systems. Although the argument of cost savings should never be advanced as the primary reason for providing public mental health services, results of this magnitude make a strong case for the wisdom of investing public resources in programs such as the Full Service Partnership.

The moderate relationships between FSP expenditures, cost offsets and county/participant characteristics suggest other factors relate to variation between counties. Additional investigation is needed in order to determine county, service and client characteristics that may impact FSP expenditures and cost offsets. For example, clinical diagnosis has been shown in a previous study to be an important covariate, and encounter data at the unit of service level a critical outcome variable (particularly use of outpatient services). [45] Neither variable was available

for analysis given the need to rely largely upon available data sources for the current study. Fidelity to implementation of evidence-based practices and other quality of service indicators merit further investigation, given the logical relationship to outcomes.

Definition of Terms

DEFINITION OF TERMS	
3M	Quarterly Assessment
AB	Assembly Bill
CF	Capital Facilities
CFTN	Capital Facilities and Technological Needs
CMHDA	California Mental Health Directors Association
CSA	Corrections Standards Authority
CSI	Client Services Information System
CSS	Community Services and Supports
CYF	Children, Youth and Families
DCR	Data Collection and Reporting System for MHSA FSP
DJJ	Division of Juvenile Justice
DMH	Department of Mental Health
DNR	Agency did not report costs
DOF	Department of Finance
EAG	Evaluation Advisory Group
ER	Emergency Room
FFP	Federal Financial Participation
FSP	Full Service Partner or Full Service Partnership
FY	Fiscal Year
GSD	General System Development
IMD	Institution for Mental Diseases
INN	Innovation
IMPACT	Improving Mood – Promoting Access to Collaborative Treatment
JHC	Juvenile Halls and/or Camps
KET	Key Event Tracking
LAO	Legislative Analyst's Office
LGBTQ	Lesbian, Gay, Bisexual, Transsexual/Transgendered and Questioning
MH	Mental Health
MHRC	Mental Health Rehabilitation Centers
MHSA	Mental Health Services Act
MHSOAC	Mental Health Services Oversight and Accountability Commission (also OAC)
NC	No Camp
NJH	No Juvenile Hall
NJHC	No Juvenile Hall or Camp
OA	Older Adults
OSHPD	Office of Statewide Health Planning and Development
PAF	Partnership Assessment Form
PEI	Prevention and Early Intervention
POQI	Performance Outcomes & Quality Improvement
RER	Revenue and Expenditure Reports
RFA	Request for Applications
RFP	Request for Proposal
SAMHSA	Substance Abuse and Mental Health Services Administration
SB	Senate Bill
SED	Serious Emotional Disturbance
SGF	State General Fund
SMA	Statewide Maximum Allowance
SMI	Severe Mental Illness
SMHA	State Mental Health Authority
SPSS	Statistical Package for the Social Sciences
TAY	Transition-Age Youth
TN	Technological Needs

DEFINITION OF TERMS	
WET	**Workforce Education and Training**
WIC	**Welfare and Institutions Code**
YSS	**Youth Services Survey**
YSS-F	**Youth Services Survey for Families**

Executive Summary End Notes

[1] The system of care is addressed in:

California Welfare and Institutions Code (WIC), Division 5. Community Mental Health Services, Part 3. Adult and Older Adult System of Care Act. Article 1. Legislative Findings and Intent (5801 – 5802) and Article 2. Establishing New County Systems of Care (5803 – 5809) and Part 4. The Children's Mental Health Services Act. Chapter 1. Interagency System of Care (5850 – 5851.5).

Certified as current (January 18, 2013). Note that the direct web link to WIC specific to the Mental Health Services Act requires search onsite, using the link below:

http://leginfo.legislature.ca.gov/faces/codes.xhtml

CSS is addressed in:

California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, Community Services and Supports, 3200.080.

Note that the direct web link to CCR specific to the Mental Health Services Act requires search onsite, using the link below,

http://government.westlaw.com/linkedslice/default.asp?RS=GVT1.0&VR=2.0&SP=CCR-1000&Action=Welcome

Full Service Partnership is further addressed in:

California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category. Subsection (c).

[2] Per the Corporation for Supportive Housing (undated report), *AB 2034 Program experiences in housing homeless people with serious mental illness*:

> The state legislature started laying the foundation for MHSA back in 1999 when it passed AB 34, which provided $10 million for pilot programs through the mental health departments in Los Angeles, Sacramento and Stanislaus counties. Based on the success of that effort, funding increased dramatically in FY 00-01 under AB 2034. AB 2034 provided the resources necessary to expand existing pilots and create additional programs statewide. (p. 1)

In summary, there are many predecessors to Prop 63. Others include AB 34 and AB 3777.

[3] California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author. (p. 3)

Data collected from November 1, 1999 – January 31, 2007. $55 million in costs, $27.4 million in offsets (psychiatric hospitalization, incarceration and emergency room use for psychiatric episodes).

[4] Please refer to End Note #1.

[5] Full Service Partnership is addressed in:

California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category. Subsection (c).

[6] Alignment of plan, update, RER, plus breakout of discrete FSP programs into distinct age groups was a rarity among the counties, but this should not be viewed as a "*negative*" on the part of the counties, because the original intent of the RER had nothing to do with breakouts by age group.

Note that one county was in start-up during the entire study period, and was therefore removed from the total N for purpose of this study. No comparable data was available for analysis – this is the reason for removal. Therefore, the N = 58 (rather than 59).

California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620 Full Service Partnership Service Category. Subsection (j).

[7] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions. 3200.030. Children and Youth:

> (1) Individuals age 18 and older who meet the conditions specified in Chapter 26.5 (commencing with Section 7570) of Division 7 of Title 1 of the Government Code are considered children and youth who are eligible to receive services.

[8] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.280. Transition Age Youth.

[9] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.010. Adult.

[10] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.230. Older Adult.

[11] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 3. General Requirements, 3310. The Three-Year Program and Expenditure Plan. Subsection (b) (1).

[12] The most conservative estimate of cost offsets would involve accessing consequence data directly from providers – jails, prisons, etc. However, this was not feasible from either a time or a study-cost perspective. Therefore, self-report data were relied upon in order to estimate days in jail, prison, etc.

Note that the term "cost offsets" is used, compared to "expenditures" when discussing the daily average expenditure per FSP. The term "cost" is used in reference to offsets because the unit of analysis is the actual cost (recognized as accurate by a governmental agency, either at the state or at the county level) incurred to providers when providing a "service," whether it be the cost of inpatient psychiatric hospitalization for one day, the daily cost of incarceration, or the cost of an emergency room visit – the official source for each agency cost is discussed extensively in the report, *Full Service Partnerships: California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness*:

http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

and therefore need not be repeated here.

[13] Documentary review was selected as the method due to budget limitations and concerns about county/municipal burden inherent in a site visit/on-site service observation. See Appendix A for a list of Evaluation Advisory Group members.

Following the FSP Service Summary, counties/municipalities had the opportunity to review their individualized FSP Services Assessment, and to provide supplementary documentation for consideration in the event that critical services were not documented in the CSS Plan or Annual Updates. When supplementary documentation was provided by a county or municipality, its specific, individualized FSP Service Summary was updated to reflect new information. The FSP Service Summary includes documentation of the source material, for county/municipal reference. Because of the opportunity for counties to review and comment on planned FSP services, and to make corrections where necessary, the services summarized in Table 1 (above) may reasonably be considered to be implemented for FSPs (rather than simply planned).

[14] See Appendix B for FSP services by county and age group – not all age groups were served in all counties during the study period.

[15] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category. Subsection (f).

[16] Housing, for the purpose of this study, is defined as:

1) Project-Based Housing Program, per California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3630.05. Project-Based Housing Program. Per Subsection (a):
The County may use General System Development funds for costs associated with Project-Based Housing…

2) Mental Health Services Act Housing Program Service Category, per California Code of Regulation (Barclays Official), Title 9. Rehabilitative and Developmental Services, Division 1. Department of Mental Health, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.225. Mental Health Services Act Housing Program Service Category.
"Mental Health Services Act Housing Program Service Category" means the service category of the Community Services and Supports component of the Three-Year Program and Expenditure Plans under which Mental Health Services Act funds, administered through the California Housing Finance Agency, are used to acquire, rehabilitate, or construct permanent supportive housing for clients with serious mental illness and provide operating subsidies.

[17] For more details on methods related to the cost-offset study, see Chapter IV of the full Report.

[18] Annualization of the service period is the same methodology used by the California Department of Mental Health when evaluating and reporting on AB 2034 outcomes.

California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author.

[19] Small counties have been pooled for the purpose of summarizing the data in Tables 2 – 5, and in Appendix G. For Tables 2 – 5, small county data was pooled as a means of dealing with skew (as opposed to transformation, which would not be appropriate for purpose of display in Tables 2 - 5), based upon Evaluation Advisory Group recommendation. For Appendix G, small county data was pooled for purpose of display based upon the recommendation of the Evaluation Advisory Group. This recommendation was based upon the lower number of FSPs served in smaller counties, and what would amount to an unfair comparison if aligned in a table containing larger counties. Pooling of small counties aggregates the small county data, allowing for a fairer comparison to their larger counterparts.

Small counties were not pooled in all tables/analyses, and thus it is noted when pooling occurred.

In addition, small counties were pooled in the following report:
Mental Health Services Act Evaluation: Compiling Community Services and Supports (CSS) Data to Produce All Priority Indicators Contract Deliverable 2F, Phase II, available for download at:

http://www.mhsoac.ca.gov/Evaluations/docs/CompilingCSSDataToProducePriorityIndicators_2FPhase2_121812.pdf

[20] See Appendix G for a display of the data shown in this table, by county.

[21] See End Notes 18 and 19.

[22] Ibid.

[23] Ibid.

[24] Ibid.

[25] Ibid.

[26] Ibid.

[27] Of course, cost savings in individual counties could be attributable to many plausible alternative influences other than FSP enrollment, particularly additional services from other programs in that county. However, these influences would not adequately explain aggregate state-level savings.

[28] UCLA updated the Penetration Rate for each county to reflect the relevant year and applicable census data, per the following notation from DMH:

> When considering these penetration rates, it is important to remember that they are based on census data combined with estimates that were calculated by applying prediction weights. Due to the way census data is updated, the data in the tables should be viewed as "best available" and should be checked and/verified at the local level where numbers do not appear to represent actual local population data.

http://www.dmh.ca.gov/Statistics_and_Data_Analysis/RetentionPenetrationData.asp

Please refer to the following report for further information about the *Penetration Rate and its use: Mental Health Services Act Evaluation: Compiling Community Services and Supports (CSS) Data to Produce All Priority Indicators; Contract Deliverable 2F, Phase II*

http://www.mhsoac.ca.gov/Evaluations/docs/CompilingCSSDataToProducePriorityIndicators_2FPhase2_121812.pdf

See pages 42 – 45.

Cost Offsets can be developed only for counties that submit data to the State Department of Mental Health's Full Service Partnership (FSP) Data Collection and Reporting System (DCR). All of the variables used in the FSP Cost Offset analysis are contained in the DCR. UCLA does not have access to non-DCR data from counties.

[29] Population density was created for each county using county population and square miles of the county. The population of each county was taken from the following archival dataset:

http://www.census.gov/popest/research/eval-estimates/eval-est2010.html

Population Estimates, 2010, U.S. Census Bureau, Population Division.

The square miles of each county was taken from the following archival dataset:

http://quickfacts.census.gov/qfd/states/06000.html U.S. Census Bureau State and County Quick Facts.

The areas analyzed for savings are very similar to those analyzed in the evaluation of AB 2034 efforts, which included inpatient psychiatric hospitalization and incarceration. Emergency room use was also evaluated but was limited to psychiatric rather than physical health.

California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author.

[30] *Percentage Insured* - 2003, 2005, 2007, and 2009: California Health Interview Survey:

http://www.chis.ucla.edu/

The areas analyzed for savings are very similar to those analyzed in the evaluation of AB 2034 efforts, which included inpatient psychiatric hospitalization and incarceration. Emergency room use was also evaluated but was limited to psychiatric rather than physical health.

California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author.

[31] *Poverty Rate:* Table 1: 2009 Poverty and Median Income Estimates – Counties (released in December 2010); Source: U.S. Census Bureau, Small Area Estimates Branch

http://www.census.gov/did/www/saipe/data/statecounty/data/2009.html

[32] *Unemployment* - California Unemployment Rate (Average – Not Seasonally Adjusted)

http://www.labormarketinfo.edd.ca.gov/?pageid=164

The California Employment Development Department (CA EDD) defines "*Unemployment Rate*" as the number of unemployed divided by the labor force then multiplied by 100 (http://www.labormarketinfo.edd.ca.gov/?pageid=1006). For sake of consistency in data presentation, UCLA calculated unemployment rates using the same method as CA EDD.

[33] The foreclosure rate is defined as the number of foreclosed properties as a percent of households. HousingLink (2007). *Fixing the foreclosure system: The trouble with foreclosure data*. Retrieved August 23, 2011, from

http://www.minneapolisfed.org/news_events/events/community/100407/foreclosuredata_obrien.pdf

California Number of Foreclosures (Annual) were obtained from Realty Trac, and then foreclosure rates calculated using the methodology described above.

[34] In order to create a county-level variable, the percentage of the FSP population in each county that is Caucasian was calculated. Individual-level data could not be entered into the model analyzing county-level data. For gender, the percentage of the FSP population that was male was calculated.

[35] However, when the results are depicted graphically (see Exhibit IV.3), most counties tend to cluster in the center of the distribution (mid-range of expenditures, serving a population that ranges from 30 to 50% male). Therefore, the data display does not tell a clear story, and this result is inconclusive (by way of comparison, examine Exhibits IV.1 and IV.2, in which a clearer relationship can be drawn between CYF and TAY daily expenditures and the proportion of white/Caucasians served).

[36] Please refer to the report for a complete discussion of cost offsets: *Full Service Partnerships: California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness*:

http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

[37] Small counties have been pooled for the purpose of summarizing the data in Tables 10 – 13, and in Appendix H. For Tables 10 – 13, small county data was pooled as a means of dealing with skew (as opposed to transformation, which would not be appropriate for purpose of display in Tables 10 - 13), based upon Evaluation Advisory Group recommendation. For Appendix H, small county data was pooled for purpose of display based upon the recommendation of the Evaluation Advisory Group. This recommendation was based upon the lower number of FSPs served in smaller counties, and what would amount to an unfair comparison if aligned in a table containing larger counties. Pooling of small counties aggregates the small county data, allowing for a fairer comparison to their larger counterparts.

[38] See Appendix H for a display of the data shown in this table, by county.

[39] See End Notes 36 and 37.

[40] Ibid.

[41] Ibid.

[42] Ibid.

[43] Ibid.

[44] Ibid.

[45] Gilmer, T.P.; Stefancic, A.; Ettner, S.L.; Manning, W.G.; & Tsemberis, S. (2010). Effect of Full Service Partnerships on homelessness, use and costs of mental health services, and quality of life among adults with serious mental illness. *Archives of General Psychiatry*, *67*, 645-652.

I. Introduction

Proposition 63 (2004) provides increased funding through the Mental Health Services Act (MHSA) to support mental health services for underserved and previously unserved individuals within the context of the public mental health system. Prop 63 funds are distributed to county departments of mental health to implement MHSA components. Components are: Prevention and Early Intervention (PEI); Workforce Education and Training (WET); Capital Facilities and Technological Needs (CF/TN); Innovation (INN); and Community Services and Supports (CSS), which includes the Full Service Partnership (FSP). The focus of this report is the Full Service Partnership (FSP), which is designed to serve Californians in all phases of life who experience the most severe mental health challenges because of illness or circumstance. This population has been historically underserved and has substantial opportunity for benefits from improved access and participation in quality mental health treatment and support. FSP services are a large portion of the Community Services and Supports (CSS) funding allocation from MHSA. There is a requirement that "*the County shall direct the majority of its Community Services and Supports funds to the Full-Service Partnership Service Category*," [1] and that clients be served with "*whatever it takes.*" The remaining portions of CSS are intended to expand supportive services, such as transportation or vocational training (which are typically unfunded), crisis intervention and treatment.

The Statewide Evaluation

UCLA's Center for Healthier Children, Families and Communities and EMT Associates, Inc. have been contracted by the Mental Health Services Oversight and Accountability Commission to conduct a statewide evaluation of the Mental Health Services Act. This evaluation is designed to be consistent with the intent of the Act "*to ensure that all funds are expended in the most cost effective manner and services are provided in accordance with recommended best practices subject to local and state oversight to ensure accountability to taxpayers and to the public*." The UCLA/EMT Evaluation will produce deliverables in several priority areas. The purpose of this report is twofold, to specify the: [2]

- Statewide [3] and ***county-specific*** per-person annual expenditure average for FSP Adults, Older Adults, Children and Transition-Age Youth and proportion of funding by revenue source.
- Financial impact of outcomes achieved in comparison with expenditures for FSP clients for at least one of the four age groups. In the context of FSP impact, this report documents ***how FSP service expenditures are offset by savings*** [4] ***in actual dollar amounts as a result of reductions in inpatient hospitalization days (psychiatric and physical health) and number of days incarcerated***.

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[1] Full Service Partnership is addressed in:
California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620 Full Service Partnership Service Category. Subsection (c).
Note that the direct web link to CCR specific to the Mental Health Services Act requires search onsite, using the link below,
http://government.westlaw.com/linkedslice/default.asp?RS=GVT1.0&VR=2.0&SP=CCR-1000&Action=Welcome

[2] This report represents the combination of two Phase III contract deliverables: Phase III Deliverable 1.A – FSP Cost Report, which specifies the statewide and county-specific per-person annual cost average for FSP Adults, Older Adults, Children and Transition Age Youth and proportion of funding by revenue source; and Phase III Deliverable 1.B – FSP Cost Offset Report, the Initial written report that specifies the financial impact of outcomes achieved in comparison with expenditures for FSP clients for at least one of the four age groups.

[3] The detailed report summarizing statewide findings may be found at:
http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

[4] The terms *cost savings* and *cost offsets* are used interchangeably throughout this Report.

Report Overview

This report, Full Service Partnerships: California's Investment to Support Children/Transition Age Youth with Serious Emotional Disturbance, and Adults/Older Adults with Severe Mental Illness contains five chapters. A brief synopsis of each chapter follows.

Chapter I – Introduction - provides a brief introduction to the report and a short orientation for the reader to the contents of each chapter.

Chapter II, Involvement of Key Stakeholders, describes the process for obtaining input from expert evaluation advisors and people with lived experience, and the impetus for embarking on a process of extracting information about FSP services from CSS Plans and Updates, and subsequently confirming accuracy with the counties in order to provide context for by-county findings.

A Description of Full Service Partnership Services is provided in Chapter III. The process of conducting a systematic service assessment using each county's CSS Plan, Annual Updates, and other FSP-related documents submitted by counties/municipalities is discussed. Findings are summarized in tables, illustrating the types of FSP services provided, and the number and percentage of counties offering specific services and strategies to each age group.

Expenditures on Full Service Partnership Programs are presented in Chapter IV. In plain language – this chapter contains FSP expenditures per person by age group. There is a brief discussion of the methodology used to produce FSP expenditures per person, including the elements that went into compiling FSP expenditures. The calculation for participant service years is also presented. The statewide per-person annual expenditure average by age group and the range across counties (from low to high) is shown in a table. In this chapter, findings from correlational analysis examining the potential relationship between evidence-based practices, population density, penetration rate (the proportion of people with mental illness served, compared to the population in need), and other factors related to FSP expenditures across counties are presented. Potential reasons for variation between counties are explored and discussed.

Chapter V focuses on Cost Offsets for Full Service Partnership Programs. In this chapter, findings from outcome analysis of psychiatric services, physical health services and criminal justice involvement are presented that illustrate how the savings due to reduction in the number of days help pay for FSP services. The range in costs offset across counties (from low to high) is shown in a table. In this chapter, findings from correlational analysis examining the potential relationship to factors related to FSP cost offsets across counties are presented, and potential reasons for variation between counties are explored and discussed.

II. Involvement of Key Stakeholders

The Expanded Statewide Evaluation of the Mental Health Services Act specifies that the evaluation team:

Establish and maintain stakeholder engagement in the evaluation that is representative of a wide scope of expertise. Engagement will include:

- A process for input from individuals living with mental illness, family members/personal caregivers and representatives of culturally diverse unserved and underserved groups of all ages, and
- A process for input from researchers, data analysts and programmers who are responsible for local data evaluation efforts.

The focus of this chapter is to describe the process and contribution of engagement of stakeholders through seven key strategies:

1. Presentations to client and family groups/organizations representing unserved/underserved groups
2. Key stakeholder interviews with individuals representing client/family groups and organizations representing unserved/underserved groups
3. Presentations to associations/service provider agencies
4. Key stakeholder interviews with individuals representing associations/service provider agencies
5. Formation of an Evaluation Advisory Group
6. Key stakeholder interviews with peer advocates and parent partners
7. Product review/feedback

1. Presentations to Client & Family Groups/Organizations Representing Unserved/ Underserved Groups

Outreach to client and family groups and organizations representing unserved and underserved groups was conducted early in the evaluation process. [5] An offer was made to stakeholder groups for presentation about the Statewide Evaluation of the Mental Health Services Act in person, through conference calls or through webinars. [6]

A total of six (6) presentations were made during the spring/summer of 2011, during which feedback on the FSP Costs and Cost Offsets studies was actively sought. [7]

With respect to the FSP Costs and Cost Offsets studies, the following themes emerged:

- Client and family groups wanted to review the draft report and needed adequate time to do so: [8]
    - Reviewers want to know the disposition of their review comments (e.g., were they used in producing the Final Report, and if not, why not?).
- An emphasis on recovery and resilience is sorely needed:

[5] Late March-July 2011.

[6] The study as a whole was presented and feedback sought with the following considerations: a) reduce stakeholder burden (to avoid returning for every deliverable and thereby requiring multiple presentations/feedback sessions), b) budgetary constraints.

[7] See Appendix F for a list of organizations.

[8] Commitment was made by the Cost Project Director Dr. Elizabeth Harris to each group of stakeholders that they would be sent a copy of the draft report for review and input.

- Most of the data collected through the statewide Department of Mental Health system (the Data Collection and Reporting System, known as the DCR) are *consequence*-focused. In lay terms, most of what is collected about FSP clients is negative (e.g., incarceration, hospitalization).
- Clients and families would like to see positive outcomes documented and somehow tied to savings to the system. [9]

A key stakeholder group representing underserved and unserved individuals was very concerned that:

- *Communities of color are not served in proportion to their actual numbers by the Full Service Partnership program*.

The degree to which communities of color are being served by Full Service Partnerships merits investigation, and is a key question to be addressed in a separate MHSA Statewide Evaluation deliverable. [10]

2. Key Stakeholder Interviews with Individuals Representing Client & Family Groups/ Organizations Representing Unserved/Underserved Groups

Stakeholder groups were contacted and offered participation in a presentation about the Statewide Evaluation of the MHSA, with an opportunity for comment and recommendation. The evaluation team met with four (4) organizations that requested in-person meetings to gain a better understanding of the study. Two agencies for Older Adults opted not to participate in presentations but made the following input:

- The needs of Older Adults are not addressed by every county:
  - A cost-offset study, therefore, may incorrectly assume that Older Adults do not have positive outcomes, when the real problem is that there are not programs under FSP in place to a) recruit them and b) to specifically address their needs. [11]
  - Among counties that do address the needs of Older Adults through Full Service Partnerships, some are implementing evidence-based practices (e.g., IMPACT). However, IMPACT is also being implemented by some counties under the Prevention and Early Intervention component. [12] Indeed, there are a number of evidence-based services being implemented for Older Adults under Early Intervention – which, in combination with FSP services for Older Adults, potentially provide a more robust service system. [13] Fragmentation of funding even under MHSA may make it difficult to determine the true cost offsets for Older Adults – which would be enhanced if individuals in need of early intervention participated in the same data collection and reporting system as Older Adult FSPs.

The evaluation team took these concerns into consideration when conducting analyses of FSP expenditures and cost offsets by age group, as the calculation of numbers served was critical to determining expenditure per client.

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[9] Examples include measuring indicators of recovery, and quality adjusted life years (QALYs).

[10] Phase II Deliverable 2.E – Priority Indicator Report - *Mental Health Services Act Evaluation: Compiling Community Services and Supports (CSS) Data to Produce All Priority Indicators; Contract Deliverable 2F, Phase II*
http://www.mhsoac.ca.gov/Evaluations/docs/CompilingCSSDataToProducePriorityIndicators_2FPhase2_121812.pdf

[11] A thorough, systematic review of CSS Plans was conducted expressly for the purpose of identifying services for Older Adults, using a structured review tool, by one interviewee. She has given her permission to make the results available, on request.

[12] Specifically, under Early Intervention.

[13] UCLA is currently conducting a statewide evaluation of PEI efforts – reports to be released in late 2013.

In addition, see the discussion in this chapter under the *Evaluation Advisory Group* for the process developed for documenting and summarizing FSP services and strategies.

The potential positive impact of evidence-based practices on both expenditures and cost offsets should not be under-estimated. The following assumptions may be tested:

- Implementing an evidence-based best practice may be more expensive because of additional staff training and ongoing supervision requirements (expenditures), and
- Implementing a proven practice that has previously shown demonstrable outcomes is likely to produce the same positive outcomes with FSP participants (cost offsets).

See Chapters IV (expenditures) and V (offsets) for the results of analyses run to test these hypotheses.

3. Presentations to Associations/Service Provider Agencies

Outreach to service provider agencies and community mental health associations/agencies was also conducted early in the Phase III evaluation. [14] A total of six (6) presentations were made during the spring/summer of 2011, during which feedback on the FSP Expenditures and Cost Offsets studies was actively sought. [15] This was the area that generated the most interest and enthusiasm among community mental health associations. [16]

With respect to the FSP Expenditures and Cost Offsets studies, the following themes emerged:

- Service provider agencies/community mental health associations were interested in reviewing the draft report. [17]
- County contractors (e.g., community mental health providers) may provide MHSA services in a more cost-effective manner than the county. This hypothesis should be tested.

The latter concern has clear implications for conduct of the expenditure and cost-offset analyses. Accordingly, feasibility testing is discussed in the following section.

4. Interviews with Representatives from Associations/Service Provider Agencies

When the initial offer was extended to stakeholder groups for a presentation about the Statewide Evaluation of the MHSA, seven (7) organizations instead opted to meet in person or via conference call to gain a better understanding of the study. [18]

The California Mental Health Planning Council, which recommended the original MHSA performance indicators, was one. The focus of its meeting was on Phase II Deliverable 2 (*Statewide and County Indicator Report*).

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[14] Late March-July 2011.

[15] See the appendix for a list of organizations.

[16] MHSA coordinators were interested in the Statewide Evaluation as a whole. The main theme was informing them well in advance of any expectations involving data collection.

[17] Commitment was made by Dr. Harris to each group of stakeholders that they would be sent a copy of the draft report for review and input.

[18] The plan was that interviewees would report items of interest back to their constituency, given the busy agendas that most association meetings entailed. However, a subsequent presentation was scheduled for the California Mental Health Planning Council, following the initial interview.

The remaining organizational representatives were interested in the FSP Expenditures and Cost Offsets Report. The themes that emerged during the interviews echoed those discovered during presentations made to agencies/associations.

In the summer of 2011, the only available data source was the Revenue and Expenditure Reports. A link to the worksheet provided by the Department of Mental Health for documenting FSP expenditures by program is provided in Appendix E (*Revenue and Expenditure Reports*). The worksheet breaks out expenditures under FSP into *county* and *contractor*. Based on this initial information, we determined that the question posed by associations and service provider agencies merited feasibility testing:

- Do the available data support our ability to answer the question, "*Do county contractors (e.g., community mental health providers) provide MHSA services in a more cost-effective manner than the county?"*

We laid out several questions to be answered during our exploratory process:

1. Are contractors identified by a unique identification number in the Revenue and Expenditure Report?
   a. If yes, can this be tracked to individual client (services received) in the DCR?
2. Are contractors identified by name in the Revenue and Expenditure Report?
   a. If yes, can this be tracked to individual client (services received) in the DCR?

The answers to #1 and #2 were ***no***. In addition, we learned that although individual client service records in the DCR may specify the FSP service structure each person participated in, the FSP services may have been implemented by any one of a number of contractors as well as the county itself. The DCR was not designed to capture detailed service-exposure level data.

The next step was to examine County Cost Reports, with the goal of answering the following questions:

1. Can FSP expenditures be disentangled out of the larger MHSA costs contained in the Cost Report?
   a. If yes, can individual contractor FSP billing be traced through the Cost Report (*thereby bypassing the Revenue and Expenditure Reports altogether*)?

After an exhaustive review of the Cost Report worksheets and consultation with a county fiscal expert,[19] the answers were determined to be ***no***.

In summary, we learned the following:

- Individual FSP client data in the DCR contains the general name of the FSP service structure an individual person participated in, but not the individual contractor that delivered the services nor the number of contacts, amount of time of each contact, etc.
- Individual contractors are not identified in any systematic way in the Revenue and Expenditure Report (RER). There is no way to link RER expenditure data by contractor to either the DCR or the Cost Report.

Counties would need to turn over individual-level cost data to UCLA in order to answer the question as to whether contractors deliver FSP services in a more efficient manner compared with the county. We determined that requesting this level of participation from counties is not feasible for the following reasons:

- Burden on county mental health departments

[19] The county fiscal expert consulted completes the Cost Report worksheets annually, in addition to the Revenue and Expenditure Report.

- Confidentiality concerns
- Budget/time constraints

In sum, MHSOAC may determine that the question, "*Do county contractors (e.g., community mental health providers) provide MHSA services in a more cost-effective manner than the county?"* posed by community mental health associations/service provider agencies merits investigation and may develop a Request for Proposal in order to thoroughly study the issue, keeping in mind the data requirements outlined above.

5. Evaluation Advisory Group

The Evaluation Advisory Group (*see Appendix A*) explicitly advises on FSP expenditures and cost offsets. It is composed of nationally recognized evaluators and evaluation and fiscal staff from county mental health departments.

The group initially convened for an all-day meeting on November 3, 2011, in Anaheim. A follow-up meeting was held on February 6, 2012, in Encino. Each participant received a binder with PowerPoint slides that organized the meeting presentations and discussion, and backup materials for reference. The meeting produced two kinds of decisions:

1. *Recommended actions.* After presentation of a required step in the expenditure estimation process and a recommended action or alternatives, the group offered comment and deliberated. If consensus was reached, a recommendation for a preferred action was made.

   When consensus was not reached because of a need for further assessment, actions were recommended contingent on this assessment. Criteria for a final decision were typically identified.

2. *Recommendations for further information from counties.* In some instances it was necessary to get clarification on county data, fill gaps where information was missing in a county or gain clarification on critical points of information. The Advisory Group determined that it was appropriate to contact counties through e-mail to ask for clarifications or information specific to their county, as long as inquiries were brief and focused. When appropriate, the Advisory Group recommended queries to be made to selected counties. These Internet queries formed the basis of a web survey that was developed for county participation.

Evaluation Advisory Group input in the area of expenditure and cost-offset methodology is best understood in the context of chapters devoted to these topics. Refer directly to Chapters III and IV for further discussion.

Full Service Partnership Services Description

For the purpose of this report and recognizing the need to be responsive to key stakeholder feedback, the UCLA/EMT team faced an immediate need to systematically categorize services across counties/municipalities in order to subsequently link specific services to specific age groups. This is important for the following reasons:

- ***FSP expenditures and cost offsets vary by county and age group.*** One reason may be the depth and breadth of services offered under the Full Service Partnership Program.

A report about FSP expenditures and cost offsets in the absence of information about FSP services and activities by age group is to present the proverbial *black box*. In addition, review of the Phase II Deliverable 1 MHSA Cost Report

by county department of mental health stakeholders elicited feedback recommending description of Full Service Partnership programs, in order to provide the appropriate context within which to interpret findings.

Therefore, the Evaluation Advisory Group recommended documentation of FSP services by county and age group as an important analysis.

With the primary goal in mind of developing a standardized system of describing planned FSP services, the Community Services and Supports component section of the Three-Year Program and Expenditure Plan [20] (for the purpose of this report, we will refer to the part of the plan that addresses Community Services and Supports as the *CSS Plan*) and the attendant updates (*Annual Updates through FY 10-11*) served as the basis for the initial FSP review and summary conducted by UCLA. The FSP Service Assessment for each county/municipality was conducted using a systematic review and summary tool developed by a consultant formerly employed with a large county department of mental health and directly involved in the evaluation of that county's MHSA program. The focus of the tool was straightforward – with instructions to trained reviewers to indicate whether planned services were present or absent in the CSS Plan and/or Annual Updates. The rating of "present" or "absent" avoided any judgment about quality, adequacy, etc., as such judgments are inappropriate absent on-site observation.

The strategy of document review and summary was selected following discussion with the FSP Evaluation Advisory Group, [21] due to budget limitations and concerns about county/municipal burden inherent in a site visit/on-site service observation. The draft FSP Service Summary tool was reviewed at a FSP Evaluation Advisory Group meeting, and refined following that meeting.

Following the FSP Service Summary, counties/municipalities had the opportunity to review their individualized FSP Services Assessment, and to provide supplementary documentation for consideration in the event that critical services were not documented in the CSS Plan or Annual Updates. For example, one county submitted its FSP Implementation Manual for inclusion in its FSP Service Summary. When supplementary documentation was provided by a county or municipality, its specific, individualized FSP Service Summary was updated to reflect new information. The FSP Service Summary includes documentation of the source material, for county/municipal reference.

We have reviewed every county's Community Services and Supports Plan and Annual Updates in order to generate a county-specific FSP Service Summary. [22] The FSP Service Summary indicates whether a planned service/activity was present or absent for each age group.

The FSP Service Summary tool was first developed by an expert consultant and pilot tested on one county. The tool was then reviewed by the Evaluation Advisory Group. [23] Revisions were made to the tool based on feedback from the advisory group.

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[20] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 3. General Requirements, 3310. The Three-Year Program and Expenditure Plan. Subsection (b) (1).

[21] See Appendix A for a list of Evaluation Advisory Group members.

[22] The decision was made to use available data (rather than conduct site visits to each county) in order to avoid burden to the counties and due to budgetary considerations.

[23] Our consultant had worked as a Full Service Partnership Coordinator for a large county. The county reviewed was the one she had worked for, with its permission. Counties were provided the opportunity to provide additional documentary evidence because services may have changed following plan submission or a service may have inadvertently been left out of the plan – in short, the Evaluation Advisory Group noted that the Plans and Updates were not designed to capture everything offered through the Full Service Partnership, and therefore the opportunity to augment with additional data must be offered to counties.

FSP Service Summaries were sent back to each county, along with the source location (basis for the present/absent rating). [24] Counties were provided the opportunity for review/feedback, which included submission of documentary evidence to support FSP activities/practices in place. [25]

County feedback was incorporated, and the FSP Assessments updated accordingly. However, due to the length of this report, and the importance of the topic as it relates to expenditures (*and potentially to cost offsets*), we propose that a summary of FSP Services and the potential impact on FSP Expenditures and Cost Offsets be explored in a stand-alone report.

6. Interviews with Peer Advocates & Parent Partners

Following the series of presentations and interviews, the MHSA Statewide Evaluation team launched a participatory evaluation (*Phase III Deliverable 2*). In order to avoid burden on clients and families (and not work at cross-purposes with the participatory evaluation), the Phase III Deliverable 1 process focused on methodology and input from the Evaluation Advisory Group during the period of intensive data collection for the participatory evaluation.

By June 2012, the participatory evaluation survey data collection period was winding down. A brief presentation was made to the Participatory Evaluation Consumer Advisory Board via conference call on June 5, 2012. The request was simple:

> *How can we learn more about the positive ways that FSP clients and families are contributing to their care, as they progress in their recovery* (i.e., ***offsetting costs***)?

We chose an exploratory approach for a number of reasons:

1. The Expenditures and Cost Offsets deliverable had ample opportunities for review and feedback from all stakeholder groups, throughout all phases of development.
2. Clients and families clearly expressed the need (*this speaks to the type of data currently collected under the DCR*) to focus on positive outcomes. [26]
3. Clients and families are in the best position to inform us about what to look for in terms of potential offset areas.
4. Budget limitations and time constraints due to the nature of the deliverable and contract prevented us from launching a second participatory evaluation in which primary (*new*) data collection from clients and families could be the focus.

Therefore, the parameters of an exploratory approach required that no more than nine (9) peer advocates/parent partners be interviewed, and that one general question be posed (*What are some of the ways you have seen people contribute to their care as they progress through recovery?*), to be answered in no more than 15 minutes. A $25 gift certificate would be provided in appreciation for participation in the telephone interview. Peer advocates

[24] For example, the page number in the original CSS Plan. We provided the source location to make it easier for counties to follow the logic for our ratings of whether a given service (e.g., wraparound) was present or absent.

[25] One county requested a site visit in order to update its FSP Assessment. The FSP Assessment matrix accompanied the site visitor and was updated following the visit based on qualitative survey results (interview data with FSP staff).

[26] Previous research by an Evaluation Advisory Group member on a subset of counties (representing the majority of the state's population) using DCR data revealed that there is little change in employment and education outcomes, at least in the manner in which they are currently collected under the DCR paradigm. Therefore, it did not seem a worthwhile use of our resources to reinvent this particular wheel. There is no reason to expect that we would have found different results.

and parent partners were deemed excellent sources of information, given both their lived experience and the numbers of individuals and families mentored through the Full Service Partnership program.

Many wonderful examples of success emerged during the interviews, including a budding entrepreneur who had formerly been homeless. However, an unanticipated theme surfaced across the interviews. The potential for cost offsets to the system is great, but it is not being documented due to deficits in the DCR (see the graphic below):

- Peer networks (*informal and formal*): A recurring theme was the power of peers. Connection to others with lived experience was cited as the reason individuals:
    - Became engaged in mental health services (*where previous efforts had failed*)
    - Were no longer homeless (*able to maintain independent living*)
    - Could "*step down*" in service intensity (*presumably resulting in savings of county staff time, or opening a slot for a new client*)
    - Stayed out of the hospital (*thanks to informal intervention by peers*)
    - Transported their SED children to enrichment activities (*thanks to peer carpooling*)

These were but a few examples cited by the peers (*employed by county mental health departments and county contractors*).

The Key Event Tracking Form within the DCR requests that FSP clients be queried about time spent in volunteer activities. ***It fails to ask what volunteer activity they are engaged in.*** Therefore, time spent by FSP clients acting as informal peers/mentors for others is not documented.

Peer advocates indicated that many FSP clients do not engage in paid employment during their first year of recovery. Nonetheless, the time spent volunteering as a peer advocate provides a critical service on two fronts:

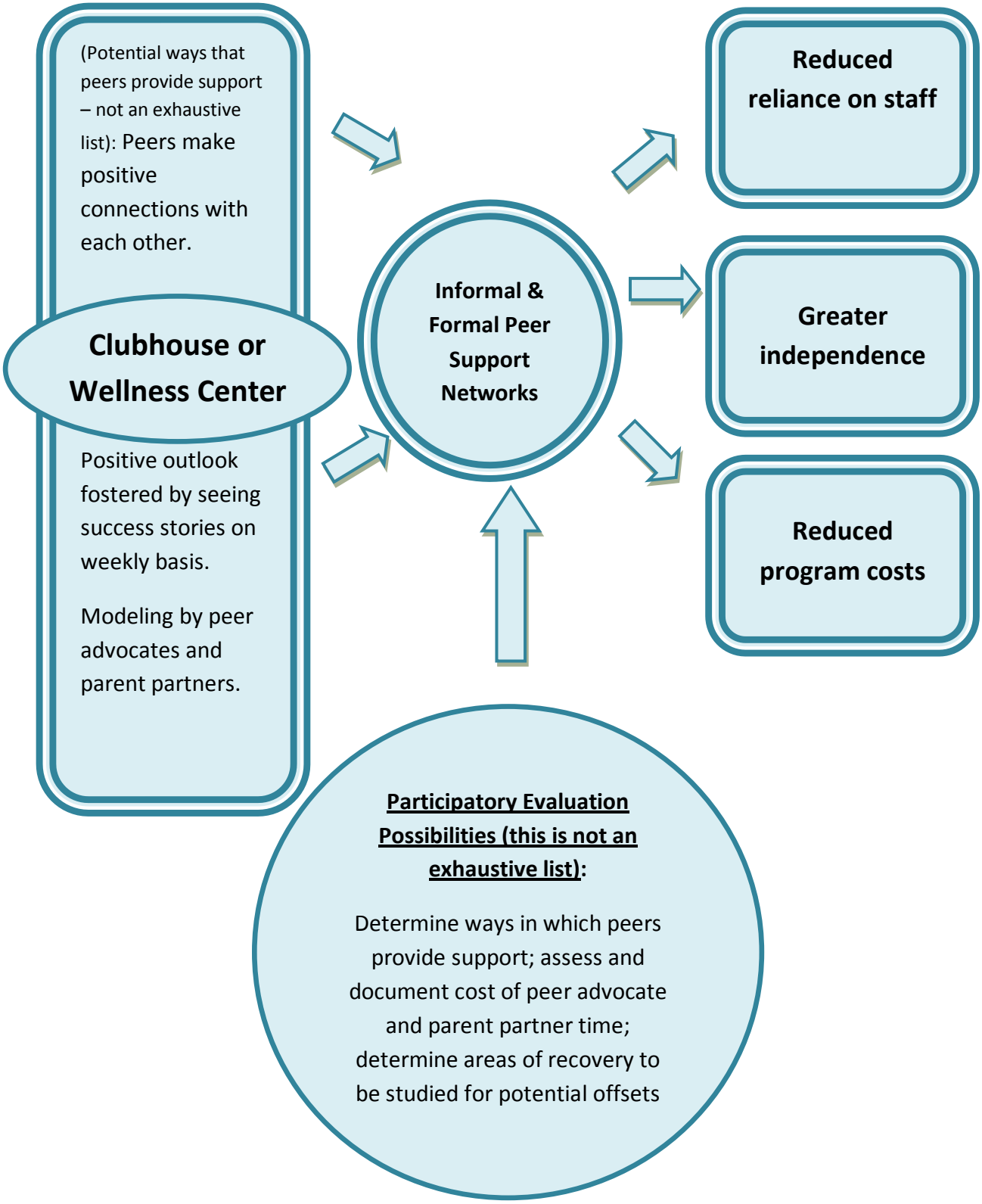
- An informal peer network is established within the county, providing a needed support system.
- Public mental health system expenditures presumably are offset by the informal (and formal) peer support systems.

Time spent working in a formal peer support system is likewise not documented. The Key Event Tracking Form within the DCR requests that FSP clients be queried about time spent employed. ***It fails to ask about the nature of the employment the FSP clients are engaged in.***

We recommend that the Mental Health Services Oversight and Accountability Commission consider funding a participatory evaluation to formally study the positive impact of peer networks. Such a study would provide a necessary balance to the preponderance of consequence-focused data currently collected through the state's DCR system.

Exhibit II.1

Full Service Partnership Program – Hypothesized Relationship between Peer Networks and Cost Offsets



7. *Involvement of Key Stakeholders: Summary*

In all, 23 presentations, interviews and conference calls were held with key stakeholders representing clients and families, service providers and community mental health associations from the end of March through July 2011.

An Evaluation Advisory Group was established, representing nationally recognized experts in cost evaluation and county department of mental health evaluators and fiscal staff. The group held two formal meetings and continues to deliberate via e-mail.

Peer advocates and parent partners were interviewed in order to gain the perspective of individuals with lived experience on potential offsets that FSP participants contribute as they progress in recovery. Their input revealed a remarkable and unmeasured resource represented by peer networks. A recommendation was advanced to formally study the potential cost offset impact of peer networks on the mental health system in the statewide report on FSP Expenditures and Cost Offsets. [27]

[27] http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

III. Description of Full Service Partnership Programs

Documenting in narrative form the essence of what constitutes a Full Service Partnership program has been codified in:

- California Welfare and Institutions Code (Part 4.5 of 5890) [28]
- California Code of Regulations (Title 9, Chapter 14) [29]

Each county documented their Full Service Partnership plan in the Community Services and Supports component section of the Three-Year Program and Expenditure Plan. [30]

In response, each county/municipality embarked on a process of consulting with key stakeholders within the community and conducted needs assessments in order to determine priority services, strategies and populations. The process was primary, and no artificial time limit was imposed. The result was that the planning in some settings ranged from 9 to 12 months in order to ensure that all constituents were adequately "*represented at the table*." The resulting findings and recommendations were compiled into each county's/municipality's Community Services and Supports Plan, and submitted to the Department of Mental Health for review and approval.

For the purpose of this report, the UCLA team faced an immediate need to systematically categorize services across counties/municipalities in order to subsequently link specific services to specific age groups (and to eventually arrive at a cost per FSP program by age group). With the primary goal in mind of developing a standardized system of describing planned FSP services, the Community Services and Supports Plan (CSS Plan) and the attendant updates (Annual Updates through FY 10-11) served as the basis for the initial FSP review and summary conducted by UCLA. The FSP Service Assessment for each county/municipality was conducted using a systematic review and summary tool developed by a consultant formerly employed with a large California county Department of Mental Health consultant, and directly involved in the evaluation of that county's MHSA program. The focus of the tool was straightforward – with instructions to trained reviewers to indicate whether planned services were present or absent in the CSS Plan and/or Annual Updates. The rating of "present" or "absent" avoided any judgment about quality, adequacy, etc., as such judgments are inappropriate absent onsite observation.

The strategy of document review and summary was selected after discussion with the FSP Cost Evaluation Advisory Board, [31] due to budget limitations and concerns about county/municipal burden inherent in a site visit/onsite service observation. The draft FSP Service Assessment tool was reviewed at a FSP Cost Evaluation Advisory Board meeting, and refined after that meeting.

After the FSP Service Assessment, counties/municipalities had the opportunity to review their individualized FSP Services Assessment, and to provide supplementary documentation for consideration in the event that critical

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[28] Welfare and Institutions Code (WIC), Division 5. Community Mental Health Services, Part 4.5. Mental Health Services Fund 5890 Parts 3 and 4. Note that the direct web link to WIC specific to the Mental Health Services Act requires search onsite, using the link below. The direct link to each code cannot be reproduced, and will not lead directly to the specific WIC. The only way to retrieve each WIC is to search the site, http://leginfo.legislature.ca.gov/faces/codes.xhtml
Certified as current (January 18, 2013).

[29] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.

[30] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 3. General Requirements, 3310. The Three-Year Program and Expenditure Plan. Subsection (b) (1).

[31] See Appendix A for a list of FSP Cost Evaluation Advisory Board Members.

services were not documented in the CSS Plan or Annual Updates. For example, one county submitted its FSP Implementation Manual for inclusion in its FSP Services Assessment. When supplementary documentation was provided by a county or municipality, its specific, individualized FSP Service Assessment was updated to reflect new information. The FSP Assessment Tool includes documentation of the source material, for county/municipal reference.

The manner in which FSP services are conceptualized is described in the following section, along with brief descriptions of the strategies identified in the CSS Plans and Annual Updates.

a. Full Service Partnership Services

Full Service Partnership services (FSP) are most succinctly described as:

> A '*Whatever It Takes*' approach means to find the methods and means to engage an individual, determine their needs, and create collaborative services and support to meet those needs. [32] (p. 13)

This brief description encapsulates all of the critical elements of the FSP "*service package*"

- Outreach/engagement,
- Support services (broadly defined), and
- Housing.

The specific strategies planned by each county and municipality vary, dependent upon the:

- needs of constituents identified during the extensive planning process that took place as a condition of, and prior to MHSA funding for FSP, and
- plan review, input and approval process.

Descriptions of FSP services planned for implementation by counties/municipalities in FY 06-07 through FY 09-10 are provided in the following report sections, along with a summary of the number and percentage of counties/municipalities that planned to implement each practice.

1. Outreach and Engagement

The priority for FSP is to identify populations currently receiving little or no service, and conduct outreach to those populations:

> "Outreach and Engagement Service Category" means the service category of the Community Services and Supports component of the Three-Year Program and Expenditure Plan under which the County may fund activities to reach, identify, and engage unserved individuals and communities in the mental health system and reduce disparities identified by the County. [33]

[32] California Institute for Mental Health (2010). *Full Service Partnership Implementation Tool Kits*. Sacramento: Author.

[33] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.240. Outreach and Engagement Service Category.

In addition, to engage with the intent of providing service:

> "Underserved" means clients of any age who have been diagnosed with a serious mental illness and/or serious emotional disturbance and are receiving some services, but are not provided the necessary or appropriate opportunities to support their recovery, wellness, and/or resilience. When appropriate, it includes clients whose family members are not receiving sufficient services to support the client's recovery, wellness, and/or resilience. These clients include, but are not limited to:
>
> - those who are so poorly served that they are at risk of homelessness, institutionalization, incarceration, out-of-home placement or other serious consequences;
> - members of ethnic/racial, cultural, and linguistic populations that do not have access to mental health programs due to barriers such as poor identification of their mental health needs, poor engagement and outreach, limited language access, and lack of culturally competent services; and
> - those in rural areas, Native American Rancherias and/or reservations who are not receiving sufficient services. [34]
>
> "Unserved" means those individuals who may have serious mental illness and/or serious emotional disturbance and are not receiving mental health services. Individuals who may have had only emergency or crisis-oriented contacts and/or services from the County may also be considered unserved. [35]

2. Assessment and Planning

A key characteristic of the MHSA requirements for FSP Planning and Assessment is the proactive nature of the strategies. The pre-existing standard of care statewide had been criticized as reactive and crisis-oriented. [36] The thoughtful assessment and planning process under the MHSA FSP service model involves defining the target population and ensuring that clients are engaged in services. In short, there is an emphasis on identifying potential client who will likely benefit from FSP services, rather than filling patient quotas.

Clear Eligibility Criteria

The following eligibility criteria are taken directly from MHSA statutes:

Children and adolescents identified as Seriously Emotionally Disturbed (SED) are eligible for FSPs if they meet the criteria set forth in Welfare and Institutions Code section 5600.3, subdivision (a). Adults and Older Adults identified

[34] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.300. Underserved.

[35] California Code of Regulation (Barclays Official), Title 9. Rehabilitative and Developmental Services, Division 1. Department of Mental Health, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.310. Unserved.

[36] A hallmark of Prop 63 was the ability to take the success demonstrated through AB 34 and SB 2034 programs statewide. Prior to the passage of Prop 63, SB 2034 had expanded to only 30 counties.
http://www.pendari.com/DMH/Books/MHSA_and_Transformation/files/mhsa_and_transformation.pdf

to have a serious mental disorder are eligible for FSPs if they meet the criteria set forth in subdivision (b) of section 5600.3. [37]

A. SED Children who fall into at least ONE of the following groups:

GROUP 1:

- As a result of the mental disorder, the child has substantial impairment in at least two of these areas:
  1. Self–care
  2. School functioning
  3. Family relationships
  4. Ability to function in the community, and
- Either of the following occur:
  1. The child is at risk of or has already been removed from the home
  2. The mental disorder and impairments have been present for more than six months or are likely to continue for more than one year without treatment

GROUP 2 – The child displays at least ONE of the following features:

- Psychotic features
- Risk of suicide
- Risk of violence due to a mental disorder

GROUP 3 – The child meets special education eligibility requirements under Chapter 26.5 of the Government Code.

B. SED Transition-Age Youth (youth 16 years to 25 years old) who meet ALL of the following:

- They fall into at least one of the groups in (A) above.
- They are unserved or underserved and in one of the following situations:
  1. Homeless or at risk of being homeless
  2. Aging out of the child and youth mental health system
  3. Aging out of the child welfare system
  4. Aging out of the juvenile justice system
  5. Involved in the criminal justice system
  6. At risk of involuntary hospitalization or institutionalization, or
  7. Have experienced a first episode of serious mental illness

C. SMI Adults who meet ALL of the following.

- Their mental disorder results in substantial functional impairments or symptoms, or they have a psychiatric history that shows that, without treatment, there is an imminent risk of decompensation with substantial impairments or symptoms.
- Due to mental functional impairment and circumstances, they are likely to become so disabled as to require public assistance, services, or entitlements, and they are in one of the following situations:
  1. They are unserved and one of the following:
     - Homeless or at risk of becoming homeless
     - Involved in the criminal justice system
     - Frequent users of hospital or emergency room services as the primary resource for mental health treatment
  2. They are underserved and at risk of one of the following:

[37] California's Welfare and Institutions Code (WIC), Division 5. Community Mental Health Services, Part 2.0, The Bronzan-McCorquodale Act Fund. 5600.3.

- Homelessness
- Involvement in the criminal justice system
- Institutionalization

D. SMI Older Adults (an adult 60 years or older) who meet ALL of the following:

- Their mental disorder results in substantial functional impairments or symptoms, or they have a psychiatric history that shows that, without treatment, there is an imminent risk of decompensation with substantial impairments or symptoms.
- Due to mental functional impairment and circumstances, they are likely to become so disabled as to require public assistance, services, or entitlements. AND
- They are in one of the following situations:
  1. They are unserved and one of the following:
     - Experiencing a reduction in personal and/or community functioning
     - Homeless
     - At risk of becoming homeless
     - At risk of becoming institutionalized
     - At risk of out-of-home care
     - At risk of becoming frequent users of hospital or emergency room services as the primary resource for mental health treatment
  2. They are underserved and at risk of one of the following:
     - Homelessness
     - Institutionalization
     - Nursing home or out-of-home care
     - Frequently using hospital and/or emergency room services as their primary resource for mental health treatment
     - Involvement in the criminal justice system

Needs Assessment

A formal needs assessment, though not a requirement in statute, is recommended by the California Mental Health Directors Association (CMHDA). CMHDA defines needs assessment as a formal process using an instrument that:

> Has been tested and proved reliable, and is used to help consumers and staff determine what services might be needed. Included in this assessment are: [38]
>
> - The consumer's current stage of engagement
> - Their current level of functional impairment
> - Their other medical problems or substance abuse
> - Their available family and community support
> - Their level of stress and their risk of harm (p. 1)

Individual Services and Supports Plan

> "Individual Services and Supports Plan" means the plan developed by the client and, when appropriate, the client's family, with the Personal Service Coordinator/Case Manager to identify the client's goals and describe the array of services and supports necessary to advance these

[38] California Mental Health Directors Association, Adult System of Care Committee. (2008, April). *Recommended Guidelines for Levels of Service*. http://www.cmhda.org/committees/documents/ASOC/Handouts/0806/0806_ASOC_Handouts_ASOC_LOS_policy_and_guidelines_April08_%286-25-08%29.pdf

goals based on the client's needs and preferences and, when appropriate, the needs and preferences of the client's family. [39]

Service Delivery based on Needs Assessment & Individual Services and Supports Plan

One goal of a transformed mental health system is to enter into partnership with clients and their families, and to provide services based on the client's needs, rather than to try to fit the client into pre-existing service models. This necessitates up-front planning jointly with the client, accounting for individual needs and preferences.

Findings: Outreach and Engagement

The priority for FSP is to identify populations currently receiving little or no service, and conduct outreach to those populations. In addition, to engage currently unserved and underserved individuals with serious emotional disturbance/severe mental illness with the intent of providing service. A thoughtful assessment and planning process under the MHSA FSP service model involves defining the target population and ensuring that clients are engaged in services.

Outreach and Engagement for FSPs are summarized by age group across the counties/municipalities in Table III.1.

Table III.1
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Outreach and Engagement [40]

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Outreach and Engagement*	**47**	**87.0%**	**55**	**93.2%**	**55**	**93.2%**	**51**	**94.4%**
Outreach to Underserved and Unserved	44	81.5%	55	93.2%	55	93.2%	51	94.4%
Priority to Unserved Populations	47	87.0%	52	88.1%	54	91.5%	45	83.3%
Assessment and Planning	**53**	**98.1%**	**59**	**100%**	**56**	**94.9%**	**53**	**98.1%**
Clear FSP Eligibility Criteria	47	87.0%	54	91.5%	47	79.7%	44	81.5%
Needs Assessment	38	70.4%	46	78.0%	44	74.6%	43	79.6%
Individual Services and Supports Plan (ISSP)*	40	74.1%	50	84.8%	46	78.0%	40	74.1%
Service Delivery - Needs Assessment/ISSP	30	55.6%	38	64.4%	37	62.7%	29	53.7%
TOTAL	**53**	**98.1%**	**59**	**100%**	**59**	**100%**	**54**	**100%**

* Services/strategies in Table III.1 indicated with an asterisk (*) represent requirements under the Mental Health Services Act.

The data displayed in Table III.1 support the following conclusions regarding implementation of initial Outreach and Engagement services across the state:

- Outreach is conducted by 81.5 to 94.4 percent of the counties, depending upon the age group.
- Priority to unserved populations the stated intent for 83.3 to 91.5 percent of counties, depending upon the age group.

[39] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.180. Individual Services and Supports Plan.
[40] See Appendix B for counties providing FSP services to each age group.

- Guidelines around assessment and FSP service planning are in documented as being in place in nearly all counties.

3. Personal Service Coordinator/Case Manager

Services under the Full Service Partnership include designation of a Personal Service Coordinator/Case Manager for each client, and when appropriate, the client's family, to the single point of responsibility for that client/family.[41] The end result of the shift should be a more humane manner of interacting with clients, and a more engaged clientele.

Low Caseload

The County shall provide a sufficient number of Personal Service Coordinators/Case Managers to ensure that:

- Availability is appropriate to the service needs of the client/family
- Individualized attention is provided to the client/family
- Intensive services and supports are provided, as needed[42]

24/7 Coverage

The County shall ensure that a Personal Service Coordinator/Case Manager or other qualified individual known to the client/family is available to respond to the client/family 24 hours a day, 7 days a week to provide after-hour intervention.[43]

In the event of an emergency when a Personal Service Coordinator/Case Manager or other qualified individual known to the client/family is not available, the County shall ensure that another qualified individual is available to respond to the client/family 24 hours a day, 7 days a week to provide after-hour intervention.

Small Counties may meet this requirement through the use of peers or community partners, such as community-based organizations, who are known to the client/family.

A staff member (clinician or paraprofessional) known to the client/family has the advantage of an existing alliance with the client/family, knows the client/family's history, and has access to the community and other agencies that the client/family is engaged with for services. In short, the staff member can cut through red tape and quickly assist, where others would be faced with conducting detailed assessments or making decisions about emergency hospitalization.

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[41] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category. Subsection (f).

[42] Ibid.

[43] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category. Subsection (i).

Scroll down on the page to Subsection (i) for specific language related personal service coordinators and the 24/7 requirement. (1) and (2) underneath (i) provide further clarification.

This report author was one of the few LA County DMH FFS providers on call 24/7 (prior to MHSA), and provided just such an intervention for a Medi-Cal client suffering from schizophrenia. This author (also a licensed psychologist) informed the landlord of her client's rights under the law (eviction in the middle of the night without due notice was, of course, illegal). A more suitable (Section 8) placement was eventually found for this client.

The requirement for 24/7 coverage by a staff person known to the client/family has, in and of itself, enormous potential for savings in terms of reducing emergency hospitalizations (a hypothesis we explore later in this report).

Services in the Community versus the Clinic

Meeting clients/family members in settings that they are comfortable with, instead of asking them to come to foreign places for service, should not be a revolutionary concept. Yet the traditional public mental health system, in many regards, is still built around the old concept that is prevalent in popular culture – the client coming in to the therapist's office, with the traditional waiting room where the client checks in at the front desk (except in many public mental health clinics, there is a security guard at the front door, and the client must first pass through a metal detector before checking in).

Contrast this setting to one that is more typical of social work – the professional or paraprofessional makes arrangements to meet the client/family at their home, or in a public setting comfortable to the family (e.g., community center, park). There are no armed guards, no metal detectors – the message is one of alliance, not opposition.

This is not to negate the very real danger that clinicians sometimes face (e.g., the tragedy that prompted Laura's Law). Nonetheless, the flexible nature of the FSP program enables counties/municipalities to develop appropriate outreach and engagement practices that work toward bringing in those who will benefit from FSP services, and flag those for whom a community-based intervention may not be appropriate due to staff safety and other concerns.

Findings: Personal Services Coordinator/Case Manager

Implementation of a Personal Services Coordinator/Case Manager when serving FSPs is summarized by age group across the counties/municipalities in Table III.2.

Table III.2
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Personal Services Coordinator/Case Manager [44]

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Personal Services Coordinator/Case Manager*	**52**	**96.3%**	**58**	**98.3%**	**59**	**100%**	**52**	**96.3%**
Low Caseload	35	64.6%	39	66.1%	38	64.4%	35	64.6%
24/7 Coverage*	46	85.2%	54	91.5%	53	89.8%	44	81.2%
Services in the Community vs. Clinic	42	77.8%	44	74.6%	41	69.5%	38	70.4%
TOTAL	**52**	**96.3%**	**58**	**98.3%**	**59**	**100%**	**52**	**96.3%**

* Services/strategies in Table III.2 indicated with an asterisk (*) represent requirements under the Mental Health Services Act.

The findings, based upon review of county plans and updates and subsequent county review, are as follows regarding the implementation of services to FSPs according to required MHSA practices:

- Keeping to a low caseload appears to be the most difficult challenge for counties, regardless of age group. Only 64.6 to 66.1 percent of counties reported implementation of a reduced caseload.
- 24/7 coverage was documented for 81.2 to 91.5 percent of the counties.

[44] See Appendix B for counties providing service to each age group.

- Specific reference to services at community-based locations (as compared with a mental health clinic setting) was documented for 96.3 to 100 percent of counties, depending upon the age group.

4. General Standards

In the California Code of Regulations is an articulated a set of recovery and resiliency-oriented principles to guide implementation of the Mental Health Services Act.[45] Due to the radical departure from business as usual, the General Standards were laid out and defined to a certain degree (depending upon the standard and the level of abstraction):

1. Community Collaboration
2. Cultural Competence
3. Client-Driven
4. Family-Driven
5. Wellness, Recovery, and Resilience Focused
6. Integrated Service Experiences for clients and their families

The General Standards and the operational definitions as described in the California Code of Regulations are outlined below.

Community Collaboration

The California Code of Regulations lays out the "*big picture*" with respect to collaboration:

> "Community Collaboration" means a process by which clients and/or families receiving services, other community members, agencies, organizations, and businesses work together to share information and resources in order to fulfill a shared vision and goals.[46]

Collaboration with community services refers to the mechanics of interacting with interested parties in order to exchange information and share resources to support people in their recovery process.[47]

Cultural Competence

The reduction of racial and cultural disparities in access to services and receipt of services is central to the MHSA vision.

> "Cultural Competence" means incorporating and working to achieve each of the goals listed below into all aspects of policy-making, program design, administration and service delivery. Each system and program is assessed for the strengths and weaknesses of its proficiency to

[45] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 3. General Requirements, 3320. General Standards.

[46] California Code of Regulation (Barclays Official), Title 9. Rehabilitative and Developmental Services, Division 1. Department of Mental Health, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.060. Community Collaboration.

[47] New Freedom Commission on Mental Health (2003). *Achieving the Promise: Transforming Mental Health Care in America. Executive Summary.* DHHS Pub. No. SMA-03-3831. Rockville, MD.

achieve these goals. The infrastructure of a service, program or system is transformed, and new protocol and procedure are developed, as necessary, to achieve these goals. [48]

- Equal access to services of equal quality is provided, without disparities among racial/ethnic, cultural, and linguistic populations or communities.
- Treatment interventions and outreach services effectively engage and retain individuals of diverse racial/ethnic, cultural, and linguistic populations.
- Disparities in services are identified and measured, strategies and programs are developed and implemented, and adjustments are made to existing programs to eliminate these disparities.
- An understanding of the diverse belief systems concerning mental illness, health, healing and wellness that exist among different racial/ethnic, cultural, and linguistic groups is incorporated into policy, program planning, and service delivery.
- An understanding of the impact bias, racism, and other forms of discrimination have on the mental health of each individual served is incorporated into service delivery.
- Services and supports utilize the strengths and forms of healing that are trained to understand and effectively address the needs and values of the particular racial/ethnic, cultural and/or linguistic population or community that they serve.
- Strategies are developed and implemented to promote equal opportunities for administrators, service providers, and others involved in service delivery who share the diverse racial/ethnic, cultural and linguistic characteristics of individuals with serious mental illness/emotional disturbance in the community.

Client and Family-Driven Care

"Client Driven" means that the client has the primary decision-making role in identifying his/her needs, preferences and strengths and a shared decision-making role in determining the services and supports that are most effective and helpful for him/her. Client driven programs/services use clients' input as the main factor for planning, policies, procedures, service delivery, evaluation and the definition and determination of outcomes. [49]

"Family Driven" means that families of children and youth with serious emotional disturbance have a primary decision-making role in the care of their own children, including the identification of needs, preferences and strengths, and a shared decision-making role in determining the services and supports that would be most effective and helpful for their children. Family driven programs/services use the input of families as the main factor for planning, policies, procedures, service delivery, evaluation, and the definition and determination of outcomes. [50]

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[48] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.100. Cultural Competence.

[49] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.050. Client Driven.

Note that the grammatical error (lack of hyphen between *Client* and *Driven* is inherent the original text – because it is quoted verbatim, it has not been corrected.

[50] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.120. Family Driven.

Note that the grammatical error (lack of hyphen between *Family* and *Driven* is inherent the original text – because it is quoted verbatim, it has not been corrected.

Wellness, Recovery and Resilience-Focused

This concept is one of the most revolutionary and important concepts in mental health. Although recovery has long been a cherished belief in the addiction field, this mantra has been adopted on a broad scale in the field of mental health within the past decade. [51] The Federal Substance Abuse and Mental Health Services Administration recently elevated recovery to even greater prominence in its 2011–14 strategic plan. Although the previous plan (2006–11) emphasized resiliency and recovery, the current plan is unequivocal in its slogan: "*Treatment is Effective. People recover*." [52]

The California Code of Regulations ensures that the General Standards of Wellness, Recovery and Resilience are built into services across the Community Services spectrum:

> "Full Spectrum of Community Services" means the mental health and non-mental health services and supports necessary to address the needs of the client, and when appropriate the client's family, in order to advance the client's goals and achieve outcomes that support the client's *recovery, wellness and resilience*. [53] [italics added for emphasis]

Integrated Service Experience

> "Integrated Service Experience" means the client, and when appropriate the client's family, accesses a full range of services provided by multiple agencies, programs and funding sources in a comprehensive and coordinated manner. [54]

In order to accomplish delivery of service that is integrated, a necessity is joint planning between the various agencies involved with the client/family. In the absence of coordinated service plans, individual agencies/providers continue to interact with clients/families in a "*silo*" manner. Clients/families experience disjointed interactions with multiple providers, who give sometimes conflicting messages and instructions. When the client/family is the focus (as discussed above), the paradigm shifts from the convenience of the provider/agency to developing a plan of care that best meets the client's/family's needs.

Findings: General Standards

There are five General Standards imbedded in the MHSA that must be interwoven into all services (including FSP). Implementation of services to FSPs according to General Standards is summarized by age group across the counties/municipalities in Table III.3.

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[51] Substance Abuse and Mental Health Services Administration. (2003). *Strategies for Developing Treatment Programs for People With Co-Occurring Substance Abuse and Mental Disorders*. SAMHSA Publication No. 3782. Rockville, MD: SAMHSA. http://www.fccmh.org/resources/docs/Strategies.pdf

[52] Substance Abuse and Mental Health Services Administration. (2011). *Leading Change: A Plan for SAMHSA's Roles and Actions 2011-2014 Executive Summary and Introduction.* HHS Publication No. (SMA) 11-4629 Summary. Rockville, MD: Substance Abuse and Mental Health Services Administration.

[53] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.150. Full Spectrum of Community Services.

[54] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.190. Integrated Service Experience.

Table III.3
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – General Standards [55]

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
General Standards*	**54**	**100%**	**59**	**100%**	**59**	**100%**	**59**	**100%**
Community Collaboration	49	90.7%	57	96.6%	47	79.7%	44	81.2%
Cultural Competence	52	96.3%	58	98.3%	57	96.6%	51	94.4%
Client-Driven Care	37	68.5%	46	78.0%	49	83.1%	36	66.7%
Family-Driven Care	45	83.3%	44	74.6%	39	66.1%	34	63.0%
Wellness, Recovery, Resilience Focused	54	100%	59	100%	59	100%	54	100%
Integrated Service Experience	44	81.2%	53	89.8%	52	88.1%	45	83.3%
TOTAL	**54**	**100%**	**59**	**100%**	**59**	**100%**	**54**	**100%**

* Services/strategies in Table III.3 indicated with an asterisk (*) represent requirements under the Mental Health Services Act.

Depending upon the principle and the age group, nearly all counties documented addressing this requirement (96.3 to 98.3 percent).

5. *Outpatient Mental Health Services*

The California Code of Regulations states that clients, through the Full Service Partnership agreement, may have access to the Full Spectrum of Community Services necessary to attain the goals identified in the Individual Services and Supports Plan (ISSP). Mental health services and supports are listed. [56] The Welfare and Institutions Code specifies:

> For the majority of seriously mentally disordered adults and older adults, treatment is best provided in the client's natural setting in the community. Treatment, case management, and community support services should be designed to prevent inappropriate removal from the natural environment to more restrictive and costly placements. [57]

and

> Enable children to remain at home with their families whenever possible. [58]

This statement implies the inclusion of outpatient services, which includes Medi-Cal services and Medi-Cal reimbursement, for those eligible for this federal cost-sharing program. [59] If Medi-Cal reimburses for a proportion

[55] See Appendix B for counties providing service to each age group.
[56] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.
[57] California's Welfare and Institutions Code (WIC), Division 5. Community Mental Health Services, Part 3.0, Adult and Older Adult Mental Health System of Care Act, 5801.
[58] California's Welfare and Institutions Code (WIC), Division 5. Community Mental Health Services, Part 4.0, The Children's Mental Health Services Act, 5851.
[59] (a) The County shall utilize Mental Health Services Act (MHSA) funds only to establish or expand mental health services and/or supports for the components specified in Section 3310(b) and for the Community Program Planning Process specified in Section 3300.

of FSP clients, implicit is the assumption that such reimbursement may be viewed as an added benefit to the county/municipality, but Medi-Cal reimbursement should not be the driver of FSP outreach, enrollment, or service delivery.

Individual and Group Therapy

DMH's billing manual for Medi-Cal mental health services describes individual and group therapy in terms of purpose, and describes the settings in which Medi-Cal will not reimburse for service. Individual and group therapy are not described per se. Rather, activities that may occur during individual and group therapy are listed (e.g., assessment, planning, therapy). [60]

Medication Support

In contrast to individual and group therapy, the billing manual for Medi-Cal provides a clear definition of the expected activities to be associated with Medication Support:

- Medication Support Services are those services that include prescribing, administering, dispensing and monitoring psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to evaluation of the need for medication; and collateral and plan development related to the delivery of the service and/or assessment of the patient. (p. 4-13) [61]

Crisis Intervention

The ability to intervene in a psychiatric emergency without the requirement to hospitalize is important to maintaining the liberty and self-determination of clients in the public mental health system. Crisis Intervention (as compared to Crisis Stabilization) provides the mechanism for doing so in an outpatient setting. Another characteristic is the brevity of intervention length (less than 24), compared to the longer time frames employed for Crisis Stabilization.[62]

Case Management/Brokerage

This essential service is described in the DMH billing manual:

- Case Management/Brokerage is a service that assists a patient to access needed *medical, educational, social, pre-vocational, rehabilitative*, or other community services. The service activities may include, but

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(b) Programs and/or services provided with MHSA funds shall:
(1) Offer mental health services and/or supports to individuals/clients with serious mental illness and/or serious emotional disturbance, and when appropriate their families.
(A) The Prevention and Early Intervention component is exempt from this requirement.
(2) Be designed for voluntary participation. No person shall be denied access based solely on his/her voluntary or involuntary legal status.
(3) Comply with the requirements in Section 3410, Non-Supplant.
(c)To the extent allowed under (a) and (b) of this Section, the County may use MHSA funds to match other funding sources, such as Medi-Cal and the Healthy Families Program. The County shall not submit requests for MHSA funding solely for the purpose of increasing reimbursement for Medi-Cal or the Healthy Families Program.
California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 4. Funding Provisions, 3400. Allowable Costs and Expenditures.

[60] California Department of Mental Health. (2008, July). *Mental Health Medi-Cal Billing Manual (Version 1.0)*. Sacramento: Author. 4.2.12 Mental Health Services: Title 9, Section 1810.227, p. 4-12.

[61] California Department of Mental Health. (2008, July). *Mental Health Medi-Cal Billing Manual (Version 1.0)*. Sacramento: Author. 4.2.12 Mental Health Services: Title 9, Section 1810.25, p. 4-13.

[62] Ibid. 4.2.12 Mental Health Services: Title 9, Section 1840.338 & 1840.348, p. 4-13.

are not limited to: communication, coordination, and referral; monitoring service delivery to ensure patient access to service and the service delivery system; monitoring the patient's progress; placement services; and plan development. (*italics* added, p. 4-12) [63]

Findings: Outpatient Mental Health Services

Implementation of outpatient mental health services to FSPs is summarized by age group across the counties/municipalities in Table III.4.

Table III.4
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Outpatient Mental Health Services [64]

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Outpatient Mental Health Services	**51**	**94.4%**	**58**	**98.3%**	**56**	**94.9%**	**50**	**92.6%**
Individual Therapy	30	55.6%	31	52.5%	30	50.9%	26	48.2%
Group Therapy	27	50.0%	30	50.9%	30	50.9%	25	46.3%
Medication Support	26	48.2%	35	59.3%	37	62.7%	35	64.6%
Crisis Intervention	41	75.9%	44	74.6%	43	72.9%	41	75.9%
Case Management	36	66.7%	53	89.8%	48	81.4%	31	57.4%
TOTAL	**51**	**94.4%**	**58**	**98.3%**	**56**	**94.9%**	**50**	**92.6%**

Outpatient mental health services are offered in 92.6 to 98.3 percent of the counties to FSPs, depending upon the age group served.

6. Other Supports

The requirement to do "*whatever it takes*" for FSP clients implies a broad range of services and supports not typically associated with the traditional mental health model. Such supports include assistance in meeting daily living needs, paying for health care, and providing respite services when needed.

Instrumental Needs

The California Code of Regulations provides examples of the ways in which FSP programs can meet the instrumental (daily living) needs of clients and their family members (including, but not limited to): [65]

- Food
- Clothing

[63] Ibid. 4.2.12 Mental Health Services: Title 9, Section 1840.249, p. 4-12.
[64] See Appendix B for counties providing service to each age group.
[65] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.

Cost of Health Care Treatment

The California Institute for Mental Health recently (2010) sponsored an "Integration Forum" in which national data were presented, illustrating that the mentally ill are more likely to suffer from chronic health conditions; the average age of death is a relatively young (by today's standards) 53 years of age. Timely access to health care therefore is critical for those served by FSPs. [66]

Cost of health care treatment is specifically noted in the California Code of Regulations as a "non-mental health service and support" allowable under the Full Service Partnership. [67]

Respite Services

Respite services are allowable under the Full Service Partnership program for all age groups. [68]

Supportive Employment/Education

The range of allowable activities as described in the Community Services and Supports Plan considers the needs of clients across the age range with respect to employment and education through facilitation of placement in "supportive" settings. Supportive employment and education facilitate collaborative arrangements in which the placement and partners are part of the recovery plan. [69]

Psychoeducation/ Family Education

A fully informed constituency is a critical element of the Mental Health Services Act. Toward that end, Full Service Partnership strategies include education about the mental health assessment and diagnosis process, the manner in which the service plan is development, treatment options, medication and client rights with respect to medication, and other relevant information. [70]

Educational/Employment Supplies

Although not explicitly suggested or required, some counties proposed assisting clients and families in obtaining school and work supplies (e.g., college text books, uniforms for work).

Recreational/Social Activities

Providing clients and families with meaningful opportunities to interact socially with peers in a relaxed setting is consistent with a recovery-oriented model. Although not explicitly suggested or required, some counties proposed clients to be involved and engaged in the planning of recreational and social activities.

Transportation

A viable means to move about in the community is critical to full engagement as a citizen in a recovery-oriented treatment program. Transportation therefore becomes the linkage for clients who may not otherwise have the means to move easily and freely about, particularly in rural counties with large geographic distances, or in counties with long commute times due to heavy traffic.

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[66] California Institute for Mental Health (2011). *Mental Health and Substance Abuse Disorder Services as Core Elements of Health Homes*. Presented at the Regional Mental Health/Substance Abuse/Primary Care Integration Forum, Sacramento.

[67] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.

[68] Ibid.

[69] Ibid.

[70] Ibid.

Parenting Education

Offering Parenting Education to family members caring for a child/youth with serious emotional disorders or, adults with serious mental illness who have children does not imply that they are poor parents in need of education. Rather, dealing with serious emotional disorders/serious mental illness can test the mettle of even the most patient and well-educated parent. Learning about parenting in a safe environment that is free from judgment represents a "*value-added*" service when peers can seek support from one another, as well as learn skills unique to their situation.

Intimate Partner Violence Services

Specialized services to address the specific needs of individuals suffering from intimate partner violence may include counseling, placement in temporary protective shelter, assistance in obtaining a restraining order, guidance on legal rights, etc.

Findings: Other Supports

The requirement to do "*whatever it takes*" for FSP clients implies a broad range of services and supports not typically associated with the traditional mental health model. Such supports include assistance in meeting daily living needs, paying for health care, and providing respite services when needed.

Implementation of other support services to FSPs is summarized by age group across the counties/municipalities in Table III.5.

Table III.5

Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Other Supports [71]

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Other Supports	**48**	**88.9%**	**57**	**96.6%**	**56**	**94.9%**	**48**	**88.9%**
Instrumental Needs	29	53.7%	32	54.2%	33	55.9%	28	51.9%
Cost of Health Care Treatment	11	20.4%	10	17.0%	9	15.3%	8	14.8%
Respite Services	17	31.5%	15	25.4%	12	20.3%	16	29.6%
Supportive Employment/Education	3	6.0%	11	18.6%	11	18.6%	8	14.8%
Psychoeducation	29	53.7%	33	55.9%	33	55.9%	27	50.0%
Family Education	33	61.1%	35	59.3%	32	54.2%	28	51.9%
Educational/ Employment Supplies	31	57.4%	33	55.9%	30	50.9%	24	44.4%
Recreational/Social Activities	23	42.6%	32	54.2%	28	47.5%	23	42.6%
Transportation	34	63.0%	40	67.8%	39	66.1%	34	63.0%
Parenting Education	26	48.1%	21	35.6%	14	23.7%		
Intimate Partner Violence Services	6	11.1%	9	15.3%	11	18.6%	11	20.4%
TOTAL	**48**	**88.9%**	**57**	**96.6%**	**56**	**94.9%**	**48**	**88.9%**

[71] See Appendix B for counties providing service to each age group.

Other support services are offered in 88.9 to 96.6 percent of counties, depending upon the age group served by the FSP.

7. Peer Support Services

A complementary component directly related to provision of Full Service Partnership services is Workforce Education and Training – specifically, the Workforce Staffing Support Funding Category.[72] Ideally, the team consists of bilingual staff, clients, and family members who are hired to assist in addressing elimination of disparities to underserved and unserved racial/ethnic clients and family members:

- Deficits in cultural and/or linguistic competence
- Promotion of employment and career opportunities in the Public Mental Health System for clients and family members of clients

Hence, although it is not an explicit requirement that counties include clients and family members be hired on as FSP team members, a common theme throughout CSS Plans was client and family employment in specific and concrete roles, leading the UCLA Team to document the critical ways in which peers and parent advocates are engaged in meaningful service in the public mental health system.

Specific Positions for Peers

Peer teams are staffed by consumers and family members. When appropriate, they often take on roles such as mentors, counselors, educators and advocates, etc. Such team members are valuable in providing referrals to community resources and providing general support to their peers.

According to *Peer Support among Inpatients in an Adult Mental Health Setting* (2010), peer support is a thoughtful process that involves observing, reflecting, taking action, and evaluating outcomes. Supportive actions include helping with activities of daily living, sharing material goods, providing information and advice, sharing a social life, and offering emotional support. This leads to various positive outcomes for providers and recipients of peer support, such as improved mental health outcomes and quality of life (p. 589).[73]

Peer staff members have often utilized such services in the past and, with proper training, are equipped to provide such services to other peers.

Findings: Peer Supports – Specific Positions for Peers

The number of counties employing peers/parent advocates, and the specific positions are summarized by age group across the counties/municipalities in Table III.6.

[72] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 8. Workforce Education and Training, 3845. Workforce Staffing Support Funding Category.
Scroll down to (a) (2) (C) and (3) (A), (B) and (C)

[73] Bouchard, L. (2010). Peer Support among Inpatients in an Adult Mental Health Setting. *Issues In Mental Health Nursing*, *31*(9), 589-598.

Table III.6
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Peer Support – Specific Positions for Parent Peers

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Specific Positions	**51**	**94.4%**	**57**	**96.6%**	**56**	**94.9%**	**51**	**94.4%**
Mentors/Peer Adjustment Coaches	36	66.7%	41	69.5%	38	64.4%	39	72.2%
Job Coaches	9	16.7%	21	35.6%	25	42.4%	18	33.3%
Educational Coaches/Tutors	11	20.4%	21	35.6%	22	37.3%	18	33.3%
Case Managers	7	13.0%	13	22.0%	14	27.3%	13	24.1%
Parent Educators	21	38.9%	25	42.4%	19	32.2%	15	27.8%
Peer Educators	29	53.7%	42	71.2%	47	79.7%	47	87.0%
Advocates	24	44.4%	32	54.2%	36	61.0%	28	51.9%
TOTAL	**51**	**94.4%**	**57**	**96.6%**	**56**	**94.9%**	**51**	**94.4%**

The inclusion of consumers/family members on staff was documented for nearly all counties - 94.4 to 96.6 percent of the counties.

Strategies where Peers are part of the Team

According to Solomon (2004), peer support can be defined as ''social emotional support, frequently coupled with instrumental support, that is mutually offered or provided by persons having a mental health condition to others sharing a similar mental health condition to bring about a desired social or personal change'' (p. 699). [74]

Peers often provide services such as outreach and engagement programs, run social and recreational activities; provide child care support, housing support and transportation; provide support with instrumental needs such as housekeeping, grocery shopping and other general needs. Peers also offer peer-run self-help classes, a warm-line and drop-in centers, where clients can go and receive support for specific needs.

The number of counties using specific strategies when employing peers/parent advocates is summarized by age group across the counties/municipalities in Table III.7.

[74] As seen in Schutt, R. K., & Rogers, E. (2009). Empowerment and peer support: structure and process of self-help in a consumer-run center for individuals with mental illness. *Journal Of Community Psychology*, *37*(6), 697-710.

Table III.7
Number and Percent of Counties Reporting Planned Implementation of Full Service Partnership Basic Services – Peer Support – Strategies where Peers are part of Team

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Strategies Involving Peers on Team	**50**	**92.6%**	**54**	**91.5%**	**55**	**93.2%**	**50**	**92.6%**
Drop-In Centers/Club House	16	29.6%	26	44.1%	27	45.8%	24	44.4%
Warm Line	12	22.2%	13	22.0%	15	25.4%	13	24.1%
Outreach and Engagement	30	55.6%	36	61.0%	38	64.4%	36	66.7%
Social Recreation	22	40.7%	36	61.0%	34	57.6%	29	53.7%
Child Care Support	3	6.0%	5	8.5%	3	5.1%	1	1.9%
Transportation	16	29.6%	22	37.3%	22	37.3%	22	40.7%
Housing Support	10	18.5%	19	32.2%	21	35.6%	18	33.3%
Classes (e.g., self-help)	14	25.9%	22	37.3%	25	42.4%	19	32.2%
Instrumental Support (e.g., housekeeping)	3	6.0%	5	8.5%	7	11.9%	10	18.5%
Grounds-keeping/Facility Maintenance	0	0.0%	1	1.7%	1	1.7%	1	1.9%
In-Home Support	3	6.0%	4	6.8%	5	8.5%	8	13.6%
Respite Care	2	3.7%	3	5.1%	2	3.4%	2	3.7%
Crisis Intervention	7	13.0%	10	17.0%	10	17.0%	11	20.4%
Rehabilitation	0	0.0%	6	10.2%	10	17.0%	6	11.1%
Violence/Trauma Recovery	1	1.9%	1	1.7%	2	3.4%	2	3.7%
TOTAL	**50**	**92.6%**	**54**	**91.5%**	**55**	**93.2%**	**50**	**92.6%**

Nearly all counties gave examples of the specific strategies peers/parent advocates engaged in as FSP team members.

Peers Augmenting the Overall Capacity of the Staff Team

In a comprehensive review of self-help and consumer-operated programs to date, Campbell (2005) examined several studies of self-help programs for mental health clients which, taken together, suggest that self-help and peer support programs can promote empowerment and recovery increase social support, functioning, and activities (p. 699). [75] Participants learned from others how to meet the needs of people in situations similar to theirs and then taught others how to meet their own needs in the same ways. Through this process of learning and sharing, Center participants developed a sense of their own capacities and strengthened their bonds with others (p. 706). [76]

Peers augment the program by running support groups an various topics, fill ethnic disparities, share their personal stories and teach socialization and communication skills. Furthermore, peers are aware of community services and collaborate with other agencies in order to provide the best and most appropriate services to their peers.

[75] As seen in Schutt, R. K., & Rogers, E. (2009). Empowerment and peer support: structure and process of self-help in a consumer-run center for individuals with mental illness. *Journal of Community Psychology*, *37*(6), 697-710.
[76] Ibid.

The number of counties citing specific ways in which peers/parent advocates augment the overall capacity of the team is summarized by age group across the counties/municipalities in Table III.8.

Table III.8
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Peer Support – Peers Augmenting the Overall Capacity of the Staff Team

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Peers Augmenting Overall Capacity	**48**	**88.9%**	**58**	**98.3%**	**57**	**96.6%**	**53**	**98.1%**
Support Groups	32	59.3%	45	76.3%	47	79.7%	44	81.2%
Cultural Competence	30	55.6%	40	67.8%	40	67.8%	36	66.7%
LGBTQ	6	10.2%	11	18.6%	9	15.3%	8	13.6%
Clinical & Family/Peer Support	28	51.9%	36	61.0%	38	64.4%	33	61.1%
Consumer Experience	4	7.4%	9	15.3%	9	15.3%	7	13.0%
Collaboration with Other Agencies/Community	21	38.9%	31	52.5%	38	64.4%	37	68.5%
Recruitment and Hiring	20	37.0%	28	47.5%	30	50.9%	26	48.1%
Socialization Skills	7	13.0%	11	18.6%	10	17.0%	11	20.4%
Communication Skills	2	3.7%	3	5.1%	3	5.1%	3	5.6%
TOTAL	**48**	**88.9%**	**58**	**98.3%**	**57**	**96.6%**	**53**	**98.1%**

Up to 98.3 percent of counties (all serve adults) noted ways in which clients and family members were planned to augment the team, but not all cited specific roles or current employment of peers/parent advocates (see Tables III.6 and III.7).

8. Housing

Housing, for the purpose of this study, is defined as: [77]

1) Project-Based Housing Program, per California Code of Regulation (Barclays Official), Title 9. Rehabilitative and Developmental Services, Division 1. Department of Mental Health, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3630.05 Project-Based Housing Program. Per Subsection (a):

[77] Housing, for the purpose of this study, is defined as:

1) Project-Based Housing Program, per California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3630.05. Project-Based Housing Program. Per Subsection (a):
The County may use General System Development funds for costs associated with Project-Based Housing…

2) Mental Health Services Act Housing Program Service Category, per California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.225. Mental Health Services Act Housing Program Service Category.
"Mental Health Services Act Housing Program Service Category" means the service category of the Community Services and Supports component of the Three-Year Program and Expenditure Plans under which Mental Health Services Act funds, administered through the California Housing Finance Agency, are used to acquire, rehabilitate, or construct permanent supportive housing for clients with serious mental illness and provide operating subsidies.

The County may use General System Development funds for costs associated with Project-Based Housing…

Mental Health Services Act Housing Program Service Category, per California Code of Regulation (Barclays Official), Title 9. Rehabilitative and Developmental Services, Division 1. Department of Mental Health, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.225 Mental Health Services Act Housing Program Service Category.

> *"Mental Health Services Act Housing Program Service Category" means the service category of the Community Services and Supports component of the Three-Year Program and Expenditure Plans under which Mental Health Services Act funds, administered through the California Housing Finance Agency, are used to acquire, rehabilitate, or construct permanent supportive housing for clients with serious mental illness and provide operating subsidies.*

Findings: Housing

The number of counties citing specific housing efforts in their plans/updates is summarized by age group across the counties/municipalities in Table III.9.

Table III.9
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Housing

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Housing	**37**	**68.5%**	**55**	**93.2%**	**56**	**94.9%**	**43**	**79.6%**

9. FSP Team Composition

Guidance for FSP team structure comes from the federal Substance Abuse and Mental Health Services Administration. Recommendations related to the number of psychiatrists, nurse practitioners, and social workers are provided. In addition, collaboration through a team approach is the recommended standard of care. [78]

Number of Psychiatrist/Nurse Practitioner Staff

Guidelines provided by the Substance Abuse and Mental Health Services Administration (SAMHSA) suggest that one full-time psychiatrist be on staff for every 100 clients. In addition to serving as the program's medical director, SAMHSA advises that the psychiatrist be fully integrated into the service team (rather than functioning solely to prescribe medication, as was the case historically). The other crucial team member is the nurse practitioner – two full-time staff members are recommended for every 100 clients. [79]

[78] Substance Abuse and Mental Health Services Administration. (2008). *Assertive Community Treatment: Building Your Program.* DHHS Pub. No. SMA-08-4344, Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

When applying criteria to counties/municipalities with proposed caseloads fewer than 100, the ratio was applied fractionally.

[79] Ibid.

Number of Social Worker Staff

SAMHSA guidelines suggest that a social worker on staff meet at least once a week with each client on his/her caseload. [80]

Team Approach

The SAMHSA stricture [81] to function as a team, rather than in independent silos fits nicely with the MHSA requirement for seamless, integrated services. [82]

Findings: Composition of MHSA Team

The number of counties citing specific best practices related to the FSP team is summarized by age group across the counties/municipalities in Table III.10.

Table III.10
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Composition of FSP Team

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
MH Staff	**33**	**61.1%**	**42**	**77.8%**	**44**	**74.6%**	**43**	**79.6%**
Number of Psychiatrist/Nurse Practitioner Staff	25	46.3%	28	47.5%	31	52.5%	33	61.1%
Number of Social Worker Staff	22	40.7%	25	42.4%	26	44.1%	23	42.6%
Team Approach	24	44.4%	33	55.9%	32	54.2%	31	57.4%
TOTAL	**33**	**61.1%**	**42**	**77.8%**	**44**	**74.6%**	**43**	**79.6%**

Specific best practices with regard to team composition were cited by 61.1 to 79.6 percent of counties, depending upon the age group served by the FSP team.

10. Co-Occurring Disorders

The California Code of Regulations includes "cost of treatment of co-occurring conditions, such as substance abuse" in the list of allowable non-mental health services under the Full Service Partnership Service Category. [83]

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[80] Substance Abuse and Mental Health Services Administration. (2008). *Assertive Community Treatment: Building Your Program.* DHHS Pub. No. SMA-08-4344, Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

[81] Ibid.

[82] California Department of Mental Health. (2005, August). *Mental Health Services Act Community Services and Supports Three-Year Program Expenditure Plan Requirements.*
http://www.dmh.ca.gov/dmhdocs/docs/letters05/05-05CSS.pdf

[83] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.
Scroll down to (a) (1) (B) for examples of non-mental health services and supports allowable under the Full Service Partnership Service Category.

Substance Abuse Treatment Services

Additional recommendations include provision of service through an integrated team and in a parallel time frame, as compared with the "*services as usual*" model where mental health services and substance abuse treatment services are completely separate, and provided sequentially. [84]

Table III.11
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Co-Occurring Disorders Services

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Substance Abuse Treatment	**28**	**51.9%**	**49**	**83.1%**	**49**	**83.1%**	**38**	**70.4%**

Linkage to substance abuse treatment for FSPs with co-occurring disorders was documented by 51.9 to 83.1 percent of counties, depending upon the age group.

11. Evidence-Based Practices

Only one evidence-based model was mandated (Wraparound for Children). [85] Use of additional evidence-based models was left to the discretion of counties/municipalities.

Evidence Based Practices (EBP) are becoming more and more essential in today's psychological environment. According to Drake et al (2001), EBPs are "interventions for which there is consistent scientific evidence showing that they improve client outcomes'' and is equivalent to terms more commonly used in broader mental health settings and psychology, ''empirically supported interventions'' and ''empirically supported treatments'' (p. 370).[86]

Wellness Recovery Action Plan

The Wellness Recovery Action Plan (WRAP) was developed in the true spirit of empowering individuals with mental illness, in that it requires active input from the individual. It can be completed alone or with assistance. [87] The key is that the process is directed by the individual. Key elements of WRAP include:

- Daily Maintenance Plan
- Identifying Triggers and an Action Plan
- Identifying Early Warning Signs and an Action Plan
- Identifying When Things Are Breaking Down and an Action Plan
- Crisis Planning

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[84] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.
Scroll down to (a) (1) (B) for examples of non-mental health services and supports allowable under the Full Service Partnership Service Category.

[85] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.
Scroll down to (a) (1) (C) for specific language requiring wraparound services for children under the Full Service Partnership Service Category.

[86] Stanhope, V., Tuchman, E., & Sinclair, W. (2011). The Implementation of Mental Health Evidence Based Practices from the Educator, Clinician and Researcher Perspective. *Clinical Social Work Journal*, *39*(4), 369-378.

[87] Copeland, M.E. *Wellness Recovery Action Plan*. Downloaded on 12/1/11. http://www.mentalhealthrecovery.com/wrap

- Post Crisis Planning

The Wellness Recovery Action Plan (WRAP) is an intervention geared towards Adults (26-55 years of age) with a mental illness and is typically implemented in a group setting. [88] According to Copeland et al., (2004), WRAP "is a self-management system designed by consumers, assisting people to identify the factors that contribute to or prolong unwellness." (p. 450). [89] The Plan aims to create an action plan to manage these factors and plan for what will happen to them if the clients are no longer able to make a decision (p. 450). [90]

> WRAP is designed to help individuals rebuild their "pathway to recovery" using two important parts:
>
> 1. five key concepts of mental health recovery (hope, personal responsibility, education, self-advocacy and support) and,
> 2. six self-management systems (wellness tool box, daily maintenance plan, triggers and plan, early warning signs and plan, when things have broken down and plan, and a crisis plan). (p. 94) [91]

Cognitive Behavioral Therapy

Cognitive Behavioral Therapy (CBT) is an educational model that has been widely used to treat anxiety, mood, and psychotic disorders (Caroff & Beck, 2005) within the general population (p. 264). [92] According to Velting, Setzer, and Albano (2004), there are six main components to CBT:

1. psychoeducation,
2. somatic management,
3. cognitive restructuring,
4. problem-solving,
5. exposure, and
6. relapse prevention (p. 264). [93]

According to Beck (1995), techniques typically used with CBT include "teaching individuals to monitor affect, physical arousal, and cognition to gain greater self-awareness and identify targets for change." (p. 134). [94]

CBT can be used with a variety of ages. According to SAMHSA's National Registry of Evidence-based Programs and Practices, this model can be used with youth (13-17 years of age) and young adults (18-25 years of age) who are suffering from anxiety and/or depression. [95] When treating adolescents, the following is emphasized:

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[88] SAMHSA's National Registry of Evidence-based Programs and Practices. Wellness Recovery Action Plan (WRAP). http://www.nrepp.samhsa.gov/

[89] As seen in, Doughty, C. (2008). The Wellness Recovery Action Plan (WRAP): workshop evaluation. *Australasian Psychiatry, 16*, 450-456.

[90] Ibid.

[91] As seen in Wenli, Z., Suet Yi, W., Yanbing, L., Hong-Shiow, Y., & Yue, Z. (2009). The Wellness Recovery Action Plan (WRAP): Effectiveness with Chinese consumers. *Aotearoa New Zealand Social Work Review, 21/22(4/1),* 94-102.

[92] Rotheram-Fuller, E. (2011). Cognitive-behavioral therapy for children with autism spectrum disorders. *Psychology in the Schools, 48,* 263-271.

[93] Ibid.

[94] Macrodimitris, S. J. (2010). *CBT basics: A group approach to teaching fundamental cognitive-behavioral skills. Journal of Cognitive Psychotherapy, 24,* 132-146.

[95] SAMHSA's National Registry of Evidence-based Programs and Practices: Cognitive Behavioral Therapy.

1. the use of concrete examples to illustrate points,
2. education about the nature of psychotherapy and socialization to the treatment model,
3. active exploration autonomy and trust issues,
4. focus on cognitive distortions and affective shifts that occur during sessions, and
5. acquisition of problem-solving, affect-regulation, and social skills. [96]

The model has also been successful with "rural older adults, evidencing lower literacy and diminishment of cognitive resources." (p. 510). [97] According to a study conducted by Crowther (2010), "older adults are well-suited to cognitive and behavioral therapies utilizing a collaborative, explicit goal setting, and acknowledgment of their strengths." (p. 502). [98] Since psychoeducation is a major component in this model, individuals are often considering the process as a "learning experience" rather than a "psychological treatment" (p. 504). [99] This can be advantageous to older adults who were not raised to utilize psychological principles.

Dialectical Behavior Therapy

Dialectical Behavior Therapy (DBT) is a cognitive-behavioral treatment approach with two key characteristics: a behavioral, problem-solving focus blended with acceptance-based strategies, and an emphasis on dialectical processes. [100] DBT consists of five key components:

1. capability enhancement (skills training);
2. motivational enhancement (individual behavioral treatment plans);
3. generalization (access to therapist outside clinical setting, homework, and inclusion of family in treatment);
4. structuring of the environment (programmatic emphasis on reinforcement of adaptive behaviors); and
5. capability and motivational enhancement of therapists (therapist team consultation group). [101]

DBT emphasizes balancing behavioral change, problem-solving, and emotional regulation with validation, mindfulness, and acceptance of patients. [102]

DBT has been found to be a useful evidence based practice with individuals 18 years of age and older and has been found to be useful in treating a variety of disorders. For example, according to Harned, Jackson, Comtois and Linehan's (2010) findings, DBT significantly decreases exclusionary behaviors for PTSD treatment among suicidal and/or self-injuring clients with Borderline Personality Disorder and Posttraumatic Stress Disorder (p. 424). [103] DBT for post-traumatic stress disorder aims to help patients "(a) reduce their fear of trauma-associated primary

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http://www.nrepp.samhsa.gov/

[96] Ibid.

[97] Crowther, M. (2010). Treating the aged in rural communities: the application of cognitive-behavioral therapy for depression. *Journal of Clinical Psychology, 66,* 502-512.

[98] Ibid.

[99] Ibid.

[100] SAMHSA's National Registry of Evidence-based Programs and Practices. Dialectical Behavior Therapy. http://www.nrepp.samhsa.gov/

[101] Ibid.

[102] Ibid.

[103] Harned, M. S., Jackson, S. C., Comtois, K. A., & Linehan, M. M. (2010). Dialectical behavior therapy as a precursor to PTSD treatment for suicidal and/or self-injuring women with borderline personality disorder. *Journal of Traumatic Stress, 23,* 421-429.

emotions, (b) question secondary emotions like guilt and shame, and (c) radically accept trauma facts" (p. 102). [104] DBT views disordered eating and purging as maladaptive methods used to manage, control or change adverse emotional states." (p. 77). [105]

Social Skills Training

Social Skills training is a directive, goal-orient process which can be used when working with Children, Transition-Aged youth, Adults and Older Adults. This approach assumes that clients have patterns of relating with others that can be changed for the better (p. 152). [106] According to SAMHSA's National Registry of Evidence-based Programs and Practices "the social skills training component is based on modules for symptom management, communication role-play, and problem-solving social skills." [107]

Social Skills Training can be used on a variety of ages. One study conducted by Williams (2011), found Social Skills Training has been viewed as quite effective, especially in dealing with youth who report high levels of antisocial or aggressive behaviors. [108] Castorina's (2011) study supported the contention that "boys with Asperger syndrome can be taught to attend to non-verbal social cues to infer emotions, and that elements of social and emotion perception can be improved though social skills training" (p. 80). [109] Social Skills Training provides individuals the skills needed to interact and understand other individuals in their social surroundings.

Behavioral Therapy

Behavioral Therapy can be used on individuals as young as children. According to Romero, Donohue and Allen (2010), behavioral interventions "may be effective in treating co-morbid child neglect and substance abuse" (p. 288). [110] Family Behavioral Therapy uses interventions "aimed at teaching substance abusers to avoid or manage stimuli that often precede substance use, such as arguments, anger, places where drugs are present, depression, and anxiety." (p. 287) [111]

Behavioral Couples Therapy can be used to treat adults with substance abuse issues. BCT is a substance abuse treatment approach "based on the assumptions that (1) intimate partners can reward abstinence and (2) reducing relationship distress lessens risk for relapse." [112] The primary relational goals of BCT are to improve

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[104] Steil, R., Dyer, A., Priebe, K., Kleindienst, N., & Bohus, M. (2011). Dialectical behavior therapy for posttraumatic stress disorder related to childhood sexual abuse: A pilot study of an intensive residential treatment program. *Journal of Traumatic Stress, 24,* 102-106.

[105] Dennis, A. (2010). Dialectical behavior therapy for binge eating and bulimia. *Eating Disorders, 18,* 76-78.

[106] Lenz, A., Holman, R. L., & Dominguez, D. L. (2010). Encouraging connections: Integrating expressive art and drama Into Therapeutic Social Skills Training with adolescents. *Journal of Creativity in Mental Health, 5,* 142-157.

[107] SAMHSA's National Registry of Evidence-based Programs and Practices. Social Skills Group Intervention. http://www.nrepp.samhsa.gov/

[108] Williams, C. A. (2011). Mentoring and social skills training: Ensuring better outcomes for youth in foster care. *Child Welfare, 90,* 59-74.

[109] Castorina, L. M. (2011). The inclusion of siblings in social skills training groups for boys with Asperger Syndrome. *Journal of Autism & Developmental Disorders, 41,* 73-81.

[110] Romero, V., Donohue, B., & Allen, D. (2010). Treatment of concurrent substance dependence, child neglect and domestic violence: A single case examination involving Family Behavior Therapy. *Journal of Family Violence, 25,* 287-295.

[111] Ibid.

[112] SAMHSA's National Registry of Evidence-based Programs and Practices. Behavioral couples therapy for alcoholism and drug abuse. http://www.nrepp.samhsa.gov/

communication and increase positivity and commitment. To achieve these goals, the therapist teaches effective listening, conflict resolution, and problem-solving skills (p. 441). [113]

Modeling

Modeling is a method used in specific techniques of psychotherapy. When using this technique, the client learns by imitation alone, without any specific verbal direction by the therapist. [114] This technique is often used with Children and Youth, but can also be used with Adults and Older Adults.

Family Psychoeducation

Family Psychoeducation is an approach often used when working with an individual's disorder and need to include the family. "Psychoeducational approaches offer specific educational content regarding the phenomenology, etiology, course, and treatment of specific disorders." (p. 375). [115] Such programs are offered in an individual family format or in a multi-family workshop format, in order for them to learn about the disorder, its course, prognosis, medications, and management (p. 373). [116] **"**Psychoeducational approach presents psychiatric disorders as illnesses over which the impaired individual has little or no control. First and foremost, this approach is taken to prevent family members from blaming and criticizing the patient." (p. 373) [117] At the same time, "the family also is offered support, validation, and recognition for their own difficult experiences in living with a mentally ill family member." (p. 374) [118]

Working with the families is important when working with children or adolescents. Brent, Poling, McKain, and Baugher (1993), found that after a two-hour presentation about depression, parents significantly increased their knowledge about depression and modified some dysfunctional beliefs about depression (e.g., that depressive symptoms are manipulative and that the adolescents should be able to "pull themselves out of it." p. 376) [119] Such shifts in thought may influence how the family views the patient which may in return impact his or her progress. When working with adults and their families, psychoeducation is tailored to certain "aspects of a diagnosis, sociocultural group, or setting is important for effectiveness, it is clear that the usefulness of information, skill building, problem-solving, social support, and reducing social isolation are common across these variations." (p. 108) [120]

Multisystemic Therapy

Multisystemic Therapy (MST) *"*stands out as a culturally competent home-based service with strong empirical evidence for treating certain populations in the juvenile justice system (Burns et al., 1999), emerging evidence of effectiveness in the child welfare system, and may have promise for treating youth with a serious emotional

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[113] Ruff, S., McComb, J. L., Coker, C. J., & Spenkle, D. H. (2010). Behavioral couples therapy for the treatment of substance abuse: A substantive and methodological review of O'Farrell, Fals-Stewart, and colleagues' program of research. *Family Process, 49,* 439-456.

[114] VandenBoss, Gary (2006). *APA dictionary of psychology*. Washington, DC: American Psychological Association.

[115] Fristad, M. A., Gavazzi, S. M., Centolella, D. M., & Soldano, K. W. (1996). Psychoeducation: A promising intervention strategy for families of children and adolescents with mood disorders. *Contemporary Family Therapy: An International Journal, 18(3),* 371-383.

[116] Ibid.

[117] Ibid.

[118] Ibid.

[119] Ibid.

[120] Lucksted, A., McFarlane, W., Downing, D., & Dixon, L. (2012). Recent developments in family psychoeducation as an evidence-based practice. *Journal of Marital & Family Therapy, 38(1),* 101-121.

disturbance in the community mental health system." (p. 191) [121] MST encourages therapists to strive to create strong collaborative relationships with their clients. MST therapists strive to highlight youth and family strengths throughout treatment (p. 169). [122] "This strength based approach sets a positive tone for sessions and ultimately motivates clients to address their most difficult problems."

> Therapists look for potential *strengths* within multiple contexts, including the individual child (e.g., intelligence, hobbies and interests, social and academic skills), family (e.g., problem-solving ability, affective bonds, financial resources, extended family), peers (e.g., prosocial activities, achievement orientation), school (e.g., management practices, prosocial after-school activities, concerned school personnel), and the neighborhood/community (e.g., concerned and involved neighbors, voluntary associations such as Boys and Girls clubs, recreational opportunities). (p. 169) [123]

MST has been known to be used for youth (6-17 years of age) and, according to Henggeler et al., (1998), was conceived to treat juvenile offenders, yet it has "much in common with the system of care movement for the treatment of youth with severe emotional impairment within the communities in which they live." (p. 192). [124] The ultimate goal of MST is to empower families to build a healthier environment through the mobilization of existing child, family, and community resources. [125]

Therapeutic Foster Care

Therapeutic Foster Care (TFC) "has become a preferred out-of-home placement for youth with severe emotional and behavioral disorders." (p. 168). [126] Such interventions are geared toward children and youth to help the client set clear and attainable goals (p. 81). [127] According to Southerland et al. (2009), "evidence from randomized trials has shown that TFC reduces problematic behavior, increases pro-social behavior, and leads to better outcomes post-discharge. " (p. 50) [128]

One of the key areas of effective treatment is quality foster parenting training. Children and adolescents in TFC display a wide range of symptoms, and foster parents must be ready to address any or all of them (p. 82). [129] A key feature of a TFC intervention is the treatment parents, who provide care and treatment for troubled youth in their home on a 24/7 basis (p. 50). [130] One of the main requirements of TFC is training parents. The treatment parent in

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[121] Painter, K. (2010). Multisystemic therapy as an alternative community-based treatment for youth with severe emotional disturbance: Empirical literature review. *Social Work in Mental Health, 8,* 190-208.

[122] Tuerk, E. W. (2012). Collaboration in family therapy. *Journal of Clinical Psychology, 68*, 168-178.

[123] Ibid.

[124] Painter, K. (2010). Multisystemic therapy as an alternative community-based treatment for youth with severe emotional disturbance: Empirical literature review. *Social Work in Mental Health, 8,* 190-208.

[125] SAMHSA's National Registry of Evidence-based Programs and Practices. Multisystemic Therapy (MST) for juvenile offenders. http://www.nrepp.samhsa.gov/

[126] Breland-Noble, A. M., Farmer, E. Z., Dubs, M. S., Potter, E., & Burns, B. J. (2005). Mental health and other service use by youth in therapeutic foster care and group homes. *Journal of Child & Family Studies, 14,* 167-180.

[127] Sheperis, C. (2003). In-home treatment of Reactive Attachment Disorder in a therapeutic foster care system: A case example. *Journal of Mental Health Counseling, 25,* 76.

[128] Southerland, D., Mustillo, S., Farmer, E., Stambaugh, L., & Murray, M. (2009). What's the relationship got to do with it? Understanding the therapeutic relationship in therapeutic foster care. *Child & Adolescent Social Work Journal, 26*, 49-63.

[129] Sheperis, C. (2003). In-home treatment of Reactive Attachment Disorder in a therapeutic foster care system: A case example. *Journal of Mental Health Counseling, 25,* 76.

[130] Southerland, D., Mustillo, S., Farmer, E., Stambaugh, L., & Murray, M. (2009). What's the relationship got to do with it? Understanding the therapeutic relationship in therapeutic foster care. *Child & Adolescent Social Work Journal, 26*, 49-63.

TFC fulfills dual roles: (1) the parent role of nurturing and taking care of the child's basic needs; and (2) the treatment role, directly implementing treatment interventions with the youth (p. 50). [131] Clear development of a treatment plan with measurable goals and outcomes, continued training of foster parents, utilization of a multidisciplinary treatment team approach, and a consistent therapeutic relationship are essential elements in reducing the disruptive behavior and stabilizing disrupted attachment patterns (p. 87). [132]

Parent-Child Interaction Therapy

Parent-Child Interaction Therapy (PCIT) is a treatment program for young children with conduct disorders that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns. [133] PCIT was developed for children ages 2-7 years. In PCIT, parents are taught specific skills to establish or strengthen a nurturing and secure relationship with their child while encouraging prosocial behavior and discouraging negative behavior. [134] PCIT incorporates parent and child in the treatment sessions and uses live, individualized therapist coaching for an idiographic approach to changing the dysfunctional parent-child relationship (p. 488). [135] This treatment has two phases, each focusing on a different parent-child interaction: child-directed interaction and parent-directed interaction. [136]

Wraparound

Only one evidence-based model was mandated (Wraparound for Children). [137] Per Welfare and Institutions Code 18250 - 18258: [138]

> **CHAPTER 4. County Wraparound Services Program [18250. - 18258.]** [139]
>
> **18250**: [140]
>
> (a) It is the intent of the Legislature that all counties be authorized to provide children with service alternatives to group home care through the development of expanded family based services programs. These programs shall include individualized or "wraparound" services, where services are wrapped around a child living with his or her birth parent, relative,

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[131] Southerland, D., Mustillo, S., Farmer, E., Stambaugh, L., & Murray, M. (2009). What's the relationship got to do with it? Understanding the therapeutic relationship in therapeutic foster care. *Child & Adolescent Social Work Journal, 26*, 49-63.

[132] Sheperis, C. (2003). In-home treatment of Reactive Attachment Disorder in a therapeutic foster care system: A case example. *Journal of Mental Health Counseling, 25,* 76.

[133] SAMHSA's National Registry of Evidence-based Programs and practices. Parent-Child Interaction Therapy. http://www.nrepp.samhsa.gov/

[134] Ibid.

[135] Timmer, S. G., Ware, L. M., Urquiza, A. J., & Zebell, N. M. (2010). The effectiveness of Parent-Child Interaction Therapy for victims of interparental violence. *Violence & Victims, 25,* 486-503.

[136] SAMHSA's National Registry of Evidence-based Programs and practices. Parent-Child Interaction Therapy. http://www.nrepp.samhsa.gov/

[137] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.

Scroll down to (a) (1) (C) for specific language requiring wraparound services for children under the Full Service Partnership Service Category.

[138] Welfare and Institutions Code (WIC), Division 9. Public Social Services, Part 6. Miscellaneous Provisions, Chapter 4. County Wraparound Services Program, 18250 - 18250.

Wraparound requirements per WIC are repeated verbatim – therefore, spelling and grammatical errors have not been corrected from the original text.

[139] *(Heading of Chapter 4 amended by Stats. 2010, Ch. 561, Sec. 1.)*

[140] *(Amended by Stats. 2012, Ch. 35, Sec. 144. Effective June 27, 2012.)*

nonrelative extended family member,[141] adoptive parent, licensed or certified foster parent, or guardian. The wraparound services developed under this section shall build on the strengths of each eligible child and family and be tailored to address their unique and changing needs.

(b) It is further the intent of the Legislature that the county wraparound services program include the following elements:

(1) Enabling the county to access all possible sources of federal funds for the purpose of developing family based service alternatives.

(2) Encouraging collaboration among persons and entities including, but not limited to, parents, county welfare departments, county mental health departments, county probation departments, county health departments, special education local planning agencies, school districts, and private service providers for the purpose of planning and providing individualized services for children and their birth or substitute families.

(3) Ensuring local community participation in the development and implementation of wraparound services by county placing agencies and service providers.

(4) Preserving and using the service resources and expertise of nonprofit providers to develop family based and community-based service alternatives.

(c) Beginning in the 2011–12 fiscal year, and for each fiscal year thereafter, funding and expenditures for programs and activities under this section shall be in accordance with the requirements provided in Sections 30025 and 30026.5 of the Government Code.

18251: [142]

As used in this chapter:

(a) "County" means each county participating in an individualized or wraparound services program.

(b) "County placing agency" means a county welfare or probation department, or a county mental health department.

(c) "Eligible child" means a child or nonminor dependent,[143] who is any of the following:

(1) A child or nonminor dependent who has been adjudicated as either a dependent, transition dependent, or ward of the juvenile court[144] and who would be placed in a group home licensed by the department at a rate classification level of 10 or higher.

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[141] As defined in Section 362.7.

[142] *(Amended by Stats. 2012, Ch. 846, Sec. 62. Effective January 1, 2013.)*

[143] As described in subdivision (v) of Section 11400.

[144] Pursuant to Section 300, 450, 601, or 602.

(2) A child or nonminor dependent who is currently, or who would be, placed in a group home licensed by the department at a rate classification level of 10 or higher.

(3) A child who is eligible for adoption assistance program benefits when the responsible public agency has approved the provision of wraparound services in lieu of out-of-home placement care at a rate classification level of 10 or higher.

(d) "Wraparound services" means community-based intervention services that emphasize the strengths of the child and family and includes the delivery of coordinated, highly individualized unconditional services to address needs and achieve positive outcomes in their lives.

(e) "Service allocation slot" means a specified amount of funds available to the county to pay for an individualized intensive wraparound services package for an eligible child. A service allocation slot may be used for more than one child on a successive basis.

18252: [145]

Each county shall, at the county's option, develop a county plan for intensive wrap-around services and monitor the provision of those services in accordance with the plan. This plan shall be submitted to the department for informational purposes. Where a county operates both systems of care under the Children's Mental Health Services Act, Part 4 (commencing with Section 5850) of Division 5, and wrap-around services, these plans shall be coordinated. Each county's plan shall include all the following elements:

(a) A process and protocol for reviewing the eligibility of children and families for service and for monitoring accessibility and availability of service to the targeted population. Children shall be determined as eligible for wrap-around services, [146] except that:

(1) Once a child is determined to be eligible for wrap-around services under this chapter, he or she shall remain eligible for the time period specified in his or her individualized services plan.

(2) A child and family participating in a family maintenance services program [147] and the wrap-around services program, shall not be subject to the time limitations specified in Section 16506.

(b) A process to accept, modify, or deny proposed individualized service plans for eligible children and families.

(c) A process for parent support, mentoring, and advocacy that ensures parent understanding of, and participation in, wrap-around services programs.

[145] *(Amended by Stats. 1997, Ch. 795, Sec. 3. Effective January 1, 1998.)*
[146] Pursuant to subdivision (c) of Section 18251.
[147] As described in Section 16506.

(d) A planning and review process to support and facilitate the following principles in delivering intensive wrap-around services to eligible children and families:

(1) Focusing on an individual child and family through the creation of service plans designed specifically to address the unique needs and strengths of each child and his or her family.

(2) Providing services geared toward enabling children to remain in the least restrictive, most family-like setting possible.

(3) Developing a close collaborative relationship with each child's family in the planning and provision of wrap-around services.

(4) Conducting a thorough, strengths-based assessment of each child and family that will form the basis for the development of the individualized intervention plan.

(5) Designing and delivering services that incorporate the religious customs, and regional, racial, and ethnic values and beliefs of the children and families served.

(6) Measuring consumer satisfaction to assess outcomes.

(e) Written interagency agreements or memorandums of understanding between the county departments of mental health, social services, and probation that specify jointly provided or integrated services, staff tasks and responsibilities, facility and supply commitments, budget considerations, and linkage and referral services.

18253: [148]

Each county shall ensure that an evaluation of the wraparound services program is conducted to determine the cost and treatment effectiveness of outcomes such as family functioning and social performance, preventing placement in more restrictive environments, improving emotional and behavioral adjustments, school attendance, and stability in the least restrictive school placement for eligible children. Systems of care outcomes shall be included to the extent they are applicable to the target population.

18253.5: [149]

Each county shall ensure that staff participating in the wraparound services program have completed training provided or approved by the department, on providing individualized wraparound services.

[148] *(Amended by Stats. 2010, Ch. 561, Sec. 4. Effective January 1, 2011.)*
[149] *(Amended by Stats. 2010, Ch. 561, Sec. 5. Effective January 1, 2011.)*

18254: [150]

(a) Rates for wraparound services, under the wraparound services program, shall be based on the following factors:

(1) The average cost of rate classification 10 to 11 in each county, minus the cost of any concurrent out-of-home placement, for children who are or would be placed in a rate level 10 or 11 group home.

(2) The average cost of rate classification 12 to 14 in each county, minus the cost of any concurrent out-of-home placement, for children who are or would be placed in a rate level 12 to 14 group home.

(b)

(1) Prior to the 2011–12 fiscal year, the department shall reimburse each county, for the purpose of providing intensive wraparound services, up to 100 percent of the state share of nonfederal funds, to be matched by each county's share of cost as established by law, and to the extent permitted by federal law, up to 100 percent of the federal funds allocated for group home placements of eligible children, at the rate authorized pursuant to subdivision (a).

(2) Beginning in the 2011–12 fiscal year, and for each fiscal year thereafter, funding and expenditures for programs and activities under this section shall be in accordance with the requirements provided in Sections 30025 and 30026.5 of the Government Code.

(c) County, and to the extent permitted by federal law, federal, foster care funds shall remain with the administrative authority of the county, which may enter into an interagency agreement to transfer those funds, and shall be used to provide intensive wraparound services.

(d) Costs for the provision of benefits to eligible children, at rates authorized by subdivision (a), through the wraparound services program authorized by this chapter, shall not exceed the costs which would otherwise have been incurred had the eligible children been placed in a group home.

18256: [151]

The department shall work with the County Welfare Directors Association of California to identify periodic data elements to be collected in order to track the impact of the counties' wraparound services programs on applicable California Child and Family Services Review System outcome indicators, such as safety, permanency, and the well-being of the child.

[150] *(Amended by Stats. 2012, Ch. 35, Sec. 145. Effective June 27, 2012.)*

[151] *(Repealed and added by Stats. 2010, Ch. 561, Sec. 9. Effective January 1, 2011.)*

18256.5: [152]

In order to prevent disruption to a child participating in a wraparound services program, any county that terminates its wraparound services program shall ensure the participating child's service needs are met without disruption until his or her case is closed.

18257: [153]

The State Department of Social Services shall seek applicable federal approval to make the maximum number of children being served through such programs eligible for federal financial participation and amend any applicable state regulations to the extent necessary to eliminate any limitations on the numbers of children who can participate in these programs.

18258:

(a) A child who is categorically eligible for Medi-Cal benefits pursuant to Section 1396a(a)(10)(A)(i)(I) of Title 42 of the United States Code shall remain eligible for Medi-Cal benefits so long as foster care maintenance payments under Title IV-E of the federal Social Security Act are made on the child's behalf. Placement at home without a change in the child's status as an adjudicated dependent or ward of the juvenile court shall not be cause for a redetermination unless necessary to obtain federal financial participation for Medi-Cal.

(b) A child who is eligible for Medi-Cal benefits, but is not described in subdivision (a), shall remain eligible for benefits subject to annual Medi-Cal redetermination. [154] Placement at home without a change in the child's status as an adjudicated dependent or ward of the juvenile court shall not be cause for a redetermination unless necessary to obtain federal financial participation for Medi-Cal.

(c) Medi-Cal eligibility for a child receiving wraparound services pursuant to this chapter shall be determined in accordance with the standards, methodologies, and procedures outlined in Chapter 7 (commencing with Section 14000) of Part 3 of Division 9.

(d) This section is declaratory of existing law.

Partners in Care

Partners in Care (PIC) is an intervention for use in managed primary care settings to improve the treatment of depression. PIC is based on collaborative care models, in which mental health is integrated with primary care. [155] The core elements of PIC include teamwork between specialists and generalists, case management by nurses, and patient education and empowerment. The intervention educates clinicians on the treatment of depression in the primary care setting while also giving them access to psychotherapists who can provide consultation on difficult

[152] *(Amended by Stats. 2010, Ch. 561, Sec. 10. Effective January 1, 2011.)*

[153] *(Amended by Stats. 2012, Ch. 35, Sec. 147. Effective June 27, 2012. Note: This section was added on Nov. 2, 2004, by initiative Prop. 63. Prop. 63 allows, under conditions in Sec. 18, the Legislature to directly amend its provisions by 2/3 vote.)*

[154] Pursuant to Section 14012.

[155] SAMHSA's National Registry of Evidence-based Programs and practices. Partners in Care. http://www.nrepp.samhsa.gov/

cases and take referrals when needed.[156] PIC is most often used when treating Adults and Older Adults, but can also be used when treating Transition-Aged Youth.

Findings: Evidence-Based Practices

Evidence-Based Practices (EBP) are becoming more and more essential in today's psychological environment. According to Drake et al (2001), EBPs are "interventions for which there is consistent scientific evidence showing that they improve client outcomes'' and are equivalent to terms more commonly used in broader mental health settings and psychology, ''empirically supported interventions'' and ''empirically supported treatments'' (p. 370).[157]

Table III.12

Number and Percent of Counties Reporting Planned Implementation of Full Service Partnership Value-Added Services – Evidence-Based Practices

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Evidence-Based Practices	**41**	**75.9%**	**45**	**76.3%**	**49**	**83.1%**	**32**	**59.3%**
Wellness Recovery Action Plan			35	59.3%	40	67.8%	22	40.7%
Cognitive Behavior Therapy	14	25.9%	15	25.4%	12	20.3%	7	13.0%
Dialectical Behavior Therapy			8	13.6%	6	10.2%	4	7.4%
Social Skills Training	13	24.1%	20	33.9%	14	27.3%	10	18.5%
Behavior Therapy	12	22.2%	12	20.3%	10	17.0%	9	16.7%
Modeling	4	7.4%	6	10.2%	5	8.5%	4	7.4%
Family Psychoeducation	14	25.9%	19	32.2%	20	33.9%	19	35.2%
Multisystemic Therapy	2	3.7%	3	5.1%				
Therapeutic Foster Care	6	11.3%						
Parent-Child Interaction Therapy	12	22.2%						
Wraparound	38	70.4%						
Partners In Care					1	1.7%	1	1.9%
TOTAL	**41**	**75.9%**	**45**	**76.3%**	**49**	**83.1%**	**32**	**59.3%**

The number of counties citing specific evidence-based practices provided to FSPs is summarized by age group across the counties/municipalities in Table III.12. The majority of counties cited at least one evidence-based practice provided to each of the age groups served by the FSP (59.3 to 83.1 percent).

[156] SAMHSA's National Registry of Evidence-based Programs and practices. Partners in Care. http://www.nrepp.samhsa.gov/

[157] Stanhope, V., Tuchman, E., & Sinclair, W. (2011). The implementation of mental health evidence based practices from the educator: Clinician and researcher perspective. *Clinical Social Work Journal*, *39*, 369-378.

12. *Other Practices*

The California Code of Regulations [158] makes it clear that the use of alternative treatment and culturally specific treatment approaches shall not be prohibited by these regulations. The number of counties reporting alternative and culturally specific treatments is displayed, by age group, in Table III.13.

Table III.13
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Other Practices

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Other Practices	**30**	**50.9%**	**30**	**50.9%**	**33**	**55.9%**	**26**	**66.7%**
Alternative Treatment	6	10.2%	15	25.4%	12	20.3%	10	18.5%
Culturally-Specific Treatment	24	44.4%	26	44.1%	24	40.7%	23	42.6%
TOTAL	**30**	**50.9%**	**30**	**50.9%**	**33**	**55.9%**	**26**	**66.7%**

A little over half of the counties documented other practices for CYF, TAY and Adult FSPs, such as alternative treatments, or culturally-specific treatment. Approximately two-thirds documented other practices in place for Older Adults.

13. *Discharge Coordination*

FSP services are designed to be seamless, and it therefore follows that discharge from a psychiatric facility or long-term care, or from a criminal justice setting, should be coordinated in order to ensure smooth transition back into the community.

Table III.14
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services – Discharge Coordination

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Discharge Coordination	**33**	**61.7%**	**40**	**67.8%**	**37**	**62.7%**	**27**	**50.0%**
Hospital Coordination	17	31.5%	20	33.9%	24	40.7%	23	42.6%
Criminal Justice Coordination	33	61.1%	40	67.8%	37	62.7%	27	50.0%
TOTAL	**33**	**61.7%**	**40**	**67.8%**	**37**	**62.7%**	**27**	**50.0%**

At least half (50.0 to 67.8 percent of counties, depending upon the age group) document specific practices related to discharge coordination.

[158] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category.
Scroll down to (a) (1) (A) (v) for the specific citation.

14. FSP Services Summary

The overall vision of doing "*whatever it takes*" to aid individuals with severe mental illness/serious emotional disturbance has given birth to an overall framework under which an organized array of services is provided across the State. UCLA reviewed every county's Full Service Partnership Plan and Annual Updates in order to generate a county-specific FSP Assessment. [159] The FSP Assessment indicates whether a planned service/activity was present or absent for each age group. The FSP Assessment tool was first developed by an expert consultant, and pilot tested on one county. The tool was then reviewed by the Cost Advisory Group. [160] Revisions were made to the tool based on feedback from the Cost Advisory Group.

FSP Assessments were sent back to each county, along with the source location (basis for the present/absent rating). [161] Counties had the opportunity for review/feedback, which included submission of documentary evidence to support FSP activities/practices in place. [162] Based on the FSP Service Summary, the following services are offered across the state to FSPs (summarized in Table III.15).

[159] The decision was made to use available data (rather than conduct site visits to each county) in order to avoid burden to the counties, and due to budgetary considerations.

[160] Our consultant had worked as a Full Service Partnership Coordinator for a large county. The county reviewed was the county she had worked for, with their permission. Counties were provided the opportunity to provide additional documentary evidence because services may have changed following plan submission, a service may have inadvertently been left out of the plan – in short, the Cost Advisory Group noted that the Plans and Updates were not designed to capture everything offered through the Full Service Partnership, and therefore the opportunity to augment with additional data must be offered to counties.

[161] For example, the page number in the original FSP Plan. We provided the source location in order to make it easier for counties to follow the logic for our ratings of whether a given service (e.g., wraparound) was present or absent.

[162] One county requested a site visit in order to update their FSP Assessment. The FSP Assessment matrix accompanied the site visitor, and was updated following the visit based on qualitative survey results (interview data with FSP staff).

Table III.15
Number and Percent of Counties Reporting Implementation of Full Service Partnership Services

Service Strategy	Counties: CYF (N=54)		Counties: TAY (N=59)		Counties: Adults (N=59)		Counties: Older Adults (N=54)	
	N	%	N	%	N	%	N	%
Outreach and Engagement*	53	98.1%	59	100%	59	100%	54	100%
Personal Services Coordinator/Case Manager*	52	96.3%	58	98.3%	59	100%	52	96.3%
General Standards*	54	100%	59	100%	59	100%	54	100%
Outpatient Mental Health Services	51	94.4%	58	98.3%	56	94.9%	50	92.6%
Other Supports	48	88.9%	57	96.6%	56	94.9%	48	88.9%
Specific Positions for Clients/Family Members	51	94.4%	57	96.6%	56	94.9%	51	94.4%
Strategies Involving Peers on Team	50	92.6%	54	91.5%	55	93.2%	50	92.6%
Peers Augmenting Overall Team Capacity	48	88.9%	58	98.3%	57	96.6%	53	98.1%
Housing	40	74.1%	55	93.2%	55	93.2%	43	79.6%
Best practices – Team Composition	33	61.1%	42	77.8%	44	74.6%	43	79.6%
Substance Abuse Treatment	28	51.9%	49	83.1%	49	83.1%	38	70.4%
Evidence-Based Practices	41	75.9%	45	76.3%	49	83.1%	32	59.3%
Other Practices	30	50.9%	30	50.9%	33	55.9%	26	66.7%
Discharge Coordination	33	61.7%	40	67.8%	37	62.7%	27	50.0%

* Services/strategies in Table 1 indicated with an asterisk (*) represent requirements under the Mental Health Services Act.

The following conclusions may be drawn regarding services offered to FSPs:

- At least one of the required strategies is in place for outreach and engagement in all counties serving TAY, Adults and Older Adults, and for 98.1 percent of counties serving CYF.
- Outpatient mental health services are offered in 92.6 to 98.3 percent of the counties to FSPs, depending upon the age group served.
- Other support services are offered in 88.9 to 96.6 percent of counties, depending upon the age group served by the FSP.
- The inclusion of consumers/family members on staff was documented for nearly all counties - 94.4 to 96.6 percent of the counties. Up to 98.3 percent of counties (all serve Adults) noted ways in which clients and family members were planned to augment the team, but not all cited specific roles or current employment of peers/parent advocates.
- Depending upon the age group served by the FSP, housing is offered 74.1 to 93.2 percent of counties.
- Specific best practices with regard to team composition were cited by 61.1 to 79.6 percent of counties, depending upon the age group served by the FSP team.
- Linkage to substance abuse treatment for FSPs with co-occurring disorders was documented by 51.9 to 83.1 percent of counties, depending upon the age group.
- At least half (50.0 to 67.8 percent of counties, depending upon the age group) document specific practices related to discharge coordination (from hospitals and criminal justice facilities).

IV. Expenditures on Full Service Partnership Programs

Full Service Partnership expenditures [163] are the focus of this chapter. [164] Translated into plain language – what was expended on Full Service Partnership programs?

This deliverable is defined simply as follows:

> ***Initial written report that specifies:***
>
> 1. ***The statewide and county-specific per-person annual cost average and range for FSP Adults, Older Adults, Children and Transition-Age Youth, and***
> 2. ***The proportion of revenue by funding source.***

The chapter opens with a description of our methodology – how we went about calculating the expenditures for Full Service Partnership programs. The chapter closes with statewide Full Service Partnership expenditures by age group.

a. Methodology

Expenditures on Full Service Partnerships (FSP) were analyzed and reported (through Fiscal Year 08-09) as part of the Phase II Statewide Evaluation of the Mental Health Services Act, Deliverable 1. [165] The primary data source for determining FSP cost was the Revenue and Expenditure Reports. [166] Revenue and Expenditure Reports are completed by each county mental health department, and they document all monies spent and distributed through the Mental Health Services Act.

In the process of completing Phase II Deliverable 1, the UCLA Team summarized all public mental health expenditures on Full Service Partnerships documented in the Revenue and Expenditure Reports (RER). Therefore, the RERs were deemed a logical data source to start with.

The initial question to be answered, in order for the analysis to proceed, relates directly back to the deliverable language (above):

> Can ***FSP service expenditures by age group*** be calculated using the RERs?

Without the ability to determine age-group-specific expenditures, the county-specific and statewide expenditure average and range ***for FSP Adults, Older Adults, Children and Transition-Age Youth cannot be determined.***

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[163] Although UCLA was tasked with determining costs, we explain in this chapter why the available data sources forced a shift to FSP expenditures when discussing FSP services. Costs are also a focus, but only inasmuch as available public data sources were available, documenting daily consequence cost to county and state systems.

[164] Phase III Deliverable 1.A. Initial written report that specifies 1) the statewide and county-specific per-person annual expenditure average and range for FSP Adults, Older Adults, Children and Transition-Age Youth and 2) the proportion of revenue by funding source.

[165] http://mhsoac.ca.gov/Announcements/docs/Evaluation_Deliverable1A_Brief2_FSP.pdf
California's Investment in the Public Mental Health System: Proposition 63; Brief 2 of 7: Providing Community Services and Supports through Full Service Partnerships.

[166] FY 06-07 was the earliest fiscal year for which Revenue and Expenditure Reports were submitted by counties. No counties submitted Revenue and Expenditure Reports (according to the Department of Mental Health) prior to FY 06-07.

Therefore, it was imperative for the team to quickly identify a reliable and valid means of determining FSP service expenditures by age group. [167]

Recall the discussion of the Revenue and Expenditure Report limitations in Chapter II. A link to the worksheet provided by the Department of Mental Health for documenting FSP expenditures by program for FY 08-09 is provided in Appendix E. There was no change to the original FY 09-10 RER form issued to counties. The revised version, however, requires only a summary total for FSP services and does not ask for breakout expenditures. [168]

The initial questions posed about the FSP worksheets (*summarized in Chapter II*) laid the groundwork for similar questions about FSP services:

1. Are FSP services identified by a unique identification number in the Revenue and Expenditure Reports?
   a. If yes, can this be tracked to individual client (services received) in the DCR?
2. Are FSP services identified by name in the Revenue and Expenditure Report?
   a. If yes, can this be tracked to individual client (services received) in the DCR?
   b. If yes, can this be tracked to the CSS Plan and Annual Updates?

The answer to #1 was determined to be ***no***. This posed obvious problems – the most troubling being:

- How can we reliably link a particular FSP worksheet with expenditures to a particular age group in the DCR?

An alternative was considered – perhaps FSP services as identified in the RER worksheets could be tracked to the CSS Plan and Annual Updates. The team therefore embarked upon an exhaustive review process of attempting to match every RER worksheet back to a named FSP service in the original CSS Plan, and then to subsequent fiscal year Annual Updates.

The results were problematic for a number of reasons:

- Names change from year to year in some counties but do not always change on the RER (or vice versa);
- Services may be combined in a given fiscal year when they were broken out by age the previous year. For example, all small counties combined FSP breakout services by age group into one omnibus FSP service package in FY 09-10;
- Services disappear out of the RER but are not documented as to why they disappear in the Annual Update;
- New services appear in the RER, but they are not documented in the original CSS Plan or the Annual Update;
- Services are identified as FSP in the original CSS Plan/Annual Update, but no FSP expenditures appear in the RER;

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[167] Revenue and Expenditure Reports reviewed were those submitted by counties and municipalities to DMH as of October 1, 2011. Dr. Harris traveled to Sacramento and personally picked up an encrypted hard drive containing DCR data, Annual Updates and FY 08-09 and FY 09-10 RERs (UCLA already had FY 08-09 RERs from the Phase II Deliverable 1 analysis).

[168] Revised instructions were issued to counties on December 27, 2011, with a due date of January 31, 2012, for counties that had not yet submitted FY 08-09 and FY 09-10 RERs. FY 09-10 is provided in the report, but the revised forms are identical to FY 08-09.
http://www.dmh.ca.gov/dmhdocs/docs/notices11/11-16.pdf
Although the revised instructions did not impact UCLA's time line (FY 09-10 RERs provided by DMH were provided prior to the revised instructions issuance), the Evaluation Advisory Group will need to carefully consider whether this RER data can be used, given how different the instructions are from those of previous years.

- Not all age groups that had been planned to be served may, in actuality, be served (when DCR data are compared with planned budgets); and
- Target age groups may change from year to year.

The answer to the question, "*Are FSP services identified by name in the Revenue and Expenditure Report, and can they be tracked to individual FSPs in the DCR, and to the CSS Plan and Annual Updates*?" is:

> "*It depends entirely on the county, the fiscal year and even the service in question*."

In addition, the answer to the question changes even within a given county, and within a single fiscal year.

However, barriers to extracting FSP expenditures by age group should not be seen as a poor reflection of county documentation. Indeed, the Revenue and Expenditure Reports were not designed for this purpose. Counties reported during the web survey process (additional data collection used for this deliverable, described later in this chapter) that they complied as best they could with the RER instructions provided, but that the RERs are not a reflection of county mental health accounting practices. Indeed, the prevailing sentiment among county fiscal staff may be summarized in one quote received:

> "*We simply don't track our mental health spending this way*."

After spending 60 days of investigation, thoroughly exhausting these possibilities as potential data sources, the Evaluation Advisory Group was convened in order to seek expert guidance and input into resolution of the critical challenge of breaking out FSP expenditures into age groups in a reliable and valid manner.

The objectives of the first Evaluation Advisory Group meeting (held November 3, 2011 – see Chapter II for an introduction to the EAG) were:

a) To define the product necessary to meet the requirements of the deliverable;
b) To identify *feasible* ways in which the deliverable may be improved (e.g., be made more informative and useful in understanding what drives expenditures per client and expenditure differences across counties);
c) To identify issues and solutions to the issues that need to be resolved to:
    1. identify the data elements necessary to the desired products;
    2. identify the data sources most suitable to producing these data elements;
    3. identify issues and solutions concerning the exact configuration of data elements (e.g., the exact definition of what FSP expenditures should include) appropriate to developing the products;
    4. conduct the analysis;
    5. display findings; and
d) To suggest an organized set of steps to systematically resolve issues identified under c).

The results of the RER analysis were presented to the Evaluation Advisory Group, along with other potential data sources. Challenges associated with each potential data source are summarized in the report, *Full Service Partnerships: California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness*, and will not be repeated here. [169]

The EAG determined, during the deliberation process, that the critical question of FSP expenditures by age group would be difficult for UCLA to answer using the available data sources. Although the total expenditures on Full

[169] http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

Service Partnerships each fiscal year can be obtained from the RER (and indeed, was obtained and reported in Phase II Deliverable 1 for FY 08-09), the ***RER falls short on its own in terms of providing a reliable and valid mechanism for breaking out the total expenditures by age group.***

Therefore, the absolute necessity of breaking out FSP expenditures by age group formed the basis for launching a county web survey. The Evaluation Advisory Group determined that *only county department of mental health staff* (preferably, fiscal staff) have the information needed to make determinations about how the total FSP expenditures for their county should be broken out by age group. Although a county survey represented a data collection burden, county-informed breakouts were deemed to be far preferable to any educated guess on the part of the UCLA team.

Estimating expenditures for comparable services provides ***the foundation*** for assessing the return on the FSP service investment. The assessment of cost offset is accomplished through identifying how service expenditures result in substantial savings to the system (e.g., reduced hospitalization costs, reduced incarceration costs). The web survey was necessary to augment data already gathered from RERs; to ensure that all counties are adequately represented in the analysis; and to ensure the most accurate and feasible estimate of appropriate service expenditures.

1. Full Service Partnership Expenditures

The total amount expended on Full Service Partnerships in FY 08-09 and FY 09-10 (as reported by each county in its RER) served as the basis for the total Full Service Partnership Expenditures.[170] Total Full Service Partnership Expenditures was only a starting point, however, given the need to break out expenditures by age group.

2. Age Groups

In order to include a county in the FSP Expenditures and Cost Offsets Report, we needed Full Service Partnership expenditures broken out by age group. Per the California Code of Regulations, "*The County shall provide services to all age groups i.e., older adults, adults, transition age youth, and children/youth in the Full Service Partnership Service Category*."[171] Age groups are defined as follows:

- "Children and youth" means individuals from birth through 17 years of age.[172]
- "Transition Age Youth" means youth 16 years to 25 years of age.[173]

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[170] Three study counties did not submit an FY 09-10 RER. Therefore, expenditures as reported in the web survey served as the sole source for FSP FY 09-10 expenditures.

[171] Alignment of plan, update, RER, plus breakout of discrete FSP programs into distinct age groups was a rarity among the counties, but this should not be viewed as a "*negative*" on the part of the counties, because the original intent of the RER had nothing to do with breakouts by age group.

Note that one county was in start-up during the entire study period, and was therefore removed from the total N for purpose of this study. No comparable data was available for analysis – this is the reason for removal. Therefore, the N = 58 (rather than 59).

California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3620. Full Service Partnership Service Category. Subsection (j).

[172] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions. 3200.030. Children and Youth:

(1) Individuals age 18 and older who meet the conditions specified in Chapter 26.5 (commencing with Section 7570) of Division 7 of Title 1 of the Government Code are considered children and youth who are eligible to receive services.

[173] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.280. Transition Age Youth.

- "Adult" means an individual 18 years of age through 59 years of age. [174]
- "Older Adult" means an individual 60 years of age and older. [175]

Accordingly, all findings for this analysis are reported separately by age group. The county web survey contained questions about the proportion of expenditures on Full Service Partnership services for each age group, for each fiscal year. [176]

3. Housing

There was consensus among Evaluation Advisory Group members that housing is a critical aspect of FSP services, and an expensive service. [177] Housing was therefore included as an FSP expenditure even though it is reported somewhat differently in some counties.

Housing, for the purpose of this study, is defined as: [178]

1) Project-Based Housing Program, per California Code of Regulation (Barclays Official), Title 9. Rehabilitative and Developmental Services, Division 1. Department of Mental Health, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3630.05. Project-Based Housing Program.
    a) The County may use General System Development funds for costs associated with Project-Based Housing, including but not limited to:
        1) Purchasing/renovating/constructing Project-Based Housing.
        2) Master leasing of Project-Based Housing.
            (A) The lease between the County and the property owner shall specify that the County shall select the tenants and collect payments from the tenants for the Project-Based Housing.
        3) Repairing damage to the Project-Based Housing in which a tenant resides/resided.
        4) Establishing and maintaining a Capitalized Operating Subsidy Reserve. [179]
        5) Establishing a Project-Based Housing Fund.

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[174] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.010. Adult.

[175] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.230. Older Adult.

[176] Assignment of FSPs into age group categories is done at the county level. This categorization is reflected in the DCR. The UCLA team does not make any assignment of individual FSPs to age group category.

[177] This does not include the Governor's Housing Initiative. There was consensus among EAG members that this cost would be excluded from the analysis.

[178] Housing, for the purpose of this study, is defined as:

1) Project-Based Housing Program, per California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3630.05. Project-Based Housing Program. Per Subsection (a):
The County may use General System Development funds for costs associated with Project-Based Housing…
2) Mental Health Services Act Housing Program Service Category, per California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.225. Mental Health Services Act Housing Program Service Category.
"Mental Health Services Act Housing Program Service Category" means the service category of the Community Services and Supports component of the Three-Year Program and Expenditure Plans under which Mental Health Services Act funds, administered through the California Housing Finance Agency, are used to acquire, rehabilitate, or construct permanent supportive housing for clients with serious mental illness and provide operating subsidies.

[179] As defined in section 3200.028.

Mental Health Services Act Housing Program Service Category, per California Code of Regulation (Barclays Official), Title 9. Rehabilitative and Developmental Services, Division 1. Department of Mental Health, Chapter 14, Mental Health Services Act. Article 2. Definitions, 3200.225. Mental Health Services Act Housing Program Service Category.

> *"Mental Health Services Act Housing Program Service Category" means the service category of the Community Services and Supports component of the Three-Year Program and Expenditure Plans under which Mental Health Services Act funds, administered through the California Housing Finance Agency, are used to acquire, rehabilitate, or construct permanent supportive housing for clients with serious mental illness and provide operating subsidies.*

Breakout Reporting of Housing Costs

Since housing is a core service for stabilizing clients, and is a major cost item, the EAG recommended that housing expenditures be broken out, presented and discussed as a key expenditure.

Counties were explicitly queried about the line item in which housing was reported on the RER. If it was reported on an FSP line item, the housing amount reported for the relevant age group (i.e., *the age group for which housing is documented on an FSP line item*) was subtracted from the FSP program expenditure total for that age group. [180] FSP expenditure by age-group calculations using RER and web survey data were included as a worksheet in each county's FSP Expenditures and Cost Offsets Excel file, provided to counties for initial review in May 2012.

4. Outreach

The EAG agreed that outreach in order to recruit individuals and families into FSP programs is another critical aspect that should be represented in expenditures, though it may be reported outside the FSP RER worksheet.

There is a specific line item for Outreach in the CSS Program Worksheet, and counties may show outreach expenditures there (see Appendix E). For counties that show no expenditures under the outreach line item on their FSP program expenditure worksheets, these expenditures may be reported elsewhere. The web survey therefore contained specific questions about the cost of outreach for each fiscal year (specific to bringing potential FSP clients into service) and the proportion spent on each age group.

Counties that participated in the web survey reviewed the initial draft of FSP Expenditures and Cost Offsets in a county-specific Excel file, distributed in May 2012.

The initial round of survey participants included a majority of the counties (N = 37; 63.8%).[181] The populations of counties represented in the draft report for FY 09-10 comprised most of the State of California (67.3%).[182] The majority was also represented for FY 08-09 (66.9%).

Although the original intent to include outreach expenditures represented the desire to document ***all*** that Full Service Partnership participants may receive, when counties reviewed the figures, consensus was that inclusion of

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[180] Without this adjustment, we would be counting housing expenditures twice – they are already included in the RER total, and then we would be counting them again from the county web survey (for those counties that document housing expenditures on a line item within FSP).

[181] Note that one county did not provide data, and later informed the UCLA team that they were in start-up during the entire study period. This county was consequently removed from the total N for purpose of calculation. Therefore, the N = 58 (rather than 59).

[182] See Appendix D for a list of county participants. Population data were extracted by county and for the state, for 2008 (corresponding to FY 08-09) and 2009 (corresponding to FY 09-10), from census data:
http://www.census.gov/popest/research/eval-estimates/eval-est2010.html

outreach expenditures overinflated Full Service Partnership expenditures. In addition, counties indicated that drilling down on the exact outlay of outreach expenditures for FSP clients was difficult, when outreach is typically provided to a much broader population (across ages, in some cases).

Given concerns about inexactitude and over-inflation of expenditures, outreach expenditures were removed from the calculations based on county feedback.

5. Operational Definitions

Through the process described in this chapter, counties were queried directly about the proportion of expenditures provided to each age group for Fiscal Years 08-09 and 09-10. The proportion [183] by age group was then applied to expenditure data [184] in order to arrive at Full Service Partnership expenditures per age group. [185] This process was followed for all counties in order to maintain uniformity and in order to rely upon county-informed breakouts. [186]

The definition of annual expenditure average for each age group, in each fiscal year, in each county is:

$$\frac{\textbf{Aggregated FSP Service Expenditures per Age Group}}{\textbf{Standardized Client Years per Age Group}}$$

"*Aggregated FSP Service"* refers to the summary of all services operating within a county for each particular age group. This is the manner in which expenditures are rolled up and reported on the FSP RER worksheet.

"Expenditures" for a given fiscal year is defined as the aggregate expenditure for all FSP services provided to an age group, determined using the most recent revision of the Revenue and Expenditure (RER) report for a given fiscal year that has been prepared by the county, in combination with information from that county via web survey that provides a determination as to how FSP service expenditures should be broken out into age groups.

FSP service expenditures may be adjusted by housing that may be reported outside the FSP program expenditure sheets in some counties (e.g., on the CSS General System Development worksheet).

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[183] A small number of counties did not answer all questions, or did not answer for all age groups. For these counties, discrepancies were noted on the county-specific matrix (e.g., no expenditure data for a specific age group, but there are data for that age group in the DCR). For counties that did not answer the question about the age breakout for supportive services, the original budget/Annual Update age breakouts were used to estimate the proportion of expenditures by age group (applied to the Revenue and Expenditure Report data). If the original budget/Annual Update numbers were unclear/not specific, the actual numbers served by age group in each fiscal year were used as the basis for developing proportions by age group. The county's FSP expenditures by age group were then submitted to the county for review and input.

[184] Counties were asked to report on the amount expended per age group on supportive services provided to Full Service Partnership participants by age group. Some counties accounted for all of their FSP expenditures using this method (verified by matching back to their Revenue and Expenditure Report). Other counties accounted for only a proportion. For counties that did not account for all Full Service Partnership line-item expenditures in the web survey, the expenditures used for calculations defaulted to the Full Service Partnership line items in the county's Revenue and Expenditure Report.

[185] Not all counties serve all age groups, but the calculation for these counties was simple. For example, County X indicates that nothing was spent on Older Adults during FY 08-09. Zero proportion of expenditures is multiplied by the total FSP expenditure amount, for a total cost of $0. The value $0 is reflected on County X's FSP Expenditures and Cost Offsets Excel spreadsheet.

[186] There are a few anomalies – counties that show no expenditures on a certain age group yet show DCR data for this age group. In cases such as these, the anomaly is noted on the county worksheet, and counties were provided another opportunity for review and feedback following distribution of revised FSP Expenditures and Cost Offsets Excel worksheets on July 27, 2012.

"*Standardized Client Years"* is defined as the number of full FSP client years of service provided across all programs regardless of numbers of clients entering or exiting, or the individual duration of services. This particular aspect of the calculation is discussed in more detail below (see *7. Standardized Client Years* for further discussion).

6. Expenditure Calculations

The proposed data sources and procedures to meet the basic requirement of calculating the annualized number of clients and FSP program expenditures per age group are described in this section.

Numerator

The numerator is the Aggregated FSP Expenditure per Age Group. The data source was the Revenue and Expenditure Report, cumulative across FSP services. Expenditures were limited to those reported for FSP clients, using funding sources identified in the RER program summaries combined with information provided by counties via the web survey.

Denominator

The denominator is the Standardized Client Years per Age Group. The data source was FSP clients as identified in the State Department of Mental Health's Data Collection and Reporting System (DCR). The DCR was briefly introduced in Chapter II, *Involvement of Key Stakeholders*. The following description comes from Phase II Deliverable 2.E (draft, p. 8):

> The DCR system houses data for clients who are served through Full Service Partnership programs. Data from assessments – the Partnership Assessment Form (PAF), Key Event Tracking (KET) and Quarterly Assessment (3M) – are collected for clients in specific age categories.
>
> - The PAF reflects client history and baseline information, including client education and/or employment, housing situation, legal issues, health status and substance use.
> - The KET reflects any important changes in the client's life such as housing, education and/or employment and legal issues during Full Service Partnership.
> - The 3M is used to collect information quarterly on key areas such as education, health status, substance use and legal issues.

See *Standardized Client Years* for further discussion.

Fiscal Years Analyzed

The two fiscal years (FY) selected for analysis were FY 08-09 and FY 09-10. These two years were selected as a result of available data in the DCR. Without DCR data for most of the counties, Standardized Client Years per Age Group cannot be calculated (see Exhibit IV.1 for a summary of the available data sources and their limitations). Data from earlier fiscal years are incomplete across California counties. [187] The rationale for the focus on later implementation years is that no statewide assumptions can be made in earlier fiscal years.

[187] See *Mental Health Services Act Evaluation: Compiling Community Services and Supports (CSS) Data to Produce All Priority Indicators Contract Deliverable 2F, Phase II*, available for download at:
http://www.mhsoac.ca.gov/Evaluations/docs/CompilingCSSDataToProducePriorityIndicators_2FPhase2_121812.pdf

Start-up expenditures [188] are not included in the formula [189] because for many counties, particularly larger counties, start-up occurred in years earlier than FY 08-09, when DCR data is not available for the majority of counties. The focus of our study were two fiscal years in which good quality RER and DCR data were available for the majority of counties. FY 07-08 is not included in the formula, or in this report, because DCR data are not available for most of the counties.

7. Standardized Client Years

Standardized Client Years represent a numeric value in the denominator of our annual expenditure-per-FSP-client rate calculation. Calculations are completed separately for each fiscal year and for each age group. The definition of this numeric value, and the rationale for this definition, are provided in this chapter.

Standardized Client Years are calculated through the following process (***again, note that this process is run separately for each fiscal year and for each age group***):

- Identified all clients who were enrolled in FSP during the target fiscal year;
- Calculated the number of days that each was enrolled during the target fiscal year (*see the discussion below, as there are nuances to this particular calculation*);
- Summed number of days enrolled across all enrollees;
- Divided by 365 (the number of days in a year).

Enrollment is defined as the period of time that an individual is enrolled in and eligible for services in FSP. This definition is not dependent on being enrolled in any specific service or on receiving any specific support. The main assumption is that enrolled participants are receiving FSP services to meet their varying needs at a level that will help them achieve individualized service plan goals. These targets and the services received by individual participants will appropriately vary. Enrollment appropriate to this definition was initially defined by the partnership start and partnership status change dates entered in the Partnership Assessment Form (PAF).[190]

As has been the case with most MHSA data, however, realities of the data resulted in alternative strategies, described below under *Challenges*.

The primary concept that we measured was the *number of persons served during each fiscal year* (by age group). Of course, not everyone is enrolled continuously over an entire year. There are four participation patterns that needed to be accounted for in our analysis (*refer back to the second bullet point, above*). We present them in each fiscal year, in order to avoid any confusion that calculations may have somehow been different for different fiscal years:

Fiscal Year 08-09:

- Start date in FY 08-09 and end date in FY 08-09 [191]

[188] In addition, external shocks to system (realignment and the end of AB 2034) occurred in earlier fiscal years, calling into question the ability to replicate the cost calculation into other fiscal years had earlier years been included in the analysis. Counties also provided evidence that RER instructions changed significantly from FY 06-07 to FY 07-08. Documentation may be provided, upon request.

[189] Start-up for each individual county is defined as the first two years of FSP expenditures. Therefore, the actual fiscal years vary, depending upon the county.

[190] The Partnership Status Change date on the PAF is updated automatically when there is a change in status on the KET or 3M.

[191] We account for FSP clients with multiple start and stop dates within the same fiscal year.

- Start date before FY 08-09 and end date in FY 08-09
- Start date in FY 08-09 and no end date (still enrolled)
- Start date before FY 08-09 and no end date (still enrolled)

Fiscal Year 09-10:

- Start date in FY 09-10 and end date in FY 09-10 [192]
- Start date before FY 09-10 and end date in FY 09-10
- Start date in FY 09-10 and no end date (still enrolled)
- Start date before FY 09-10 and no end date (still enrolled)

Examples are provided on the following page to illustrate the number of days calculated in each of the four categories.

Here are some examples to illustrate start and end dates within the same fiscal year (FY 08-09):

Sample Client	Start Date in FY 08-09	End Date in FY 08-09	# of Days
001	7/3/2008	1/30/2009	211
002	7/17/2008	5/1/2009	288
003	8/26/2008	12/15/2008	111

Here are some examples that show start dates before the fiscal year and end dates within the fiscal year (FY 08-09):

Sample Client	Start Date before FY 08-09	End Date in FY 08-09	# of Days
066	7/3/2007	7/15/2008	378
067	7/17/2007	7/15/2008	364
068	8/26/2007	8/22/2008	362

Below is an example of a start date within the fiscal year but no end date. (FY 09-10). When there is no end date, the end date defaults to the end of the most recent fiscal year (June 30, 2012).

Sample Client	Start Date in FY 09-10	No End Date	# of Days
100	7/1/2009	6/30/2012	1,094

Below is one example of a start date before the fiscal year, but no end date (FY 09-10). When there is no end date, the end date defaults to the end of the most recent fiscal year (June 30, 2012).

Sample Client	Start Date before FY 09-10	No End Date	# of Days
045	7/1/2008	6/30/2012	1,459

The examples above (*number of days)* are building blocks used in calculation of Standardized Client Years. [193] However, they do not represent the completion of the calculations, because they have not yet been tallied across

[192] For consistency's sake, we account for FSP clients with multiple start and stop dates within the same fiscal year.

[193] Keep in mind that the primary concept is to measure the number of persons served by FSP in each fiscal year. This is very different from the number of new enrollees each fiscal year. In Chapter V, we explain why this difference is so important when we discuss cost offsets.

all FSP clients in the age group in the fiscal year of interest, nor has the divisor of 365 been applied. The tables merely illustrate how calculations as described under the **bolded bullet point** are completed:

- Identified all clients who were enrolled in FSP during the target fiscal year;
- **Calculated the number of days that each was enrolled during the target fiscal year;**
- Summed number of days enrolled across all enrollees;
- Divided by 365 (the number of days in a year).

For the purpose of discussing FSP expenditures by age group, we are interested in the number of FSP clients within each age group who received services from the FSP program in each fiscal year. It doesn't matter if some of these people are the same people in FY 08-09 and FY 09-10. The important consideration is, *did they receive FSP services in that fiscal year?* If the answer is *yes*, then we counted them. How we counted and arrived at our final calculations is described below.

Challenges

Through discussion with several counties after review of their draft FSP Expenditures and Cost Offsets Excel worksheets, one issue that came to the fore was the variation across counties in number of FSP clients served in each fiscal year. This feedback prompted further investigation of FSP clients identified as being served in each FY.

In reviewing DCR data for FY 08-09 and 09-10, we found cases with (*the terms in quotation marks represent actual DCR variable names*):

- Identical start ("*PartnershipDate*") and change ("*DatePartnershipStatusChange*") dates
    - Many cases are enrollees prior to FY 09-10 – which suggests that this anomaly is not due to clients recently entered into the system,
- A "*PartnershipStatus*" of "1" (indicating an active partner), and
- KET assessment dates subsequent to their "*DatePartnershipStatusChange*" – meaning that KET data were entered *after* the date of partnership status change, and somehow the DCR did not recognize that KET data were entered and update the DatePartnershipStatusChange variable (see example case below).

Subsequent KET assessments (KETs occurring *after* the original PAF) suggest that a change date equal to the start date ("*DatePartnershipStatusChange*") for such cases is ***not accurate.*** The inaccuracy of these end dates prevented them from being included in our initial counts.[194]

The names across the table headers represent DCR variable names. The data shown below were extracted from an actual case out of the DCR to provide an example. The global identification number has been removed to protect confidentiality.

GlobalID	PartnershipStatus	PartnershipDate	DatePartnershipStatusChange	AssessmentDate_KET	AssessmentDate_KET	AssessmentDate_KET
xxxxxx	1	16-Mar-2007	16-Mar-2007	01-Oct-2009	16-Oct-2009	03-Dec-2009

In brief, the example above suggests that an FSP participant was discharged on the same day he or she was enrolled, yet the KET date clearly tells us that this is clearly not the case. This problem with the DCR system prevented cases such as these from being identified initially, given that our initial assumption was to use:

[194] A separate issue that should be followed up with DMH is why DatePartnershipStatusChange is not automatically updated when KET is entered for these cases. This system glitch is troubling.

- "*PartnershipDate*" for the date of enrollment; and
- "*DatePartnershipStatusChange*" for the date of FSP conclusion

Other, related, problems were identified in the DCR data:

- Start ("*PartnershipDate*") and change ("*DatePartnershipStatusChange*") dates prior to the FY being considered,
- "*PartnershipStatus*" of "1" (indicating an active partner) or "3" (indicating a re-enrollee), and
- Subsequent KET assessments (in the current fiscal year – yet the CHANGE date is in a fiscal year *prior to the fiscal years we are analyzing*)

Again, these subsequent KET assessments (*dates **in the fiscal years** we are interested in analyzing*) suggest that change dates ("*DatePartnershipStatusChange*") *in prior fiscal years, outside of our analysis range, **are not accurate**.* Thus, the inaccuracy of these change dates prevented them from being included in our initial counts.

The intricacies of the DCR system identified above also impact calculations of days of service. Given the anomalies uncovered, we came to the determination that the "*PartnershipDate,*" "*DatePartnershipStatusChange*" and "*PartnershipStatus*" fields are required for accurate estimation of the number of service days each partner received during a given FY. Decision rules regarding interpretation of the values contained in these data fields are required so that days of service can be consistently calculated for all FSP clients served in a given FY. Decision rules for FSP clients based upon their partnership status are outlined below:

- For **active partners** (i.e., *"PartnershipStatus"* = 1 or 3), days of service were counted from FSP start date (*"PartnershipDate"*) or the beginning of the given FY (July 1 for Partnership Dates prior to the FY) to the end of the FY (June 30).
    - Some active partners show identical "*PartnershipDate*" and "*DatePartnershipStatusChange*" and have KET assessments on the same date, within a given FY. For such cases, days of service were counted from "*PartnershipDate*" to the end of the given FY, as there is no indication of service end.
    - Active partners with "*PartnershipDate*" and "*DatePartnershipStatusChange*" prior to the FY, some with subsequent KET assessments, other without subsequent assessments. Such cases were credited with a full FY of service (365 days), as these partners are active and have no indication of service end.
- For **non-active partners** (i.e., *PartnershipStatus* = 0) with "*DatePartnershipStatusChange*" within the FY or subsequent to the end of the given FY, days of service were counted from start date ("*PartnershipDate*") or the beginning of the given FY (July 1 for partnership dates prior to the FY) to a "*DatePartnershipStatusChange*" within the FY or the end of the FY (June 30).
    - Some non-active partners also show identical "*PartnershipDate*" and "*DatePartnershipStatusChange,*" and have KET assessments on the same date, within a given FY. These cases were defaulted to a single day of service.

Specific decision rules regarding the values (i.e., dates and partnership status) contained in these data files were required to produce accurate counts of service days for all FSP clients served in a given FY. These decision rules were outlined in order to provide the most conservative counts of service days per FSP client.

b. Per-Person Annualized Cost Average by Age Group

Almost all of the counties are included in this Final Report (N = 50; 86.2%).[195] The populations of counties (numbers of persons residing in the counties according to census data) represented in this report comprise almost all of the State of California (95.0%).[196]

The calculations shown in Tables IV.1 and IV.3 below use *annualized expenditure per FSP client year* as a standard metric for service expenditures across counties. The calculation of *annualized expenditure per FSP client* involved the following steps (recall from earlier in the chapter):

- Identified all clients who were enrolled in FSP during the target fiscal year;
- Calculated the number of days that each was enrolled during the target fiscal year;
- Summed number of days enrolled across all enrollees;
- Divided by 365.

This calculation produces the number of FSP client years of service for the year. Service expenditures for the year divided by FSP client years of service for the year equals the *Annualized Expenditure per FSP client year* for that fiscal year. Here is the formula for annualized expenditure per FSP:

$$\frac{\textbf{FSP Expenditures Total}}{\textbf{Number of Client Years}}$$

This quotient was calculated within client age categories, for each fiscal year (FY 08-09 and FY 09-10).[197]

Table IV.1

Full Service Partnership Services: Numbers Served by Age Group
(Fiscal Year 08-09)

	Number Served			Sum of Days			Number of Client Years		
Age Group	**Total**	**Low**	**High**	**Total**	**Low**	**High**	**Total**	**Low**	**High**
CYF	4,296	9	2,223	983,187	1,369	580,545	2,693.7	3.8	1,590.5
TAY	4,593	25	1,257	1,064,015	6,517	333,383	2,915.1	17.9	913.4
Adults	9,640	37	4,176	2,404,022	9,000	1,148,521	6,586.4	24.7	3,146.6
Older Adults	1,388	1	373	344,979	7	98,535	945.1	<.1	270.0

[195] Calculations were successfully completed for three additional counties that did not complete the web survey. These three counties aligned their CSS Plans, Annual Updates, and Revenue and Expenditure Reports in a consistent manner and broke out FSP programs into discrete age groups. Alignment of plan, update, RER, plus breakout of discrete FSP programs into distinct age groups was a rarity among the counties, but this should not be viewed as a "negative" on the part of the counties, because the original intent of the RER had nothing to do with breakouts by age group. Inclusion of the three additional counties brings the total number of participants to 50 (86.2%).

Note that one county was in start-up during the entire study period, and was therefore removed from the total N for purpose of calculation. Therefore, the N = 58 (rather than 59). The link to census data is:
http://www.census.gov/popest/research/eval-estimates/eval-est2010.html

[196] See Appendix D for a list of county participants.

[197] Small counties have been pooled for the purpose of presenting data in Tables IV.1 and IV.2.

Table IV.2
Full Service Partnership Services: Annualized Expenditure per-Client by Age Group
(Fiscal Year 08-09)

Age Group	Annualized Expenditure per- FSP Client			Daily Expenditure per-FSP Client			FSP Service Expenditure Total		
	Average	Low	High	Average	Low	High	Total	Low	High
CYF	$21,931.29	$3,759.79	$72,054.99	$60.09	$10.30	$197.41	$59,076,305.79	$86,851.14	$27,863,702.00
TAY	$18,553.96	$6,753.44	$92,470.00	$50.83	$18.50	$253.34	$54,086,655.41	$352,529.77	$21,698,945.60
Adults	$26,737.23	$6,815.18	$64,318.98	$73.25	$18.67	$176.22	$176,102,066.30	$254,338.00	$81,947,433.40
Older Adults	$22,303.26	$14,593.75	$112,063.43	$61.10	$41.06	$307.02	$21,078,807.79	$64,976.01	$5,720,395.00

Annualized expenditure is the total expenditure for an FSP client over a year (12 months).

Tables IV.3 and IV.4 display the same type of information about numbers served and expenditures as in Tables IV.1 and IV.2, but for Fiscal Year 09-10.[198]

Table IV.3
Full Service Partnership Services: Numbers Served by Age Group
(Fiscal Year 09-10)

Age Group	Number Served			Sum of Days			Number of Client Years		
	Total	Low	High	Total	Low	High	Total	Low	High
CYF	6,348	5	3,165	1,444,331	780	820,496	3,957.1	2.1	2,247.9
TAY	6,623	36	1,702	1,619,816	8,444	477,643	4,437.9	23.1	1,308.6
Adults	12,733	39	4,541	3,456,407	3,630	1,357,732	9,469.6	9.9	3,719.8
Older Adults	1,764	1	406	480,383	365	124,740	1,316.1	1	341.8

Table IV.4
Full Service Partnership Services: Annualized Expenditure per-Client by Age Group
(Fiscal Year 09-10)

Age Group	Annualized Expenditure per- FSP Client			Daily Expenditure per-FSP Client			FSP Service Expenditure Total		
	Average	Low	High	Average	Low	High	Total	Low	High
CYF	$17,481.79	$3,933.95	$54,663.66	$47.90	$10.78	$149.76	$69,177,192.53	$82,641.89	$40,675,886.00
TAY	$13,741.40	$5,584.11	$54,570.82	$37.65	$15.30	$129.51	$60,982,974.12	$287,581.77	$22,853,881.40
Adults	$23,626.13	$5,066.28	$55,558.11	$64.73	$13.88	$261.41	$223,729,986.45	$320,491.79	$113,766,228.00
Older Adults	$18,785.22	$9,538.23	$162,106.00	$51.47	$26.13	$141.99	$24,723,227.99	$43,553.21	$6,412,015.00

The age breakouts reveal that FSP services for Adults comprise most of the expenditures in both fiscal years.

c. Contextual Factors – Relationship to Expenditures

FY 09-10 was chosen to conduct additional analyses in order to examine the potential relationship between contextual factors and expenditures. FY 09-10 was selected because the number of counties included in the analysis was larger than for FY 08-09. When comparing per-FSP expenditures between FY 08-09 and FY 09-10, wide variation was observed for some small counties. When variation exceeded a pre-established threshold, FY 08-09 was excluded from report analyses. However, setting aside a number of small counties should not be viewed as a poor reflection of FSP implementation by these counties. Indeed, the likely reason for variation is documented in the California Code of Regulations:

[198] Small counties have been pooled for the purpose of presenting data in Tables IV.3 and IV.4.

> Small counties proposing to provide full service partnership programs/services in Fiscal Year 2008-09 must only identify the population to be served and the amount of funding to be reserved for this purpose. [199]

See Appendix D, which lists the small counties for which FY 08-09 was not included in the FY 08-09 analysis.

Table IV.5 displays information about possible factors of service populations, the kinds of services provided by counties, and characteristics of the counties themselves that may be related to differences between the average county FSP expenditure per client. These county-level factors were subsequently analyzed using multivariate statistics in order to determine the relationship to the average FSP expenditure in each county. Hence, the purpose was comparison of county-level variables (not individual-level variables).

Table IV.5
Description of County-Level Variables -
Total FSP Average Daily Expenditure per County

	CYF Average Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Counties	The number of counties for which we have daily expenditure data. An average for each age group was calculated, in order to produce a county-level variable, to compare with other county-level variables.			
Number of Service Options	The total number of FSP activities/strategies offered in the county (see Appendix B).			
Evidence-Based Services	The total number of FSP evidence-based activities/strategies offered in the county (see Appendix B).			
Peer Services	The total number of FSP activities/strategies led by peers in the county (see Appendix B).			
Penetration Rate	The Penetration Rate is a ratio estimate of the prevalence of serious mental illness/serious emotional disturbance in California (developed by Dr. Charles Holzer from the University of Texas).			
Population Density	Population density was created for each county using county population and square miles of the county.			
Percent County Population Insured	Percent of county population with health insurance.			
Poverty Level	2009 Poverty and Median Income Estimates – Counties; Source: U.S. Census Bureau, Small Area Estimates Branch			
Unemployment Rate	The California Employment Development Department (CA EDD) defines "*Unemployment Rate*" as the number of unemployed divided by the labor force then multiplied by 100.			
Rate of Foreclosures	Rate of foreclosures in the county.			

A series of multivariate analyses were conducted in order to determine the relationship between average expenditure by age group and county factors. Analyses completed included:

- Regression
- General Linear Model
- ANOVA
- MANCOVA

[199] California Code of Regulation (Barclays Official), Title 9, Division 1, Chapter 14, Mental Health Services Act. Article 6. Community Services and Supports, 3650. Community Services and Supports Component of the Three-Year Program and Expenditure Plan.

Scroll down to (6) (F) for the discussion of small counties in FY 08-09. The instructions continue…Prior to implementation, detailed work plans, time frames, budgets and staffing requirements for each Full Service Partnership program to ensure review and requirements will be required for each Full Service Partnership program to ensure review and approval by the Department and the Oversight and Accountability Commission (OAC), as appropriate.

None of the multivariate models yielded meaningful results, resulting in return to examining the correlational matrices produced during the process of conducting multivariate analyses. The results are displayed in Table IV.6. Table IV.6 provides information on possible factors of service populations, the kinds of services provided by counties, and characteristics of the counties themselves that may be related to differences between the average county FSP expenditure per age group. Table IV.6 displays correlations between select characteristics of services provided (number of service options offered in the county, number of evidence-based options, number of peer led services offered); and characteristics of the county environment (penetration rate,[200] population density,[201] percent of county population with health insurance,[202] poverty level,[203] county unemployment rate,[204] and rate of foreclosures).[205]

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[200] UCLA updated the penetration rate for each county to reflect the relevant year and applicable census data, per the following notation from DMH:

> When considering these penetration rates, it is important to remember that they are based on census data combined with estimates that were calculated by applying prediction weights. Due to the way census data is updated, the data in the tables should be viewed as "best available" and should be checked and/verified at the local level where numbers do not appear to represent actual local population data.

http://www.dmh.ca.gov/Statistics_and_Data_Analysis/RetentionPenetrationData.asp

Please refer to the following report for further information about the penetration rate and its use:
Mental Health Services Act Evaluation: Compiling Community Services and Supports (CSS) Data to Produce All Priority Indicators; Contract Deliverable 2F, Phase II

http://www.mhsoac.ca.gov/Evaluations/docs/CompilingCSSDataToProducePriorityIndicators_2FPhase2_121812.pdf

See pages 42 – 45.

Cost Offsets can be developed only for counties that submit data to the State Department of Mental Health's Full Service Partnership (FSP) Data Collection and Reporting System (DCR). All of the variables used in the FSP Cost Offset analysis are contained in the DCR. UCLA does not have access to non-DCR data from counties.

[201] Population density was created for each county using county population and square miles of the county. The population of each county was taken from the following archival dataset:

http://www.census.gov/popest/research/eval-estimates/eval-est2010.html

Population Estimates, 2010, U.S. Census Bureau, Population Division.

The square miles of each county was taken from the following archival dataset:
http://quickfacts.census.gov/qfd/states/06000.html U.S. Census Bureau State and County Quick Facts.

The areas analyzed for savings are very similar to those analyzed in the evaluation of AB 2034 efforts, which included inpatient psychiatric hospitalization and incarceration. Emergency room use was also evaluated but was limited to psychiatric rather than physical health.

California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author.

[202] *Percentage Insured* - 2003, 2005, 2007, and 2009: California Health Interview Survey:

http://www.chis.ucla.edu/

The areas analyzed for savings are very similar to those analyzed in the evaluation of AB 2034 efforts, which included inpatient psychiatric hospitalization and incarceration. Emergency room use was also evaluated but was limited to psychiatric rather than physical health.

California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author.

[203] *Poverty Rate:* Table 1: 2009 Poverty and Median Income Estimates – Counties (released in December 2010); Source: U.S. Census Bureau, Small Area Estimates Branch

http://www.census.gov/did/www/saipe/data/statecounty/data/2009.html

[204] *Unemployment* - California Unemployment Rate (Average – Not Seasonally Adjusted)

http://www.labormarketinfo.edd.ca.gov/?pageid=164

The California Employment Development Department (CA EDD) defines "*Unemployment Rate*" as the number of unemployed divided by the labor force then multiplied by 100 (http://www.labormarketinfo.edd.ca.gov/?pageid=1006). For sake of consistency in data presentation, UCLA calculated unemployment rates using the same method as CA EDD.

[205] The foreclosure rate is defined as the number of foreclosed properties as a percent of households. HousingLink (2007). *Fixing the foreclosure system: The trouble with foreclosure data*. Retrieved August 23, 2011, from

http://www.minneapolisfed.org/news_events/events/community/100407/foreclosuredata_obrien.pdf

California Number of Foreclosures (Annual) were obtained from Realty Trac, and then foreclosure rates calculated using the methodology described above.

Table IV.6.
Correlations (Pearson's) of FSP Services, and County Characteristics to
Total FSP Average Daily Expenditures for Counties
(Fiscal Year 09-10)

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Counties	*34*	*39*	*42*	*31*
Number of Service Options	-0.120	-0.262	-0.011	-0.290
Evidence-Based Services	-0.102	-0.171	0.133	-0.225
Peer Services	-0.070	0.034	0.050	-0.230
Penetration Rate	-0.070	-0.140	0.006	-0.156
Population Density	0.180	-0.177	0.077	-0.078
Percent County Population Insured	0.420*	0.095	-0.067	-0.164
Poverty Level	-0.373*	-0.208	-0.212	0.066
Unemployment Rate	-0.310	0.115	-0.173	0.057
Rate of Foreclosures	-0.179	0.144	-0.264	0.191

**Correlation is significant at the .05 level*

The results displayed in Table IV.6 highlight the:

1. relatively small degree to which these factors are associated with the average FSP daily expenditure across counties,
2. presence of only one factor that shows a consistent direction of association with the average daily FSP expenditure across all age groups (number of service options – negative correlation for each age group),

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Service Options	-0.120	-0.262	-0.011	-0.290

and

3. degree to which other factors related to the average FSP daily expenditure differ across participant age groups (e.g., unemployment rate is negatively correlated with CYF and Adult Daily cost and positively correlated with TAY and Older Adult Daily cost. In addition, the correlation is moderate for CYF, and very small for the other age groups).

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Unemployment Rate	-0.310	0.115	-0.173	0.057

With respect to the relatively small magnitude of association as measured by these coefficients, two associations reach a level of statistical significance, but only for CYF expenditures (percent of county population insured and poverty level). Please note that correlation does not equal causation – association merely means that two variables are related to one another, not that one variable changed the other variable in any way:

- **Percent of Population Insured**: Higher percentages of children with insurance were correlated (at .05 significance level) with higher average daily FSP expenditure for CYF.
- **Poverty Level:** Lower percentages of families with children living in poverty were correlated (at .05 significance level) with higher average daily expenditure for CYF.

In order to examine select characteristics of FSP participants (gender, race/ethnicity),[206] additional correlational analyses were conducted. An explanation of the variables used in analysis is provided below, in Table IV.7, and the results are displayed in Table IV.8.

Table IV.7.
Description of FSP-Level Variables -
Total FSP Average Daily Expenditure

	CYF Average Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Gender	The proportion of Caucasian FSPs (by age group) in each county.			
Race	The proportion of FSPs (by age group) in each county that are Male.			

Table IV.8.
Correlations (Spearman's Rank Order) of FSP Characteristics to
FSP Average Daily Expenditures
(Fiscal Year 09-10)

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Number of Counties	*34*	*39*	*42*	*31*
Gender	-0.175	-0.066	0.116	-0.437*
Race	0.458*	0.404*	0.150	0.126

**Correlation is significant at the .05 level (2-tailed)*

The results displayed in Table IV.8 highlight the:

1. relatively moderate degree to which FSP characteristics are associated with the average FSP daily expenditure for some age groups across counties (compared to the county characteristic variables),

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Gender	-0.175	-0.066	0.116	**-0.437*** ←
Race	**0.458*** ↑	**0.404*** ↑	0.150	0.126

2. presence of one factor that shows a consistent direction of association with the average daily FSP expenditure across all age groups (race – proportion of White/Caucasian FSPs – positive correlation for each age group), and

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Race	0.458*	0.404*	0.150	0.126

[206] In order to create a county-level variable, the percentage of the FSP population in each county that is Caucasian was calculated. Individual-level data could not be entered into the model analyzing county-level data. For gender, the percentage of the FSP population that was male was calculated.

3. the degree to which gender is largely unrelated to the average FSP daily expenditure, with the exception of Older Adults.

	CYF Daily Expenditure	TAY Daily Expenditure	Adult Daily Expenditure	Older Adult Daily Expenditure
Gender	-0.175	-0.066	0.116	**-0.437*** ←

With respect to the relatively moderate magnitude of association as measured by these coefficients, three associations reach a level of statistical significance. Please note that correlation does not equal causation – association merely means that two variables are related to one another, not that one variable changed the other variable in any way:

- **Race/Ethnicity**: Higher percentages of white (Caucasian) FSPs served by a county were associated with higher average daily FSP expenditure for CYF and TAY (at .05 significance level).
- **Gender**: Higher percentages of male (FSPs) served by a county were associated with lower average daily FSP expenditure for Older Adults (at .05 significance level).
    - However, when the results are depicted graphically (see Exhibit IV.3), most counties tend to cluster in the center of the distribution (mid-range of expenditures, serving a population that ranges from 30 to 50% male). Therefore, the data display does not tell a clear story, and this result is inconclusive (by way of comparison, examine Exhibits IV.1 and IV.2, in which a clearer relationship can be drawn between CYF and TAY daily expenditures and the proportion of white/Caucasians served).

These results are depicted graphically in Exhibits IV.1 through IV.3.

Exhibit IV.1.
Relationship of CYF Race/Ethnicity to
FSP Average Daily Expenditures
(Fiscal Year 09-10)

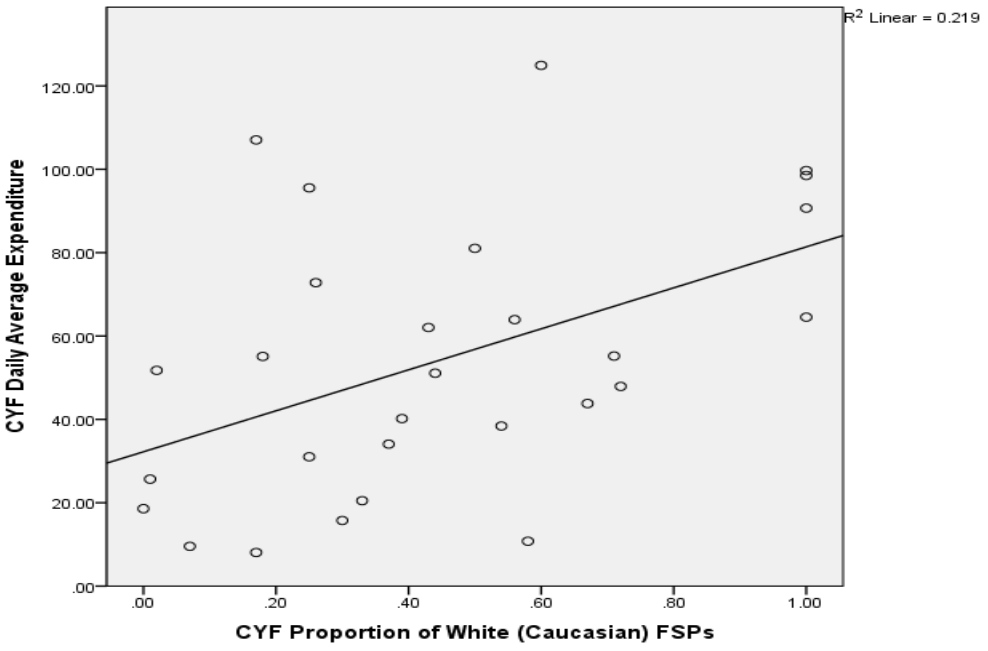


Exhibit IV.2.
Relationship of TAY Race/Ethnicity to
FSP Average Daily Expenditures
(Fiscal Year 09-10)

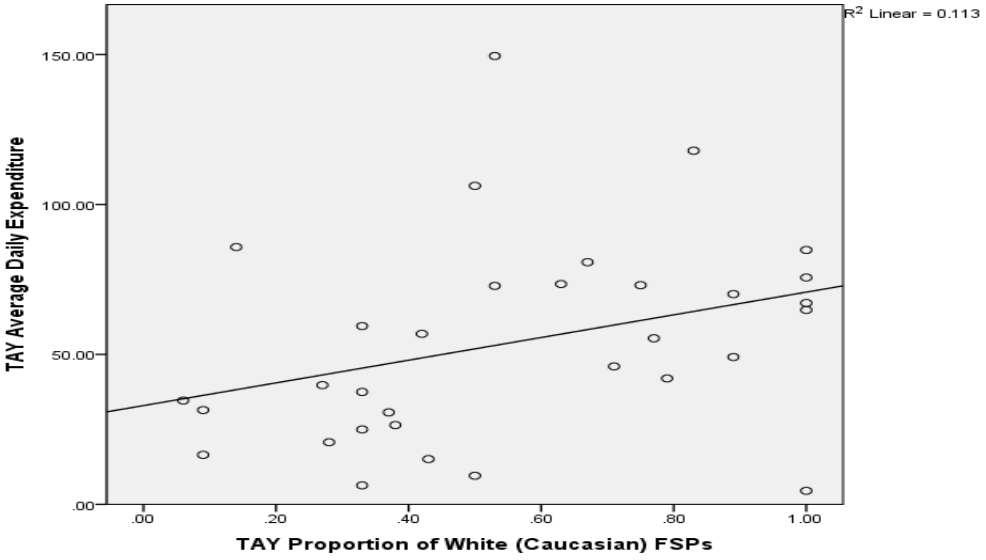
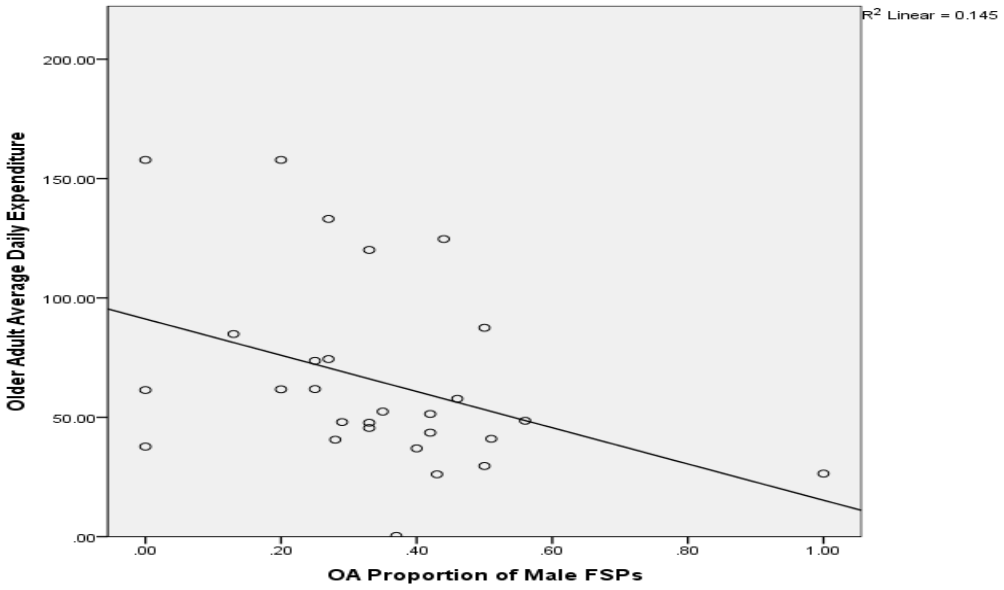


Exhibit IV.3.
Relationship of Older Adult Gender to
FSP Average Daily Expenditures
(Fiscal Year 09-10)



d. Summary

FSP expenditures per client and cost offsets vary substantially across counties. The age breakouts reveal that although FSP services for Adults comprise most of the expenditures, when participant and county characteristics were analyzed in order to determine potential association with FSP expenditures, relationships are evident for only CYF, TAY and Older Adults. The following correlations resulted (moderate range):

- **Percent of Population Insured**: Higher percentages of children with insurance were correlated with higher average daily FSP expenditure for CYF.
- **Poverty Level:** Lower percentages of families with children living in poverty were correlated with higher average daily expenditure for CYF.
- **Race/Ethnicity**: Higher percentages of white (Caucasian) FSPs served by a county were associated with higher average daily FSP expenditures for CYF and TAY

The moderate relationships between FSP expenditures and county/participant characteristics suggest other factors relate to variation between counties. Additional investigation is needed in order to determine county, service and client characteristics that may impact FSP expenditures. For example, clinical diagnosis has been shown in a previous study to be an important covariate, and encounter data at the unit of service level a critical outcome variable (particularly use of outpatient services). [207] Neither variable was available for analysis given the need to rely largely upon available data sources for the current study. Fidelity to implementation of evidence-based practices and other quality of service indicators merit further investigation, given the logical relationship to outcomes.

[207] Gilmer, T.P.; Stefancic, A.; Ettner, S.L.; Manning, W.G.; & Tsemberis, S. (2010). Effect of Full Service Partnerships on homelessness, use and costs of mental health services, and quality of life among adults with serious mental illness. *Archives of General Psychiatry*, *67*, 645-652.

V. Cost-Offsets for Full Service Partnership Programs

One focus of this chapter is *"whether costs incurred in providing mental health services … are offset by reduced costs elsewhere in the health care system*." [208] By virtue of the data collected at the time of intake and follow-up, we have been able to expand exploration of cost reduction beyond the health care system, to include incarceration.

The report, Full Service Partnerships: California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness, outlines whether amounts expended providing Full Service Partnership services are offset by reduced costs in: [209]

Physical Health Services

- Acute Care Inpatient Hospitalization (number of days) [210]
- Skilled Nursing (Non-Psychiatric) (number of days)
- Emergency Room Visits (number of times)

Psychiatric Care

- Inpatient Psychiatric Hospitalization (number of days)
- Long-Term Care (number of days) [211]
- Skilled Nursing (Psychiatric) (number of days)

Criminal Justice Involvement

- Arrests (number of times)
- Division of Juvenile Justice (number of days)
- Juvenile Hall/Camp (number of days)
- Jail (number of days)
- Prison (number of days)

Findings in each of these areas are presented, each age group, in that report, and will not be repeated here. The detailed report summarizing statewide findings may be found at:

http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

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[208] Fells, T. (1999). Is there a cost offset to psychotherapy? *Journal of Psychotherapy Practice and Research, 8,* 243, 247. Quote taken from p. 243.

[209] Cost Offsets can be developed only for counties that submit data to the State Department of Mental Health's Full Service Partnership (FSP) Data Collection and Reporting System (DCR). All of the variables used in the FSP Cost Offset analysis are contained in the DCR. UCLA does not have access to non-DCR data from counties.

The areas analyzed for savings are very similar to those analyzed in the evaluation of AB 2034 efforts, which included inpatient psychiatric hospitalization and incarceration. Emergency room use was also evaluated but was limited to psychiatric rather than physical health.

California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author.

We recognize that there are fixed costs associated with each of the offset categories analyzed. The important point is that participants in the Full Service Partnership program are less likely to be the ones occupying the inpatient psychiatric bed, jail cell, etc. as a result of intervention. Obviously, the hospital bed and jail cell are still available for someone else's use, as it were.

[210] As defined in response to physical health needs – we examine psychiatric hospitalization as a separate category of offsets.

[211] Institution for Mental Diseases/Mental Health Rehabilitation Centers. The KET does not distinguish between whether an FSP client's long-term care was reimbursed at the MHRC rate or the IMD rate. Therefore, an average of the IMD and MHRC rates for the facilities contracted by each county was used as the basis for calculating the cost applied to the number of days in long-term care.

Rather, the total amount of costs offset and reasons for variation by county are the focus of this particular chapter.

a. Methodology

There are four formulas that are completed when calculating cost offsets (regardless of whether we are calculating offsets for physical health, psychiatric care or criminal justice). In this section (methodology), each calculation is introduced and *briefly* described below.[212] This section is followed by a subsection devoted to cost offset calculation, in which an in-depth, step-by-step explanation is provided. Please refer to the numbered section (corresponding to the steps as outlined below) for further explanation of the calculations.

The four calculations are:

1. Out of the larger group of FSP clients **new enrollees** (FY 08-09 and FY 09-10) are selected.
2. For the **pre-intake period** (the 12 months prior to enrolling in the FSP), in each of the offset categories –
   - Per client:
     - Number of days per year/number of events per year (**annual)**
   - Annual per-client number of days/events is different from annualized per-client number of days/events, below, under #3.
3. For the **post-enrollment period** (the 12 months after intake in the FSP), in each of the offset categories –
   - Per client:
     - **Annualized** number of days/number of events
   - Annualized per-client number of days/number of events is different from annual per-client number of days/events, above, under #2.
   - Annualized per-client number of days/number of events involves application of an **annualization multiplier**, in order to arrive at the annualized number of days/number of events per client. The annualization multiplier is very different from a statewide rate (which is a dollar amount and is described under #4).
4. A **statewide rate** (e.g., cost of incarcerating an individual for one day) is applied to arrive at cost offset (and then applied to number of days of acute hospitalization, etc.)
   - After the number of days is multiplied by the rate:
     - For the pre-intake period (the 12 months prior to enrolling in the FSP), the **annual** per-client cost offset is produced.
     - For the post-enrollment period (the 12 months after intake in the FSP), the **annualized** per-client cost offset is produced.

In this section of the report, an important distinction is drawn between expenditures and costs. In the previous chapter, the focus was on expenditures (amount expended for FSP services). In this chapter, the focus is on costs. In particular:

[212] This report, succinct introduction to the Methodology section is provided for organizational purposes only (*in order to provide an orientation for the reader*), and will be insufficient to provide complete understanding of the methodology. Please refer to the report: *Full Service Partnerships: California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness*:
http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf
in which step-by-step instructions are provided for calculation of each cost offset area.

Physical Health Services

- Acute Care Inpatient Hospitalization – the ***daily cost of hospitalization (non-psychiatric)***

The Office of Statewide Health Planning and Development (OSHPD) is the source for the rates applied by county for acute inpatient care.[213] Among the counties that participated, a "*statewide*" rate was determined by calculating an average of the rates for counties that participated in this round of the study.[214] The statewide average cost for FY 08-09 is:

Inpatient Hospitalization - Physical	
Statewide Average FY 08-09	$2,546.01

The statewide rate for FY 09-10 is:

Inpatient Hospitalization - Physical	
Statewide Average FY 09-10	$2,676.36

The OSHPD data set[215] includes all hospitals in each county. If a county has more than one hospital providing acute hospitalization services, an average within the county was first calculated in order to arrive at a rate for each county. Below is the definition of acute care hospitalization, as provided by OSHPD.

For the purpose of this report, the daily cost in each county was used in analysis. The example above is provided for illustrative purposes only, in order to highlight the difference between expenditures (an amount expended) and costs (the standard cost to provide a service – in this case, a day of inpatient hospitalization)

Other physical health services analyzed for cost savings included:

- Skilled Nursing (Non-Psychiatric) – the ***daily cost of non-psychiatric skilled nursing facility care***
- Emergency Room Visits – ***cost per emergency room visit***

See the statewide report referenced in Chapter IV for the statewide average cost in each fiscal year, and the data sources.

Psychiatric Care

- Inpatient Psychiatric Hospitalization -- the ***daily cost of inpatient psychiatric hospitalization***
- Long-Term Care – the ***daily cost of long-term care***
- Skilled Nursing (Psychiatric) ***daily cost of psychiatric skilled nursing facility care***

Criminal Justice Involvement

- Arrests (number of times) – ***cost per arrest***
- Division of Juvenile Justice (number of days) – ***daily cost in a Division of Juvenile Justice facility***
- Juvenile Hall/Camp (number of days) -- ***daily cost in Juvenile Hall/Camp***
- Jail (number of days) -- ***daily cost in Jail***

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[213] http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/Hospital_Utilization.html

[214] See Appendix D for a list of counties that participated in the study.

[215] Available for download from its website, http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/Hospital_Utilization.html

- Prison (number of days) -- ***daily cost in Prison***

The methodology for each aspect of these new calculations is described in this section.

1. New Enrollees

All cost-offset analyses were limited to new enrollees in each fiscal year. First we explain what a new enrollee is, and then we will justify why limiting the analysis to new enrollees was imperative.

This *new* aspect of methodology for calculating cost offsets is actually part of a calculation introduced in Chapter III. Our new enrollees are the bolded groups. Recall the following:

Fiscal Year 08-09

- **Start date in FY 08-09 and end date in FY 08-09** [216]
- Start date before FY 08-09 and end date in FY 08-09
- **Start date in FY 08-09 and no end date (still enrolled)**
- Start date before FY 08-09 and no end date (still enrolled)

Fiscal Year 09-10

- **Start date in FY 09-10 and end date in FY 09-10** [217]
- Start date before FY 09-10 and end date in FY 09-10
- **Start date in FY 09-10 and no end date (still enrolled)**
- Start date before FY 09-10 and no end date (still enrolled)

A new enrollee is identified thus:

- FY 08-09: Enrollment date between July 1, 2008, and June 30, 2009
- FY 09-10: Enrollment date between July 1, 2009, and June 30, 2010

Any FSP client who did not meet these enrollment-date criteria was excluded from the cost-offset analysis.

- Enrollment date was the sole determining factor as to which fiscal year an FSP client was placed into for purpose of analysis.
- An FSP client appeared in only one data set (no one appeared in both fiscal years, despite the fact that an FSP client who enrolled in FY 08-09 might still be enrolled in FY 09-10). [218]

It was critical to limit the cost-offset analysis to new enrollees in order to compare the proverbial apples to apples. In brief:

- At intake, days of hospitalization and incarceration are queried for the 12 months prior to enrollment.
- In order to provide a valid comparison (apples to apples), the post-comparison period had to be limited to the 12 months after enrollment.

[216] We account for FSP clients with multiple start and stop dates within the same fiscal year.
[217] For consistency's sake, we account for FSP clients with multiple start and stop dates within the same fiscal year.
[218] Length of participation is handled through the annualization calculation. Refer back to the discussion of methods in Chapter IV.

Table V.1 displays the number of FSP clients (new enrollees only) in FY 08-09. FY 08-09 new enrollees are a subset of the larger group of clients displayed in Chapter IV.

Table V.1
Full Service Partnership Services: New Enrollees by Age Group
(Fiscal Year 08-09)

	Number of New Enrollees FY 08-09
CYF	2,164
TAY	2,327
Adults	4,315
Older Adults	582
Total	**9,388**

Table V.2 displays the number of FSP clients (new enrollees only) in FY 09-10. FY 09-10 new enrollees are a subset of the larger group of clients displayed in Chapter IV.

Table V.2
Full Service Partnership Services: New Enrollees by Age Group
(Fiscal Year 09-10)

	Number of New Enrollees FY 09-10
CYF	3,101
TAY	2,977
Adults	4,702
Older Adults	645
Total	**11,425**

2. Pre-Intake Period – 12 Months Prior to Enrolling in FSP: Annual per-Client Offset-Category Cost

This concept is actually straightforward. Because the Partnership Assessment Form (PAF) contains questions for FSP clients about number of days hospitalized, etc., in the 12 months prior to enrollment, there is no need to apply an annualization formula. The period of time in question is already 12 months.

PAF data are collected by individual counties, and then entered into the State of California Department of Mental Health's Data Collection and Reporting System (DCR). UCLA received the DCR data (updated through June 30, 2011) through the contract to conduct the Statewide Evaluation of the Mental Health Services Act.

Therefore, *annual per-client offset-category cost* is calculated for the baseline (pre-enrollment) through the following steps:

- Identified all clients who enrolled in FSP during the target fiscal year. [219]
- Through intake interview data (PAF), identified the number of days of hospitalization, incarceration, etc., for each client. [220]

[219] See above for an explanation of how new enrollees were identified.
[220] See the report, http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf for details.

- In the year prior to enrollment, summed across all clients, multiplied by the daily negotiated cost for the county [221] and divided by the number of clients enrolled in FSP during the target year. [222]

This quotient is the *annual per-client (offset-category) cost* for the baseline, the year prior to enrollment.

3. *Post-Intake Period – 12 Months Post-Enrollment into FSP: Annualized per-Client Offset-Category Cost*

The manner in which annualization is calculated has already been described (Chapter IV), and the methodology is no different when applied to cost offsets. [223]

Annualized per-client (offset-category) cost is calculated for the period of time each client is in FSP following enrollment. This post-enrollment offset-category cost is calculated through the following steps:

- Identified all clients who enrolled in FSP during the target fiscal year (*new enrollees*), and the number of those who had been hospitalized, incarcerated, etc. [224]
- Through Key Event Tracking data, identified: [225]
    - The number of days enrolled.
    - Days Enrolled is then divided into 365 (the number of days in a year), illustrated in the formula below:

$$\frac{365}{\text{Days Enrolled}}$$

    - This quotient is the *annualization multiplier for each new enrollee*.
    - The annualization multiplier is applied to all new enrollees, whether or not they were hospitalized, incarcerated, etc. [226]
- Identified:
    - The number of days of hospitalization, incarceration, etc., for each client post-enrollment, and
    - Multiplied by each client's *annualization multiplier*.
        - An example annualization multiplier from a randomly selected Adult FSP client = .62

[221] See the report, http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf for details.
[222] Total number of new enrollees – see Tables V.1 and V.2.
[223] Annualization of the service period is the same methodology used by the California Department of Mental Health when evaluating and reporting on AB 2034 outcomes.
California Department of Mental Health (2007). (unpublished) *Report to the Legislature on the effectiveness of integrated services for homeless adults with serious mental illness*. Sacramento, CA: Author.
[224] See the report, http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf for each cost-offset category and the exact DCR variables that were used in the calculations.
[225] See Chapter IV for an introduction to the KET, variables used when calculating number of days of FSP participation, and each cost-offset category in this chapter for the specific cost-offset variables used in analysis.
[226] See Chapter IV for how days of enrollment were calculated.

- New enrollees with zero (0) days (*of hospitalization, for example*) drop out of the analysis at this point, and we are left with those new enrollees with a number of days in the offset category of interest.
  - This product is the *annualized number of days of (cost-offset category*) for each new enrollee (e.g., *who was hospitalized or incarcerated during the 12-month follow-up period*).
    - The 12-month follow-up period is completely tailored to the individual FSP client, and entirely based upon the date of intake into the FSP. For example:

Sample Client	Intake (Start Date in FY 08-09)	12-Month Follow- Up Period (Follow-Up goes into FY 09-10)	# of Days
251	12/1/2008	11/30/2009	365

Note that this particular FSP client is a *new enrollee in FY 08-09* based on the intake date of 12/1/2008. This FSP client is not "*double-counted*" as a new enrollee in FY 09-10 because there is no intake date in FY 09-10. The data shown in the table above illustrate the following about the 12-month follow-up period:

- The 12-month follow-up period is tied to the individual FSP client;
- The 12-month clock starts ticking with the individual FSP client's date of intake; and
- The 12-month follow-up period can cross fiscal years for an individual client.

- Summed annualized days of (cost-offset category) across all new enrollees. [227]
  - Multiplied by the daily negotiated cost of psychiatric hospitalization, incarceration, etc., for the county, [228] and
  - Divided by the number of new enrollees in FSP during the target year. [229]

This quotient is the *annualized per-client hospitalization, incarceration, etc., cost* for the post-enrollment period.

Again, note that we limited the analyses to **new enrollees** in order to have a match with the 12-month pre-enrollment period, in essence, to compare the 12 months after enrollment with the 12-month period prior to enrollment (PAF question asks about the 12 months prior to enrollment when asking about hospitalization, etc.).

This chapter summarizes the program costs for clients who initially enrolled in FSP during the target fiscal year, the amount of offsets, and the percentage of one-year program costs that have been saved in annualized physical health care, psychiatric care and criminal justice through FSP participation by these new enrollees.

b. Costs Offset by Age Group

This report identifies the cost savings that society realizes because these services have been provided. Of course, these savings are not the sole justification of expenditures; the primary purpose of the law is to improve services to mentally ill citizens most in need of assistance. However, it is a critical role of accountable and transparent public service to demonstrate the impacts of this needed and individually compassionate service on public concerns. Therefore, this analysis summarizes the savings that are incurred in a limited number of public services for the recipients of FSP services. To state this differently, this analysis assesses the costs to society with respect to

[227] Note that FSP clients who do not have any days of hospitalization, incarceration, etc., have dropped out of the analysis at this point.
[228] See each specific offset category in this chapter for where these rates were obtained and the manner in which they were applied.
[229] Total number of new enrollees – see Tables V.1 and V.2.

health services that are incurred by persons facing severe mental health challenges, and public costs incurred because of criminal justice system involvement attributable to these challenges.

It is important to note that this is a conservative analysis. Expenditures that are not clearly attributable to FSP clients have not been included, and cost savings estimates have been indexed to conservative estimates of cost. As is widely recognized, estimating the costs of savings attributable to service is complex – from both an expenditure estimate and a benefit estimate point of view. At each step in these estimation processes, we have consciously adopted a conservative approach.

See Chapter IV for discussion of the age groups and their definitions, and the number of counties included in this report. Table V.4 below represents service expenditures and costs saved for Fiscal Year (FY) 08-09 new FSP enrollees. [230] Cost offsets are the total differential between the cost of mental and physical health services, and criminal justice involvement costs in the year prior to entry into FSP services and the average 12-month cost after entry into services. [231] This is the amount of public money in these areas that was saved after these clients had access to service.

Table V.3
Full Service Partnership Services: Number of New Enrollees by Age Group
(Fiscal Year 08-09)

	Number of New Enrollees FY 08-09			Sum of Days		
Age Group	**Total**	**Low**	**High**	**Total**	**Low**	**High**
CYF	2,164	9	2,223	340,323	1,369	580,545
TAY	2,327	25	1,257	371,250	6,517	333,383
Adults	4,315	37	4,176	690,298	9,000	1,148,521
Older Adults	582	1	373	91,220	7	98,535

Table V.4
Full Service Partnership Services: Expenditures and Cost Offsets by Age Group
(Fiscal Year 08-09)

	Total Expenditures for FY 08-09 New Enrollees			Total Cost Offset FY 08-09		
Age Group	**Total**	**Low**	**High**	**Total**	**Low**	**High**
CYF	$20,450,009.07	$3,759.79	$72,054.99	$2,428,313.16	$86,851.14	$27,863,702.00
TAY	$18,870,637.50	$6,753.44	$92,470.00	$22,437,417.44	$352,529.77	$21,698,945.60
Adults	$50,564,328.50	$6,815.18	$64,318.98	$41,509,329.01	$254,338.00	$81,947,433.40
Older Adults	$5,573,542.00	$14,593.75	$112,063.43	$5,421,665.55	$64,976.01	$5,720,395.00

[230] See Appendix G for a display of the data shown in this table, by county. Again, note that small counties have been pooled for the purpose of display in Appendix G.

[231] Please refer to the report for a complete discussion of cost offsets: *Full Service Partnerships: California's Investment to Support Children and Transition-Age Youth with Serious Emotional Disturbance and Adults and Older Adults with Severe Mental Illness*: http://mhsoac.ca.gov/Meetings/docs/Meetings/2012/Nov/OAC_111512_Tab4_MHSA_CostOffset_Report_FSP.pdf

Tables V.5 and V.6 display the same type of new enrollee, cost and cost offset information as in Tables V.3 and V.4, but for Fiscal Year 09-10. [232]

Table V.5
Full Service Partnership Services: Number of New Enrollees by Age Group
(Fiscal Year 09-10)

Age Group	Number of New Enrollees FY 08-09			Sum of Days		
	Total	Low	High	Total	Low	High
CYF	3,101	9	2,223	454,605	1,369	580,545
TAY	2,977	25	1,257	496,190	6,517	333,383
Adults	4,702	37	4,176	868,415	9,000	1,148,521
Older Adults	645	1	373	103,459	7	98,535

Table V.6
Full Service Partnership Services: Expenditures and Cost Offsets by Age Group
(Fiscal Year 09-10)

Age Group	Total Expenditures for FY 09-10 New Enrollees			Total Cost Offset FY 09-10		
	Total	Low	High	Total	Low	High
CYF	$21,775,579.50	$3,759.79	$72,054.99	$2,262,842.11	$86,851.14	$27,863,702.00
TAY	$18,681,553.50	$6,753.44	$92,470.00	$27,501,007.94	$352,529.77	$21,698,945.60
Adults	$56,212,502.95	$6,815.18	$64,318.98	$56,120,875.82	$254,338.00	$81,947,433.40
Older Adults	$5,325,034.73	$14,593.75	$112,063.43	$3,857,684.17	$64,976.01	$5,720,395.00

The findings displayed in Tables V.3 through V .6 support a number of conclusions:

- Cost savings over the two-year period are consistent in relative magnitude across age groups. In particular, TAY consumers experienced the greatest cost-related benefits of service. Transition-Age Youth are at high risk for criminal justice and crisis management services, and FSP participation apparently has a significant impact on consequences for this age group.
- Cost offsets are dramatically lower for the CYF age group. This may reflect the more preventive orientation of services for children, which is not as clearly reflected in the short time line of the measured offsets. Savings for children may appear over a much longer period of time, outside the currently funded study period. In addition, the "*consequence*" nature of the offset categories examined (e.g., criminal justice involvement) is more relevant to older age cohorts. Effects of service are sensitive to life maturation, indicators of service success and the time horizon of measured effects.
- Overall, across all age groups, 75 and 88 percent of FSP expenditures for new enrollees in FY 08-09 and FY 09-10 (respectively) are offset by savings to the public mental health, health and justice systems. Although the argument of cost savings should never be advanced as the primary reason for providing public mental health services, results of this magnitude make a strong case for the wisdom of investing public resources in programs such as the Full Service Partnership.

In summary, this analysis of cost offsets in larger social costs attributable to participation in the FSP program documents positive results. Results for the TAY and Adult age groups, which account for the great majority of clients, are particularly positive. These results are quite favorable when compared with AB 2034, a program charged with serving homeless (or at risk of becoming homeless) TAY and Adults with severe mental illness – the final analysis reported a percentage of costs offset of 49.8 percent.

[232] See Appendix G for a display of the data shown in this table, by county. Again, note that small counties have been pooled for the purpose of display in Appendix G.

c. Contextual Factors – Relationship to Cost Offsets

In addition, an analysis of county contextual variables that may be related to cost offsets was conducted. This analysis (and the multivariate analyses preceding the results shown below) parallels the analysis of average daily FSP expenditures (Table IV.6). Variable definitions and analysis technique are the same as those described in that section. The dependent variable is total cost offset as a percentage of total expenditures. Table V.7 displays associations, as measured by Pearson's correlation coefficients, between the individual, service, and county environment characteristics identified above, and average cost offset for each county.

The pattern of association for cost offsets is quite different than that identified for expenditures. Table V.7 demonstrates the following patterns in association across the age groups.

Table V.7.
Correlations (Pearson's) of FSP Services and County Characteristics to
Average Cost Offsets for Counties
(Fiscal Year 09-10)

**Correlation is significant at the .05 level (2-tailed)*	**CYF Average Cost Offset**	**TAY Average Cost Offset**	**Adult Average Cost Offset**	**Older Adult Average Cost Offset**
Number of Counties	*34*	*39*	*42*	*31*
Number of Service Options	-0.382*	0.048	-0.011	0.293
Evidence-Based Services	-0.248	0.025	-0.113	0.233
Peer Services	-0.314	-0.077	-0.070	0.100
Penetration Rate	-0.057	-0.351*	0.263	0.292
Population Density	0.103	-0.251	-0.238	-0.236
Percent County Population Insured	0.196	0.095	-0.212	-0.301
Poverty Level	-0.150	-0.208	0.176	0.168
Unemployment Rate	-0.133	0.115	-0.100	-0.030
Rate of Foreclosures	0.083	0.088	0.005	0.019

The results displayed in Table V.7 highlight the:

1. relatively small degree to which these factors are associated with the FSP average cost offset across counties,
2. presence of only one factor that shows a consistent direction of association with the FSP average cost offset across all age groups (rate of foreclosures – positive correlation with each age group), and

	CYF Average Cost Offset	**TAY Average Cost Offset**	**Adult Average Cost Offset**	**Older Adult Average Cost Offset**
Rate of Foreclosures	0.083	0.088	0.005	0.019

3. degree to which other factors related to the FSP cost offsets differ across participant age groups (e.g., poverty level is negatively correlated with CYF and TAY average cost offset and positively correlated with Adult and Older Adult average cost offset).

Please note that correlation does not equal causation – association merely means that two variables are related to one another, not that one variable changed the other variable in any way:

- **Number of Service Options** is associated with offsets for CYF.

- The greater number of services offered, the lower average cost offset among CYF (significant at .05 level). In plain language, offering more services for CYF is not associated with greater cost offsets in the near term. However, it is not possible to know the impact after one year – CYF cost offsets may not be likely to appear until many years later, perhaps even into adolescence or young adulthood.

- **Penetration Rate** (ratio estimate of the prevalence of serious mental illness/serious emotional disturbance) is associated with offsets in all but the CYF group, but varies across age groups.
  - For TAY participants, a higher penetration rate is related (at .05 significance level) to lower average cost offset in counties.

In order to examine select characteristics of FSP participants (gender, race/ethnicity), additional correlational analyses were conducted. The results are displayed in Table V.8.

Table V.8.
Correlations (Spearman's Rank Order) of FSP Characteristics to
FSP Average Cost Offset
(Fiscal Year 09-10)

	CYF Total Cost Offset	TAY Total Cost Offset	Adult Total Cost Offset	Older Adult Total Cost Offset
Number of Counties	*34*	*39*	*42*	*31*
Gender	0.298	0.217	0.166	-0.097
Race	-0.025	-0.054	0.142	-0.037

**Correlation is significant at the .05 level (2-tailed)*

The results displayed in Table V.8 highlight the relatively small degree to which FSP characteristics are associated with the FSP average cost offset across counties. The descriptive analyses examining participant characteristics suggests that cost offsets are less related to these factors than is daily service expenditure.

d. Summary

Cost savings over the two-year period are consistent in relative magnitude across age groups. In particular, TAY consumers experienced the greatest cost-related benefits of service. Transition-Age Youth are at high risk for criminal justice and crisis management services, and FSP participation apparently has a significant impact on consequences for this age group.

- **Penetration Rate** (ratio estimate of the prevalence of serious mental illness/serious emotional disturbance) is associated with lower average cost offset for TAY across counties.

Cost offsets are dramatically lower for the CYF age group. This may reflect the more preventive orientation of services for children, which is not as clearly reflected in the short time line of the measured offsets. Savings for children may appear over a much longer period of time, outside the currently funded study period. In addition, the "*consequence*" nature of the offset categories examined (e.g., criminal justice involvement) is more relevant to older age cohorts. Effects of service are sensitive to life maturation, indicators of service success and the time horizon of measured effects.

- **Number of Service Options** is associated with offsets for CYF, in that the greater number of services offered, the lower average cost offset among CYF. In plain language, offering more services for CYF is not associated with greater cost offsets in the near term. However, it is not possible to know the impact after

one year – CYF cost offsets may not be likely to appear until many years later, perhaps even into adolescence or young adulthood.

Overall, across all age groups, 75 and 88 percent of FSP costs for new enrollees in FY 08-09 and FY 09-10 (respectively) are offset by savings to the public mental health, health and justice systems. The moderate nature of the correlations between contextual factors and cost offsets suggests that other factors are responsible for variation between counties. Additional areas meriting investigation as potential reasons for variation between county were proposed in Chapter IV, and are equally valid to pursue when analyzing cost offsets, but require the investment of additional (new) data collection.

Appendix A

Evaluation Advisory Group Members

Evaluation Advisory Group Members

1. Maria Iyog-O'Malley, Former FSP Services Manager, San Francisco Department of Mental Health/UCLA Expert Consultant
2. Debbie Innes-Gomberg, Los Angeles County Department of Mental Health
3. Christina Cordova, Orange County Health Authority
4. Keith Erselius, San Bernardino Behavioral Health
5. Ruben Gasco, San Bernardino Behavioral Health
6. Keith Haigh, San Bernardino Behavioral Health
7. Brian Yates, American University, UCLA Expert Consultant
8. Todd Gilmer, University of San Diego, UCLA Expert Consultant
9. Steve Hahn-Smith, Contra Costa Health Services Department
10. Diane Prentiss, San Francisco Department of Public Health

Appendix B

FSP
Services by County

Table B.1
Counties Reporting Planned Implementation of Full Service Partnership Services to CYF
(N=54)

County	Outreach & Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Alameda		✓	✓			
Alpine	✓	✓	✓	✓	✓	
Amador	✓	✓	✓	✓		✓
Berkeley City	✓	✓		✓	✓	✓
Butte	✓	✓	✓			
Calaveras	✓	✓	✓	✓	✓	
Colusa		✓	✓		✓	✓
Contra Costa	✓	✓	✓	✓	✓	✓
Del Norte	✓		✓			
El Dorado		✓	✓		✓	✓
Fresno	✓	✓	✓	✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓
Humboldt*						
Imperial		✓	✓	✓	✓	✓
Inyo*						
Kern	✓	✓	✓	✓	✓	✓
Kings	✓	✓	✓		✓	
Lake	✓	✓	✓	✓	✓	✓
Lassen	✓	✓			✓	
Los Angeles	✓	✓	✓		✓	✓
Madera	✓			✓		
Marin		✓	✓	✓	✓	✓
Mariposa			✓		✓	
Mendocino	✓	✓	✓	✓		
Merced	✓	✓		✓	✓	✓
Modoc	✓	✓	✓	✓		
Mono*						
Monterey	✓	✓	✓	✓	✓	
Napa	✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓	✓
Orange	✓	✓	✓			
Placer	✓	✓	✓	✓	✓	
Plumas	✓	✓	✓	✓	✓	✓

County	Outreach & Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Riverside	✓	✓	✓	✓	✓	✓
Sacramento	✓	✓		✓	✓	
San Benito	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓	✓
San Diego	✓	✓	✓	✓	✓	✓
San Francisco	✓	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓	✓
San Luis Obispo	✓	✓	✓		✓	✓
San Mateo	✓	✓	✓	✓	✓	✓
Santa Barbara		✓	✓			
Santa Clara	✓	✓	✓	✓		
Santa Cruz*						
Shasta	✓	✓	✓	✓	✓	✓
Sierra		✓	✓		✓	
Siskiyou	✓		✓	✓		
Solano	✓	✓	✓	✓		
Sonoma	✓	✓			✓	✓
Stanislaus		✓	✓	✓	✓	
Sutter-Yuba	✓	✓	✓	✓	✓	✓
Tehama*						
Tri-City	✓		✓	✓	✓	
Trinity						
Tulare	✓		✓	✓	✓	✓
Tuolumne	✓	✓	✓	✓	✓	✓
Ventura	✓	✓	✓	✓	✓	✓
Yolo	✓	✓	✓			
TOTAL	**44**	**47**	**47**	**38**	**40**	**30**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.2
Counties Reporting Planned Implementation of Full Service Partnership Services to CYF
(N=54)

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Cultural Competence	Community Collaboration	Integrated Service Experience
Alameda				✓					
Alpine	✓	✓	✓	✓	✓	✓	✓	✓	✓
Amador		✓		✓		✓	✓	✓	
Berkeley City			✓	✓	✓	✓	✓	✓	✓
Butte		✓		✓		✓	✓	✓	
Calaveras	✓	✓	✓	✓	✓	✓	✓	✓	✓
Colusa	✓	✓	✓	✓	✓	✓	✓	✓	
Contra Costa	✓	✓	✓	✓	✓	✓	✓	✓	✓
Del Norte	✓	✓		✓	✓	✓	✓	✓	✓
El Dorado		✓	✓	✓	✓	✓	✓	✓	✓
Fresno	✓	✓	✓	✓	✓	✓	✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓	✓	✓	✓
Humboldt*									
Imperial	✓	✓	✓	✓	✓	✓	✓	✓	✓
Inyo*									
Kern	✓	✓	✓	✓	✓	✓	✓	✓	✓
Kings		✓	✓	✓			✓	✓	
Lake	✓	✓	✓	✓	✓	✓	✓	✓	✓
Lassen		✓		✓	✓	✓	✓	✓	✓
Los Angeles	✓	✓	✓	✓	✓	✓	✓	✓	✓
Madera	✓	✓	✓	✓	✓	✓	✓		✓
Marin	✓	✓	✓	✓	✓	✓	✓	✓	✓
Mariposa		✓	✓	✓			✓	✓	✓
Mendocino				✓			✓	✓	
Merced	✓	✓	✓	✓			✓	✓	✓
Modoc	✓	✓	✓	✓		✓	✓	✓	✓
Mono*									
Monterey	✓	✓	✓	✓	✓	✓	✓	✓	✓
Napa	✓	✓	✓	✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓	✓	✓	✓	✓
Orange	✓	✓	✓	✓	✓	✓	✓	✓	✓
Placer	✓	✓		✓	✓	✓	✓	✓	
Plumas	✓			✓			✓	✓	✓

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Cultural Competence	Community Collaboration	Integrated Service Experience
Riverside	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sacramento	✓	✓	✓	✓		✓	✓	✓	✓
San Benito	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Diego	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Francisco	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Joaquin		✓	✓	✓		✓	✓	✓	✓
San Luis Obispo	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara		✓	✓	✓			✓		
Santa Clara			✓	✓		✓	✓	✓	✓
Santa Cruz*									
Shasta		✓	✓	✓	✓	✓	✓	✓	✓
Sierra		✓		✓	✓	✓	✓	✓	✓
Siskiyou	✓		✓	✓			✓	✓	✓
Solano	✓			✓		✓	✓		
Sonoma	✓	✓		✓	✓	✓	✓	✓	✓
Stanislaus	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓	✓	✓	✓	✓
Tehama*									
Tri-City		✓	✓	✓	✓	✓	✓	✓	✓
Trinity				✓					
Tulare		✓	✓	✓		✓	✓	✓	✓
Tuolumne	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ventura		✓	✓	✓	✓	✓	✓	✓	✓
Yolo		✓	✓	✓	✓	✓	✓	✓	✓
TOTAL	**35**	**46**	**42**	**54**	**37**	**45**	**52**	**49**	**44**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.3
Counties Reporting Planned Implementation of Full Service Partnership Services to CYF
(N=54)

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Alameda					✓
Alpine		✓		✓	✓
Amador	✓	✓		✓	
Berkeley City	✓	✓			
Butte	✓			✓	✓
Calaveras				✓	
Colusa		✓		✓	
Contra Costa	✓	✓	✓	✓	✓
Del Norte					
El Dorado					
Fresno	✓	✓		✓	✓
Glenn	✓	✓	✓	✓	✓
Humboldt*					
Imperial	✓	✓		✓	✓
Inyo*					
Kern	✓	✓	✓	✓	✓
Kings	✓			✓	✓
Lake			✓	✓	✓
Lassen					
Los Angeles	✓	✓	✓	✓	✓
Madera					✓
Marin	✓		✓		
Mariposa			✓	✓	✓
Mendocino				✓	
Merced			✓	✓	✓
Modoc				✓	
Mono*					
Monterey	✓	✓	✓	✓	
Napa	✓	✓		✓	✓
Nevada	✓		✓	✓	✓
Orange	✓	✓	✓	✓	✓
Placer					✓
Plumas			✓		✓

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Riverside	✓	✓	✓	✓	✓
Sacramento		✓		✓	✓
San Benito	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓
San Diego	✓	✓	✓		✓
San Francisco	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓
San Luis Obispo	✓		✓	✓	✓
San Mateo	✓	✓	✓	✓	✓
Santa Barbara				✓	
Santa Clara				✓	✓
Santa Cruz*					
Shasta			✓	✓	✓
Sierra				✓	
Siskiyou				✓	✓
Solano				✓	
Sonoma	✓	✓	✓		✓
Stanislaus	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓
Tehama*					
Tri-City				✓	
Trinity					
Tulare	✓		✓		✓
Tuolumne	✓	✓	✓	✓	✓
Ventura	✓	✓		✓	✓
Yolo	✓	✓		✓	
TOTAL	**39**	**27**	**26**	**41**	**35**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.4
Counties Reporting Planned Implementation of Full Service Partnership Services to CYF
(N=54)

County	Other Supports										
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment/ Education	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Parenting Education	Intimate Partner Violence Services
Alameda											
Alpine	✓	✓				✓	✓		✓	✓	
Amador											
Berkeley City					✓	✓	✓			✓	
Butte	✓						✓	✓	✓		✓
Calaveras						✓		✓	✓		
Colusa	✓					✓					
Contra Costa	✓	✓	✓			✓	✓		✓	✓	
Del Norte						✓					
El Dorado	✓				✓	✓		✓	✓	✓	
Fresno	✓				✓	✓	✓		✓	✓	
Glenn					✓	✓	✓	✓	✓	✓	
Humboldt*											
Imperial	✓		✓		✓	✓	✓	✓	✓	✓	
Inyo*											
Kern	✓	✓	✓		✓	✓	✓	✓	✓	✓	
Kings			✓						✓		
Lake	✓	✓	✓		✓	✓	✓	✓	✓	✓	
Lassen					✓						
Los Angeles	✓	✓	✓			✓		✓	✓	✓	✓
Madera	✓				✓		✓		✓	✓	
Marin											
Mariposa					✓	✓	✓				
Mendocino			✓								
Merced	✓				✓		✓		✓		
Modoc	✓										
Mono*									✓		
Monterey						✓			✓	✓	
Napa	✓	✓	✓		✓	✓	✓	✓	✓	✓	
Nevada	✓				✓					✓	
Orange			✓		✓	✓	✓		✓	✓	
Placer		✓									
Plumas	✓				✓	✓	✓	✓			
Riverside	✓	✓	✓		✓	✓	✓	✓	✓	✓	

County	Other Supports										
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment/ Education	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Parenting Education	Intimate Partner Violence Services
Sacramento						✓	✓	✓	✓	✓	
San Benito	✓				✓	✓		✓	✓	✓	
San Bernardino	✓		✓	✓	✓	✓	✓	✓	✓		
San Diego									✓		✓
San Francisco			✓		✓	✓	✓	✓	✓	✓	
San Joaquin	✓				✓	✓	✓		✓		
San Luis Obispo	✓						✓	✓	✓		
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
Santa Barbara											
Santa Clara										✓	
Santa Cruz*											
Shasta	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓
Sierra					✓						
Siskiyou	✓						✓		✓		
Solano	✓					✓	✓	✓			
Sonoma			✓			✓					
Stanislaus	✓				✓	✓			✓	✓	
Sutter-Yuba	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓
Tehama*											
Tri-City								✓			
Trinity											
Tulare					✓	✓	✓	✓	✓	✓	
Tuolumne	✓	✓	✓		✓	✓	✓	✓	✓	✓	
Ventura					✓		✓		✓	✓	
Yolo	✓				✓	✓	✓		✓		
TOTAL	**29**	**11**	**17**	**3**	**29**	**33**	**31**	**23**	**34**	**26**	**6**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.5
Counties Reporting Planned Implementation of Full Service Partnership Services – Peer Support – Specific Positions for Parent Peers
(N=54)

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Alameda	✓					✓	
Alpine					✓	✓	
Amador		✓					
Berkeley City	✓						
Butte	✓	✓				✓	
Calaveras	✓						
Colusa						✓	✓
Contra Costa	✓				✓		✓
Del Norte	✓						
El Dorado			✓		✓	✓	
Fresno			✓		✓		✓
Glenn	✓			✓		✓	
Humboldt*							
Imperial	✓					✓	
Inyo*							
Kern	✓				✓		
Kings	✓					✓	
Lake		✓	✓		✓	✓	
Lassen						✓	
Los Angeles					✓	✓	
Madera	✓				✓		
Marin	✓			✓		✓	✓
Mariposa	✓						
Mendocino		✓			✓		
Merced	✓		✓				
Modoc				✓		✓	
Mono*							
Monterey	✓		✓		✓	✓	✓
Napa	✓				✓		✓
Nevada		✓	✓		✓	✓	✓
Orange	✓				✓		
Placer	✓						✓
Plumas							

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Riverside	✓	✓	✓			✓	✓
Sacramento	✓	✓		✓	✓	✓	✓
San Benito	✓	✓	✓	✓		✓	✓
San Bernardino							✓
San Diego	✓		✓			✓	
San Francisco	✓				✓	✓	✓
San Joaquin	✓					✓	✓
San Luis Obispo	✓				✓	✓	
San Mateo	✓		✓		✓	✓	✓
Santa Barbara							
Santa Clara							
Santa Cruz*							
Shasta						✓	✓
Sierra	✓	✓					✓
Siskiyou						✓	✓
Solano	✓					✓	✓
Sonoma	✓						✓
Stanislaus	✓				✓	✓	✓
Sutter-Yuba	✓						
Tehama*							
Tri-City	✓					✓	✓
Trinity	✓				✓		
Tulare	✓					✓	✓
Tuolumne				✓	✓		
Ventura	✓		✓	✓	✓		✓
Yolo	✓						
TOTAL	**36**	**9**	**11**	**7**	**21**	**29**	**24**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.6
Counties Reporting Planned Implementation of Full Service Partnership Services –
Peer Support – Strategies where Peers are part of Team for Child
(N=54)

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Alameda															
Alpine			✓				✓	✓							
Amador			✓	✓											
Berkeley City															
Butte	✓	✓	✓	✓		✓	✓		✓				✓		
Calaveras						✓									
Colusa			✓	✓											
Contra Costa				✓		✓		✓							
Del Norte	✓			✓				✓							
El Dorado			✓			✓					✓				
Fresno			✓												
Glenn		✓	✓	✓		✓	✓	✓							
Humboldt*															
Imperial			✓	✓											
Inyo*															
Kern			✓												
Kings				✓			✓		✓						
Lake	✓	✓					✓		✓			✓	✓		
Lassen			✓												
Los Angeles															
Madera	✓			✓				✓							
Marin			✓			✓		✓							
Mariposa															
Mendocino	✓	✓	✓	✓									✓		
Merced			✓								✓				
Modoc	✓	✓	✓												
Mono*															
Monterey					✓	✓		✓							
Napa	✓	✓	✓		✓	✓	✓	✓			✓	✓	✓		

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Nevada			✓												
Orange															
Placer			✓												
Plumas				✓											
Riverside	✓	✓	✓	✓			✓								
Sacramento	✓		✓	✓									✓		
San Benito				✓		✓									
San Bernardino		✓													
San Diego			✓					✓							
San Francisco	✓		✓	✓											✓
San Joaquin		✓	✓					✓							
San Luis Obispo				✓		✓		✓							
San Mateo	✓		✓	✓	✓	✓		✓							
Santa Barbara															
Santa Clara															
Santa Cruz*															
Shasta	✓	✓	✓	✓		✓									
Sierra		✓	✓	✓			✓								
Siskiyou	✓														
Solano															
Sonoma			✓												
Stanislaus	✓	✓	✓			✓	✓						✓		
Sutter-Yuba						✓		✓							
Tehama*															
Tri-City															
Trinity						✓									
Tulare			✓	✓											
Tuolumne	✓		✓	✓		✓							✓		
Ventura			✓	✓			✓	✓							
Yolo	✓														
TOTAL	**16**	**12**	**30**	**22**	**3**	**16**	**10**	**14**	**3**	**0**	**3**	**2**	**7**	**0**	**1**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.7
Counties Reporting Planned Implementation of Full Service Partnership Services – Peer Support – Peers Augmenting the Overall Capacity of the Staff Team for Child
(N=54)

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Alameda	✓	✓							
Alpine	✓	✓		✓	✓	✓	✓		
Amador								✓	✓
Berkeley City				✓			✓		
Butte	✓	✓	✓	✓			✓	✓	
Calaveras									
Colusa	✓								
Contra Costa		✓	✓						
Del Norte	✓								
El Dorado	✓	✓		✓		✓			
Fresno									
Glenn	✓	✓		✓					
Humboldt*									
Imperial		✓				✓	✓		
Inyo*									
Kern	✓			✓			✓		
Kings	✓								
Lake				✓		✓		✓	
Lassen		✓		✓		✓	✓		
Los Angeles	✓			✓			✓		
Madera	✓	✓		✓			✓		
Marin	✓					✓			
Mariposa		✓							
Mendocino	✓	✓		✓			✓		
Merced	✓					✓			
Modoc		✓				✓			
Mono*									
Monterey	✓			✓	✓		✓		
Napa	✓	✓		✓		✓	✓		
Nevada	✓	✓	✓	✓			✓		
Orange						✓			
Placer									

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Plumas								✓	
Riverside	✓	✓	✓	✓		✓	✓		
Sacramento	✓	✓	✓	✓	✓	✓	✓		
San Benito	✓	✓		✓		✓			
San Bernardino									
San Diego		✓		✓		✓	✓		
San Francisco	✓	✓		✓		✓	✓		
San Joaquin	✓	✓		✓		✓			
San Luis Obispo	✓								
San Mateo	✓	✓		✓		✓	✓	✓	✓
Santa Barbara									
Santa Clara									
Santa Cruz*									
Shasta	✓	✓		✓	✓			✓	
Sierra	✓			✓			✓		
Siskiyou	✓								
Solano							✓		
Sonoma		✓				✓			
Stanislaus	✓	✓	✓	✓					
Sutter-Yuba								✓	
Tehama*									
Tri-City	✓	✓							
Trinity	✓	✓				✓			
Tulare	✓	✓		✓					
Tuolumne	✓	✓		✓					
Ventura						✓	✓		
Yolo		✓		✓					
TOTAL	**32**	**30**	**6**	**28**	**4**	**21**	**20**	**7**	**2**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.8
Counties Reporting Planned Implementation of Full Service Partnership Services to Children, Youth and Families: Housing
(N=54)

County	Housing
Alameda	
Alpine	✓
Amador	
Berkeley City	
Butte	✓
Calaveras	✓
Colusa	✓
Contra Costa	✓
Del Norte	
El Dorado	
Fresno	✓
Glenn	✓
Humboldt*	
Imperial	✓
Inyo*	
Kern	✓
Kings	✓
Lake	✓
Lassen	
Los Angeles	✓
Madera	✓
Marin	
Mariposa	
Mendocino	
Merced	✓
Modoc	✓
Mono*	
Monterey	
Napa	✓
Nevada	✓

County	Housing
Orange	✓
Placer	✓
Plumas	✓
Riverside	✓
Sacramento	✓
San Benito	✓
San Bernardino	✓
San Diego	
San Francisco	✓
San Joaquin	✓
San Luis Obispo	
San Mateo	✓
Santa Barbara	
Santa Clara	✓
Santa Cruz*	
Shasta	✓
Sierra	✓
Siskiyou	✓
Solano	✓
Sonoma	
Stanislaus	
Sutter-Yuba	✓
Tehama*	
Tri-City	✓
Trinity	
Tulare	✓
Tuolumne	✓
Ventura	
Yolo	✓
TOTAL	**37**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.9
Counties Reporting Planned Implementation of Full Service Partnership Services to CYF
(N=54)

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Alameda				
Alpine			✓	
Amador		✓		
Berkeley City				
Butte		✓		
Calaveras				✓
Colusa				
Contra Costa	✓	✓	✓	✓
Del Norte				
El Dorado			✓	
Fresno	✓	✓	✓	✓
Glenn	✓	✓	✓	✓
Humboldt*				
Imperial	✓	✓	✓	✓
Inyo*				
Kern	✓	✓	✓	
Kings				✓
Lake	✓			
Lassen				✓
Los Angeles	✓		✓	✓
Madera				
Marin				✓
Mariposa		✓		
Mendocino				
Merced	✓	✓		
Modoc	✓	✓	✓	
Mono*				
Monterey	✓	✓	✓	
Napa	✓		✓	✓
Nevada	✓	✓	✓	✓
Orange	✓		✓	✓
Placer				
Plumas			✓	
Riverside				✓

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Sacramento				✓
San Benito	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓
San Diego				
San Francisco	✓	✓	✓	✓
San Joaquin	✓			✓
San Luis Obispo	✓	✓	✓	
San Mateo	✓	✓	✓	✓
Santa Barbara	✓			
Santa Clara				✓
Santa Cruz*				
Shasta	✓	✓	✓	✓
Sierra		✓		
Siskiyou	✓			✓
Solano				
Sonoma				✓
Stanislaus	✓	✓	✓	
Sutter-Yuba			✓	✓
Tehama*				
Tri-City				✓
Trinity				
Tulare			✓	✓
Tuolumne	✓	✓	✓	✓
Ventura				✓
Yolo	✓	✓		
TOTAL	**25**	**22**	**24**	**28**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.10
Counties Reporting Planned Implementation of Full Service Partnership Services to CYF
(N=54)

County	Evidence-Based Practices									Other Practices		Coordination		Disch-arge
	Cognitive Behavioral Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeducation	Multisystemic Therapy	Therapeutic Foster Care	Parent-Child Interaction	Wraparound	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning /Criteria
Alameda									✓					
Alpine	✓								✓		✓			
Amador			✓						✓					✓
Berkeley City					✓			✓	✓		✓			
Butte														
Calaveras					✓				✓		✓		✓	
Colusa	✓	✓							✓					
Contra Costa									✓		✓			
Del Norte	✓	✓							✓					
El Dorado								✓	✓					
Fresno					✓			✓	✓				✓	
Glenn	✓	✓	✓		✓			✓	✓	✓	✓	✓	✓	✓
Humboldt*														
Imperial		✓		✓					✓				✓	
Inyo*														
Kern	✓	✓	✓	✓	✓				✓			✓	✓	✓
Kings							✓		✓		✓		✓	
Lake									✓	✓	✓	✓	✓	✓
Lassen													✓	
Los Angeles							✓		✓	✓	✓	✓		✓
Madera											✓	✓	✓	
Marin									✓					
Mariposa											✓		✓	
Mendocino									✓					
Merced		✓					✓	✓	✓				✓	
Modoc														
Mono*														
Monterey	✓										✓		✓	✓
Napa			✓		✓				✓			✓	✓	
Nevada		✓	✓					✓	✓			✓	✓	✓
Orange	✓				✓			✓	✓		✓		✓	✓
Placer									✓	✓	✓			
Plumas									✓					

County	Evidence-Based Practices									Other Practices		Coordination		Disch-arge
	Cognitive Behavioral Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeducation	Multisystemic Therapy	Therapeutic Foster Care	Parent-Child Interaction	Wraparound	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning /Criteria
Riverside	✓	✓	✓			✓	✓	✓	✓				✓	
Sacramento										✓	✓	✓	✓	
San Benito	✓	✓	✓		✓			✓	✓		✓	✓	✓	✓
San Bernardino	✓	✓	✓		✓				✓	✓	✓	✓	✓	✓
San Diego									✓				✓	
San Francisco				✓					✓		✓		✓	
San Joaquin								✓	✓		✓		✓	✓
San Luis Obispo		✓							✓					✓
San Mateo	✓	✓	✓		✓		✓		✓	✓	✓	✓	✓	✓
Santa Barbara														
Santa Clara					✓				✓				✓	
Santa Cruz*														
Shasta			✓						✓		✓	✓	✓	✓
Sierra									✓					
Siskiyou														
Solano														
Sonoma					✓		✓		✓			✓	✓	
Stanislaus			✓						✓			✓	✓	✓
Sutter-Yuba	✓				✓	✓		✓	✓		✓	✓	✓	
Tehama*														
Tri-City												✓	✓	
Trinity									✓				✓	
Tulare	✓										✓		✓	
Tuolumne	✓	✓	✓	✓	✓			✓			✓	✓	✓	✓
Ventura													✓	
Yolo														
TOTAL	**14**	**13**	**12**	**4**	**14**	**2**	**6**	**12**	**39**	**7**	**23**	**17**	**33**	**16**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

Table B.11
Counties Reporting Planned Implementation of Full Service Partnership Services to Transition-Age Youth
(N=59)

County	Outreach and Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Alameda	✓	✓	✓	✓	✓	✓
Alpine	✓	✓	✓	✓	✓	
Amador	✓	✓	✓	✓		
Berkeley City	✓	✓		✓	✓	✓
Butte	✓	✓	✓			
Calaveras	✓	✓	✓	✓	✓	
Colusa		✓	✓		✓	✓
Contra Costa	✓	✓	✓	✓	✓	✓
Del Norte	✓	✓	✓	✓		
El Dorado	✓	✓	✓	✓	✓	
Fresno	✓		✓	✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓
Humboldt	✓	✓	✓	✓	✓	✓
Imperial	✓	✓	✓	✓	✓	✓
Inyo	✓	✓	✓		✓	
Kern	✓	✓	✓	✓	✓	✓
Kings	✓	✓	✓		✓	
Lake	✓	✓	✓	✓	✓	✓
Lassen	✓	✓			✓	
Los Angeles	✓	✓	✓	✓	✓	✓
Madera	✓				✓	
Marin	✓	✓	✓	✓	✓	✓
Mariposa			✓		✓	
Mendocino	✓	✓	✓			
Merced	✓	✓	✓	✓	✓	✓
Modoc	✓	✓	✓	✓		
Mono	✓	✓			✓	✓
Monterey	✓	✓	✓	✓	✓	✓
Napa	✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓	✓
Orange	✓	✓	✓	✓	✓	
Placer	✓	✓	✓	✓	✓	✓
Plumas	✓	✓	✓	✓	✓	✓
Riverside	✓	✓	✓	✓	✓	✓

County	Outreach and Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Sacramento	✓	✓	✓	✓	✓	
San Benito	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓	✓
San Diego	✓	✓	✓	✓	✓	✓
San Francisco	✓	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓	✓
San Luis Obispo		✓	✓	✓	✓	✓
San Mateo	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓
Santa Clara	✓	✓	✓	✓	✓	
Santa Cruz	✓	✓	✓			
Shasta	✓	✓	✓	✓	✓	✓
Sierra		✓	✓	✓	✓	✓
Siskiyou	✓		✓	✓		
Solano	✓	✓	✓	✓		
Sonoma	✓	✓			✓	
Stanislaus	✓	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓	✓
Tehama	✓	✓	✓		✓	✓
Tri-City	✓		✓	✓	✓	
Trinity	✓	✓	✓	✓	✓	✓
Tulare	✓		✓	✓	✓	✓
Tuolumne	✓	✓	✓	✓	✓	✓
Ventura	✓		✓	✓	✓	✓
Yolo	✓	✓	✓			✓
TOTAL	**55**	**52**	**54**	**46**	**50**	**38**

Table B.12
Counties Reporting Planned Implementation of Full Service Partnership Services to Transition-Age Youth (N=59)

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Cultural Competence	Community Collaboration	Integrated Service Experience
Alameda	✓	✓	✓	✓	✓	✓	✓	✓	✓
Alpine	✓	✓	✓	✓	✓	✓	✓	✓	✓
Amador				✓			✓		
Berkeley City		✓	✓	✓	✓	✓	✓	✓	✓
Butte		✓		✓		✓	✓	✓	
Calaveras		✓	✓	✓	✓		✓	✓	✓
Colusa	✓	✓	✓	✓	✓	✓	✓	✓	
Contra Costa	✓	✓	✓	✓	✓	✓	✓	✓	✓
Del Norte	✓	✓		✓	✓	✓	✓	✓	✓
El Dorado		✓		✓	✓		✓	✓	✓
Fresno	✓	✓	✓	✓	✓		✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓	✓	✓	✓
Humboldt	✓	✓		✓	✓	✓	✓	✓	✓
Imperial	✓	✓	✓	✓	✓	✓	✓	✓	✓
Inyo	✓	✓		✓	✓		✓	✓	✓
Kern	✓	✓	✓	✓	✓	✓	✓	✓	✓
Kings		✓	✓	✓			✓	✓	✓
Lake	✓	✓	✓	✓	✓	✓	✓	✓	✓
Lassen		✓		✓	✓	✓	✓	✓	✓
Los Angeles	✓	✓		✓	✓	✓	✓	✓	✓
Madera	✓	✓	✓	✓	✓	✓	✓	✓	✓
Marin	✓	✓	✓	✓	✓	✓	✓	✓	✓
Mariposa		✓		✓	✓		✓	✓	✓
Mendocino	✓			✓	✓	✓	✓	✓	
Merced	✓	✓	✓	✓	✓	✓	✓	✓	✓
Modoc	✓	✓	✓	✓		✓		✓	✓
Mono		✓	✓	✓	✓	✓	✓	✓	✓
Monterey	✓	✓		✓	✓	✓	✓	✓	✓
Napa	✓	✓	✓	✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓	✓	✓	✓	✓
Orange	✓	✓	✓	✓	✓	✓	✓	✓	✓
Placer	✓	✓	✓	✓	✓	✓	✓	✓	✓
Plumas	✓			✓			✓	✓	✓

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Cultural Competence	Community Collaboration	Integrated Service Experience
Riverside	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sacramento	✓	✓	✓	✓			✓	✓	✓
San Benito	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Diego	✓	✓	✓	✓	✓		✓	✓	✓
San Francisco	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Joaquin		✓	✓	✓		✓	✓	✓	✓
San Luis Obispo	✓	✓		✓	✓	✓	✓	✓	
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara		✓	✓	✓			✓	✓	✓
Santa Cruz				✓	✓	✓	✓	✓	✓
Shasta		✓	✓	✓	✓	✓	✓	✓	✓
Sierra		✓	✓	✓	✓	✓	✓	✓	✓
Siskiyou	✓		✓	✓			✓	✓	✓
Solano		✓	✓	✓		✓	✓	✓	✓
Sonoma	✓	✓		✓	✓	✓	✓	✓	✓
Stanislaus	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓	✓	✓	✓	✓
Tehama	✓	✓	✓	✓	✓	✓	✓	✓	✓
Tri-City		✓	✓	✓	✓	✓	✓	✓	✓
Trinity		✓	✓	✓	✓	✓	✓	✓	
Tulare		✓	✓	✓		✓	✓	✓	✓
Tuolumne	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ventura		✓	✓	✓			✓	✓	✓
Yolo		✓	✓	✓		✓	✓		✓
TOTAL	**39**	**54**	**44**	**59**	**46**	**44**	**58**	**57**	**53**

Table B.13
Counties Reporting Planned Implementation of Full Service Partnership Services to Transition-Age Youth
(N=59)

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Alameda				✓	✓
Alpine		✓	✓	✓	✓
Amador				✓	✓
Berkeley City	✓	✓			✓
Butte	✓			✓	✓
Calaveras				✓	
Colusa				✓	✓
Contra Costa	✓	✓	✓	✓	✓
Del Norte	✓	✓	✓		✓
El Dorado					✓
Fresno	✓	✓	✓	✓	✓
Glenn	✓	✓	✓	✓	✓
Humboldt			✓	✓	✓
Imperial	✓	✓		✓	✓
Inyo	✓		✓	✓	✓
Kern	✓	✓	✓	✓	✓
Kings	✓			✓	✓
Lake			✓	✓	✓
Lassen					
Los Angeles	✓	✓	✓	✓	✓
Madera		✓		✓	✓
Marin	✓		✓	✓	✓
Mariposa			✓	✓	✓
Mendocino	✓				✓
Merced	✓	✓	✓	✓	✓
Modoc				✓	
Mono			✓		✓
Monterey					✓
Napa	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓
Orange	✓	✓	✓	✓	✓
Placer	✓	✓	✓	✓	✓
Plumas			✓		✓
Riverside					✓

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Sacramento		✓	✓	✓	✓
San Benito	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓
San Diego	✓	✓	✓		✓
San Francisco	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓
San Luis Obispo	✓		✓	✓	✓
San Mateo	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓
Santa Clara				✓	✓
Santa Cruz				✓	✓
Shasta			✓	✓	✓
Sierra				✓	✓
Siskiyou				✓	✓
Solano		✓			
Sonoma	✓	✓	✓		✓
Stanislaus	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓
Tehama			✓	✓	✓
Tri-City				✓	
Trinity					✓
Tulare		✓	✓		✓
Tuolumne	✓	✓	✓	✓	✓
Ventura	✓	✓		✓	✓
Yolo					
TOTAL	**31**	**30**	**35**	**44**	**53**

Table B.14
Counties Reporting Planned Implementation of Full Service Partnership Services to Transition-Age Youth
(N=59)

County	Other Supports										
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Parenting Education	Intimate Partner Violence Services
Alameda						✓		✓			
Alpine						✓	✓		✓		
Amador											
Berkeley City					✓	✓	✓			✓	
Butte	✓						✓	✓	✓		✓
Calaveras						✓	✓	✓	✓		
Colusa	✓					✓					
Contra Costa	✓	✓					✓	✓	✓	✓	✓
Del Norte						✓			✓	✓	
El Dorado	✓				✓	✓		✓	✓		
Fresno	✓				✓	✓	✓		✓		
Glenn					✓	✓	✓	✓	✓	✓	✓
Humboldt						✓					
Imperial	✓		✓		✓	✓	✓	✓	✓	✓	
Inyo					✓		✓		✓		
Kern	✓			✓	✓	✓	✓	✓	✓	✓	
Kings			✓						✓		
Lake	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Lassen					✓						
Los Angeles	✓	✓					✓	✓	✓	✓	
Madera	✓		✓				✓	✓		✓	
Marin					✓	✓			✓		
Mariposa					✓	✓	✓				
Mendocino											
Merced	✓				✓		✓	✓	✓	✓	
Modoc	✓										
Mono	✓		✓		✓	✓	✓	✓	✓		
Monterey				✓		✓		✓	✓		
Napa	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nevada				✓	✓		✓	✓	✓		
Orange			✓		✓	✓	✓	✓	✓	✓	
Placer	✓	✓				✓			✓		
Plumas	✓				✓	✓	✓	✓			
Riverside	✓			✓		✓	✓		✓		

County	Other Supports										
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Parenting Education	Intimate Partner Violence Services
Sacramento					✓	✓	✓	✓	✓	✓	
San Benito	✓					✓		✓	✓	✓	
San Bernardino	✓			✓	✓	✓	✓	✓	✓		
San Diego					✓				✓		✓
San Francisco	✓		✓		✓		✓	✓			
San Joaquin	✓						✓	✓	✓		
San Luis Obispo	✓				✓						
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara							✓				
Santa Cruz											
Shasta	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sierra	✓	✓	✓		✓	✓			✓		
Siskiyou	✓						✓		✓		
Solano					✓						
Sonoma			✓			✓					
Stanislaus	✓				✓	✓			✓	✓	
Sutter-Yuba	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓
Tehama					✓						
Tri-City								✓			
Trinity						✓			✓	✓	
Tulare					✓	✓	✓	✓	✓	✓	
Tuolumne	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓
Ventura	✓				✓			✓	✓		
Yolo	✓							✓	✓		
TOTAL	**32**	**10**	**15**	**11**	**33**	**35**	**33**	**32**	**40**	**21**	**9**

Table B.15
Counties Reporting Planned Implementation of Full Service Partnership Services – Peer Support – Specific Positions for Peers for TAY
(N=59)

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Alameda	✓					✓	
Alpine	✓	✓			✓	✓	
Amador		✓	✓		✓	✓	
Berkeley City	✓				✓	✓	✓
Butte	✓	✓				✓	
Calaveras						✓	
Colusa						✓	✓
Contra Costa	✓				✓		✓
Del Norte	✓						
El Dorado			✓		✓	✓	✓
Fresno	✓		✓		✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓	✓
Humboldt						✓	
Imperial	✓	✓	✓		✓	✓	✓
Inyo	✓			✓		✓	
Kern	✓	✓	✓		✓	✓	
Kings	✓				✓	✓	
Lake		✓	✓		✓	✓	
Lassen						✓	
Los Angeles					✓	✓	✓
Madera							
Marin	✓		✓	✓		✓	✓
Mariposa	✓						
Mendocino	✓	✓	✓		✓		
Merced	✓		✓			✓	
Modoc				✓		✓	
Mono						✓	
Monterey	✓		✓	✓	✓	✓	✓
Napa	✓	✓		✓	✓		✓
Nevada		✓	✓		✓	✓	✓
Orange	✓				✓	✓	
Placer	✓						✓
Plumas							

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Riverside	✓	✓	✓		✓	✓	✓
Sacramento	✓	✓		✓	✓	✓	✓
San Benito	✓	✓	✓	✓		✓	✓
San Bernardino	✓					✓	✓
San Diego	✓	✓	✓			✓	✓
San Francisco	✓	✓	✓			✓	✓
San Joaquin							✓
San Luis Obispo	✓				✓	✓	
San Mateo	✓		✓		✓	✓	✓
Santa Barbara	✓	✓		✓		✓	✓
Santa Clara				✓			
Santa Cruz	✓					✓	
Shasta				✓		✓	✓
Sierra	✓	✓					✓
Siskiyou						✓	✓
Solano	✓	✓	✓			✓	✓
Sonoma	✓			✓			✓
Stanislaus	✓				✓	✓	✓
Sutter-Yuba	✓						
Tehama	✓	✓	✓			✓	✓
Tri-City	✓					✓	✓
Trinity	✓	✓	✓		✓		
Tulare	✓					✓	✓
Tuolumne				✓	✓		
Ventura	✓	✓	✓				✓
Yolo	✓				✓		
TOTAL	**41**	**21**	**21**	**13**	**25**	**42**	**32**

Table B.16
Counties Reporting Planned Implementation of Full Service Partnership Services –
Peer Support – Strategies where Peers are part of Team for TAY
(N=59)

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Alameda															
Alpine			✓				✓	✓							
Amador	✓			✓	✓	✓		✓							
Berkeley City			✓												
Butte		✓	✓	✓		✓	✓		✓				✓		
Calaveras			✓			✓									
Colusa			✓	✓											
Contra Costa			✓	✓		✓		✓							
Del Norte	✓			✓				✓							
El Dorado			✓	✓		✓	✓				✓				
Fresno															
Glenn	✓	✓	✓	✓		✓	✓	✓						✓	
Humboldt			✓												
Imperial	✓		✓	✓	✓	✓	✓	✓	✓			✓		✓	
Inyo						✓	✓							✓	
Kern			✓	✓			✓	✓							
Kings			✓	✓			✓		✓				✓		
Lake	✓	✓					✓		✓			✓	✓		
Lassen			✓												
Los Angeles	✓											✓			
Madera	✓			✓				✓							
Marin			✓	✓		✓		✓							
Mariposa															
Mendocino	✓	✓	✓	✓									✓		
Merced			✓								✓				
Modoc	✓	✓	✓					✓							
Mono															
Monterey	✓		✓	✓	✓	✓	✓	✓							
Napa	✓	✓	✓		✓	✓	✓	✓			✓		✓		
Nevada			✓												

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Orange				✓											
Placer			✓												
Plumas				✓											
Riverside	✓	✓	✓	✓			✓	✓							
Sacramento	✓		✓	✓									✓		
San Benito	✓			✓		✓	✓								
San Bernardino	✓	✓												✓	
San Diego	✓	✓	✓	✓		✓	✓	✓						✓	
San Francisco	✓		✓	✓											
San Joaquin		✓	✓			✓		✓							
San Luis Obispo				✓		✓		✓							
San Mateo	✓		✓	✓	✓	✓		✓							
Santa Barbara	✓		✓	✓		✓	✓	✓	✓	✓	✓		✓	✓	✓
Santa Clara	✓		✓					✓					✓		
Santa Cruz															
Shasta	✓	✓	✓	✓		✓									
Sierra		✓	✓				✓								
Siskiyou	✓														
Solano	✓														
Sonoma			✓												
Stanislaus	✓	✓	✓			✓	✓						✓		
Sutter-Yuba				✓		✓		✓							
Tehama	✓			✓		✓									
Tri-City															
Trinity							✓								
Tulare			✓	✓											
Tuolumne	✓		✓	✓		✓							✓		
Ventura			✓	✓			✓	✓							
Yolo								✓							
TOTAL	**26**	**13**	**36**	**30**	**5**	**22**	**19**	**22**	**5**	**1**	**4**	**3**	**10**	**6**	**1**

Table B.17
Counties Reporting Planned Implementation of Full Service Partnership Services –
Peer Support – Peers Augmenting the Overall Capacity of the Staff Team for TAY
(N=59)

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Alameda	✓	✓							
Alpine	✓	✓		✓	✓	✓	✓		
Amador	✓	✓	✓	✓	✓		✓	✓	
Berkeley City	✓	✓		✓		✓	✓		
Butte	✓	✓	✓	✓			✓	✓	
Calaveras	✓	✓							
Colusa	✓			✓					
Contra Costa	✓	✓							
Del Norte	✓	✓							
El Dorado	✓	✓		✓		✓	✓		
Fresno							✓		
Glenn	✓	✓	✓	✓		✓	✓		
Humboldt	✓			✓		✓			
Imperial	✓	✓		✓		✓	✓	✓	
Inyo	✓	✓				✓			
Kern	✓			✓		✓	✓		
Kings	✓								
Lake	✓	✓		✓	✓	✓		✓	
Lassen		✓		✓		✓	✓		
Los Angeles	✓			✓			✓		
Madera	✓	✓		✓			✓		
Marin	✓	✓				✓	✓		
Mariposa		✓							
Mendocino	✓	✓		✓			✓		
Merced	✓			✓		✓			
Modoc		✓				✓			
Mono	✓			✓					
Monterey	✓	✓		✓	✓		✓		
Napa	✓	✓		✓		✓	✓		✓
Nevada	✓	✓	✓	✓		✓	✓		
Orange						✓			
Placer				✓					

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Plumas								✓	
Riverside	✓	✓	✓	✓		✓	✓		
Sacramento	✓	✓	✓	✓		✓	✓		
San Benito	✓	✓		✓	✓	✓			
San Bernardino							✓		
San Diego	✓	✓		✓		✓	✓	✓	
San Francisco	✓	✓		✓			✓		
San Joaquin	✓	✓				✓			
San Luis Obispo	✓								
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara		✓	✓			✓			
Santa Cruz		✓		✓		✓			
Shasta	✓	✓		✓	✓		✓	✓	
Sierra				✓			✓		
Siskiyou									
Solano	✓						✓		
Sonoma	✓	✓				✓			
Stanislaus	✓	✓	✓	✓		✓			
Sutter-Yuba	✓				✓	✓		✓	
Tehama						✓			
Tri-City	✓	✓							
Trinity	✓	✓		✓		✓			
Tulare	✓	✓		✓					
Tuolumne	✓	✓		✓					
Ventura						✓	✓		
Yolo	✓	✓	✓	✓				✓	
TOTAL	**45**	**40**	**11**	**36**	**9**	**31**	**28**	**11**	**3**

Table B.18
Counties Reporting Planned Implementation of Full Service Partnership Services to Transition-Age Youth: Housing
(N=59)

County	Housing
Alameda	✓
Alpine	✓
Amador	
Berkeley City	
Butte	✓
Calaveras	✓
Colusa	✓
Contra Costa	✓
Del Norte	✓
El Dorado	✓
Fresno	✓
Glenn	✓
Humboldt	✓
Imperial	✓
Inyo	✓
Kern	✓
Kings	✓
Lake	✓
Lassen	✓
Los Angeles	✓
Madera	✓
Marin	✓
Mariposa	
Mendocino	✓
Merced	✓
Modoc	✓
Mono	✓
Monterey	✓
Napa	✓
Nevada	✓

County	Housing
Orange	✓
Placer	✓
Plumas	✓
Riverside	✓
Sacramento	✓
San Benito	✓
San Bernardino	✓
San Diego	✓
San Francisco	✓
San Joaquin	✓
San Luis Obispo	✓
San Mateo	✓
Santa Barbara	✓
Santa Clara	✓
Santa Cruz	✓
Shasta	✓
Sierra	✓
Siskiyou	✓
Solano	
Sonoma	✓
Stanislaus	✓
Sutter-Yuba	✓
Tehama	✓
Tri-City	✓
Trinity	✓
Tulare	✓
Tuolumne	✓
Ventura	✓
Yolo	✓
TOTAL	**55**

Table B.19
Counties Reporting Planned Implementation of Full Service Partnership Services to TAY
(N=59)

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Alameda	✓	✓	✓	✓
Alpine				✓
Amador		✓		
Berkeley City				✓
Butte		✓		
Calaveras				✓
Colusa				
Contra Costa	✓	✓	✓	✓
Del Norte				✓
El Dorado				✓
Fresno	✓	✓	✓	✓
Glenn	✓	✓	✓	✓
Humboldt				✓
Imperial	✓	✓	✓	✓
Inyo				✓
Kern	✓	✓	✓	✓
Kings				✓
Lake	✓			✓
Lassen				✓
Los Angeles	✓		✓	✓
Madera				✓
Marin	✓	✓	✓	✓
Mariposa		✓		
Mendocino				
Merced	✓	✓		✓
Modoc	✓	✓	✓	
Mono			✓	✓
Monterey		✓	✓	✓
Napa	✓		✓	✓
Nevada	✓	✓	✓	✓
Orange			✓	✓
Placer			✓	✓
Plumas			✓	

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Riverside	✓		✓	✓
Sacramento				✓
San Benito	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓
San Diego	✓		✓	✓
San Francisco	✓	✓		✓
San Joaquin	✓		✓	✓
San Luis Obispo	✓	✓	✓	
San Mateo	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓
Santa Clara				✓
Santa Cruz				
Shasta	✓	✓	✓	✓
Sierra		✓	✓	✓
Siskiyou	✓			✓
Solano				✓
Sonoma			✓	✓
Stanislaus	✓	✓	✓	✓
Sutter-Yuba			✓	✓
Tehama	✓	✓	✓	✓
Tri-City				✓
Trinity				
Tulare			✓	✓
Tuolumne	✓	✓	✓	✓
Ventura			✓	✓
Yolo	✓			✓
TOTAL	**28**	**25**	**33**	**49**

Table B.20
Counties Reporting Planned Implementation of Full Service Partnership Services to TAY
(n=59)

County	Evidence-Based Practices								Other Practices		Coordination		Dis-charge
	Wellness Recovery Action Plan	Cognitive Behavioral Therapy	Dialectical Behavior Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeducation	Multisystemic Therapy	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning/ Criteria
Alameda	✓			✓									
Alpine	✓	✓		✓						✓			
Amador					✓								
Berkeley City	✓						✓			✓			
Butte													
Calaveras	✓						✓		✓	✓		✓	
Colusa	✓	✓		✓									
Contra Costa	✓					✓						✓	
Del Norte	✓			✓							✓	✓	
El Dorado	✓		✓										
Fresno	✓			✓			✓		✓		✓	✓	
Glenn	✓	✓	✓	✓	✓		✓		✓	✓	✓	✓	✓
Humboldt		✓							✓			✓	
Imperial	✓	✓	✓	✓			✓					✓	✓
Inyo	✓	✓		✓					✓			✓	
Kern		✓	✓	✓	✓	✓	✓	✓			✓	✓	✓
Kings	✓								✓	✓		✓	✓
Lake									✓	✓	✓	✓	✓
Lassen	✓											✓	
Los Angeles	✓			✓	✓				✓	✓	✓	✓	✓
Madera										✓	✓	✓	
Marin	✓											✓	✓
Mariposa										✓		✓	
Mendocino	✓												
Merced				✓								✓	
Modoc													
Mono							✓						
Monterey							✓		✓	✓			
Napa	✓				✓		✓			✓	✓	✓	
Nevada	✓	✓		✓	✓	✓					✓	✓	✓
Orange									✓	✓	✓	✓	
Placer													

County	Evidence-Based Practices								Other Practices		Coordination		Dis-charge
	Wellness Recovery Action Plan	Cognitive Behavioral Therapy	Dialectical Behavior Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeducation	Multisystemic Therapy	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning/ Criteria
Plumas													
Riverside		✓		✓								✓	
Sacramento	✓						✓		✓	✓	✓	✓	✓
San Benito	✓	✓	✓	✓	✓		✓			✓	✓	✓	✓
San Bernardino		✓		✓					✓	✓	✓	✓	✓
San Diego	✓			✓								✓	
San Francisco						✓				✓		✓	
San Joaquin	✓									✓		✓	✓
San Luis Obispo	✓			✓									
San Mateo	✓	✓	✓	✓	✓		✓		✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara												✓	
Santa Cruz													
Shasta	✓				✓					✓	✓	✓	✓
Sierra	✓								✓	✓		✓	✓
Siskiyou													
Solano	✓												
Sonoma	✓						✓					✓	
Stanislaus					✓		✓			✓	✓	✓	✓
Sutter-Yuba	✓	✓					✓	✓		✓	✓	✓	
Tehama													
Tri-City											✓	✓	
Trinity	✓						✓					✓	
Tulare	✓						✓			✓		✓	
Tuolumne	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓
Ventura	✓								✓			✓	
Yolo													
TOTAL	**35**	**15**	**8**	**20**	**12**	**6**	**19**	**3**	**16**	**25**	**20**	**40**	**18**

Table B.21

Counties Reporting Planned Implementation of Full Service Partnership Services to Adults (N=59)

County	Outreach and Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Alameda	✓	✓	✓	✓	✓	✓
Alpine	✓	✓		✓	✓	
Amador	✓	✓	✓	✓		
Berkeley City	✓	✓		✓		✓
Butte	✓	✓	✓	✓	✓	✓
Calaveras	✓	✓	✓			
Colusa	✓	✓	✓			
Contra Costa	✓	✓	✓	✓	✓	✓
Del Norte	✓	✓				
El Dorado	✓	✓	✓	✓	✓	
Fresno	✓		✓	✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓
Humboldt	✓	✓	✓	✓	✓	✓
Imperial	✓	✓	✓	✓	✓	✓
Inyo	✓	✓	✓		✓	✓
Kern	✓	✓	✓	✓	✓	✓
Kings	✓	✓	✓		✓	
Lake	✓	✓	✓	✓	✓	✓
Lassen	✓				✓	
Los Angeles	✓	✓	✓	✓	✓	✓
Madera	✓	✓				
Marin		✓	✓	✓	✓	✓
Mariposa					✓	
Mendocino	✓	✓	✓	✓	✓	✓
Merced	✓	✓		✓	✓	
Modoc	✓	✓	✓	✓		
Mono	✓	✓			✓	✓
Monterey	✓	✓	✓	✓	✓	✓
Napa	✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓		✓	
Orange	✓	✓		✓	✓	
Placer	✓	✓	✓	✓	✓	✓
Plumas	✓	✓	✓	✓	✓	✓

County	Outreach and Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Riverside	✓	✓	✓	✓	✓	✓
Sacramento	✓	✓	✓	✓	✓	
San Benito	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓	✓
San Diego	✓	✓	✓	✓	✓	✓
San Francisco	✓	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓	✓
San Luis Obispo	✓	✓	✓	✓	✓	✓
San Mateo	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓
Santa Clara	✓	✓	✓	✓		✓
Santa Cruz		✓	✓			
Shasta	✓	✓	✓	✓	✓	✓
Sierra	✓	✓	✓	✓	✓	✓
Siskiyou	✓		✓	✓		
Solano	✓	✓				
Sonoma	✓	✓				
Stanislaus	✓	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓	✓
Tehama		✓	✓		✓	✓
Tri-City	✓		✓	✓	✓	
Trinity	✓	✓	✓	✓	✓	✓
Tulare	✓	✓		✓	✓	
Tuolumne	✓	✓	✓	✓	✓	✓
Ventura	✓	✓	✓	✓	✓	✓
Yolo	✓	✓	✓			
TOTAL	**55**	**54**	**47**	**44**	**46**	**37**

Table B.22
Counties Reporting Planned Implementation of Full Service Partnership Services to Adults
(N=59)

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Culturally Competence	Community Collaboration	Integrated Service Experience
Alameda	✓	✓	✓	✓	✓	✓	✓	✓	✓
Alpine	✓	✓	✓	✓	✓	✓	✓	✓	✓
Amador				✓			✓		
Berkeley City		✓	✓	✓	✓	✓	✓	✓	✓
Butte	✓	✓	✓	✓	✓	✓	✓	✓	
Calaveras	✓	✓		✓	✓		✓		✓
Colusa			✓	✓			✓	✓	
Contra Costa	✓	✓	✓	✓	✓	✓	✓	✓	✓
Del Norte	✓	✓		✓	✓	✓	✓	✓	✓
El Dorado		✓		✓	✓		✓	✓	✓
Fresno	✓	✓	✓	✓	✓		✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓	✓	✓	✓
Humboldt	✓	✓		✓	✓	✓	✓	✓	✓
Imperial		✓		✓	✓	✓	✓	✓	✓
Inyo	✓	✓		✓	✓		✓		✓
Kern	✓	✓	✓	✓	✓	✓	✓	✓	✓
Kings		✓		✓			✓		✓
Lake	✓	✓	✓	✓	✓	✓	✓	✓	✓
Lassen		✓		✓	✓	✓	✓		✓
Los Angeles	✓	✓	✓	✓	✓	✓	✓	✓	✓
Madera	✓	✓		✓	✓	✓	✓		✓
Marin	✓	✓	✓	✓			✓		✓
Mariposa				✓			✓		✓
Mendocino	✓	✓		✓	✓		✓	✓	✓
Merced	✓	✓	✓	✓	✓	✓	✓	✓	✓
Modoc	✓	✓	✓	✓		✓		✓	✓
Mono		✓	✓	✓	✓	✓	✓	✓	✓
Monterey	✓	✓	✓	✓	✓	✓	✓	✓	✓
Napa	✓			✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓	✓	✓	✓	✓
Orange	✓	✓		✓	✓	✓	✓	✓	✓
Placer	✓	✓	✓	✓	✓		✓	✓	✓

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Culturally Competence	Community Collaboration	Integrated Service Experience
Plumas	✓			✓			✓	✓	✓
Riverside	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sacramento		✓	✓	✓			✓	✓	✓
San Benito	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓		✓	✓	✓
San Diego	✓	✓	✓	✓	✓		✓	✓	✓
San Francisco	✓	✓	✓	✓	✓		✓	✓	✓
San Joaquin		✓	✓	✓		✓	✓	✓	✓
San Luis Obispo	✓	✓	✓	✓	✓	✓	✓	✓	
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara		✓	✓	✓		✓	✓	✓	✓
Santa Cruz		✓		✓			✓		
Shasta		✓	✓	✓	✓	✓	✓	✓	✓
Sierra		✓	✓	✓	✓	✓	✓	✓	✓
Siskiyou	✓		✓	✓			✓	✓	✓
Solano		✓		✓					
Sonoma	✓	✓		✓	✓	✓	✓	✓	✓
Stanislaus	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓	✓	✓	✓	✓
Tehama	✓	✓	✓	✓	✓	✓	✓	✓	
Tri-City		✓	✓	✓	✓	✓	✓	✓	✓
Trinity		✓	✓	✓	✓	✓	✓	✓	✓
Tulare		✓	✓	✓		✓	✓	✓	✓
Tuolumne	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ventura		✓	✓	✓			✓		
Yolo		✓	✓	✓	✓	✓	✓		✓
TOTAL	**38**	**53**	**41**	**59**	**44**	**39**	**57**	**47**	**52**

Table B.23
Counties Reporting Planned Implementation of Full Service Partnership Services to Adults
(N=59)

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Alameda				✓	✓
Alpine		✓	✓	✓	
Amador				✓	✓
Berkeley City	✓	✓			
Butte			✓		✓
Calaveras				✓	
Colusa					✓
Contra Costa	✓	✓	✓	✓	✓
Del Norte	✓		✓		✓
El Dorado					✓
Fresno	✓		✓	✓	✓
Glenn	✓	✓	✓	✓	✓
Humboldt			✓	✓	✓
Imperial				✓	✓
Inyo	✓	✓	✓	✓	✓
Kern	✓	✓	✓	✓	✓
Kings				✓	✓
Lake			✓	✓	✓
Lassen					
Los Angeles	✓	✓	✓	✓	✓
Madera					✓
Marin	✓		✓	✓	✓
Mariposa					
Mendocino				✓	✓
Merced	✓	✓	✓	✓	✓
Modoc				✓	
Mono			✓		✓
Monterey			✓		
Napa	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓
Orange	✓	✓	✓	✓	✓
Placer	✓	✓	✓	✓	✓
Plumas			✓		✓
Riverside	✓	✓	✓	✓	✓

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Sacramento	✓	✓	✓	✓	✓
San Benito	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓
San Diego	✓	✓	✓		✓
San Francisco	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓
San Luis Obispo	✓		✓	✓	✓
San Mateo	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓
Santa Clara	✓	✓		✓	✓
Santa Cruz					✓
Shasta			✓	✓	✓
Sierra			✓	✓	✓
Siskiyou				✓	✓
Solano		✓		✓	
Sonoma	✓	✓	✓		✓
Stanislaus	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓
Tehama				✓	✓
Tri-City				✓	
Trinity		✓			✓
Tulare	✓	✓		✓	
Tuolumne	✓	✓	✓	✓	✓
Ventura		✓	✓	✓	✓
Yolo					
TOTAL	**30**	**30**	**37**	**43**	**48**

Table B.24
Counties Reporting Planned Implementation of Full Service Partnership Services to Adults
(N=59)

County	Other Supports										
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment/ Education	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Parenting Education	Intimate Partner Violence Services
Alameda						✓			✓		
Alpine						✓			✓		
Amador											
Berkeley City					✓	✓	✓			✓	
Butte	✓								✓		
Calaveras							✓	✓	✓		
Colusa	✓										
Contra Costa	✓	✓					✓		✓		✓
Del Norte											
El Dorado	✓				✓	✓		✓	✓		
Fresno	✓				✓	✓	✓		✓		
Glenn	✓				✓	✓	✓	✓	✓	✓	✓
Humboldt											
Imperial	✓				✓	✓	✓		✓	✓	
Inyo					✓	✓	✓		✓	✓	
Kern	✓				✓	✓		✓	✓	✓	
Kings			✓								
Lake	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Lassen											
Los Angeles	✓	✓		✓		✓	✓	✓	✓		
Madera							✓		✓	✓	
Marin					✓	✓			✓		
Mariposa					✓	✓	✓	✓			
Mendocino	✓										
Merced	✓						✓	✓	✓	✓	
Modoc	✓										
Mono	✓		✓		✓	✓	✓	✓	✓		
Monterey				✓		✓		✓			
Napa	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Nevada				✓	✓		✓	✓	✓		
Orange	✓		✓		✓	✓	✓		✓	✓	
Placer	✓					✓			✓		
Plumas	✓				✓	✓	✓	✓			
Riverside				✓	✓	✓	✓	✓	✓		

County	Other Supports										
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment/ Education	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Parenting Education	Intimate Partner Violence Services
Sacramento					✓	✓	✓	✓	✓	✓	
San Benito	✓				✓	✓		✓	✓		
San Bernardino	✓			✓	✓	✓	✓	✓	✓		
San Diego					✓				✓		✓
San Francisco	✓							✓			
San Joaquin	✓						✓	✓	✓		
San Luis Obispo	✓				✓			✓	✓		
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara							✓	✓			✓
Santa Cruz											
Shasta	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sierra	✓	✓	✓		✓	✓					
Siskiyou	✓						✓		✓		
Solano					✓						
Sonoma			✓			✓					
Stanislaus	✓		✓		✓	✓			✓		
Sutter-Yuba	✓			✓	✓	✓	✓	✓	✓	✓	✓
Tehama					✓						
Tri-City								✓			
Trinity					✓	✓			✓		
Tulare					✓		✓		✓		✓
Tuolumne	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓
Ventura	✓				✓		✓	✓	✓		
Yolo	✓								✓		
TOTAL	**33**	**9**	**12**	**11**	**33**	**32**	**30**	**28**	**39**	**14**	**11**

Table B.25
Counties Reporting Planned Implementation of Full Service Partnership Services –
Peer Support – Specific Positions for Peers for Adults
(N=59)

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Alameda	✓					✓	✓
Alpine	✓				✓	✓	
Amador		✓	✓		✓	✓	
Berkeley City	✓				✓	✓	✓
Butte	✓	✓				✓	
Calaveras						✓	
Colusa						✓	✓
Contra Costa	✓						✓
Del Norte	✓	✓	✓			✓	
El Dorado			✓		✓	✓	✓
Fresno			✓			✓	✓
Glenn	✓	✓	✓	✓	✓	✓	✓
Humboldt						✓	
Imperial	✓	✓	✓		✓	✓	✓
Inyo	✓	✓				✓	✓
Kern	✓	✓	✓		✓	✓	
Kings	✓					✓	
Lake		✓	✓		✓	✓	
Lassen						✓	
Los Angeles				✓	✓	✓	✓
Madera							
Marin	✓		✓	✓		✓	✓
Mariposa							
Mendocino		✓			✓		
Merced	✓		✓			✓	
Modoc				✓		✓	
Mono						✓	
Monterey	✓	✓		✓		✓	✓
Napa	✓	✓			✓	✓	✓
Nevada		✓	✓		✓	✓	✓
Orange	✓	✓			✓	✓	
Placer	✓						✓
Plumas							

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Riverside	✓	✓	✓			✓	✓
Sacramento	✓	✓		✓	✓	✓	✓
San Benito	✓	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓		✓	✓
San Diego	✓	✓	✓			✓	✓
San Francisco	✓	✓	✓				✓
San Joaquin	✓						✓
San Luis Obispo	✓				✓	✓	
San Mateo	✓		✓	✓	✓	✓	✓
Santa Barbara	✓	✓		✓		✓	✓
Santa Clara						✓	
Santa Cruz	✓					✓	✓
Shasta				✓		✓	✓
Sierra	✓	✓				✓	✓
Siskiyou						✓	
Solano	✓					✓	✓
Sonoma	✓			✓			✓
Stanislaus	✓				✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓		✓	✓
Tehama	✓	✓	✓			✓	✓
Tri-City	✓					✓	✓
Trinity	✓	✓	✓				✓
Tulare	✓					✓	✓
Tuolumne				✓	✓		
Ventura	✓	✓	✓				✓
Yolo			✓			✓	
TOTAL	**38**	**25**	**22**	**14**	**19**	**47**	**36**

Table B.26
Counties Reporting Planned Implementation of Full Service Partnership Services –
Peer Support – Strategies where Peers are part of Team for Adult
(N=59)

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Alameda								✓							
Alpine			✓					✓					✓		
Amador	✓			✓	✓	✓		✓							
Berkeley City			✓												
Butte		✓	✓	✓		✓	✓		✓				✓		
Calaveras	✓		✓	✓							✓				
Colusa			✓												
Contra Costa						✓		✓							
Del Norte			✓	✓		✓		✓						✓	
El Dorado			✓			✓	✓				✓				
Fresno	✓		✓	✓					✓						
Glenn	✓	✓	✓	✓		✓	✓	✓						✓	
Humboldt			✓												
Imperial	✓		✓	✓	✓	✓	✓	✓	✓					✓	
Inyo						✓	✓							✓	
Kern			✓	✓			✓	✓							
Kings				✓			✓		✓						
Lake	✓	✓					✓		✓			✓	✓		
Lassen			✓												
Los Angeles	✓		✓	✓				✓							
Madera	✓			✓				✓							
Marin			✓	✓		✓		✓							
Mariposa															
Mendocino	✓	✓	✓	✓									✓		
Merced			✓								✓				
Modoc	✓	✓	✓					✓							
Mono															
Monterey	✓		✓	✓				✓							
Napa	✓	✓	✓	✓	✓	✓	✓	✓			✓		✓		
Nevada			✓												

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Orange				✓		✓			✓						
Placer	✓		✓												
Plumas				✓											
Riverside	✓	✓	✓	✓			✓								
Sacramento	✓		✓	✓			✓					✓	✓		
San Benito	✓			✓		✓	✓	✓						✓	
San Bernardino	✓	✓	✓	✓			✓	✓					✓	✓	
San Diego	✓	✓	✓	✓		✓	✓	✓						✓	
San Francisco	✓	✓	✓	✓				✓							
San Joaquin		✓	✓			✓		✓							
San Luis Obispo				✓		✓		✓							
San Mateo	✓		✓	✓		✓		✓							
Santa Barbara	✓		✓	✓		✓	✓	✓	✓	✓	✓		✓	✓	✓
Santa Clara	✓		✓				✓								
Santa Cruz															
Shasta	✓	✓	✓	✓		✓									
Sierra		✓	✓	✓			✓								
Siskiyou															
Solano															
Sonoma			✓												
Stanislaus	✓	✓	✓			✓	✓						✓		
Sutter-Yuba	✓		✓	✓		✓		✓					✓	✓	✓
Tehama	✓			✓		✓									
Tri-City															
Trinity							✓	✓						✓	
Tulare				✓											
Tuolumne	✓		✓	✓		✓	✓						✓		
Ventura		✓	✓	✓			✓	✓							
Yolo				✓											
TOTAL	**27**	**15**	**38**	**34**	**3**	**22**	**21**	**25**	**7**	**1**	**5**	**2**	**10**	**10**	**2**

Table B.27
Counties Reporting Planned Implementation of Full Service Partnership Services – Peer Support – Peers Augmenting the Overall Capacity of the Staff Team for Adult (N=59)

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Alameda	✓	✓							
Alpine	✓	✓		✓	✓	✓	✓		
Amador	✓	✓	✓	✓	✓		✓	✓	
Berkeley City	✓	✓		✓		✓	✓		
Butte	✓	✓	✓	✓			✓	✓	
Calaveras	✓	✓							
Colusa	✓			✓					
Contra Costa		✓					✓		
Del Norte	✓			✓		✓	✓		
El Dorado	✓	✓		✓		✓	✓		
Fresno	✓	✓				✓	✓		
Glenn	✓	✓		✓		✓	✓		
Humboldt	✓			✓		✓			
Imperial	✓	✓		✓		✓	✓	✓	
Inyo	✓	✓		✓		✓			
Kern	✓			✓		✓	✓		
Kings	✓								
Lake	✓	✓		✓	✓	✓		✓	
Lassen		✓		✓		✓	✓		
Los Angeles	✓			✓			✓		
Madera	✓	✓		✓		✓	✓		
Marin	✓					✓	✓		
Mariposa		✓							
Mendocino	✓	✓		✓			✓		
Merced	✓			✓		✓			
Modoc		✓				✓			
Mono	✓			✓					
Monterey	✓	✓		✓	✓	✓	✓		
Napa	✓	✓		✓		✓	✓		
Nevada	✓	✓	✓	✓		✓	✓		
Orange	✓	✓		✓		✓	✓		
Placer									

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Plumas								✓	
Riverside	✓	✓	✓	✓		✓	✓		
Sacramento	✓	✓	✓	✓		✓	✓		
San Benito	✓	✓		✓	✓	✓			✓
San Bernardino	✓	✓		✓	✓	✓			
San Diego	✓	✓		✓		✓	✓	✓	
San Francisco	✓	✓		✓		✓	✓		
San Joaquin	✓	✓				✓			
San Luis Obispo	✓								
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara		✓	✓			✓			
Santa Cruz		✓		✓		✓			
Shasta	✓	✓		✓	✓		✓	✓	
Sierra	✓			✓		✓	✓		
Siskiyou									
Solano							✓		
Sonoma	✓	✓				✓			
Stanislaus	✓	✓	✓	✓		✓			
Sutter-Yuba	✓	✓				✓		✓	
Tehama						✓			
Tri-City	✓	✓							
Trinity	✓					✓			
Tulare	✓	✓		✓					
Tuolumne	✓	✓		✓					
Ventura				✓		✓	✓		
Yolo	✓								
TOTAL	**47**	**40**	**9**	**38**	**9**	**38**	**30**	**10**	**3**

Table B.28
Counties Reporting Planned Implementation of Full Service Partnership Services to Adults: Housing
(N=59)

County	Housing
Alameda	✓
Alpine	✓
Amador	
Berkeley City	
Butte	✓
Calaveras	✓
Colusa	✓
Contra Costa	✓
Del Norte	✓
El Dorado	✓
Fresno	✓
Glenn	✓
Humboldt	✓
Imperial	✓
Inyo	✓
Kern	✓
Kings	✓
Lake	✓
Lassen	✓
Los Angeles	✓
Madera	✓
Marin	✓
Mariposa	✓
Mendocino	✓
Merced	✓
Modoc	✓
Mono	✓
Monterey	✓
Napa	✓
Nevada	✓

County	Housing
Orange	✓
Placer	✓
Plumas	✓
Riverside	✓
Sacramento	✓
San Benito	✓
San Bernardino	✓
San Diego	✓
San Francisco	✓
San Joaquin	✓
San Luis Obispo	✓
San Mateo	✓
Santa Barbara	✓
Santa Clara	✓
Santa Cruz	✓
Shasta	✓
Sierra	✓
Siskiyou	✓
Solano	
Sonoma	✓
Stanislaus	✓
Sutter-Yuba	✓
Tehama	
Tri-City	✓
Trinity	✓
Tulare	✓
Tuolumne	✓
Ventura	✓
Yolo	✓
TOTAL	**56**

Table B.29
Counties Reporting Planned Implementation of Full Service Partnership Services to Adults
(N=59)

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Alameda	✓	✓	✓	✓
Alpine				
Amador		✓		
Berkeley City				
Butte	✓	✓	✓	✓
Calaveras	✓	✓		✓
Colusa	✓		✓	
Contra Costa	✓	✓	✓	✓
Del Norte				✓
El Dorado				✓
Fresno	✓	✓	✓	✓
Glenn	✓	✓	✓	✓
Humboldt				✓
Imperial	✓	✓		✓
Inyo				✓
Kern	✓	✓	✓	✓
Kings				
Lake	✓			✓
Lassen				✓
Los Angeles	✓		✓	✓
Madera				✓
Marin	✓	✓		✓
Mariposa		✓		✓
Mendocino				
Merced	✓			✓
Modoc	✓	✓		
Mono			✓	✓
Monterey			✓	✓
Napa	✓	✓	✓	✓
Nevada	✓		✓	✓
Orange			✓	✓
Placer		✓	✓	✓
Plumas			✓	

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Riverside			✓	✓
Sacramento				✓
San Benito	✓	✓	✓	✓
San Bernardino	✓		✓	✓
San Diego	✓		✓	✓
San Francisco	✓	✓		✓
San Joaquin	✓		✓	✓
San Luis Obispo	✓	✓	✓	✓
San Mateo	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓
Santa Clara	✓	✓		✓
Santa Cruz	✓			
Shasta	✓	✓	✓	✓
Sierra		✓	✓	✓
Siskiyou	✓			✓
Solano				
Sonoma				✓
Stanislaus	✓	✓	✓	✓
Sutter-Yuba			✓	✓
Tehama		✓	✓	✓
Tri-City				✓
Trinity				✓
Tulare			✓	✓
Tuolumne	✓	✓	✓	✓
Ventura	✓	✓	✓	✓
Yolo			✓	✓
TOTAL	**31**	**26**	**32**	**49**

Table B.30
Counties Reporting Planned Implementation of Full Service Partnership Services to Adults
(n=59)

County	Evidence-Based Practices								Other Practices		Coordination		Disch-arge
	Wellness Recovery Action Plan	Cognitive Behavioral Therapy	Dialectical Behavior Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeduca-tion	Partners in Care	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning/ Criteria
Alameda	✓											✓	✓
Alpine	✓												
Amador					✓								
Berkeley City	✓						✓			✓			
Butte	✓			✓									
Calaveras	✓						✓		✓				
Colusa		✓											
Contra Costa	✓					✓					✓	✓	
Del Norte	✓			✓					✓		✓	✓	✓
El Dorado	✓		✓										
Fresno	✓						✓		✓		✓	✓	✓
Glenn	✓	✓	✓	✓	✓				✓	✓	✓	✓	✓
Humboldt												✓	
Imperial	✓						✓						✓
Inyo	✓								✓			✓	✓
Kern		✓			✓	✓	✓				✓	✓	✓
Kings										✓	✓	✓	
Lake									✓	✓	✓	✓	✓
Lassen	✓												
Los Angeles	✓								✓	✓	✓	✓	✓
Madera							✓			✓	✓	✓	
Marin	✓											✓	✓
Mariposa							✓			✓			
Mendocino				✓									
Merced												✓	
Modoc													
Mono							✓						
Monterey	✓	✓										✓	✓
Napa	✓				✓		✓			✓	✓	✓	
Nevada	✓	✓		✓		✓				✓	✓	✓	✓
Orange	✓						✓			✓	✓	✓	✓
Placer													

County	Evidence-Based Practices								Other Practices		Coordination		Disch-arge
	Wellness Recovery Action Plan	Cognitive Behavioral Therapy	Dialectical Behavior Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeduca-tion	Partners in Care	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning/ Criteria
Plumas													
Riverside	✓	✓	✓	✓			✓			✓	✓	✓	✓
Sacramento	✓						✓		✓	✓	✓	✓	
San Benito	✓	✓	✓	✓	✓		✓			✓	✓	✓	✓
San Bernardino		✓		✓					✓	✓	✓	✓	✓
San Diego	✓			✓									
San Francisco	✓											✓	
San Joaquin	✓									✓		✓	
San Luis Obispo	✓												✓
San Mateo	✓	✓		✓	✓		✓		✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara	✓						✓		✓			✓	
Santa Cruz	✓											✓	
Shasta	✓				✓					✓	✓	✓	✓
Sierra	✓								✓	✓		✓	✓
Siskiyou													
Solano	✓												
Sonoma	✓											✓	
Stanislaus	✓						✓				✓	✓	✓
Sutter-Yuba	✓	✓		✓	✓		✓			✓	✓	✓	✓
Tehama													
Tri-City											✓	✓	
Trinity	✓												✓
Tulare										✓		✓	
Tuolumne	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓
Ventura	✓			✓						✓	✓	✓	✓
Yolo	✓												
TOTAL	**40**	**12**	**6**	**14**	**10**	**5**	**20**	**1**	**13**	**23**	**24**	**37**	**26**

Table B.31
Counties Reporting Planned Implementation of Full Service Partnership Services to Older Adults (N=54)

County	Outreach and Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Alameda	✓	✓	✓	✓	✓	✓
Alpine	✓	✓		✓	✓	✓
Amador	✓	✓	✓	✓		
Berkeley City	✓	✓	✓	✓		✓
Butte	✓	✓	✓	✓	✓	✓
Calaveras	✓	✓	✓			
Colusa*						
Contra Costa*						
Del Norte*						
El Dorado		✓	✓			
Fresno	✓		✓	✓	✓	
Glenn	✓	✓	✓	✓	✓	✓
Humboldt	✓	✓	✓	✓	✓	✓
Imperial	✓	✓	✓	✓	✓	✓
Inyo	✓		✓	✓	✓	✓
Kern	✓	✓	✓	✓	✓	✓
Kings	✓				✓	✓
Lake	✓	✓	✓	✓	✓	✓
Lassen	✓				✓	
Los Angeles	✓	✓	✓	✓	✓	✓
Madera	✓	✓				
Marin	✓	✓	✓	✓	✓	✓
Mariposa					✓	
Mendocino	✓	✓	✓	✓		
Merced	✓	✓		✓	✓	
Modoc	✓	✓	✓	✓		
Mono*						
Monterey	✓	✓	✓		✓	
Napa	✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓	
Orange	✓		✓	✓	✓	
Placer	✓	✓	✓	✓	✓	✓
Plumas	✓	✓	✓	✓	✓	✓

County	Outreach and Engagement					
	Outreach to Underserved & Unserved	Priority to Unserved Populations	Clear FSP Eligibility Criteria	Needs Assessment	Individual Services & Supports Plan	Service Delivery based on Needs Assessment & ISSP
Riverside	✓	✓	✓	✓		
Sacramento	✓	✓	✓	✓	✓	
San Benito	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓	✓
San Diego	✓	✓	✓	✓	✓	✓
San Francisco	✓	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓	✓
San Luis Obispo	✓	✓	✓	✓	✓	✓
San Mateo	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓
Santa Clara	✓	✓	✓	✓	✓	
Santa Cruz	✓	✓	✓	✓		
Shasta	✓	✓	✓	✓	✓	✓
Sierra*						
Siskiyou	✓		✓	✓		
Solano	✓	✓	✓			
Sonoma	✓	✓		✓		
Stanislaus	✓	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓	✓
Tehama		✓	✓		✓	✓
Tri-City	✓		✓	✓	✓	
Trinity	✓	✓				
Tulare	✓	✓		✓	✓	
Tuolumne	✓	✓	✓	✓	✓	✓
Ventura	✓			✓	✓	
Yolo	✓	✓	✓			
TOTAL	**51**	**45**	**44**	**43**	**40**	**29**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.32
Counties Reporting Planned Implementation of Full Service Partnership Services to Older Adults
(N=54)

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Cultural Competence	Community Collaboration	Integrated Service Experience
Alameda	✓	✓	✓	✓	✓	✓	✓	✓	✓
Alpine	✓	✓	✓	✓	✓	✓	✓	✓	✓
Amador				✓			✓		
Berkeley City		✓	✓	✓	✓	✓	✓	✓	✓
Butte		✓	✓	✓	✓	✓	✓	✓	
Calaveras	✓	✓		✓	✓		✓		✓
Colusa*									
Contra Costa*									
Del Norte*									
El Dorado				✓					
Fresno	✓			✓	✓		✓	✓	✓
Glenn	✓	✓	✓	✓	✓	✓	✓	✓	✓
Humboldt	✓	✓	✓	✓	✓	✓	✓	✓	✓
Imperial	✓	✓		✓	✓	✓	✓	✓	
Inyo	✓	✓		✓	✓		✓	✓	✓
Kern	✓	✓		✓	✓	✓	✓	✓	✓
Kings		✓	✓	✓			✓	✓	✓
Lake	✓	✓	✓	✓	✓	✓	✓	✓	✓
Lassen		✓	✓	✓	✓	✓	✓		✓
Los Angeles	✓	✓		✓	✓	✓	✓	✓	
Madera	✓	✓	✓	✓		✓	✓		✓
Marin	✓			✓	✓	✓	✓	✓	✓
Mariposa		✓	✓	✓			✓		✓
Mendocino	✓			✓	✓		✓	✓	✓
Merced	✓		✓	✓	✓	✓	✓	✓	✓
Modoc	✓	✓	✓	✓		✓		✓	✓
Mono*									
Monterey	✓			✓			✓	✓	✓
Napa	✓	✓		✓	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓	✓	✓	✓	✓
Orange	✓	✓	✓	✓			✓	✓	✓
Placer	✓	✓		✓	✓	✓	✓	✓	✓

County	Personal Services Coordinator			General Standards					
	Low Caseload	24/7 Coverage	Services in Community v. the Clinic	Wellness, Recovery, Resilience	Client-Centered Care	Family-Centered Care	Cultural Competence	Community Collaboration	Integrated Service Experience
Plumas	✓			✓			✓	✓	✓
Riverside	✓	✓	✓	✓			✓	✓	✓
Sacramento		✓	✓	✓			✓	✓	✓
San Benito	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓		✓	✓	✓
San Diego	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Francisco	✓	✓	✓	✓	✓		✓	✓	✓
San Joaquin		✓	✓	✓		✓	✓	✓	✓
San Luis Obispo	✓	✓	✓	✓	✓	✓	✓	✓	
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara			✓	✓		✓	✓	✓	✓
Santa Cruz		✓	✓	✓			✓		
Shasta		✓	✓	✓	✓	✓	✓	✓	✓
Sierra*									
Siskiyou	✓		✓	✓			✓	✓	✓
Solano		✓		✓					
Sonoma	✓	✓		✓	✓	✓	✓	✓	✓
Stanislaus	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sutter-Yuba		✓	✓	✓	✓	✓	✓	✓	✓
Tehama	✓	✓	✓	✓	✓	✓	✓	✓	✓
Tri-City		✓	✓	✓	✓	✓	✓	✓	✓
Trinity				✓			✓		
Tulare		✓	✓	✓		✓	✓		✓
Tuolumne	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ventura			✓	✓	✓	✓	✓	✓	✓
Yolo		✓		✓	✓		✓	✓	✓
TOTAL	**35**	**44**	**38**	**54**	**36**	**34**	**51**	**44**	**45**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.33
Counties Reporting Planned Implementation of Full Service Partnership Services to Older Adults
(N=54)

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Alameda				✓	
Alpine		✓	✓	✓	
Amador				✓	
Berkeley City	✓				
Butte			✓	✓	✓
Calaveras				✓	
Colusa*					
Contra Costa*					
Del Norte*					
El Dorado					
Fresno			✓	✓	
Glenn	✓	✓	✓	✓	✓
Humboldt			✓	✓	✓
Imperial			✓	✓	
Inyo			✓	✓	
Kern	✓	✓	✓	✓	✓
Kings			✓	✓	✓
Lake			✓	✓	✓
Lassen					
Los Angeles	✓	✓	✓	✓	✓
Madera	✓	✓			✓
Marin	✓		✓	✓	
Mariposa					
Mendocino					
Merced	✓	✓	✓	✓	✓
Modoc				✓	
Mono*					
Monterey			✓		
Napa	✓	✓	✓	✓	✓
Nevada	✓	✓	✓	✓	✓
Orange	✓	✓	✓	✓	✓
Placer	✓	✓	✓	✓	✓
Plumas			✓		

County	Outpatient Mental Health Services				
	Individual Therapy	Group Therapy	Medication Support	Crisis Intervention	Case Management
Riverside					
Sacramento	✓	✓	✓	✓	✓
San Benito	✓	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓	✓
San Diego	✓	✓	✓	✓	✓
San Francisco	✓	✓	✓	✓	✓
San Joaquin	✓	✓	✓	✓	✓
San Luis Obispo	✓			✓	✓
San Mateo	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓
Santa Clara	✓	✓		✓	✓
Santa Cruz			✓		✓
Shasta			✓	✓	✓
Sierra*					
Siskiyou				✓	
Solano		✓		✓	✓
Sonoma	✓	✓	✓		✓
Stanislaus	✓	✓	✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓	✓
Tehama			✓	✓	
Tri-City				✓	
Trinity					
Tulare	✓	✓		✓	
Tuolumne	✓	✓	✓	✓	✓
Ventura			✓		✓
Yolo				✓	
TOTAL	**26**	**25**	**35**	**41**	**31**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.34
Counties Reporting Planned Implementation of Full Service Partnership Services to Older Adults
(N=54)

County	Other Supports									
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment/ Education	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Intimate Partner Violence Services
Alameda						✓				
Alpine						✓			✓	
Amador										
Berkeley City					✓	✓	✓			
Butte	✓								✓	
Calaveras							✓	✓	✓	
Colusa*										
Contra Costa*										
Del Norte*										
El Dorado	✓									
Fresno	✓		✓							
Glenn					✓	✓	✓	✓	✓	✓
Humboldt										
Imperial	✓				✓	✓			✓	
Inyo	✓						✓		✓	
Kern	✓		✓		✓	✓			✓	
Kings			✓							
Lake	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lassen										
Los Angeles	✓	✓				✓	✓		✓	
Madera	✓						✓	✓	✓	✓
Marin					✓	✓			✓	
Mariposa					✓	✓	✓	✓		
Mendocino										
Merced	✓		✓				✓	✓	✓	
Modoc	✓									
Mono*										
Monterey										
Napa	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Nevada				✓	✓				✓	
Orange			✓		✓	✓	✓		✓	
Placer	✓					✓			✓	
Plumas	✓				✓	✓	✓	✓	✓	

County	Other Supports									
	Instrumental Needs	Cost of Healthcare Treatment	Respite Services	Supported Employment/ Education	Psycho-education	Family Education	Educational/ Employment Supplies	Recreational Activities	Transportation	Intimate Partner Violence Services
Riverside								✓		
Sacramento					✓	✓	✓	✓	✓	
San Benito	✓				✓	✓			✓	
San Bernardino	✓			✓		✓	✓	✓	✓	
San Diego			✓		✓	✓			✓	✓
San Francisco	✓							✓	✓	
San Joaquin	✓				✓		✓	✓	✓	
San Luis Obispo	✓			✓	✓			✓	✓	
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara							✓	✓	✓	✓
Santa Cruz										
Shasta	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sierra*										
Siskiyou	✓						✓		✓	
Solano	✓	✓			✓					
Sonoma			✓			✓				
Stanislaus	✓		✓		✓	✓			✓	
Sutter-Yuba	✓				✓	✓	✓	✓	✓	✓
Tehama			✓		✓			✓		
Tri-City						✓		✓		
Trinity										
Tulare					✓		✓		✓	✓
Tuolumne	✓	✓	✓		✓	✓	✓	✓	✓	✓
Ventura					✓	✓				
Yolo	✓		✓			✓	✓		✓	
TOTAL	**28**	**8**	**16**	**8**	**27**	**28**	**24**	**23**	**34**	**11**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.35
Counties Reporting Planned Implementation of Full Service Partnership Services – Peer Support – Specific Positions for Peers for Older Adults
(N=54)

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Alameda	✓					✓	
Alpine	✓				✓	✓	
Amador		✓				✓	
Berkeley City	✓				✓	✓	✓
Butte	✓	✓				✓	
Calaveras						✓	
Colusa*							
Contra Costa*							
Del Norte*							
El Dorado			✓		✓	✓	
Fresno	✓		✓			✓	✓
Glenn	✓			✓		✓	
Humboldt						✓	
Imperial	✓	✓	✓			✓	✓
Inyo	✓					✓	
Kern	✓	✓	✓		✓	✓	
Kings	✓					✓	
Lake		✓	✓		✓	✓	
Lassen						✓	
Los Angeles	✓				✓	✓	✓
Madera							
Marin	✓		✓	✓		✓	✓
Mariposa							
Mendocino		✓			✓	✓	
Merced	✓		✓			✓	
Modoc				✓		✓	
Mono*							
Monterey	✓			✓		✓	✓
Napa	✓				✓		✓
Nevada		✓	✓		✓	✓	✓
Orange	✓	✓					
Placer	✓			✓		✓	✓

County	Peer Support Services						
	Mentors/Peer Adjustment Coaches	Job Coaches	Educational Coaches/ Tutors	Case Managers	Parent Educators/ Support Group	Peer Educators	Advocates
Plumas							
Riverside	✓	✓	✓			✓	✓
Sacramento	✓	✓		✓	✓	✓	✓
San Benito	✓	✓	✓	✓	✓	✓	✓
San Bernardino						✓	✓
San Diego	✓	✓	✓	✓		✓	✓
San Francisco	✓	✓	✓			✓	✓
San Joaquin	✓					✓	✓
San Luis Obispo	✓				✓	✓	
San Mateo	✓		✓		✓	✓	✓
Santa Barbara	✓	✓		✓		✓	✓
Santa Clara	✓					✓	✓
Santa Cruz	✓					✓	
Shasta				✓		✓	✓
Sierra*							
Siskiyou	✓					✓	
Solano	✓	✓	✓			✓	✓
Sonoma	✓			✓		✓	✓
Stanislaus	✓		✓		✓	✓	✓
Sutter-Yuba	✓	✓	✓	✓		✓	✓
Tehama	✓	✓	✓			✓	✓
Tri-City	✓					✓	✓
Trinity	✓						
Tulare	✓					✓	✓
Tuolumne				✓	✓		
Ventura	✓	✓	✓			✓	✓
Yolo	✓					✓	
TOTAL	**39**	**18**	**18**	**13**	**15**	**47**	**28**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.36
Counties Reporting Planned Implementation of Full Service Partnership Services –
Peer Support – Strategies where Peers are part of Team for Older Adult
(N=54)

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Alpine			✓				✓	✓			✓		✓		
Alameda															
Amador			✓	✓											
Berkeley City			✓												
Butte		✓	✓	✓		✓	✓		✓				✓		
Calaveras	✓		✓	✓		✓					✓				
Colusa*															
Contra Costa*															
Del Norte*															
El Dorado			✓	✓		✓					✓				
Fresno	✓		✓	✓					✓						
Glenn		✓	✓	✓		✓	✓	✓							
Humboldt			✓												
Imperial	✓		✓	✓		✓	✓	✓	✓					✓	
Inyo															
Kern			✓	✓			✓	✓							
Kings				✓			✓		✓						
Lake	✓	✓	✓				✓		✓			✓	✓		
Lassen			✓												
Los Angeles									✓						
Madera	✓							✓							
Marin			✓	✓		✓		✓							
Mariposa															
Mendocino	✓	✓	✓	✓									✓		
Merced			✓	✓				✓			✓				
Modoc	✓	✓	✓					✓	✓						
Mono*															
Monterey	✓			✓				✓							
Napa	✓	✓	✓		✓	✓	✓	✓			✓		✓		

County	Peer Support Services														
	Drop-in Centers/ Club house	Warm Lines	Outreach and Engagement	Social/ Recreation Activities	Child Care Support	Transportation	Housing Support	Classes (e.g., self-help, everyday management)	Instrumental Support (e.g., housekeeping, grocery shopping, general needs)	Grounds Keeping/ Facility Maintenance	In-Home Support	Respite Care	Crisis Intervention	Rehabilitation	Violence/Trauma Intervention
Nevada			✓												
Orange			✓	✓		✓	✓		✓						
Placer	✓		✓												
Plumas				✓											
Riverside	✓	✓	✓	✓			✓								
Sacramento	✓		✓	✓			✓						✓		
San Benito	✓			✓		✓	✓							✓	
San Bernardino	✓	✓											✓	✓	
San Diego		✓	✓	✓		✓	✓	✓			✓	✓		✓	
San Francisco	✓		✓	✓			✓	✓							
San Joaquin		✓	✓			✓		✓							
San Luis Obispo				✓		✓		✓							
San Mateo	✓		✓	✓		✓		✓	✓		✓				
Santa Barbara	✓		✓	✓		✓	✓	✓	✓	✓	✓		✓	✓	✓
Santa Clara						✓									
Santa Cruz															
Shasta	✓	✓	✓	✓		✓									
Sierra*															
Siskiyou	✓	✓	✓												
Solano	✓														
Sonoma			✓												
Stanislaus	✓	✓	✓			✓	✓						✓		
Sutter-Yuba	✓		✓	✓		✓	✓	✓					✓	✓	✓
Tehama	✓			✓		✓									
Tri-City															
Trinity						✓									
Tulare			✓	✓											
Tuolumne	✓		✓	✓		✓							✓		
Ventura			✓	✓			✓	✓							
Yolo						✓		✓							
TOTAL	**24**	**14**	**38**	**30**	**1**	**23**	**19**	**21**	**11**	**2**	**8**	**2**	**11**	**6**	**2**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.37
Counties Reporting Planned Implementation of Full Service Partnership Services –
Peer Support – Peers Augmenting the Overall Capacity of the Staff Team for Older Adult
(N=54)

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Alameda	✓	✓							
Alpine	✓	✓		✓	✓	✓	✓		
Amador								✓	✓
Berkeley City	✓	✓		✓		✓	✓		
Butte	✓	✓	✓	✓			✓		
Calaveras*									
Colusa*									
Contra Costa*									
Del Norte	✓								
El Dorado	✓	✓		✓		✓	✓		
Fresno	✓	✓				✓	✓		
Glenn	✓	✓		✓		✓	✓		
Humboldt	✓			✓		✓			
Imperial	✓	✓				✓	✓	✓	
Inyo	✓								
Kern	✓			✓		✓	✓		
Kings	✓								
Lake	✓	✓		✓	✓	✓		✓	
Lassen		✓		✓		✓	✓		
Los Angeles	✓			✓			✓		
Madera	✓	✓		✓		✓	✓		
Marin	✓					✓	✓		
Mariposa		✓							
Mendocino	✓	✓		✓			✓		
Merced	✓			✓		✓			
Modoc						✓			
Mono*									
Monterey	✓	✓		✓	✓		✓		
Napa	✓	✓		✓		✓	✓	✓	
Nevada	✓	✓	✓	✓		✓	✓		
Orange	✓	✓		✓		✓			
Placer	✓			✓		✓			

County	Peer Support Services								
	Support Groups	Culturally Competent/ Fill Ethnic Disparities	LBGTQ	Clinical and Family/Peer Support Staff	Consumer Experience (share their story)	Collaboration with Other Agencies/ Community	Recruitment and Hiring	Socialization Skills	Communication Skills
Plumas								✓	
Riverside	✓	✓		✓		✓	✓		
Sacramento	✓	✓	✓	✓		✓	✓		
San Benito	✓	✓		✓	✓	✓			
San Bernardino	✓	✓	✓			✓			
San Diego	✓	✓		✓		✓	✓	✓	
San Francisco	✓	✓		✓		✓	✓	✓	
San Joaquin	✓	✓				✓			
San Luis Obispo	✓								
San Mateo	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara	✓	✓	✓	✓		✓			
Santa Cruz		✓		✓		✓			
Shasta	✓	✓		✓	✓		✓	✓	
Sierra*									
Siskiyou				✓		✓			
Solano	✓					✓	✓		
Sonoma	✓	✓		✓		✓	✓		
Stanislaus	✓	✓	✓	✓		✓			
Sutter-Yuba	✓	✓				✓		✓	
Tehama						✓			
Tri-City	✓	✓							
Trinity	✓					✓			
Tulare	✓	✓		✓					
Tuolumne	✓	✓		✓					
Ventura						✓	✓		
Yolo									
TOTAL	**44**	**36**	**8**	**33**	**7**	**37**	**26**	**11**	**3**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.38
Counties Reporting Planned Implementation of Full Service Partnership Services to Older Adults: Housing
(N=54)

County	Housing
Alameda	✓
Alpine	✓
Amador	
Berkeley City	
Butte	✓
Calaveras	
Colusa*	
Contra Costa*	
Del Norte*	
El Dorado	✓
Fresno	
Glenn	✓
Humboldt	✓
Imperial	✓
Inyo	✓
Kern	
Kings	✓
Lake	✓
Lassen	✓
Los Angeles	✓
Madera	✓
Marin	✓
Mariposa	✓
Mendocino	
Merced	✓
Modoc	✓
Mono*	
Monterey	✓
Napa	✓
Nevada	✓

County	Housing
Orange	✓
Placer	✓
Plumas	✓
Riverside	
Sacramento	✓
San Benito	✓
San Bernardino	✓
San Diego	✓
San Francisco	✓
San Joaquin	✓
San Luis Obispo	✓
San Mateo	✓
Santa Barbara	✓
Santa Clara	✓
Santa Cruz	✓
Shasta	✓
Sierra*	
Siskiyou	✓
Solano	✓
Sonoma	✓
Stanislaus	✓
Sutter-Yuba	✓
Tehama	
Tri-City	✓
Trinity	
Tulare	✓
Tuolumne	✓
Ventura	
Yolo	
TOTAL	**43**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.39
Counties Reporting Planned Implementation of Full Service Partnership Services to Older Adults
(N=54)

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Alameda	✓	✓	✓	✓
Alpine				
Amador		✓		
Berkeley City				
Butte	✓	✓	✓	✓
Calaveras	✓			✓
Colusa*				
Contra Costa*				
Del Norte*				
El Dorado				
Fresno	✓	✓	✓	✓
Glenn	✓	✓	✓	✓
Humboldt				✓
Imperial	✓	✓		
Inyo				
Kern	✓	✓	✓	✓
Kings	✓			
Lake	✓	✓		✓
Lassen				✓
Los Angeles	✓		✓	✓
Madera			✓	✓
Marin	✓	✓	✓	✓
Mariposa		✓		✓
Mendocino	✓			
Merced	✓			✓
Modoc	✓	✓	✓	
Mono*				
Monterey	✓	✓	✓	
Napa	✓		✓	✓
Nevada	✓	✓	✓	✓
Orange	✓		✓	✓
Placer	✓			✓

County	MH Staff			SA Tx
	Number of Psychiatrist/ NP Staff	Number of Social Worker Staff	Team Approach	Substance Abuse Treatment
Plumas			✓	
Riverside			✓	
Sacramento			✓	✓
San Benito	✓	✓	✓	✓
San Bernardino	✓	✓	✓	✓
San Diego	✓		✓	✓
San Francisco	✓	✓		✓
San Joaquin	✓		✓	✓
San Luis Obispo		✓	✓	✓
San Mateo	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓
Santa Clara			✓	✓
Santa Cruz				
Shasta	✓	✓	✓	✓
Sierra*				
Siskiyou	✓			✓
Solano				
Sonoma				✓
Stanislaus	✓	✓	✓	✓
Sutter-Yuba			✓	✓
Tehama	✓	✓	✓	✓
Tri-City				✓
Trinity				
Tulare			✓	✓
Tuolumne	✓	✓	✓	✓
Ventura	✓		✓	✓
Yolo	✓			
TOTAL	**33**	**23**	**31**	**38**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Table B.40
Counties Reporting Planned Implementation of Full Service Partnership Services to Older Adults
(n=54)

County	Evidence-Based Practices								Other Practices		Coordination		Dis-charge
	Wellness Recovery Action Plan	Cognitive Behavioral Therapy	Dialectical Behavior Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeducation	Partners in Care	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning /Criteria
Alameda													✓
Alpine	✓												
Amador					✓								
Berkeley City	✓						✓			✓	✓	✓	
Butte	✓			✓									
Calaveras	✓						✓		✓	✓			
Colusa*													
Contra Costa*													
Del Norte*													
El Dorado													
Fresno	✓								✓		✓	✓	✓
Glenn	✓	✓	✓	✓	✓				✓	✓	✓	✓	✓
Humboldt												✓	
Imperial	✓						✓						
Inyo									✓		✓	✓	
Kern		✓			✓	✓	✓				✓	✓	✓
Kings										✓	✓	✓	
Lake									✓	✓	✓	✓	✓
Lassen	✓												
Los Angeles									✓	✓	✓		✓
Madera							✓			✓	✓	✓	
Marin	✓											✓	✓
Mariposa							✓			✓			
Mendocino													
Merced												✓	
Modoc													
Mono*													
Monterey													✓
Napa	✓			✓	✓		✓			✓	✓	✓	
Nevada	✓			✓						✓	✓	✓	✓
Orange							✓				✓		✓

County	Evidence-Based Practices								Other Practices		Coordination		Dis-charge
	Wellness Recovery Action Plan	Cognitive Behavioral Therapy	Dialectical Behavior Therapy	Social Skills Training	Behavior Therapy	Modeling	Family Psychoeducation	Partners in Care	Alternative Treatment	Culturally-Specific Treatment	Hospital Coordination	Criminal Justice Coordination	Planning /Criteria
Placer													
Plumas													
Riverside													
Sacramento	✓						✓		✓	✓	✓	✓	
San Benito	✓	✓	✓	✓	✓		✓			✓	✓	✓	✓
San Bernardino				✓			✓		✓	✓	✓	✓	✓
San Diego	✓			✓									
San Francisco													
San Joaquin	✓									✓		✓	
San Luis Obispo													✓
San Mateo	✓	✓		✓	✓		✓		✓	✓	✓	✓	✓
Santa Barbara	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Clara										✓			
Santa Cruz													
Shasta	✓				✓					✓	✓	✓	✓
Sierra*													
Siskiyou													
Solano	✓												
Sonoma	✓						✓					✓	
Stanislaus	✓						✓			✓	✓	✓	✓
Sutter-Yuba		✓					✓		✓	✓	✓	✓	✓
Tehama													
Tri-City							✓				✓	✓	
Trinity													
Tulare										✓		✓	
Tuolumne	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓
Ventura							✓				✓	✓	
Yolo													
TOTAL	**22**	**7**	**4**	**10**	**9**	**4**	**19**	**1**	**11**	**22**	**23**	**27**	**19**

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for OA in study*

Appendix C

County FSP Expenditure by Age Group Web Survey

(Table View – what the tables look like before we download the data)

County FSP Expenditure by Age Group Web Survey

RespondentID	
Please enter county name:	Open-Ended Response
Please enter county code:	Open-Ended Response
Where did your county/municipality document FSP Housing Expenditures on the FY 08-09 Revenue & Expenditure Reports:	GSD Housing
	GSD Operating
	FSP Operating
	Outreach & Engagement Operating
	Administrative: Operating
	Outside of the MHSA Housing Program
	None of these – Another line item
	If you indicated "None of these – Another line item", please specify.
What amount of expenditures in this line item for FY 08-09 is devoted to FSP Housing?	GSD Housing
	GSD Operating
	FSP Operating
	Outreach & Engagement Operating
	Administrative: Operating
	None of these – Another line item
What percentage of expenditures in this line item for FY 08-09 is devoted to FSP Housing? (Please have total equal 100%)	GSD Housing
	GSD Operating
	FSP Operating
	Outreach & Engagement Operating
	Administrative: Operating
	None of these – Another line item
What % of monies from the "GSD Housing" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "GSD Operating" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults

What % of monies from the "FSP Operating" source of FSP Housing in FY 09-10 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "Outreach & Engagement Operating" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "Administrative - Operating" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "Other" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
Where did your county/municipality document FSP Housing Expenditures on the FY 09-10 Revenue & Expenditure Reports?	GSD Housing
	GSD Operating
	FSP Operating
	Outreach & Engagement Operating
	Administrative: Operating
	Outside of the MHSA Housing Program
	None of these – Another line item
	If you indicated "None of these – Another line item", please specify.

What amount of expenditures in this line item in FY 09-10 is devoted to FSP Housing?	GSD Housing
	GSD Operating
	FSP Operating
	Outreach & Engagement Operating
	Administrative: Operating
	None of these – Another line item
What percentage of expenditures in this line item in FY 09-10 is devoted to FSP Housing? (Please have total equal 100%)	GSD Housing
	GSD Operating
	FSP Operating
	Outreach & Engagement Operating
	Administrative: Operating
	None of these – Another line item
What % of monies from the "GSD Housing" source of FSP Housing in FY 09-10 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "GSD Operating" source of FSP Housing in FY 09-10 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "FSP Operating" source of FSP Housing in FY 09-10 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "Outreach & Engagement Operating" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults

What % of monies from the "Administrative - Operating" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
What % of monies from the "Other" source of FSP Housing in FY 08-09 was expended on each age group: (Please have total equal 100%)	Children
	TAY
	Adults
	Older Adults
How many programs FY 08-09 are devoted to outreach to FSPs?	0 Programs
	1-10 Programs
What amount of expenditures in this program for FY 08-09 is devoted to outreach to FSPs?	Program 1
	Program 2
	Program 3
	Program 4
	Program 5
	Program 6
	Program 7
	Program 8
	Program 9
	Program 10
What % of monies for outreach in "Program 1" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 2" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 3" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY

	Adults
	Older Adults
What % of monies for outreach in "Program 4" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 5" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 6" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 7" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 8" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 9" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 10" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults

	Older Adults
How many programs FY 09-10 are devoted to outreach to FSPs?	0 Programs
	1-10 Programs
What amount of expenditures in this program for FY 09-10 is devoted to outreach to FSPs?	Program 1
	Program 2
	Program 3
	Program 4
	Program 5
	Program 6
	Program 7
	Program 8
	Program 9
	Program 10
What % of monies for outreach in "Program 1" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 2" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 3" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 4" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 5" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults

	Older Adults
What % of monies for outreach in "Program 6" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 7" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 8" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 9" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for outreach in "Program 10" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
How many programs for FY 08-09 are devoted to supportive services for FSPs?	0 Programs
	1-10 Programs
What amount of expenditures in this program for FY 08-09 is devoted to supportive services for FSPs?	Program 1
	Program 2
	Program 3
	Program 4
	Program 5
	Program 6
	Program 7
	Program 8
	Program 9
	Program 10

What % of monies for supportive services in "Program 1" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 2" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 3" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 4" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 5" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 6" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 7" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults

What % of monies for supportive services in "Program 8" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 9" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 10" in FY 08-09 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
How many programs for FY 09-10 are devoted to supportive services for FSPs?	0 Programs
	1-10 Programs
What amount of expenditures in this program for FY 09-10 is devoted to supportive services for FSPs?	Program 1
	Program 2
	Program 3
	Program 4
	Program 5
	Program 6
	Program 7
	Program 8
	Program 9
	Program 10
What % of monies for supportive services in "Program 1" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults

What % of monies for supportive services in "Program 2" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 3" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 4" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 5" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 6" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 7" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults

What % of monies for supportive services in "Program 8" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 9" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
What % of monies for supportive services in "Program 10" in FY 09-10 was expended on FSPs in each age group: (Please have total equal 100%)	Children, Youth & Families
	TAY
	Adults
	Older Adults
Please provide any comments or notes you may have for UCLA.	Open-Ended Response

FSP Services Assessment Tool

		YES/NO			
		CYF	TAY	AD	OA
1	Outreach to Underserved and Unserved Communities				
2	Priority to Unserved Populations				
3	FSP Eligibility (criteria)				
3	Needs Assessment				
3	Individual Services & Supports Plan				
3	Service Delivery based on Needs Assessment & ISSP				
4	Low Caseload				
4	Consumer/Family Staff				
4	24/7 Coverage				
4	Services in Community v. in the Clinic				
5	Client Centered Care				
5	Family Centered Care				
5	Culturally Appropriate				
5	Collaboration with Community Services				
5	Integrated Service Delivery				
6	Individual Therapy				
6	Group Therapy				
6	Medication Support				
6	Crisis Intervention				
6	Employment Case Management				
6	Medical Case Management				
6	Social Case Management				
6	Rehabilitative Case Management				
6	Educational Case Management				
6	Community Client Services				
7	Case Management Support				
7	Housing Case Management				
7	Psychoeducation				
7	Family Education				
8	Instrumental Needs				
8	Cost of Health Care Treatment				
8	Respite Care				

HOUSING		YES/NO			
		CYF	TAY	AD	OA
9	Housing Supports				
9	Operating Support				
9	Housing Placement				

		YES/NO			
		CYF	TAY	AD	OA
10	Psychiatrist/NP staff				
10	Social Worker staff				
10	Team Approach				
11	Educational/Employment Supplies				
11	Recreational Activities				
11	Transportation				
12	Education/Employment Case Management				
12	Recreational Case Management				
12	Parenting Education				
12	Intimate Partner Violence Services				
13	Substance Abuse Treatment				
14	Wellness Recovery Action Plan				
14	Cognitive Behavioral Therapy				
14	Dialectical Behavior Therapy				
14	Social Skills Training				
14	Behavior Therapy				
14	Modeling				
14	Family Psychoeducation				
14	Partners in Care				
14	IMPACT (Improving Mood--Promoting Access to Collaborative Treatment)				
14	Multisystemic Therapy				
14	Therapeutic Foster Care				
14	Psychoeducational Multi-Family Groups				
14	Parent-Child Interaction Therapy				
14	Wraparound				
15	Alternative Treatment				
15	Culturally Specific				
16	Coordination w/Hospital				
16	Coordination w/Criminal Justice				
17	Discharge Planning / Criteria				

Appendix D

County Participants

County	Study Participants [233]			
	FSP Costs by Age Group	# of FSPs/Days of Service by Age Group	FSP Cost Offsets by Age Group	Notes
Alpine	✓			FY 08-09 excluded from analysis; Not in Statewide Data Collection System
Alameda	✓			Not in Statewide Data Collection System
Amador	✓	✓	✓	FY 08-09 excluded from analysis
Berkeley	✓			Not in Statewide Data Collection System
Butte	✓	✓	✓	
Calaveras	✓	✓	✓	FY 08-09 excluded from analysis;
Colusa	✓	✓	✓	FY 08-09 excluded from analysis;
Contra Costa	✓	✓	✓	
Del Norte	✓	✓	✓	FY 08-09 excluded from analysis;
El Dorado	✓	✓	✓	
Fresno	✓	✓	✓	
Glenn	✓	✓	✓	
Humboldt	✓	✓	✓	FY 08-09 excluded from analysis;
Imperial	✓	✓	✓	
Inyo	✓	✓	✓	FY 08-09 excluded from analysis;
Kern	✓	✓	✓	
Kings				
Lake	✓	✓	✓	
Lassen	✓	✓	✓	FY 08-09 excluded from analysis;
Los Angeles	✓	✓	✓	
Madera	✓	✓	✓	
Marin	✓			Not in Statewide Data Collection System
Mariposa				
Mendocino	✓			
Merced	✓	✓	✓	
Modoc				
Mono	✓	✓	✓	FY 08-09 excluded from analysis;
Monterey				Not in Statewide Data Collection System
Napa	✓	✓	✓	
Nevada				
Orange	✓	✓	✓	
Placer	✓	✓	✓	
Plumas				
Riverside	✓	✓		Not in Statewide Data Collection System

[233] Tri City indicated that they were in start-up during the entire study period (FY 08-09 and FY 09-10). Start-up years are not included in the calculations.

County	Study Participants [233]			
	FSP Costs by Age Group	# of FSPs/Days of Service by Age Group	FSP Cost Offsets by Age Group	Notes
Sacramento				
San Benito	✓	✓	✓	
San Bernardino	✓	✓	✓	
San Diego	✓	✓	✓	
San Francisco	✓	✓	✓	
San Joaquin	✓	✓	✓	
San Luis Obispo	✓	✓	✓	
San Mateo*	✓			
Santa Barbara	✓			Not in Statewide Data Collection System
Santa Clara	✓	✓	✓	
Santa Cruz	✓	✓	✓	
Shasta	✓	✓	✓	
Sierra	✓	✓	✓	
Siskiyou	✓	✓	✓	
Solano	✓	✓	✓	
Sonoma	✓	✓	✓	
Stanislaus	✓	✓	✓	
Sutter-Yuba				
Tehama	✓	✓	✓	FY 08-09 excluded from analysis
Trinity	✓	✓	✓	
Tulare	✓	✓	✓	
Tuolumne	✓	✓	✓	
Ventura	✓	✓	✓	
Yolo	✓	✓	✓	
TOTAL	50	43	42	

Appendix E

Revenue & Expenditure Reports

Exhibit E.1

Full Service Partnership Program Worksheet: Revenue and Expenditure Report
(Fiscal Year 08-09)

http://www.dmh.ca.gov/DMHDocs/docs/notices09/09-22_Enclosure2.xls

Revenue and Expenditure Reports

Process of Transferring Individual County Excel Files from FY 09-10 into Master Cross-Site File

The MHSA (FY: 06/07, 07/08, 08/09) Database was created in the Spring of 2011 in order to conduct analyses for Phase II Deliverable 1. It is an aggregated database containing fiscal data from a total of 59 California counties/municipalities spanning three fiscal year periods, covering 25 program data sets, sourced from 589 distinct file locations, containing a total of 4,498 unique variables, encompassing a grand total of 287,265 distinct data points.

Fiscal Year 2006-2007 contained 1,325 distinct variables provided by 57 counties/municipalities across 6 programs located within 57 separate files containing a total of 72,525 distinct data points.

Fiscal Year 2007-2008 contained 1,265 distinct variables provided by 59 counties/municipalities across 7 programs located within 60 separate files containing a total of 75,900 distinct data points.

Fiscal Year 2008-2009 contained 2,264 distinct variables provided by 59 counties/municipalities across 11 programs located within 472 separate files containing a total of 135,840 distinct data points.

The MHSA Database was constructed through a process of template creation, formula crafting, running transfer protocols and performing validity checks.

Templates were formed via construction of a list of all variables across each program over all three fiscal years. Formula were generated to transfer the values of individual cells to the database template and were compiled to transfer all the relevant data points within a given workbook and, subsequently, entire source-file.

Formulas were crafted for each of the unique variables contained within each program or workbook. Master formulae were crafted for each workbook within a file or fiscal year. The master formulae performed the relocation of each relevant data point, across all programs, within a given file or fiscal year.

Transfer protocols were generated to perform manual and semi-automated opening and closing of files, updating formula and transferring the relevant data values of each fiscal year to the database. Validity checks were performed throughout each stage of the process with full checks on each new formula, random spot checks, specific value checks and redundant report checks.

Challenges/Limitations

Complications in the construction of the database template arose from the systemic variance within a specific program across multiple fiscal years. Each program contains differing sets of reported variables across each fiscal year. Such complexity required the database construction and formulae formats to account for the disparate data formats. This was accomplished through the merger of otherwise identical variables names that were renamed and through the adjustment of cell-specific spacing references in all formulae.

Further complicating the construction of the database was the systemic variance among the three fiscal years in file sets and data locations. While fiscal years 2006-2007 and 2007-2008 are rather similar the 2008-2009 fiscal year is provided in an entirely different file set format. Additionally, each fiscal year contains noteworthy variance in data locations from the other fiscal years. This complexity required the substantial retooling of the formula sets and numerous additional, unique formula sets to be constructed.

However, the most severe complications came as a result of modifications performed by reporting counties to the file names, workbook names and, most significantly, workbook formats. Variances which caused transfer protocols to report incorrect and invalid data points, if not miss the source-data entirely. These issues necessitated the manual reformatting of all files and workbooks locations found to be employing deviant standards and the subsequent manual operation of all associated transfer protocols.

UCLA hired a contractor to complete the initial extraction and merge. The contractor's services have been retained to complete the extraction and merge for the FY 09-10 data.

However, in the interest of expediency, FSP totals were taken from RERs through transcription and input into county Expenditures and Cost Offsets worksheets (provided to counties for review). Totals were cross-checked for accuracy. This initial process was much less costly and time-consuming, and met the immediate deliverable deadline need.

Exhibit E.5

Counties/Municipalities that submitted Revenue and Expenditure Reports
(Fiscal Year 08-09 & Fiscal Year 09-10)

Counties	Revenue & Expenditure Report	
	FY 08/09	FY 09/10
Alameda	1	1
Alpine	1	1
Amador	1	1
Berkeley City	1	1
Butte	1	1
Calaveras	1	1
Colusa	1	1
Contra Costa	1	1
Del Norte	1	0
El Dorado	1	1
Fresno	1	1
Glenn	1	1
Humboldt	1	1
Imperial	1	1
Inyo	1	1
Kern	1	1
Kings	1	1
Lake	1	1
Lassen	1	1
Los Angeles	1	1
Madera	1	1
Marin	1	1
Mariposa	1	1
Mendocino	1	1
Merced	1	1
Modoc	1	1
Mono	1	1
Monterey	1	1
Napa	1	1
Nevada	1	1
Orange	1	1
Placer	1	1
Plumas	1	1
Riverside	1	1
Sacramento	1	1

Counties	Revenue & Expenditure Report	
	FY 08/09	FY 09/10
San Benito	1	1
San Bernardino	1	1
San Diego	1	1
San Francisco	1	1
San Joaquin	1	1
San Luis Obispo	1	1
San Mateo	1	1
Santa Barbara	1	1
Santa Clara	1	1
Santa Cruz	1	1
Shasta	1	1
Sierra	1	1
Siskiyou	1	0
Solano	1	1
Sonoma	1	0
Stanislaus	1	1
Sutter-Yuba	1	1
Tehama	1	1
Tri City	1	1
Trinity	1	1
Tulare	1	1
Tuolumne	1	1*
Ventura	1	1
Yolo	1	1
**New summary format*		

Appendix F
Key Stakeholder Contacts

LIST OF PRESENTATIONS, MEETINGS, INTERVIEWS, CALLS PERSONALLY CONDUCTED BY DR. HARRIS WITH KEY STAKEHOLDERS IN RE: STATEWIDE MHSA EVALUATION		
March 22, 2011	In-person with Southern Regional MHSA Coordinators	**Service Providers**
March 23, 2011	In-person with Bay Area Regional MHSA Coordinators	**Service Providers**
March 29, 2011	In-person with Superior Regional MHSA Coordinators	**Service Providers**
March 30, 2011	In-person with Central Regional MHSA Coordinators	**Service Providers**
April 1, 2011	In-person with LA County DMH	**Service Providers**
April 15, 2011	In-person with FSP Practices Workgroup (Todd Gilmer, UCSD, Jen Clancy, CiMH, and others)	**Service Providers**
May 9, 2011	In-person with MHSA Partners	**Service Providers**
May 11, 2011	In-person with NAMI CA (Kathleen Derby)	**Client & Family Agency**
June 13, 2011	In-person with California Network of Mental Health Clients (Delphine Brody and client representatives)	**Client & Family Agency**
June 13, 2011	In-person with California Department of Aging (Lin Benjamin)	**Agency representing under-served**
June 13, 2011	In-person with California Community Colleges - Student Services and Special Programs (Betsy Sheldon)	**Service Providers**
June 14, 2011	In-person with United Advocates for Children and Families (Oscar Wright)	**Client & Family Agency**
June 14, 2011	In-person with Client and Family Leadership Committee (Dee Lemonds), Cultural and Linguistic Competence Committee (Pete Best)	**Client & Family Agency**
June 14, 2011	Webinar with NAMI CA clients and family representatives, onsite at NAMI CA offices	**Client & Family Agency**
June 23, 2011	In-person with the California Mental Health Directors Association (Heather Anders, contact) and Mental Health and Aging Coalition (Vivana Criado)	**Service Providers & Agency representing under-served**
July 15, 2011	In-person at Nevada County (Michele Violett)	**Presentation to Clients & Families**
July 22, 2011	In-person at Shasta County (Jaime Hannigan)	**Presentation to Clients & Families**
July 22, 2011	Telephone call with Alameda County (Rick Crispino)	**Service Providers**
July 22, 2011	In-person with California Mental Health Planning Council (Ann Arneill-Py)	**Association**
July 22, 2011	In-person with California Council of Community Mental Health Agencies (Harriett Markell)	**Association**
July 22, 2011	In-person with Sacramento Association of Mental Health Contractors (John Buck)	**Association**
July 22, 2011	In-person with CASRA (Joseph Robinson)	**Association**

Appendix G

FSP Expenditures by County

Table G.1
Full Service Partnership Services – Children, Youth and Families: Annualized Expenditure per-Client
FY 08-09 [1]
Small Counties are grouped together in the table [2]

County		Children, Youth, and Families					
	Number of Participants during Fiscal Year 08-09	Sum of Days	Number of Client Years	Annualized per-FSP expenditure	Daily Expenditure per-FSP Client	Total CYF FSP Expenditures	Total CYF Expenditures as a % of FSP Total Expenditures
Butte [3]	11	1,369	3.8	--	--	--	--
Contra Costa	112	21,109	57.8	$72,054.99	$197.41	$4,164,778.18	31.6%
Fresno [4]	129	31,968	87.6	--	--	--	--
Kern	53	13,033	35.7	$19,269.87	$52.79	$687,934.48	11.5%
Los Angeles	2,223	580,545	1,590.5	$17,518.83	$48.00	$27,863,702.00	20.3%
Merced	58	8,418	23.1	$3,759.79	$10.30	$86,851.14	3.5%
Orange	291	62,721	171.8	$30,043.43	$82.31	$5,161,462.00	22.3%
Placer	20	3,135	8.6	$28,300.58	$77.54	$243,385.00	6.3%
Riverside	402	118,171	323.8	$16,879.67	$46.25	$5,465,637.00	23.7%
San Bernardino	447	70,203	192.3	$41,982.25	$115.02	$8,073,186.00	32.9%
San Diego	282	51,520	141.2	$36,367.51	$99.64	$5,135,092.00	23.0%
San Francisco	155	34,225	93.8	$9,785.14	$26.81	$917,846.00	13.8%
San Joaquin	28	4,417	12.1	$26,113.78	$71.54	$315,976.72	4.3%
San Luis Obispo	23	4,522	12.4	$40,456.37	$110.84	$501,659.00	16.2%
Santa Clara	65	11,791	32.3	$70,441.64	$192.99	$2,275,265.00	14.22%
Santa Cruz *	--	--	--	--		--	--
Small Counties	160	29,876	81.9	$20,330.21	$55.70	$1,665,043.87	10.9%
Solano	36	9,828	26.9	$14,616.38	$40.04	$393,180.50	14.8%
Sonoma	84	24,587	67.4	$6,599.76	$18.08	$444,823.90	15.4%
Stanislaus	32	6,495	17.8	$23,376.02	$64.04	$416,093.13	7.1%
Tulare	9	1,987	5.4	$17,237.80	$47.23	$93,084.13	9.0%
Ventura	78	11,438	31.3	$19,952.97	$54.67	$624,528.00	12.5%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[1] See Appendix D for County Participants

[2] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

[3] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[4] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

Table G.2
Full Service Partnership Services – Children, Youth and Families: Core FSP Expenditures
FY 08-09 [5]
Small Counties are grouped together in the table [6]

County	Core Expenditures		
	Housing	Services	Total
Alameda	$108,784.35	--	$108,784.35
Butte [7]	--	--	--
Contra Costa	$1,450,476.18	$2,714,302.00	$4,164,778.18
Fresno [8]	--	--	--
Kern	--	$687,934.48	$687,934.48
Los Angeles	--	$27,863,702.00	$27,863,702.00
Marin	--	$467,878.00	$467,878.00
Merced	--	$86,851.14	$86,851.14
Orange	$840,854.79	$4,320,607.21	$5,161,462.00
Placer	--	$243,385.00	$243,385.00
Riverside	$36,354.24	$5,429,282.76	$5,465,637.00
San Bernardino	--	$8,073,186.00	$8,073,186.00
San Diego	--	$5,135,092.00	$5,135,092.00
San Francisco	--	$917,846.00	$917,846.00
San Joaquin	--	$315,976.72	$315,976.72
San Luis Obispo	--	$501,659.00	$501,659.00
San Mateo	--	$1,563,623.00	$1,563,623.00
Santa Barbara	--	$565,442.00	$565,442.00
Santa Clara	$22,940.65	$2,252,324.35	$2,275,265.00
Santa Cruz*	--	--	--
Small Counties	$20,769.82	$1,996,441.80	$2,017,211.62
Solano	--	$393,180.50	$393,180.50
Sonoma	--	$444,823.90	$444,823.90
Stanislaus	$19,981.95	$396,111.18	$416,093.13
Tulare	$7,250.90	$85,833.23	$93,084.13
Ventura	$238,000.00	$386,528.00	$624,528.00

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[5] See Appendix D for County Participants
[6] Small counties included for purpose of FY 08-09 analyses = Alpine, Berkeley, El Dorado, Glenn, Imperial, Lake, Madera, Mendocino, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo.
[7] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.
[8] Ibid.

Table G.3
Full Service Partnership Services – Children, Youth and Families: Annualized Expenditure per-Client
FY 09-10 [9]
Small Counties are grouped together in the table [10]

County		Children, Youth, and Families					
	Number of Participants during Fiscal Year 09-10	Sum of Days	Number of Client Years	Annualized per-FSP Expenditure	Total CYF FSP Expenditures	Daily Expenditure per-FSP Client	Total CYF Expenditures as a % of FSP Total Expenditures
Butte [11]	5	780	2.1	--	--	--	--
Contra Costa	133	30,762	84.3	$39,072.59	$3,293,819.24	$107.05	34.3%
Fresno [12]	253	46,516	127.4	--	--	--	--
Kern	53	13,317	36.5	$18,644.84	$680,536.56	$51.08	9.4%
Los Angeles	3,165	820,496	2,247.9	$18,095.06	$40,675,886.00	$49.58	22.1%
Merced	71	16,329	44.7	$12,431.35	$555,681.52	$34.06	23.8%
Orange	278	94,798	259.7	$20,111.29	$5,222,903.00	$55.10	21.0%
Placer	13	2,841	7.8	$20,142.82	$157,114.00	$55.19	6.7%
Riverside	209	50,999	139.7	$32,547.75	$4,546,920.00	$89.17	23.3%
San Bernardino	671	109,552	300.1	$26,571.40	$7,974,077.00	$72.80	30.3%
San Diego	768	105,839	290.0	$5,745.29	$1,666,134.00	$15.74	7.2%
San Francisco	196	40,393	110.7	$9,369.71	$1,037,227.00	$25.67	11.7%
San Joaquin	59	6,552	18.0	$18,891.00	$340,038.08	$51.76	4.9%
San Luis Obispo	75	14,553	39.9	$17,486.39	$697,707.00	$47.91	19.0%
Santa Clara	88	17,722	48.6	$54,663.66	$2,656,654.00	$149.76	14.74%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	281	63,726	174.6	$12,918.83	$2,255,628.57	$35.39	8.8%
Solano	45	9,732	26.7	$14,666.67	$391,600.00	$40.18	11.7%
Sonoma	116	36,099	98.9	$3,933.95	$389,067.65	$10.78	11.5%
Stanislaus	30	6,480	17.8	$23,598.50	$420,053.26	$64.65	7.5%
Tulare	10	2,657	7.3	$11,320.81	$82,641.89	$31.02	8.3%
Ventura	38	5,187	14.2	$45,600.42	$647,526.00	$124.93	6.4%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[9] See Appendix D for County Participants

[10] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditures per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

[11] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[12] Ibid.

Table G.4
Full Service Partnership Services – Children, Youth and Families: Percent of Core FSP Expenditures
FY 09-10 [13]
Small Counties are grouped together in the table [14]

County	Core Expenditures		
	Housing	Services	Total
Alameda	$39,768.13	--	$39,768.13
Butte [15]	--	--	--
Contra Costa	$852,781.44	$2,441,037.80	$3,293,819.24
Fresno [16]	--	--	--
Kern	--	$680,536.56	$680,536.56
Los Angeles	--	$40,675,886.00	$40,675,886.00
Marin	--	$461,144.00	$461,144.00
Merced	--	$555,681.52	$555,681.52
Orange	$752,612.70	$4,470,290.30	$5,222,903.00
Placer	--	$157,114.00	$157,114.00
Riverside	$13,047.33	$4,533,872.67	$4,546,920.00
San Bernardino	--	$7,974,077.00	$7,974,077.00
San Diego	--	$1,666,134.00	$1,666,134.00
San Francisco	--	$1,037,227.00	$1,037,227.00
San Joaquin	--	$340,038.08	$340,038.08
San Luis Obispo	--	$697,707.00	$697,707.00
San Mateo	--	$1,926,746.50	$1,926,746.50
Santa Barbara	--	$617,758.00	$617,758.00
Santa Clara	$25,116.54	$2,631,537.46	$2,656,654.00
Santa Cruz*	--	--	--
Small Counties	$24,291.72	$2,338,911.85	$2,363,203.57
Solano	--	$391,600.00	$391,600.00
Sonoma	--	$389,067.65	$389,067.65
Stanislaus	$18,897.92	$401,155.34	$420,053.26
Tulare	$1,844.67	$80,797.22	$82,641.89
Ventura	$10,800.00	$636,726.00	$647,526.00

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[13] See Appendix D for County Participants

[14] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

[15] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[16] Ibid.

Table G.5
Full Service Partnership Services – Transition Age Youth: Annualized Expenditure per-Client
FY 08-09 [17]
Small Counties are grouped together in the table [18]

County		Transition Age Youth					
	Number of Participants during Fiscal Year 08-09	Sum of Days	Number of Client Years	Annualized per-FSP Expenditure	Daily Expenditure per-FSP Client	Total TAY FSP Expenditures	Total TAY Expenditures as a % of FSP Total Expenditures
Butte	44	7,600	20.8	$37,108.09	$101.67	$771,848.20	51.9%
Contra Costa	98	25,038	68.6	$26,393.34	$72.31	$1,810,583.08	13.7%
Fresno [19]	155	41,213	112.9	--	--	--	--
Kern	182	35,619	97.6	$17,013.87	$46.61	$1,660,553.87	27.7%
Los Angeles	1,257	333,383	913.4	$23,756.24	$65.09	$21,698,945.60	15.8%
Merced	34	7,706	21.1	$92,470.00	$253.34	$1,951,116.95	78.9%
Orange	598	156,383	428.4	$12,388.70	$33.94	$5,307,317.00	23.0%
Placer [20]	33	8,927	24.5	--	--	--	--
Riverside	212	142,269	389.8	$8,694.66	$23.82	$3,389,178.00	14.7%
San Bernardino	682	129,544	354.9	$12,023.69	$32.94	$4,267,208.00	17.4%
San Diego	401	82,746	226.7	$16,043.92	$43.96	$3,637,156.00	16.3%
San Francisco	145	33,154	90.8	$10,602.17	$29.05	$962,677.00	14.5%
San Joaquin	122	20,373	55.8	$14,332.31	$39.27	$799,742.99	10.8%
San Luis Obispo	30	6,378	17.5	$35,652.46	$97.68	$623,918.00	20.2%
Santa Clara	131	28,241	77.4	$25,735.85	$70.51	$1,991,955.00	12.45%
Santa Cruz	63	17,821	48.8	$24,898.80	$68.22	$1,215,061.30	38.8%
Small Counties	261	51,874	142.1	$20,302.33	$55.62	$2,884,961.16	18.9%
Solano	25	6,517	17.9	$64,244.55	$176.01	$1,149,977.50	43.1%
Sonoma	58	18,519	50.7	$21,871.01	$59.92	$1,108,860.40	38.4%
Stanislaus	105	19,059	52.2	$6,753.44	$18.50	$352,529.77	6.0%
Tulare	65	14,061	38.5	$12,286.53	$33.66	$473,031.59	45.6%
Ventura	104	19,859	54.4	$26,088.46	$71.48	$1,419,212.00	28.4%

[17] See Appendix D for County Participants
[18] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.
[19] There were no FSP expenditures for Fresno TAY reported on their web survey, but there were TAY in the DCR database.
[20] There were no FSP expenditures for Placer TAY reported on their web survey, but there were TAY in the DCR database.

Table G.6
Full Service Partnership Services – Transition Age Youth: Core FSP Expenditures
FY 08-09 [21]
Small Counties are grouped together in the table [22]

County	Core FSP Expenditures		
	Housing	Services	Total
Alameda	$478,651.14	$2,087,727.00	$2,566,378.14
Butte	$148,440.40	$623,407.80	$771,848.20
Contra Costa	$644,656.08	$1,165,927.00	$4,164,778.18
Fresno [23]	--	--	--
Kern	$43,550.43	$1,617,003.44	$1,660,553.87
Los Angeles	$623,122.60	$21,075,823.00	$21,698,945.60
Marin	$33,119.52	$354,864.48	$387,984.00
Merced	$24,200.00	$1,926,916.95	$1,951,116.95
Orange	$942,645.48	$4,364,671.52	$5,307,317.00
Placer [24]	--	--	--
Riverside	$230,243.52	$3,158,934.48	$3,389,178.00
San Bernardino	--	$4,267,208.00	$4,267,208.00
San Diego	$427,971.90	$3,209,184.10	$3,637,156.00
San Francisco	$165,331.28	$797,345.72	$962,677.00
San Joaquin	--	$799,742.99	$799,742.99
San Luis Obispo	$24,074.83	$599,843.17	$623,918.00
San Mateo	$218,691.00	$1,344,932.00	$1,563,623.00
Santa Barbara	$210,425.00	$261,419.00	$471,844.00
Santa Clara	$45,881.30	$1,946,073.70	$1,991,955.00
Santa Cruz	$23,744.40	$1,191,316.90	$1,215,061.30
Small Counties	$49,960.41	$3,382,010.70	$3,431,971.11
Solano	--	$1,149,977.50	$1,149,977.50
Sonoma	$153,000.00	$955,860.40	$1,108,860.40
Stanislaus	$38,572.56	$313,957.21	$352,529.77
Tulare	$65,258.10	$407,773.49	$473,031.59
Ventura	$646.00	$1,418,566.00	$1,419,212.00

[21] See Appendix D for County Participants
[22] Small counties included for purpose of FY 08-09 analyses = Alpine, Berkeley, El Dorado, Glenn, Imperial, Lake, Madera, Mendocino, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo.
[23] There were no FSP expenditures for Fresno TAY reported on their web survey, but there were TAY in the DCR database.
[24] There were no FSP expenditures for Placer TAY reported on their web survey, but there were TAY in the DCR database.

Table G.7
Full Service Partnership Services – Transition Age Youth: Annualized Expenditure per-Client
FY 09-10 [25]
Small Counties are grouped together in the table [26]

County		Transition Age Youth					
	Number of Participants during Fiscal Year 09-10	Sum of Days	Number of Client Years	Annualized per-FSP Expenditure	Daily Expenditure per-FSP Client	Total TAY FSP Expenditures	Total TAY Expenditures as a % of FSP Total Expenditures
Butte	45	9,692	26.6	$26,814.78	$73.47	$713,273.18	34.4%
Contra Costa	134	33,834	92.7	$14,511.83	$39.76	$1,345,246.38	14.0%
Fresno [27]	241	60,943	167.0	--	--	--	--
Kern	207	39,400	107.9	$20,752.64	$56.86	$2,239,210.15	30.8%
Los Angeles	1,702	477,643	1,308.6	$17,464.38	$47.85	$22,853,881.40	12.4%
Merced	45	10,994	30.1	$43,038.99	$117.92	$1,295,473.69	55.5%
Orange	677	229,267	628.1	$7,555.63	$20.70	$4,745,692.00	19.1%
Placer [28]	30	9,293	25.5	--	--	--	--
Riverside	284	190,587	522.2	$5,777.09	$15.83	$3,016,794.00	15.4%
San Bernardino	1,015	208,031	569.9	$9,650.56	$26.44	$5,499,852.40	20.9%
San Diego	657	126,303	346.0	$13,681.38	$37.48	$4,733,759.14	20.5%
San Francisco	184	40,172	110.1	$11,478.83	$31.45	$1,263,819.00	14.2%
San Joaquin	224	49,117	134.6	$6,021.59	$16.50	$810,506.12	11.8%
San Luis Obispo	59	11,435	31.3	$20,210.64	$55.37	$632,593.16	17.3%
Santa Clara	178	36,908	101.1	$23,978.08	$65.69	$2,424,184.00	13.45%
Santa Cruz	36	11,916	32.6	$46,598.05	$127.67	$1,519,096.30	39.0%
Small Counties	452	102,834	281.7	$17,965.30	$49.22	$5,060,825.00	19.8%
Solano	36	8,444	23.1	$54,570.82	$129.51	$1,260,586.00	37.8%
Sonoma	85	24,555	67.3	$15,331.40	$42.00	$1,031,803.50	30.4%
Stanislaus	106	18,786	51.5	$5,584.11	$15.30	$287,581.77	5.1%
Tulare	100	20,225	55.4	$9,119.39	$24.98	$505,213.93	50.8%
Ventura	410	90,024	246.6	$11,193.74	$30.67	$2,760,377.00	27.2%

[25] See Appendix D for County Participants

[26] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

[27] There were no FSP expenditures for Fresno TAY reported on their web survey, but there were TAY in the DCR database.

[28] There were no FSP expenditures for Placer TAY reported on their web survey, but there were TAY in the DCR database.

Table G.8
Full Service Partnership Services – Transition Age Youth: Core FSP Expenditures
FY 09-10 [29]
Small Counties are grouped together in the table [30]

County	Core FSP Expenditures		
	Housing	Services	Total
Alameda	$715,826.34	$1,841,902.00	$2,557,728.34
Butte	$59,755.98	$653,517.20	$713,273.18
Contra Costa	$335,021.28	$1,010,225.10	$1,345,246.38
Fresno [31]	--	--	--
Kern	$54,642.96	$2,184,567.19	$2,239,210.15
Los Angeles	$296,955.40	$22,556,926.00	$22,853,881.40
Marin	$31,043.88	$353,369.12	$384,413.00
Merced	$19,580.00	$1,275,893.69	$1,295,473.69
Orange	$858,216.70	$3,887,475.30	$4,745,692.00
Placer [32]	--	--	--
Riverside	$1,239,496.35	$1,777,297.65	$3,016,794.00
San Bernardino	$506,140.40	$4,993,712.00	$5,499,852.40
San Diego	$659,996.04	$4,073,763.10	$4,733,759.14
San Francisco	$129,245.32	$1,134,573.68	$1,263,819.00
San Joaquin	--	$810,506.12	$810,506.12
San Luis Obispo	$12,550.16	$620,043.00	$632,593.16
San Mateo	$204,832.00	$1,721,914.50	$1,926,746.50
Santa Barbara	$335,206.00	$479,892.00	$815,098.00
Santa Clara	$41,860.90	$2,382,323.10	$2,424,184.00
Santa Cruz	$58,769.20	$1,460,327.10	$1,519,096.30
Small Counties	$803,766.51	$4,930,999.49	$5,734,766.00
Solano	--	$1,260,586.00	$1,260,586.00
Sonoma	$153,000.00	$878,803.50	$1,031,803.50
Stanislaus	$25,801.78	$261,779.99	$287,581.77
Tulare	$92,331.02	$412,882.91	$505,213.93
Ventura	$81,000.00	$2,679,377.00	$2,760,377.00

[29] See Appendix D for County Participants
[30] Small counties included for purpose of FY 09-10 analyses = Alpine, Amador, Berkeley, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mendocino, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo.
[31] There were no FSP expenditures for Fresno TAY reported on their web survey, but there were TAY in the DCR database.
[32] There were no FSP expenditures for Placer TAY reported on their web survey, but there were TAY in the DCR database.

Table G.9
Full Service Partnership Services – Adults: Annualized Expenditure per-Client
FY 08-09 [33]
Small Counties are grouped together in the table [34]

County		Adults					
	Number of Participants during Fiscal Year 08-09	Sum of Days	Number of Client Years	Annualized per-FSP Expenditure	Daily Expenditure per-FSP Client	Total Adult FSP Expenditures	Adult Expenditures as a % of FSP Total Expenditures
Butte	79	20,676	56.6	$12,625.70	$34.59	$714,614.54	48.0%
Contra Costa	160	43,794	120.0	$60,104.57	$134.67	$7,212,547.98	54.7%
Fresno	330	68,034	186.4	$38,502.95	$105.49	$7,176,950.00	99.8%
Kern	345	76,068	208.4	$12,968.81	$35.53	$2,702,699.08	45.1%
Los Angeles	4,176	1,148,521	3,146.6	$26,043.17	$71.35	$81,947,433.40	59.7%
Merced	37	9,146	25.1	$10,665.34	$29.22	$267,699.91	10.8%
Orange	680	179,676	492.3	$20,683.71	$56.67	$10,182,588.00	44.1%
Placer	75	20,430	56.0	$64,318.98	$176.22	$3,601,863.00	93.7%
Riverside	580	135,021	369.9	$31,109.74	$85.23	$11,507,491.00	49.9%
San Bernardino	705	112,206	307.4	$38,543.90	$105.60	$11,848,393.61	48.2%
San Diego	658	192,267	526.8	$22,352.06	$61.24	$11,775,066.00	52.7%
San Francisco	267	51,522	141.2	$28,430.48	$77.89	$4,014,384.00	60.5%
San Joaquin	485	93,546	256.3	$20,215.86	$55.39	$5,181,324.34	70.1%
San Luis Obispo	58	12,114	33.2	$47,271.51	$129.51	$1,569,414.00	50.8%
Santa Clara	341	85,228	233.5	$46,776.27	$128.15	$10,922,259.00	68.3%
Santa Cruz	41	13,321	36.5	$20,207.18	$55.36	$737,562.25	23.6%
Small Counties	493	107,065	293.3	30,112.35	$82.50	$8,831,952.15	57.9%
Solano	38	9,000	24.7	$10,297.09	$28.21	$254,338.00	9.5%
Sonoma	179	61,259	167.8	$7,166.72	$19.63	$1,202,576.40	41.7%
Stanislaus	300	68,507	187.7	$22,442.57	$61.49	$4,212,470.36	72.1%
Tulare	125	21,733	59.5	$6,815.18	$18.67	$405,503.28	39.1%
Ventura	68	9,909	27.1	$49,462.25	$135.51	$1,340,427.00	26.8%

[33] See Appendix D for County Participants

[34] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table G.10
Full Service Partnership Services – Adults: Core FSP Expenditures
FY 08-09 [35]
Small Counties are grouped together in the table [36]

County	Core FSP Expenditures		
	Housing	Services	Total
Alameda	$1,196,627.85	$4,969,600.00	$6,166,227.85
Butte	$188,996.00	$525,618.54	$714,614.54
Contra Costa	$2,524,902.98	$4,687,645.00	$7,212,547.98
Fresno	$7,128,072.00	$48,878.00	$7,176,950.00
Kern	$199,819.62	$2,502,879.46	$2,702,699.08
Los Angeles	$2,583,057.40	$79,364,376.00	$81,947,433.40
Marin	$518,872.48	$985,302.52	$1,504,175.00
Merced	$28,600.00	$239,099.91	$267,699.91
Orange	$1,214,568.03	$8,968,019.97	$10,182,588.00
Placer	--	$3,601,863.00	$3,601,863.00
Riverside	$896,737.92	$10,610,753.08	$11,507,491.00
San Bernardino	$2,500,976.61	$9,347,417.00	$11,848,393.61
San Diego	$2,054,265.12	$9,720,800.88	$11,775,066.00
San Francisco	$281,057.30	$3,733,326.70	$4,014,384.00
San Joaquin	--	$5,181,324.34	$5,181,324.34
San Luis Obispo	$161,116.17	$1,408,297.83	$1,569,414.00
San Mateo	$387,679.50	$1,388,961.50	$1,776,641.00
Santa Barbara	$390,988.00	$2,839,395.00	$3,230,383.00
Santa Clara	$321,169.10	$10,601,089.90	$10,922,259.00
Santa Cruz	$23,744.40	$713,817.85	$737,562.25
Small Counties	$316,158.71	$9,478,300.89	$9,794,459.60
Solano	$129,921.06	$124,416.94	$254,338.00
Sonoma	$51,000.00	$1,151,576.40	$1,202,576.40
Stanislaus	$358,009.89	$3,854,460.47	$4,212,470.36
Tulare	$69,608.64	$335,894.64	$405,503.28
Ventura	$2,380.00	$1,338,047.00	$1,340,427.00

[35] See Appendix D for County Participants

[36] Small counties included for purpose of FY 08-09 analyses = Alpine, Berkeley, El Dorado, Glenn, Imperial, Lake, Madera, Mendocino, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo.

Table G.11
Full Service Partnership Services – Adults: Annualized Expenditure per-Client
FY 09-10 [37]
Small Counties are grouped together in the table [38]

County		Adults					
	Number of Participants during Fiscal Year 09-10	Sum of Days	Number of Client Years	Annualized per-FSP Expenditure	Daily Expenditure per-FSP Client	Total Adult FSP Expenditures	Adult Expenditures as a % of FSP Total Expenditures
Butte	143	37,156	101.8	$13,177.70	$18.58	$1,341,490.14	64.8%
Contra Costa	188	59,159	162.1	$30,542.55	$107.05	$4,950,947.36	51.6%
Fresno	369	99,210	271.8	$24,516.24	$67.17	$6,663,514.00	99.7%
Kern	317	69,998	191.8	$17,805.96	$48.78	$3,415,182.33	47.0%
Los Angeles	4,541	1,357,732	3,719.8	$30,583.96	$83.79	$113,766,228.00	61.9%
Merced	39	11,090	30.4	$10,542.49	$28.88	$320,491.79	13.7%
Orange	724	226,632	620.9	$19,766.27	$54.15	$12,272,875.00	49.4%
Placer	77	23,466	64.3	$33,924.37	$92.94	$2,181,337.00	93.3%
Riverside	626	145,729	399.3	$24,028.32	$65.83	$9,594,507.00	49.1%
San Bernardino	983	260,608	714.0	$17,102.30	$46.86	$12,211,045.52	46.5%
San Diego	1,242	264,709	725.2	$20,132.81	$55.16	$14,600,315.00	63.3%
San Francisco	284	84,724	232.1	$24,404.64	$66.86	$5,664,316.00	63.8%
San Joaquin	937	236,492	647.9	$7,409.88	$20.30	$4,800,862.88	69.8%
San Luis Obispo	64	13,564	37.2	$55,558.11	$152.21	$2,066,761.84	56.4%
Santa Clara	416	102,633	281.2	$43,797.53	$119.99	$12,315,865.00	68.3%
Santa Cruz	36	3,630	9.9	$95,413.41	$261.41	$944,592.75	24.3%
Small Counties	915	206,213	565.0	27,171.81	$74.44	$15,352,070.86	60.0%
Solano	82	22,387	61.3	$8,125.87	$22.26	$498,116.00	14.9%
Sonoma	204	70,115	192.1	$6,028.10	$16.52	$1,157,998.70	34.1%
Stanislaus	263	65,635	179.8	$22,615.28	$61.96	$4,066,228.06	72.2%
Tulare	143	26,217	71.8	$5,066.28	$13.88	$363,759.22	36.6%
Ventura	766	215,037	589.1	$8,107.26	$36.98	$4,775,989.00	47.0%

[37] See Appendix D for County Participants

[38] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table G.12
Full Service Partnership Services – Adults: Core FSP Expenditures
FY 09-10 [39]
Small Counties are grouped together in the table [40]

County	Core FSP Expenditures		
	Housing	Services	Total
Alameda	$2,465,624.06	$7,192,694.00	$9,658,318.06
Butte	$207,079.02	$1,134,411.12	$1,341,490.14
Contra Costa	$1,279,172.16	$3,671,775.20	$4,950,947.36
Fresno	$5,950,632.00	$712,882.00	$6,663,514.00
Kern	$163,928.88	$3,251,253.45	$3,415,182.33
Los Angeles	$2,514,712.60	$111,251,515.40	$113,766,228.00
Marin	$481,180.14	$1,179,137.86	$1,660,318.00
Merced	$23,140.00	$297,351.79	$320,491.79
Orange	$3,160,973.34	$9,111,901.66	$12,272,875.00
Placer	--	$2,181,337.00	$2,181,337.00
Riverside	$39,141.99	$9,555,365.01	$9,594,507.00
San Bernardino	$4,454,035.52	$7,757,010.00	$12,211,045.52
San Diego	$2,008,683.60	$12,591,631.40	$14,600,315.00
San Francisco	$298,159.48	5,366,156.52	$5,664,316.00
San Joaquin	--	$4,800,862.88	$4,800,862.88
San Luis Obispo	$144,326.84	$1,922,435.00	$2,066,761.84
San Mateo	$537,684.00	$1,730,916.00	$2,268,600.00
Santa Barbara	$815,321.00	$4,396,167.00	$5,211,488.00
Santa Clara	$694,890.94	$11,620,974.06	$12,315,865.00
Santa Cruz	$58,769.20	$885,823.55	$944,592.75
Small Counties	$995,593.67	$14,846,800.19	$15,842,393.86
Solano	$135,002.80	$363,113.20	$498,116.00
Sonoma	$51,000.00	$1,106,998.70	$1,157,998.70
Stanislaus	$368,494.50	$3,697,733.56	$4,066,228.06
Tulare	$39,343.56	$324,415.66	$363,759.22
Ventura	$151,200.00	$4,624,789.00	$4,775,989.00

[39] See Appendix D for County Participants

[40] Small counties included for purpose of FY 09-10 analyses = Alpine, Amador, Berkeley, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mendocino, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo.

Table G.13
Full Service Partnership Services – Older Adults: Annualized Expenditure per-Client
FY 08-09 [41]
Small Counties are grouped together in the table [42]

County		Older Adults					
	Number of Participants during Fiscal Year 08-09	Sum of Days	Number of Client Years	Annualized per-FSP Expenditure	Daily Expenditure per-FSP Client	Total Older Adult FSP Expenditures	Older Adult Expenditures as a % of FSP Total Expenditures
Butte [43]	3	441	1.2	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno [44]	10	1,726	4.7	--	--	--	--
Kern	79	22,850	62.6	$14,987.47	$41.06	$938,215.57	15.7%
Los Angeles	373	98,535	270.0	$21,186.65	$58.05	$5,720,395.00	4.2%
Merced	1	7	0.0	--	--	$167,760.00	6.8%
Orange	125	34,172	93.6	$26,157.85	$71.67	$2,448,375.00	10.6%
Placer [45]	23	6,291	17.2	--	--	--	--
Riverside	203	67,729	185.6	$14,593.75	$39.98	$2,708,600.00	11.7%
San Bernardino	34	8,180	22.4	$17,060.60	$46.74	$382,157.39	1.6%
San Diego	157	37,585	103.0	$17,338.78	$47.50	$1,785,894.00	8.0%
San Francisco	67	15,768	43.2	$17,263.22	$47.30	$745,771.00	11.2%
San Joaquin	99	14,699	40.3	$27,262.95	$74.69	$1,098,696.95	14.9%
San Luis Obispo	8	1,260	3.5	$112,063.43	$307.02	$392,222.00	12.7%
Santa Clara	28	6,591	18.1	$44,574.97	$122.12	$806,807.00	5.0%
Santa Cruz	41	12,864	35.2	$33,492.00	$91.76	$1,178,918.45	37.6%
Small Counties	104	21,922	60.1	$31,173.21	$85.41	$1,873,509.82	12.3%
Solano	34	8,847	24.2	$35,873.31	$98.28	$868,134.00	32.6%
Sonoma	6	2,016	5.5	$23,647.99	$64.79	$130,063.94	4.5%
Stanislaus	46	13,574	37.2	$23,100.93	$63.29	$859,354.74	14.7%
Tulare	5	1,300	3.6	$18,048.89	$49.45	$64,976.01	6.3%
Ventura	145	36,351	99.6	$16,237.96	$44.49	$1,617,301.00	32.3%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[41] See Appendix D for County Participants

[42] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

[43] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[44] There were no FSP expenditures for Fresno Older Adults reported on their web survey, but there were Older Adult clients in the DCR database.

[45] There were no FSP expenditures for Placer Older Adults reported on their web survey, but there were Older Adult clients in the DCR database.

Table G.14
Full Service Partnership Services – Older Adults: Core FSP Expenditures
FY 08-09 [46]
Small Counties are grouped together in the table [47]

County	Core FSP Expenditures		
	Housing	Services	Total
Alameda	$391,623.66	$1,010,751.00	$1,402,374.66
Butte [48]	--	--	--
Contra Costa*	--	--	--
Fresno [49]	--	--	--
Kern	$12,808.95	$925,406.62	$938,215.57
Los Angeles	--	$5,720,395.00	$5,720,395.00
Marin	--	$423,450.00	$423,450.00
Merced	$2,200.00	$165,560.00	$167,760.00
Orange	$311,427.70	$2,136,947.30	$2,448,375.00
Placer	--	--	--
Riverside	$48,472.32	$2,660,127.68	$2,708,600.00
San Bernardino	$25,262.39	$356,895.00	$382,157.39
San Diego	$370,908.98	$1,414,985.02	$1,785,894.00
San Francisco	$73,645.42	$672,125.58	$745,771.00
San Joaquin	--	$1,098,696.95	$1,098,696.95
San Luis Obispo	--	$392,222.00	$392,222.00
San Mateo	$387,679.50	$1,043,446.50	$1,431,126.00
Santa Barbara	$16,350.00	$770,279.00	$786,629.00
Santa Clara	$68,821.95	$737,985.05	$806,807.00
Santa Cruz	$11,872.20	$1,167,046.25	$1,178,918.45
Small Counties	$53,682.06	$2,192,791.61	$2,246,473.67
Solano	$21,149.94	$846,984.06	$868,134.00
Sonoma	--	$130,063.94	$130,063.94
Stanislaus	$65,592.60	$793,762.14	$859,354.74
Tulare	$2,900.36	$62,075.65	$64,976.01
Ventura	$374.00	$1,616,927.00	$1,617,301.00

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[46] See Appendix D for County Participants

[47] Small counties included for purpose of FY 08-09 analyses = Alpine, Berkeley, El Dorado, Glenn, Imperial, Lake, Madera, Mendocino, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Sierra County did not provide FSP services in FY 08-09/FY09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

[48] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[49] There were no FSP expenditures for Fresno Older Adults reported on their web survey, but there were Older Adult clients in the DCR database.

Table G.15
Full Service Partnership Services – Older Adults: Annualized Expenditure per-Client
FY 09-10 [50]
Small Counties are grouped together in the table [51]

County		Older Adults					
	Number of Participants during Fiscal Year 09-10	Sum of Days	Number of Client Years	Annualized per-FSP Expenditure	Daily Expenditure per-FSP Client	Total Older Adult FSP Expenditures	Older Adult Expenditures as a % of FSP Total Expenditures
Butte [52]	31	5,461	15.0	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno [53]	11	2,066	5.7	--	--	--	--
Kern	78	19,373	53.1	$17,525.10	$48.01	$930,582.96	12.8%
Los Angeles	406	124,749	341.8	$18,759.55	$51.40	$6,412,015.00	3.5%
Merced [54]	1	365	1.0	--	--	--	--
Orange	142	45,028	123.4	$21,087.65	$57.77	$2,602,216.00	10.5%
Placer [55]	25	7,796	21.4	--	--	--	--
Riverside	233	77,738	213.0	$11,220.24	$30.74	$2,389,911.00	12.2%
San Bernardino	51	13,105	35.9	$16,611.93	$45.51	$596,368.12	2.3%
San Diego	225	50,077	137.2	$14,960.49	$40.99	$2,052,578.86	8.9%
San Francisco	68	20,954	57.4	$15,896.97	$43.55	$912,486.00	10.3%
San Joaquin	152	35,357	96.9	$9,538.23	$26.13	$924,254.92	13.4%
San Luis Obispo	15	3,168	8.7	$30,985.52	$84.89	$269,574.00	7.4%
Santa Clara	29	8,469	23.2	$26,878.06	$73.64	$623,571.00	3.46%
Santa Cruz	30	10,058	27.6	$51,824.74	$141.99	$1,430,362.95	36.7%
Small Counties	171	37,070	101.6	$28,848.79	$79.04	$2,931,036.86	11.4%
Solano	33	9,524	26.1	$45,505.90	$124.67	$1,187,704.00	35.6%
Sonoma	56	20,101	55.1	$14,826.38	$40.62	$816,933.48	24.1%
Stanislaus	43	13,516	37.0	$23,154.48	$63.44	$856,715.91	15.2%
Tulare	7	904	2.5	$17,421.28	$47.73	$43,553.21	4.4%
Ventura	190	53,242	145.9	$13,498.21	$36.98	$1,969,389.00	19.4%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[50] See Appendix D for County Participants

[51] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

[52] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[53] There were no FSP expenditures for Fresno Older Adults reported on their web survey, but there were Older Adult clients in the DCR database.

[54] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[55] There were no FSP expenditures for Placer Older Adults reported on their web survey, but there were Older Adult clients in the DCR database.

Table G.16
Full Service Partnership Services – Older Adults: Core FSP Expenditures
FY 09-10 [56]
Small Counties are grouped together in the table [57]

County	Core FSP Expenditures		
	Housing	Services	Total
Alameda	$755,594.47	$1,101,112.00	$1,856,706.47
Butte [58]	--	--	--
Contra Costa*	--	--	--
Fresno [59]	--	--	--
Kern	$9,107.16	$921,475.80	$930,582.96
Los Angeles		$6,412,015.00	$6,412,015.00
Marin	$5,173.98	$437,255.02	$442,429.00
Merced	$1,780.00	$160,326.00	$162,106.00
Orange	$351,219.26	$2,250,996.74	$2,602,216.00
Placer [60]	--	--	--
Riverside	$13,047.33	$2,376,863.67	$2,389,911.00
San Bernardino	$151,842.12	$444,526.00	$596,368.12
San Diego	$200,868.36	$1,851,710.50	$2,052,578.86
San Francisco	$58,641.20	$853,844.80	$912,486.00
San Joaquin	--	$924,254.92	$924,254.92
San Luis Obispo		$269,574.00	$269,574.00
San Mateo	$537,684.00	$741,673.00	$1,279,357.00
Santa Barbara	$91,141.00	$911,841.00	$1,002,982.00
Santa Clara	$75,349.62	$548,221.38	$623,571.00
Santa Cruz	$29,384.60	$1,400,978.35	$1,430,362.95
Small Counties	$376,593.76	$2,723,884.10	$3,100,477.86
Solano	$21,977.20	$1,165,726.80	$1,187,704.00
Sonoma	--	$816,933.48	$816,933.48
Stanislaus	$90,387.80	$766,328.11	$856,715.91
Tulare	--	$43,553.21	$43,553.21
Ventura	$27,000.00	$1,942,389.00	$1,969,389.00

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[56] See Appendix D for County Participants

[57] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim costs for Older Adults in the study, and are therefore not included in the *Small County* pool.

[58] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[59] There were no FSP expenditures for Fresno Older Adults reported on their web survey, but there were Older Adult clients in the DCR database.

[60] There were no FSP expenditures for Placer Older Adults reported on their web survey, but there were Older Adult clients in the DCR database.

Appendix H
FSP Cost Offsets by County

Table H.1
Full Service Partnership Services – Children, Youth and Families: Expenditures and Cost Offsets
FY 08-09 New Enrollees Only [61]
Small Counties are grouped together in the table [62]

	Children, Youth and Families				
	Number of New Enrollees during Fiscal Year 08-09	Sum of Days	Total FY 08-09 FSP New Enrollee Expenditure	Total Cost Offset	Percent of Costs Offset
Butte [63]	8	951	---	--	--
Contra Costa	76	10,578	$2,088,202.98	$9,129.23	0.4%
Fresno [64]	43	4,393	--	--	--
Kern	17	3,230	$170,511.70	($13,402..08)	-7.9%
Los Angeles	985	171,448	$8,229,504.00	$1,545,830.35	18.8%
Merced	36	3,906	$40,231.80	($18,652.38)	-46.2%
Orange	150	26,159	$2,153,147.29	$472,153.04	21.9%
Placer	9	1,344	$104,213.76	$75,749.30	72.7%
San Bernardino	329	40,076	$4,609,541.52	$367,507.00	8.0%
San Diego	140	19,182	$1,911,294.48	($124,992.53)	-6.5%
San Francisco	89	15,964	$427,994.84	$54,400.09	12.7%
San Joaquin	13	1,442	$103,160.68	($12,717.38)	-12.3%
San Luis Obispo	12	1,722	$190,866.48	($36,453.64)	-19.1%
Santa Clara	44	6,290	$1,213,907.10	($117,245.67)	<100%
Santa Cruz *	--	--		--	--
Small Counties	96	12,311	$685,722.70	$341,674.24	49.8%
Solano	21	5,221	$209,048.84	($30,655.72)	-14.7%
Sonoma	33	5,972	$107,973.76	$34,034.15	31.5%
Stanislaus	15	2,118	$135,636.72	($108,779.26)	-80.2%
Tulare	3	477	$22,528.71	--	--
Ventura	45	7,539	$412,157.13	($160,583.41)	-39.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[61] See Appendix D for County Participants

[62] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

[63] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[64] Ibid.

Table H.2
Full Service Partnership Services – Children, Youth and Families: Expenditures and Cost Offsets
FY 09-10 New Enrollees Only [65]
Small Counties are grouped together in the table [66]

	Children, Youth and Families				
	Number of New Enrollees during Fiscal Year 09-10	Sum of Days	Total FY 09-10 FSP New Enrollee Expenditure	Total Cost Offset	Percent of Costs Offset
Butte	1	178	$3,307.24	--	--
Contra Costa	42	6,070	$649,793.50	$36,497.74	5.6%
Fresno [67]	150	23,533	--	--	--
Kern	16	2,926	$149,460.08	($11,538..33)	-7.7%
Los Angeles	1,244	193,819	$9,609,546.02	$403,610.31	4.2%
Merced	38	6,980	$237,738.80	($122,985.14)	-51.7%
Orange	58	15,967	$879,981.70	($40,548.65)	-4.6%
Placer	7	1,168	$64,461.92	$14,687.14	22.8%
San Bernardino	459	57,813	$4,208,786.40	$1,281,406.96	30.4%
San Diego	616	70,337	$1,107,104.38	$384,010.11	34.7%
San Francisco	96	13,615	$349,497.05	$102,432.65	29.3%
San Joaquin	48	5,051	$261,439.76	$6,505.93	2.5%
San Luis Obispo	64	12.208	$584,885.28	$29,319.79	5.0%
Santa Clara	43	6,233	$933,454.08	$323,004.48	34.6%
Santa Cruz *	--	--		--	--
Small Counties	145	25,563	$904,674.57	($505,640.47)	-55.9%
Solano	18	3,026	$121,584.68	$77,577.18	63.8%
Sonoma	32	5,439	$58,632.42	$27,007.09	46.1%
Stanislaus	14	2,692	$174,037.80	($32,199.34)	-18.5%
Tulare	4	1,006	$31,206.12	--	--
Ventura	6	981	$122,556.33	($2,368.13)	-1.9%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[65] See Appendix D for County Participants

[66] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

[67] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

Table H.3
Full Service Partnership Services – Transition Age Youth: Expenditures and Cost Offsets
FY 08-09 New Enrollees Only [68]
Small Counties are grouped together in the table [69]

	Transition Age Youth				
	Number of New Enrollees during Fiscal Year 08-09	**Sum of Days**	**Total FY 08-09 FSP New Enrollee Expenditure**	**Total Cost Offset**	**Percent of Costs Offset**
Butte	27	3,717	$377,907.39	$100,780.17	26.7%
Contra Costa	44	8,201	$593,014.31	$124,364.45	21.0%
Fresno [70]	--	--	--	--	--
Kern	84	12,172	$567,336.92	$591,364..67	104.2%
Los Angeles	558	95,088	$6,189,277.92	$8,067,066.07	130.3%
Merced	17	2,672	$676,924.48	$61,631.76	9.1%
Orange	254	42,480	$1,453,989.60	$6,843,629.56	470.7%
Placer [71]	--	--	--	--	--
San Bernardino	462	66,976	$2,206,189.44	$948,162.95	43.0%
San Diego	182	27,811	$1,222,571.56	$201,762.58	16.5%
San Francisco	71	9,781	$284,138.05	$1,542,237.58	542.8%
San Joaquin	101	15,129	$594,115.83	$157,457.21	26.5%
San Luis Obispo	15	2,700	$263,736.00	$43,607.60	16.5%
Santa Clara	73	12,187	$859,307.37	$987,154.28	114.9%
Santa Cruz	6	1,626	$110,925.72	($4,926.46)	-4.5%
Small Counties	150	21,367	$1,188,432.52	$626,638.20	52.7%
Solano	15	4,329	$761,947.29	$84,038.40	11.0%
Sonoma	11	1,364	$81,730.88	$341,462.21	417.8%
Stanislaus	50	6,742	$124,727.00	$435,438.28	349.1%
Tulare	37	5,770	$194,218.20	$191,539.75	98.6%
Ventura	71	10,979	$784,778.92	$613,350.22	78.2%

[68] See Appendix D for County Participants

[69] Small counties included for purpose of FY 08-09 analyses = Alpine, Berkeley, El Dorado, Glenn, Imperial, Lake, Madera, Mendocino, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo.

[70] Fresno did not report any TAY expenditures, but there are TAY in the DCR.

[71] Placer did not report any TAY expenditures, but there are TAY in the DCR.

Table H.4
Full Service Partnership Services – Transition Age Youth: Expenditures and Cost Offsets
FY 09-10 New Enrollees Only [72]
Small Counties are grouped together in the table [73]

	Transition Age Youth				
	Number of New Enrollees during Fiscal Year 09-10	Sum of Days	Total FY 09-10 FSP New Enrollee Expenditure	Total Cost Offset	Percent of Costs Offset
Butte	21	3,841	$3,307.24	--	--
Contra Costa	53	10,080	$400,780.80	$416,633.83	104.0%
Fresno [74]	--	--	--	--	--
Kern	94	13,283	$755,271.38	$1,168,086..28	154.7%
Los Angeles	582	101,820	$4,872,087.00	$10,118,011.17	207.7%
Merced	18	2,762	$325,695.04	$50,413.51	15.5%
Orange	139	35,242	$729,509.40	$3,009,770.55	412.6%
Placer [75]	--	--	--	--	--
San Bernardino	522	73,615	$1,946,380.60	$3,519,695.62	180.8%
San Diego	391	47,373	$1,775,540.04	$2,749,018.84	154.8%
San Francisco	71	10,633	$334,407.85	$912,567.45	272.9%
San Joaquin	132	24,791	$409,051.50	$858,479.71	209.9%
San Luis Obispo	37	6,423	$355,641.51	$30,274.36	8.5%
Santa Clara	86	12,530	$823,095.70	$1,582,602.82	114.9%
Santa Cruz **	--	--	--	--	--
Small Counties	230	40,338	$1,985,436.36	$1,178,604.22	59.4%
Solano	20	4,496	$672,196.96	$475,392.52	70.7%
Sonoma	27	3,385	$142,170.00	$589,982.47	415.0%
Stanislaus	51	8,172	$125,031.60	$521,515.58	417.1%
Tulare	52	6,621	$165,392.58	$238,399.89	144.1%
Ventura	338	72,980	$2,238,290.60	$1,477,617.23	66.0%

***No new enrollees in FY 09-10*

[72] See Appendix D for County Participants

[73] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

[74] Fresno did not report any TAY expenditures, but there are TAY in the DCR.

[75] Placer did not report any TAY expenditures, but there are TAY in the DCR.

Table H.5
Full Service Partnership Services –Adults: Expenditures and Cost Offsets
FY 08-09 New Enrollees Only [76]
Small Counties are grouped together in the table [77]

	Adults				
	Number of New Enrollees during Fiscal Year 08-09	Sum of Days	Total FY 08-09 FSP New Enrollee Expenditure	Total Cost Offset	Percent of Costs Offset
Butte	43	43,295	$356,105.05	$242,182.84	68.0%
Contra Costa	55	7,446	$1,226,132.82	$129,947.72	10.6%
Fresno	246	4,777	$4,301,565.73	$1,801,917.72	41.9%
Kern	118	17,946	$637,621.38	$725,917..96	113.8%
Los Angeles	1,530	258,915	$18,473,585.25	$35,223,030.97	190.7%
Merced	13	1,152	$33,661.44	$234,979.19	698.1%
Orange	233	37,577	$2,129,488.59	$4,128,051.66	193.9%
Placer	28	6,383	$1,124,812.26	$217,452.74	19.3%
San Bernardino	582	74,249	$7,840,694.40	$1,913,044.75	24.4%
San Diego	147	28,119	$1,722,007.56	$492,248.11	28.6%
San Francisco	179	24,060	$1,874,033.40	$703,854.35	37.6%
San Joaquin	359	54,177	$3,000,864.03	$1,169,203.64	39.0%
San Luis Obispo	19	1,810	$234,413.10	$95,998.03	41.0%
Santa Clara	138	23,564	$3,019,726.60	$4,289,985.59	142.1%
Santa Cruz	35	11,131	$616,212.16	$116,908.02	19.0%
Small Counties	286	49,105	$4,051,162.50	$2,659,833.58	65.7%
Solano	13	1,733	$48,887.93	$85,325.82	174.5%
Sonoma	24	4,684	$91,946.92	$203,195.93	221.0%
Stanislaus	119	18,072	$1,111,247.28	$915,873.34	82.4%
Tulare	95	14,488	$270,490.96	$1,180,221.66	436.3%
Ventura	53	4,615	$625,378.65	$298,815.69	47.8%

[76] See Appendix D for County Participants

[77] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.6
Full Service Partnership Services –Adults: Expenditures and Cost Offsets
FY 09-10 New Enrollees Only [78]
Small Counties are grouped together in the table [79]

	Transition Age Youth				
	Number of New Enrollees during Fiscal Year 09-10	**Sum of Days**	**Total FY 09-10 FSP New Enrollee Expenditure**	**Total Cost Offset**	**Percent of Costs Offset**
Butte	21	3,841	$3,307.24	--	--
Contra Costa	53	10,080	$400,780.80	$416,633.83	104.0%
Fresno [80]	--	--	--	--	--
Kern	94	13,283	$755,271.38	$1,168,086..28	154.7%
Los Angeles	582	101,820	$4,872,087.00	$10,118,011.17	207.7%
Merced	18	2,762	$325,695.04	$50,413.51	15.5%
Orange	139	35,242	$729,509.40	$3,009,770.55	412.6%
Placer [81]	--	--	--	--	--
San Bernardino	522	73,615	$1,946,380.60	$3,519,695.62	180.8%
San Diego	391	47,373	$1,775,540.04	$2,749,018.84	154.8%
San Francisco	71	10,633	$334,407.85	$912,567.45	272.9%
San Joaquin	132	24,791	$409,051.50	$858,479.71	209.9%
San Luis Obispo	37	6,423	$355,641.51	$30,274.36	8.5%
Santa Clara	86	12,530	$823,095.70	$1,582,602.82	114.9%
Santa Cruz**	--	--	--	--	--
Small Counties	230	40,338	$1,985,436.36	$1,178,604.22	59.4%
Solano	20	4,496	$672,196.96	$475,392.52	70.7%
Sonoma	27	3,385	$142,170.00	$589,982.47	415.0%
Stanislaus	51	8,172	$125,031.60	$521,515.58	417.1%
Tulare	52	6,621	$165,392.58	$238,399.89	144.1%
Ventura	338	72,980	$2,238,290.60	$1,477,617.23	66.0%

***No new enrollees in FY 09-10*

[78] See Appendix D for County Participants

[79] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

[80] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[81] Ibid.

Table H.7
Full Service Partnership Services –Older Adults: Expenditures and Cost Offsets
FY 08-09 New Enrollees Only [82]
Small Counties are grouped together in the table [83]

	Older Adults				
	Number of New Enrollees during Fiscal Year 08-09	Sum of Days	Total FY 08-09 FSP New Enrollee Expenditure	Total Cost Offset	Percent of Costs Offset
Butte	2	295	$171.10	--	--
Contra Costa*	--	--	--	--	--
Fresno [84]	--	--	--	--	--
Kern	1	322	$33,079.06	--	--
Los Angeles	157	24,848	$1,442,426.40	$3,818,766.31	264.7%
Merced [85]	--	--	--	--	--
Orange	26	3,509	$251,490.03	($126,677.28)	-50.4%
Placer [86]	--	--	--	--	--
San Bernardino	17	2,134	$99,743.16	($192,354.02)	-192.8%
San Diego	66	11,363	$539,742.50	$140,233.25	26.0%
San Francisco	34	5,503	$260,291.90	$673,730.10	258.8%
San Joaquin	87	11,866	$886,271.54	$287,573.90	32.5%
San Luis Obispo	6	787	$241,624.74	$135,150.06	55.9%
Santa Clara	11	1,885	$230,196.20	$360,663.64	156.7%
Santa Cruz	2	730	$66,984.80	--	--
Small Counties	53	7,751	$662,012.91	$376,064.15	56.8%
Solano	12	2,190	$215,233.20	$165,825.92	77.0%
Sonoma	1	191	$81,730.88	$30,469.50	246.2%
Stanislaus	8	1,326	$83,922.54	$198,283.93	236.3%
Tulare	1	184	$9,098.80	--	--
Ventura	62	10,632	$473,017.68	$18,281.10	3.9%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[82] See Appendix D for County Participants

[83] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

[84] Fresno did not report any OA expenditures, but there are OA in the DCR.

[85] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[86] Placer did not report any OA expenditures, but there are OA in the DCR.

Table H.8
Full Service Partnership Services –Older Adults: Expenditures and Cost Offsets
FY 09-10 New Enrollees Only [87]
Small Counties are grouped together in the table [88]

	Older Adults				
	Number of New Enrollees during Fiscal Year 09-10	Sum of Days	Total FY 09-10 FSP New Enrollee Expenditure	Total Cost Offset	Percent of Costs Offset
Butte [89]	--	--	--	--	--
Contra Costa*	--	--	--	--	--
Fresno [90]	--	--	--	--	--
Kern	17	2,579	$123,818.79	$62,429.11	50.4%
Los Angeles	81	15,208	$781,691.20	$1,440,961.07	184.3%
Merced	--	--	--	--	--
Orange	41	8,205	$474,002.60	$6,843,629.56	470.7%
Placer [91]	--	--	--	--	--
San Bernardino	21	3,154	$143,538.54	$289,800.19	201.9%
San Diego	102	11,915	$488,395.85	($35,522.79)	-7.3%
San Francisco	19	3,974	$173,067.70	$89,098.59	51.5%
San Joaquin	72	12,060	$315,170.80	$2,060.17	0.7%
San Luis Obispo	8	1,147	$97,368.83	$15,574.87	16.0%
Santa Clara	7	1,165	$85,790.60	$187,360.97	-5.1%
Santa Cruz**	--	--	--	--	--
Small Counties	53	7,751	$662,012.91	$376,064.15	56.8%
Solano	9	1,996	$248,841.32	$159,542.54	64.1%
Sonoma	50	439	$17,832.18	$490,483.09	2,750.6%
Stanislaus	8	1,404	$89,069.76	($116,436.57)	-130.7%
Tulare	3	398	$18,996.54	$97,952.01	515.6%
Ventura	83	20,860	$771,402.80	$398,208.15	50.8%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[87] See Appendix D for County Participants

[88] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

[89] When displaying by-county results, outliers were excluded from the tables when outlier status was clearly due to procedural or data-related anomalies.

[90] Fresno did not report any OA expenditures, but there are OA in the DCR.

[91] Placer did not report any OA expenditures, but there are OA in the DCR.

Table H.9

Full Service Partnership Services – Children, Youth and Families: Costs and Cost Offsets – Inpatient Psychiatric Hospitalization FY 08-09 New Enrollees Only [92]

Small Counties are grouped together in the table [93]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	0	2	-2	$0.00	$2,168.48	($2,168.48)	0.0%
Los Angeles	1,551	973	578	$811,173.00	$508,879.00	$302,294.00	37.3%
Merced	0	35	-35	$0.00	$16,398.15	($16,398.15)	0.0%
Orange	181	58	123	$196,247.44	$62,885.92	$133,361.52	68.0%
Placer	59	0	59	$63,970.16	$0.00	$63,970.16	100.0%
San Bernardino	177	42	135	$191,910.48	$45,538.08	$146,372.40	76.3%
San Diego	28	12	16	$30,358.72	$13,010.88	$17,347.84	57.1%
San Francisco	130	32	98	$140,951.20	$34,695.68	$106,255.52	75.4%
San Joaquin	10	15	-5	$10,842.40	$16,263.60	($5,421.20)	-50.0%
San Luis Obispo	46	112	-66	$49,875.04	$121,434.88	($71,559.84)	-143.5%
Santa Clara	41	219	-178	$44,453.84	$237,448.56	$192,994.72)	-434.1%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	149	238	-89	$150,087.35	$239,736.85	($89,649.50)	-59.7%
Solano	14	10	4	$15,179.36	$10,842.40	$4,336.96	28.6%
Sonoma	27	17	10	$29,274.48	$18,432.08	$10,842.40	37.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	14	240	-226	$15,179.36	$260,217.60	($245,038.24)	-1,614.3%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[92] See Appendix D for County Participants

[93] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.10
Full Service Partnership Services – Children, Youth and Families: Inpatient Psychiatric Hospitalization
FY 09-10 New Enrollees Only [94]
Small Counties are grouped together in the table [95]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	0	2	-2	$0.00	$2,168.48	($2,168.48)	0.0%
Los Angeles	1,551	973	578	$811,173.00	$508,879.00	$302,294.00	37.3%
Merced	0	35	-35	$0.00	$16,398.15	($16,398.15)	0.0%
Orange	181	58	123	$196,247.44	$62,885.92	$133,361.52	68.0%
Placer	59	0	59	$63,970.16	$0.00	$63,970.16	100.0%
San Bernardino	177	42	135	$191,910.48	$45,538.08	$146,372.40	76.3%
San Diego	28	12	16	$30,358.72	$13,010.88	$17,347.84	57.1%
San Francisco	130	32	98	$140,951.20	$34,695.68	$106,255.52	75.4%
San Joaquin	10	15	-5	$10,842.40	$16,263.60	($5,421.20)	-50.0%
San Luis Obispo	46	112	-66	$49,875.04	$121,434.88	($71,559.84)	-143.5%
Santa Clara	41	219	-178	$44,453.84	$237,448.56	($192,994.72)	-434.1%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	149	238	-89	$150,087.35	$239,736.85	($89,649.50)	-59.7%
Solano	14	10	4	$15,179.36	$10,842.40	$4,336.96	28.6%
Sonoma	27	17	10	$29,274.48	$18,432.08	$10,842.40	37.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	14	240	-226	$15,179.36	$260,217.60	($245,038.24)	-1,614.3%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[94] See Appendix D for County Participants

[95] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.11

Full Service Partnership Services – Children, Youth and Families: Inpatient Psychiatric Hospitalization
FY 09-10 New Enrollees Only [96]
Small Counties are grouped together in the table [97]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	163	25	138	$150,775.00	$23,125.00	$127,650.00	84.7%
Kern	--	--	--	--	--	--	--
Los Angeles	1,778	1,579	199	$929,894.00	$825,817.00	$104,077.00	11.2%
Merced	337	0	337	$197,246.10	$0.00	$197,246.10	100.0%
Orange	47	29	18	$53,099.66	$32,763.62	$20,336.04	38.3%
Placer	13	0	13	$14,687.14	$0.00	$14,687.14	100.0%
San Bernardino	516	149	367	$582,966.48	$168,337.22	$414,629.26	71.1%
San Diego	477	476	1	$538,905.06	$537,775.28	$1,129.78	0.2%
San Francisco	63	39	24	$71,176.14	$44,061.42	$27,114.72	38.1%
San Joaquin	35	0	35	$39,542.30	$0.00	$39,542.30	100.0%
San Luis Obispo	16	4	12	$18,076.48	$4,519.12	$13,557.36	75.0%
Santa Clara	44	191	-147	$49,710.32	$215,787.98	($166,077.66)	-334.1%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	69	11	58	$71,232.00	$11,355.83	$59,876.17	84.1%
Solano	0	6	-6	$0.00	$6,778.68	($6,778.68)	0.0%
Sonoma	58	40	18	$65,527.24	$45,191.20	$20,336.04	31.0%
Stanislaus	5	2	3	$5,648.90	$2,259.56	$3,389.34	60.0%
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[96] See Appendix D for County Participants

[97] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.12
Full Service Partnership Services – Transition Age Youth: Inpatient Psychiatric Hospitalization
FY 08-09 New Enrollees Only [98]
Small Counties are grouped together in the table [99]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	128	2	126	$94,919.68	$1,483.12	$93,436.56	98.4%
Contra Costa	104	44	60	$112,760.96	$47,706.56	$65,054.40	57.7%
Fresno	1,925	224	1,701	$1,636,250.00	$190,400.00	$1,445,850.00	88.4%
Kern	521	221	300	$564,889.04	$239,617.04	$325,272.00	57.6%
Los Angeles	4,379	1,104	3,275	$2,290,217.00	$577,392.00	$1,712,825.00	74.8%
Merced	212	20	192	$99,325.93	$9,370.37	$89,955.56	90.6%
Orange	1,331	765	566	$1,443,123.44	$829,443.60	$613,679.84	42.5%
Placer	118	326	-208	$127,940.32	$353,462.24	($225,521.92)	-176.3%
San Bernardino	1,184	985	199	$1,283,740.16	$1,067,976.40	$215,763.76	16.8%
San Diego	894	1,203	-309	$969,310.56	$1,304,340.72	($335,030.16)	-34.6%
San Francisco	590	198	392	$639,701.60	$214,679.52	$425,022.08	66.4%
San Joaquin	132	247	-115	$143,119.68	$267,807.28	($124,687.60)	-87.1%
San Luis Obispo	47	7	40	$50,959.28	$7,589.68	$43,369.60	85.1%
Santa Clara	765	349	416	$829,443.60	$378,399.76	$451,043.84	54.4%
Santa Cruz	157	20	137	$11,882.76	$1,513.73	$10,369.03	87.3%
Small Counties	597	326	271	601,356.71	328,379.04	272,977.67	45.4%
Solano	15	0	15	$16,263.60	$0.00	$16,263.60	100.0%
Sonoma	213	1	212	$230,943.12	$1,084.24	$229,858.88	99.5%
Stanislaus	278	98	180	$301,418.72	$106,255.52	$195,163.20	64.7%
Tulare	86	53	33	$49,577.42	$30,553.53	$19,023.89	38.4%
Ventura	326	141	185	$353,462.24	$152,877.84	$200,584.40	56.7%

[98] See Appendix D for County Participants

[99] Small counties included for purpose of FY 08-09 analyses = Alpine, Berkeley, El Dorado, Glenn, Imperial, Lake, Madera, Mendocino, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo.

Table H.13

Full Service Partnership Services – Transition Age Youth: Inpatient Psychiatric Hospitalization
FY 09-10 New Enrollees Only [100]
Small Counties are grouped together in the table [101]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	179	47	132	$132,739.24	$34,853.32	$97,885.92	73.7%
Contra Costa	445	308	137	$502,752.10	$347,972.24	$154,779.86	30.8%
Fresno	582	366	216	$538,350.00	$338,550.00	$199,800.00	37.1%
Kern	299	85	214	$337,804.22	$96,031.30	$241,772.92	71.6%
Los Angeles	4,856	1,832	3,024	$2,539,688.00	$958,136.00	$1,581,552.00	62.3%
Merced	95	263	-168	$55,603.50	$153,933.90	($98,330.40)	-176.8%
Orange	351	142	209	$396,552.78	$160,428.76	$236,124.02	59.5%
Placer	303	27	276	$342,323.34	$30,504.06	$311,819.28	91.1%
San Bernardino	488	189	299	$551,332.64	$213,528.42	$337,804.22	61.3%
San Diego	2,249	1,263	986	$2,540,875.22	$1,426,912.14	$1,113,963.08	43.8%
San Francisco	482	10	472	$544,553.96	$11,297.80	$533,256.16	97.9%
San Joaquin	826	220	606	$933,198.28	$248,551.60	$684,646.68	73.4%
San Luis Obispo	107	81	26	$120,886.46	$91,512.18	$29,374.28	24.3%
Santa Clara	178	237	-59	$201,100.84	$267,757.86	($66,657.02)	-33.1%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	594	428	166	$613,214.64	$441,844.90	$171,369.74	27.9%
Solano	50	0	50	$56,489.00	$0.00	$56,489.00	100.0%
Sonoma	406	82	324	$458,690.68	$92,641.96	$366,048.72	79.8%
Stanislaus	453	254	199	$511,790.34	$286,964.12	$224,826.22	43.9%
Tulare	188	101	87	$212,398.64	$114,107.78	$98,290.86	46.3%
Ventura	940	378	562	$1,061,993.20	$427,056.84	$634,936.36	59.8%

***No new enrollees in FY 09-10*

[100] See Appendix D for County Participants

[101] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.14
Full Service Partnership Services – Adults: Inpatient Psychiatric Hospitalization
FY 08-09 New Enrollees Only [102]
Small Counties are grouped together in the table [103]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	178	8	170	$131,997.68	$5,932.48	$126,065.20	95.5%
Contra Costa	230	0	230	$249,375.20	$0.00	$249,375.20	100.0%
Fresno	2,326	695	1,631	$1,977,100.00	$590,750.00	$1,386,350.00	70.1%
Kern	566	569	-3	$613,679.84	$616,932.56	($3,252.72)	-0.5%
Los Angeles	19,105	7,589	11,516	$9,991,915.00	$3,969,047.00	$6,022,868.00	60.3%
Merced	320	97	223	$149,925.93	$45,446.30	$104,479.63	69.7%
Orange	3,933	1,232	2,701	$4,264,315.92	$1,335,783.68	$2,928,532.24	68.7%
Placer	326	176	150	$353,462.24	$190,826.24	$162,636.00	46.0%
San Bernardino	4,045	2,543	1,502	$4,385,750.80	$2,757,222.32	$1,628,528.48	37.1%
San Diego	1,151	1,327	-176	$1,247,960.24	$1,438,786.48	($190,826.24)	-15.3%
San Francisco	1,392	533	859	$1,509,262.08	$577,899.92	$931,362.16	61.7%
San Joaquin	513	273	240	$556,215.12	$295,997.52	$260,217.60	46.8%
San Luis Obispo	129	16	113	$139,866.96	$17,347.84	$122,519.12	87.6%
Santa Clara	1,221	767	454	$1,323,857.04	$831,612.08	$492,244.96	37.2%
Santa Cruz	102	0	102	$7,720.01	$0.00	$7,720.01	100.0%
Small Counties	2,212	1,316	896	$2,228,142.45	$1,325,603.74	$902,538.71	40.5%
Solano	41	26	15	$44,453.84	$28,190.24	$16,263.60	36.6%
Sonoma	135	82	53	$146,372.40	$88,907.68	$57,464.72	39.3%
Stanislaus	709	244	465	$768,726.16	$264,554.56	$504,171.60	65.6%
Tulare	1,460	531	929	$841,663.25	$306,111.77	$535,551.48	63.6%
Ventura	1,148	1,382	-234	$1,244,707.52	$1,498,419.68	($253,712.16)	-20.4%

[102] See Appendix D for County Participants

[103] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.15

Full Service Partnership Services – Adults: Inpatient Psychiatric Hospitalization

FY 09-10 New Enrollees Only [104]

Small Counties are grouped together in the table [105]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	972	43	929	$720,796.32	$31,887.08	$688,909.24	95.6%
Contra Costa	32	0	32	$36,152.96	$0.00	$36,152.96	100.0%
Fresno	1,815	1,195	620	$1,678,875.00	$1,105,375.00	$573,500.00	34.2%
Kern	2,662	410	2,252	$3,007,474.36	$463,209.80	$2,544,264.56	84.6%
Los Angeles	17,314	5,834	11,480	$9,055,222.00	$3,051,182.00	$6,004,040.00	66.3%
Merced	102	77	25	$59,700.60	$45,068.10	$14,632.50	24.5%
Orange	1,041	784	257	$1,176,100.98	$885,747.52	$290,353.46	24.7%
Placer	516	339	177	$582,966.48	$382,995.42	$199,971.06	34.3%
San Bernardino	2,624	691	1,933	$2,964,542.72	$780,677.98	$2,183,864.74	73.7%
San Diego	10,527	7,220	3,307	$11,893,194.06	$8,157,011.60	$3,736,182.46	31.4%
San Francisco	901	215	686	$1,017,931.78	$242,902.70	$775,029.08	76.1%
San Joaquin	3,375	1,355	2,020	$3,813,007.50	$1,530,851.90	$2,282,155.60	59.9%
San Luis Obispo	275	89	186	$310,689.50	$100,550.42	$210,139.08	67.6%
Santa Clara	2,123	1,716	407	$2,398,522.94	$1,938,702.48	$459,820.46	19.2%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	3,592	1,704	1,888	$3,708,193.61	$1,759,120.80	$1,949,072.81	52.6%
Solano	146	106	40	$164,947.88	$119,756.68	$45,191.20	27.4%
Sonoma	102	55	47	$115,237.56	$62,137.90	$53,099.66	46.1%
Stanislaus	426	167	259	$481,286.28	$188,673.26	$292,613.02	60.8%
Tulare	1,140	186	954	$1,287,949.20	$210,139.08	$1,077,810.12	83.7%
Ventura	1,636	1,519	117	$1,848,320.08	$1,716,135.82	$132,184.26	7.2%

***No new enrollees in FY 09-10*

[104] See Appendix D for County Participants

[105] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.16
Full Service Partnership Services – Older Adults: Inpatient Psychiatric Hospitalization
FY 08-09 New Enrollees Only [106]
Small Counties are grouped together in the table [107]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	74	16	58	$62,900.00	$13,600.00	$49,300.00	78.4%
Kern	152	266	-114	$164,804.48	$288,407.84	($123,603.36)	-75.0%
Los Angeles	2,443	708	1,735	$1,277,689.00	$370,284.00	$907,405.00	71.0%
Merced	10	0	10	$4,685.19	$0.00	$4,685.19	100.0%
Orange	103	40	63	$111,676.72	$43,369.60	$68,307.12	61.2%
Placer	304	109	195	$329,608.96	$118,182.16	$211,426.80	64.1%
San Bernardino	38	54	-16	$41,201.12	$58,548.96	($17,347.84)	-42.1%
San Diego	129	0	129	$139,866.96	$0.00	$139,866.96	100.0%
San Francisco	207	51	156	$224,437.68	$55,296.24	$169,141.44	75.4%
San Joaquin	201	65	136	$217,932.24	$70,475.60	$147,456.64	67.7%
San Luis Obispo	40	6	34	$43,369.60	$6,505.44	$36,864.16	85.0%
Santa Clara	165	50	115	$178,899.60	$54,212.00	$124,687.60	69.7%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	246	137	109	$247,795.23	$137,999.78	$109,795.45	44.3%
Solano	7	11	-4	$7,589.68	$11,926.64	($4,336.96)	-57.1%
Sonoma	--	--	--	--	--	--	--
Stanislaus	167	11	156	$181,068.08	$11,926.64	$169,141.44	93.4%
Tulare	--	--	--	--	--	--	--
Ventura	128	115	13	$138,782.72	$124,687.60	$14,095.12	10.2%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[106] See Appendix D for County Participants

[107] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.17
Full Service Partnership Services – Older Adults: Inpatient Psychiatric Hospitalization
FY 09-10 New Enrollees Only [108]
Small Counties are grouped together in the table [109]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	28	6	22	$20,763.68	$4,449.36	$16,314.32	78.6%
Contra Costa*	--	--	--	--	--	--	--
Fresno	30	0	30	$27,750.00	$0.00	$27,750.00	100.0%
Kern	144	51	93	$162,688.32	$57,618.78	$105,069.54	64.6%
Los Angeles	2,247	430	1,817	$1,175,181.00	$224,890.00	$950,291.00	80.9%
Merced	--	--	--	--	--	--	--
Orange	154	51	103	$173,986.12	$57,618.78	$116,367.34	66.9%
Placer	56	1	55	$63,267.68	$1,129.78	$62,137.90	98.2%
San Bernardino	223	30	193	$251,940.94	$33,893.40	$218,047.54	86.5%
San Diego	652	896	-244	$736,616.56	$1,012,282.88	($275,666.32)	-37.4%
San Francisco	75	10	65	$84,733.50	$11,297.80	$73,435.70	86.7%
San Joaquin	192	85	107	$216,917.76	$96,031.30	$120,886.46	55.7%
San Luis Obispo	67	57	10	$75,695.26	$64,397.46	$11,297.80	14.9%
Santa Clara	150	299	-149	$169,467.00	$337,804.22	($168,337.22)	-99.3%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	795	364	431	$820,716.57	$375,774.63	$444,941.94	54.2%
Solano	108	19	89	$122,016.24	$21,465.82	$100,550.42	82.4%
Sonoma	294	188	106	$332,155.32	$212,398.64	$119,756.68	36.1%
Stanislaus	45	46	-1	$50,840.10	$51,969.88	($1,129.78)	-2.2%
Tulare	--	--	--	--	--	--	--
Ventura	146	4	142	$164,947.88	$4,519.12	$160,428.76	97.3%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[108] See Appendix D for County Participants

[109] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditure for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.18
Full Service Partnership Services – Children, Youth and Families: Inpatient Skilled Nursing (Psychiatric)
FY 08-09 New Enrollees Only [110]
Small Counties are grouped together in the table [111]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[110] See Appendix D for County Participants

[111] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.19
Full Service Partnership Services – Children, Youth and Families: Inpatient Skilled Nursing (Psychiatric)
FY 09-10 New Enrollees Only [112]
Small Counties are grouped together in the table [113]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[112] See Appendix D for County Participants

[113] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.20
Full Service Partnership Services – Transition Age Youth: Inpatient Skilled Nursing (Psychiatric)
FY 08-09 New Enrollees Only [114]
Small Counties are grouped together in the table [115]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	21	0	21	$6,213.06	$0.00	$6,213.06	100.0%
Kern	--	--	--	--	--	--	--
Los Angeles	8	0	8	$2,366.88	$0.00	$2,366.88	100.0%
Merced	--	--	--	--	--	--	--
Orange	30	2	28	$9,599.98	$640.00	$8,959.98	93.3%
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	0	34	-34	$0.00	$6,911.86	($6,911.86)	0.0%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	46	86	-40	$5,300.35	$9,909.35	($4,609.00)	-87.0%
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

[114] See Appendix D for County Participants

[115] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.21

Full Service Partnership Services – Transition Age Youth: Inpatient Skilled Nursing (Psychiatric)
FY 09-10 New Enrollees Only [116]
Small Counties are grouped together in the table [117]

County	Transition Age						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	0	6	-6	$0.00	$1,970.43	- $1,970.43	0.0%
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	6	0	6	$1,138.13	$0.00	$1,138.13	100.0%
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	63	0	63	$13,058.64	$0.00	$13,058.64	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	0	253	-253	$0.00	$59,170.05	($59,170.05)	0.0%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

***No new enrollees in FY 09-10*

[116] See Appendix D for County Participants

[117] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.22
Full Service Partnership Services – Adults: Inpatient Skilled Nursing (Psychiatric)
FY 08-09 New Enrollees Only [118]
Small Counties are grouped together in the table [119]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	287	45	242	$84,911.82	$13,313.70	$71,598.12	84.3%
Kern	37	2	35	$7,521.73	$406.58	$7,115.15	94.6%
Los Angeles	1,051	225	826	$310,948.86	$66,568.50	$244,380.36	78.6%
Merced	--	--	--	--	--	--	--
Orange	111	26	85	$35,519.93	$8,319.98	$27,199.95	76.6%
Placer	0	1	-1	$0.00	$223.60	($223.60)	0.0%
San Bernardino	7	5	2	$1,196.23	$854.45	$341.78	28.6%
San Diego	0	200	-200	$0.00	$37,348.00	($37,348.00)	0.0%
San Francisco	304	149	155	$61,800.16	$30,290.21	$31,509.95	51.0%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	0	13	-13	$0.00	$2,427.62	($2,427.62)	0.0%
Santa Cruz	182	0	182	$20,970.95	$0.00	$20,970.95	100.0%
Small Counties	25	0	25	$5,562.15	$0.00	$5,562.15	100.0%
Solano	--	--	--	--	--	--	--
Sonoma	56	0	56	$7,428.40	$0.00	$7,428.40	100.0%
Stanislaus	0	1	-1	$0.00	$318.13	($318.13)	0.0%
Tulare	--	--	--	--	--	--	--
Ventura	222	7	215	$45,130.38	$1,423.03	$43,707.35	96.8%

[118] See Appendix D for County Participants

[119] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.23

Full Service Partnership Services – Adults: Inpatient Skilled Nursing (Psychiatric)

FY 09-10 New Enrollees Only [120]

Small Counties are grouped together in the table [121]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	545	0	545	$172,519.64	$0.00	$172,519.64	100.0%
Contra Costa	--	--	--	--	--	--	--
Fresno	150	68	82	$49,260.69	$22,331.51	$26,929.18	54.7%
Kern	--	--	--	--	--	--	--
Los Angeles	613	267	346	$201,312.02	$87,684.03	$113,627.99	56.4%
Merced	--	--	--	--	--	--	--
Orange	0	168	-168	$0.00	$59,673.48	($59,673.48)	0.0%
Placer	84	0	84	$26,060.58	$0.00	$26,060.58	100.0%
San Bernardino	385	0	385	$73,029.84	$0.00	$73,029.84	100.0%
San Diego	2,147	2,108	39	$445,033.17	$436,949.19	$8,083.98	1.8%
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	60	0	60	$7,674.32	$0.00	$7,674.32	100.0%
Santa Clara	58	12	46	$12,022.24	$2,487.36	$9,534.88	79.3%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	742	40	702	$173,534.30	$9,354.95	$164,179.35	94.6%
Solano	--	--	--	--	--	--	--
Sonoma	150	0	150	$22,086.23	$0.00	$22,086.23	100.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	281	0	281	$87,178.85	$0.00	$87,178.85	100.0%
Ventura	150	0	150	$33,847.79	$0.00	$33,847.79	100.0%

***No new enrollees in FY 09-10*

[120] See Appendix D for County Participants

[121] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.24
Full Service Partnership Services – Older Adults: Inpatient Skilled Nursing (Psychiatric)
FY 08-09 New Enrollees Only [122]
Small Counties are grouped together in the table [123]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	90	0	90	$18,296.10	$0.00	$18,296.10	100.0%
Los Angeles	653	135	518	$193,196.58	$39,941.10	$153,255.48	79.3%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	0	9	-9	$0.00	$1,538.01	($1,538.01)	0.0%
San Diego	--	--	--	--	--	--	--
San Francisco	164	0	164	$33,339.56	$0.00	$33,339.56	100.0%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	305	0	305	$56,955.70	$0.00	$56,955.70	100.0%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	0	23	-23	$0.00	$5,117.18	($5,117.18)	0.0%
Solano	14	0	14	$5,460.14	$0.00	$5,460.14	100.0%
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	0	142	-142	$0.00	$28,867.18	($28,867.18)	0.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[122] See Appendix D for County Participants

[123] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.25

Full Service Partnership Services – Older Adults: Inpatient Skilled Nursing (Psychiatric)
FY 09-10 New Enrollees Only [124]
Small Counties are grouped together in the table [125]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	10	0	10	$2,256.52	$0.00	$2,256.52	100.0%
Los Angeles	275	0	275	$90,311.27	$0.00	$90,311.27	100.0%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	196	0	196	$37,178.83	$0.00	$37,178.83	100.0%
San Diego	424	157	267	$87,887.31	$32,543.18	$55,344.13	63.0%
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	0	6	-6	$0.00	$127.91	($127.91)	0.0%
Santa Clara	--	--	--	--	--	--	--
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	766	432	334	$179,147.27	$101,033.45	$78,113.82	43.6%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	136	0	136	$30,688.66	$0.00	$30,688.66	100.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[124] See Appendix D for County Participants

[125] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.26
Full Service Partnership Services – Children, Youth and Families: Long Term Care
FY 08-09 New Enrollees Only [126]
Small Counties are grouped together in the table [127]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[126] See Appendix D for County Participants

[127] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.27

Full Service Partnership Services – Children, Youth and Families: Long Term Care
FY 09-10 New Enrollees Only [128]
Small Counties are grouped together in the table [129]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[128] See Appendix D for County Participants

[129] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.28
Full Service Partnership Services – Transition Age Youth: Long Term Care
FY 08-09 New Enrollees Only [130]
Small Counties are grouped together in the table [131]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	88	19	69	$17,673.33	$3,815.83	$13,857.50	78.4%
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	2,064	0	2,064	$387,879.58	$0.00	$387,879.58	100.0%
Merced	--	--	--	--	--	--	--
Orange	30	0	30	$6,020.10	$0.00	$6,020.10	100.0%
Placer	--	--	--	--	--	--	--
San Bernardino	89	10	79	$15,040.11	$1,689.90	$13,350.21	88.8%
San Diego	272	242	30	$54,382.66	$48,340.59	$6,042.07	11.1%
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	147	196	-49	$27,481.65	$36,642.20	($9,160.55)	-33.3%
Santa Cruz	0	65	-65	$0.00	$10,798.36	($10,798.36)	0.0%
Small Counties	906	0	906	$153,115.17	$0.00	$153,115.17	100.0%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	24	0	24	$4,475.36	$0.00	$4,475.36	100.0%
Ventura	1,091	0	1,091	$123,375.74	$0.00	$123,375.74	100.0%

[130] See Appendix D for County Participants

[131] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.29

Full Service Partnership Services – Transition Age Youth: Long Term Care
FY 09-10 New Enrollees Only [132]
Small Counties are grouped together in the table [133]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	249	8	241	$44,149.57	$1,418.46	$42,731.11	96.8%
Contra Costa	86	0	86	$18,466.77	$0.00	$18,466.77	100.0%
Fresno	185	0	185	$43,020.83	$0.00	$43,020.83	100.0%
Kern	--	--	--	--	--	--	--
Los Angeles	5,519	33	5,486	$1,067,226.01	$6,381.31	$1,060,844.70	99.4%
Merced	--	--	--	--	--	--	--
Orange	90	0	90	$20,046.93	$0.00	$20,046.93	100.0%
Placer	--	--	--	--	--	--	--
San Bernardino	2	0	2	$366.16	$0.00	$366.16	100.0%
San Diego	2,034	0	2,034	$414,824.86	$0.00	$414,824.86	100.0%
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	346	479	-133	$62,750.56	$86,871.44	($24,120.88)	-38.4%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	154	94	60	$28,127.36	$17,168.65	$10,958.71	39.0%
Solano	--	--	--	--	--	--	--
Sonoma	90	0	90	$16,433.64	$0.00	$16,433.64	100.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	66	0	66	$13,661.04	$0.00	$13,661.04	100.0%
Ventura	201	0	201	$25,230.39	$0.00	$25,230.39	100.0%

***No new enrollees in FY 09-10*

[132] See Appendix D for County Participants

[133] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.30
Full Service Partnership Services – Adults: Long Term Care
FY 08-09 New Enrollees Only [134]
Small Counties are grouped together in the table [135]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	116	0	116	$23,296.67	$0.00	$23,296.67	100.0%
Fresno	0	312	-312	$0.00	71,444.88	($71,444.88)	0.0%
Kern	144	3	141	$28,437.12	$592.44	$27,844.68	97.9%
Los Angeles	20,508	390	20,118	$3,853,989.56	$73,291.20	$3,780,698.36	98.1%
Merced	--	--	--	--	--	--	--
Orange	584	0	584	$117,191.28	$0.00	$117,191.28	100.0%
Placer	817	0	817	$138,073.00	$0.00	$138,073.00	100.0%
San Bernardino	3,212	531	2,681	$542,795.88	$89,733.69	$453,062.19	83.5%
San Diego	77	154	-77	$15,395.09	$30,850.16	($15,455.07)	-100.4%
San Francisco	2,677	654	2,023	$520,676.50	$127,142.71	$393,533.79	75.6%
San Joaquin	0	3	-3	$0.00	$576.83	($576.83)	0.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	5,241	459	4,782	$979,804.95	$85,810.05	$893,994.90	91.2%
Santa Cruz	44	0	44	$7,264.95	$0.00	$7,264.95	100.0%
Small Counties	7,911	561	7,350	$1,336,969.21	$94,809.72	$1,242,159.49	92.9%
Solano	40	0	40	$8,170.00	$0.00	$8,170.00	100.0%
Sonoma	259	113	146	$43,427.83	$18,947.28	$24,480.55	56.4%
Stanislaus	85	0	85	$14,787.03	$0.00	$14,787.03	100.0%
Tulare	2,262	17	2,245	$421,802.68	$3,220.39	$418,582.29	99.2%
Ventura	2,804	0	2,804	$317,090.34	$0.00	$317,090.34	100.0%

[134] See Appendix D for County Participants

[135] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.31

Full Service Partnership Services – Adults: Long Term Care
FY 09-10 New Enrollees Only [136]
Small Counties are grouped together in the table [137]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	196	138	58	$42,087.06	$29,632.73	$12,454.33	29.6%
Fresno	409	0	409	$95,110.91	$0.00	$95,110.91	100.0%
Kern	330	0	330	$72,215.55	$0.00	$72,215.55	100.0%
Los Angeles	31,139	90	31,049	$6,021,444.24	$17,403.58	$6,004,040.66	99.7%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	212	254	-42	$38,812.96	$46,502.32	($7,689.36)	-19.8%
San Bernardino	186	1	185	$34,052.88	$183.08	$33,869.80	99.5%
San Diego	13,306	585	12,721	$2,713,696.92	$119,363.10	$2,594,333.82	95.6%
San Francisco	580	326	254	$112,810.00	$63,463.41	$49,346.59	43.7%
San Joaquin	740	547	193	$157,934.69	$116,743.61	$41,191.08	26.1%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	4,341	328	4,013	$787,283.76	$59,486.08	$727,797.68	92.4%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	4,627	299	4,328	$845,099.44	$54,610.92	$790,488.52	93.5%
Solano	628	68	560	$128,269.00	$13,880.83	$114,388.17	89.2%
Sonoma	358	8	350	$65,369.38	$1,460.77	$63,908.61	97.8%
Stanislaus	--	--	--	--	--	--	--
Tulare	624	292	332	$129,158.89	$60,439.74	$68,719.15	53.2%
Ventura	3,007	0	3,007	$377,451.72	$0.00	$377,451.72	100.0%

***No new enrollees in FY 09-10*

[136] See Appendix D for County Participants

[137] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.32
Full Service Partnership Services – Older Adults: Long Term Care
FY 08-09 New Enrollees Only [138]
Small Counties are grouped together in the table [139]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	414	0	414	$81,756.72	$0.00	$81,756.72	100.0%
Los Angeles	2,145	1	2,144	$403,101.60	$187.93	$402,913.67	100.0%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	364	40	324	$61,512.36	$6,759.60	$54,752.76	89.0%
San Diego	179	0	179	$35,788.59	$0.00	$35,788.59	100.0%
San Francisco	295	107	188	$57,377.50	$20,875.69	$36,501.81	63.6%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	340	0	340	$63,563.00	$0.00	$63,563.00	100.0%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	1,013	0	1,013	$171,198.31	$0.00	$171,198.31	100.0%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	408	0	408	$46,138.68	$0.00	$46,138.68	100.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[138] See Appendix D for County Participants

[139] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.33

Full Service Partnership Services – Older Adults: Long Term Care

FY 09-10 New Enrollees Only [140]

Small Counties are grouped together in the table [141]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	323	0	323	$57,270.32	$0.00	$57,270.32	100.0%
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	1,373	0	1,373	$265,501.23	$0.00	$265,501.23	100.0%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	370	0	370	$67,739.60	$0.00	$67,739.60	100.0%
San Diego	188	0	188	$38,341.73	$0.00	$38,341.73	100.0%
San Francisco	193	0	193	$37,538.50	$0.00	$37,538.50	100.0%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	223	0	223	$40,443.28	$0.00	$40,443.28	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	3,314	304	3,010	$605,286.26	$55,524.15	$549,762.11	90.8%
Solano	--	--	--	--	--	--	--
Sonoma	42	0	42	$7,669.03	$0.00	$7,669.03	100.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	1	0	1	$206.99	$0.00	$206.99	100.0%
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

***No new enrollees in FY 09-10*

[140] See Appendix D for County Participants

[141] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.34
Full Service Partnership Services – Children, Youth and Families: Inpatient Hospitalization (Physical)
FY 08-09 New Enrollees Only [142]
Small Counties are grouped together in the table [143]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	2	0	2	$7,881.23	$0.00	$7,881.23	100.0%
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	468	165	303	$1,031,004.00	$363,495.00	$667,509.00	64.7%
Merced	0	1	-1	$0.00	$2,234.92	($2,234.92)	0.0%
Orange	0	7	-7	$0.00	$18,498.34	($18,498.34)	0.0%
Placer	--	--	--	--	--	--	--
San Bernardino	29	0	29	$66,991.45	$0.00	$66,991.45	100.0%
San Diego	0	6	-6	$0.00	$14,549.41	($14,549.41)	0.0%
San Francisco	14	34	-20	$50,456.59	$122,537.43	($72,080.84)	-142.9%
San Joaquin	0	11	-11	$0.00	$27,529.92	($27,529.92)	0.0%
San Luis Obispo	10	0	10	$26,336.91	$0.00	$26,336.91	100.0%
Santa Clara	38	0	38	$162,258.10	$0.00	$162,258.10	100.0%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	48	53	-5	$122,208.26	$134,938.29	($12,730.03)	-10.4%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	2	2	0	$3,947.88	$3,947.88	$0.00	0.0%
Tulare	--	--	--	--	--	--	--
Ventura	0	3	-3	$0.00	$6,750.93	($6,750.93)	0.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[142] See Appendix D for County Participants

[143] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized cost per person and cost offset analyses could not be conducted.

Table H.35

Full Service Partnership Services – Children, Youth and Families: Inpatient Hospitalization (Physical)
FY 09-10 New Enrollees Only [144]
Small Counties are grouped together in the table [145]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	1	0	1	$2,205.55	$0.00	$2,205.55	100.0%
Los Angeles	128	237	-109	$309,504.00	$573,066.00	($263,562.00)	-85.2%
Merced	5	0	5	$12,175.94	$0.00	$12,175.94	100.0%
Orange	7	12	-5	$19,531.54	$33,482.64	($13,951.10)	-71.4%
Placer	--	--	--	--	--	--	--
San Bernardino	90	162	-72	$218,489.40	$393,280.92	($174,791.52)	-80.0%
San Diego	81	12	69	$215,037.45	$31,857.40	$183,180.05	85.2%
San Francisco	18	7	11	$69,548.98	$27,046.83	$42,502.15	61.1%
San Joaquin	2	32	-30	$5,192.84	$83,085.44	($77,892.60)	-1,500.0%
San Luis Obispo	6	0	6	$16,931.56	$0.00	$16,931.56	100.0%
Santa Clara	60	0	60	$283,903.80	$0.00	$283,903.80	100.0%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	0	233	-233	$0.00	$623,590.90	($623,590.90)	0.0%
Solano	21	0	21	$82,906.34	$0.00	$82,906.34	100.0%
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

[144] See Appendix D for County Participants

[145] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.36
Full Service Partnership Services – Transition Age Youth: Inpatient Hospitalization (Physical)
FY 08-09 New Enrollees Only [146]
Small Counties are grouped together in the table [147]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	1	6	-5	$2,365.71	$14,194.27	($11,828.56)	-500.0%
Contra Costa	7	7	0	$27,584.31	$27,584.31	$0.00	0.0%
Fresno	0	31	-31	$0.00	$63,999.50	($63,999.50)	0.0%
Kern	30	0	30	$61,219.80	$0.00	$61,219.80	100.0%
Los Angeles	470	255	215	$1,035,410.00	$561,765.00	$473,645.00	45.7%
Merced	9	10	-1	$20,114.28	$22,349.20	($2,234.92)	-11.1%
Orange	154	47	107	$406,963.48	$124,203.14	$282,760.34	69.5%
Placer	0	18	-18	$0.00	$58,637.70	($58,637.70)	0.0%
San Bernardino	430	739	-309	$993,321.50	$1,707,126.95	($713,805.45)	-71.9%
San Diego	283	214	69	$686,247.32	$518,929.07	$167,318.25	24.4%
San Francisco	148	5	143	$533,398.20	$18,020.21	$515,377.99	96.6%
San Joaquin	8	6	2	$20,021.76	$15,016.32	$5,005.44	25.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	19	156	-137	$81,129.05	$666,112.20	($584,983.15)	-721.1%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	66	111	-45	$168,036.36	$282,606.61	($114,570.25)	-68.2%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	42	0	42	$82,905.39	$0.00	$82,905.39	100.0%
Tulare	54	17	37	$98,005.86	$30,853.70	$67,152.16	68.5%
Ventura	14	3	11	$31,504.34	$6,750.93	$24,753.41	78.6%

[146] See Appendix D for County Participants

[147] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.37

Full Service Partnership Services – Transition Age Youth: Inpatient Hospitalization (Physical)
FY 09-10 New Enrollees Only [148]
Small Counties are grouped together in the table [149]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	4	19	-15	$10,279.55	$48,827.85	($38,548.30)	-375.0%
Contra Costa	4	3	1	$17,140.29	$12,855.22	$4,285.07	25.0%
Fresno	31	24	7	$67,522.96	$52,275.84	$15,247.12	22.6%
Kern	288	20	268	$635,198.40	$44,111.00	$591,087.40	93.1%
Los Angeles	547	223	324	$1,322,646.00	$539,214.00	$783,432.00	59.2%
Merced	--	--	--	--	--	--	--
Orange	26	24	2	$72,545.72	$66,965.28	$5,580.44	7.7%
Placer	3	6	-3	$10,219.35	$20,438.70	($10,219.35)	-100.0%
San Bernardino	117	5	112	$284,036.22	$12,138.30	$271,897.92	95.7%
San Diego	374	175	199	$992,888.98	$464,587.09	$528,301.89	53.2%
San Francisco	21	22	-1	$81,140.48	$85,004.31	($3,863.83)	-4.8%
San Joaquin	25	102	-77	$64,910.50	$264,834.84	($199,924.34)	-308.0%
San Luis Obispo	16	1	15	$45,150.83	$2,821.93	$42,328.90	93.7%
Santa Clara	25	25	0	$118,293.25	$118,293.25	$0.00	0.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	223	50	173	$596,827.34	$133,817.79	$463,009.55	77.6%
Solano	105	0	105	$414,531.69	$0.00	$414,531.69	100.0%
Sonoma	44	21	23	$146,550.80	$69,944.70	$76,606.10	52.3%
Stanislaus	128	41	87	$272,934.15	$87,424.22	$185,509.93	68.0%
Tulare	3	0	3	$5,428.25	$0.00	$5,428.25	100.0%
Ventura	129	70	59	$302,323.11	$164,051.30	$138,271.81	45.7%

***No new enrollees in FY 09-10*

[148] See Appendix D for County Participants

[149] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.38
Full Service Partnership Services – Adults: Inpatient Hospitalization (Physical)
FY 08-09 New Enrollees Only [150]
Small Counties are grouped together in the table [151]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	30	3	27	$70,971.37	$7,097.14	$63,874.23	90.0%
Contra Costa	7	47	-40	$27,584.31	$185,208.96	($157,624.65)	-571.4%
Fresno	254	146	108	$524,383.00	$301,417.00	$222,966.00	42.5%
Kern	65	1	64	$132,642.90	$2,040.66	$130,602.24	98.5%
Los Angeles	2,479	3,012	-533	$5,461,237.00	$6,635,436.00	($1,174,199.00)	-21.5%
Merced	30	2	28	$67,047.61	$4,469.84	$62,577.77	93.3%
Orange	213	280	-67	$562,878.06	$739,933.60	($177,055.54)	-31.5%
Placer	10	41	-31	$32,576.50	$133,563.65	($100,987.15)	-310.0%
San Bernardino	658	772	-114	$1,520,012.90	$1,783,358.60	($263,345.70)	-17.3%
San Diego	312	177	135	$756,569.48	$429,207.69	$327,361.79	43.3%
San Francisco	381	599	-218	$1,373,139.97	$2,158,821.11	($785,681.14)	-57.2%
San Joaquin	342	209	133	$855,930.24	$523,068.48	$332,861.76	38.9%
San Luis Obispo	33	43	-10	$86,911.80	$113,248.71	($26,336.91)	-30.3%
Santa Clara	401	28	373	$1,712,249.95	$119,558.60	$1,592,691.35	93.0%
Santa Cruz	24	0	24	$73,798.73	$0.00	$73,798.73	100.0%
Small Counties	260	228	32	$661,961.43	$580,489.25	$81,472.18	12.3%
Solano	33	19	14	$120,713.73	$69,501.84	$51,211.89	42.4%
Sonoma	24	75	-51	$68,137.92	$212,931.00	($144,793.08)	-212.5%
Stanislaus	169	86	83	$333,595.52	$169,758.67	$163,836.85	49.1%
Tulare	114	26	88	$206,901.26	$47,188.01	$159,713.25	77.2%
Ventura	41	18	23	$92,262.71	$40,505.58	$51,757.13	56.1%

[150] See Appendix D for County Participants

[151] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.39

Full Service Partnership Services – Adults: Inpatient Hospitalization (Physical)

FY 09-10 New Enrollees Only [152]

Small Counties are grouped together in the table [153]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	19	0	19	$48,827.85	$0.00	$48,827.85	100.0%
Contra Costa	2	0	2	$8,570.15	$0.00	$8,570.15	100.0%
Fresno	251	20	231	$546,718.16	$43,563.20	$503,154.96	92.0%
Kern	88	4	84	$194,088.40	$8,822.20	$185,266.20	95.5%
Los Angeles	2,450	2,079	371	$5,924,100.00	$5,027,022.00	$897,078.00	15.1%
Merced	9	19	-10	$21,916.69	$46,268.56	($24,351.87)	-111.1%
Orange	235	248	-13	$655,701.70	$691,974.56	($36,272.86)	-5.5%
Placer	40	46	-6	$136,258.00	$156,696.70	($20,438.70)	-15.0%
San Bernardino	338	468	-130	$820,549.08	$1,136,144.88	($315,595.80)	-38.5%
San Diego	1,029	916	113	$2,731,772.08	$2,431,781.56	$299,990.52	11.0%
San Francisco	198	359	-161	$765,038.82	$1,387,115.84	($622,077.02)	-81.3%
San Joaquin	334	359	-25	$867,204.28	$932,114.78	($64,910.50)	-7.5%
San Luis Obispo	8	2	6	$22,575.41	$5,643.85	$16,931.56	75.0%
Santa Clara	498	644	-146	$2,356,401.54	$3,047,234.12	($690,832.58)	-29.3%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	343	287	56	$917,990.04	$768,114.11	$149,875.93	16.3%
Solano	155	68	87	$611,927.74	$268,458.62	$343,469.12	56.1%
Sonoma	9	0	9	$29,976.30	$0.00	$29,976.30	100.0%
Stanislaus	57	55	2	$121,540.99	$117,276.39	$4,264.60	3.5%
Tulare	1,486	0	1,486	$2,688,795.56	$0.00	$2,688,795.56	100.0%
Ventura	214	101	113	$501,528.26	$236,702.59	$264,825.67	52.8%

***No new enrollees in FY 09-10*

[152] See Appendix D for County Participants

[153] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.40
Full Service Partnership Services – Older Adults: Inpatient Hospitalization (Physical)
FY 08-09 New Enrollees Only [154]
Small Counties are grouped together in the table [155]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	13	26	-13	$26,528.58	$53,057.16	($26,528.58)	-100.0%
Los Angeles	909	756	153	$2,002,527.00	$1,665,468.00	$337,059.00	16.8%
Merced	0	1	-1	$0.00	$2,234.92	($2,234.92)	0.0%
Orange	3	93	-90	$7,927.86	$245,763.66	($237,835.80)	-3,000.0%
Placer	34	5	29	$110,760.10	$16,288.25	$94,471.85	85.3%
San Bernardino	86	158	-72	$198,664.30	$364,987.90	($166,323.60)	-83.7%
San Diego	48	86	-38	$116,395.31	$208,541.59	($92,146.28)	-79.2%
San Francisco	199	88	111	$717,204.34	$317,155.69	$400,048.65	55.8%
San Joaquin	164	121	43	$410,446.08	$302,829.12	$107,616.96	26.2%
San Luis Obispo	50	13	37	$131,684.55	$34,237.98	$97,446.57	74.0%
Santa Clara	63	38	25	$269,006.85	$162,258.10	$106,748.75	39.7%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	19	12	7	$48,374.10	$30,552.07	$17,822.03	36.8%
Solano	92	50	42	$336,535.24	$182,899.59	$153,635.65	45.7%
Sonoma	--	--	--	--	--	--	--
Stanislaus	45	32	13	$88,827.21	$63,166.02	$25,661.19	28.9%
Tulare	--	--	--	--	--	--	--
Ventura	172	217	-45	$387,053.32	$488,317.27	($101,263.95)	-26.2%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[154] See Appendix D for County Participants

[155] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.41

Full Service Partnership Services – Older Adults: Inpatient Hospitalization (Physical)
FY 09-10 New Enrollees Only [156]
Small Counties are grouped together in the table [157]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	86	27	59	$221,010.25	$69,386.94	$151,623.31	68.6%
Contra Costa*	--	--	--	--	--	--	--
Fresno	30	0	30	$65,344.80	$0.00	$65,344.80	100.0%
Kern	19	47	-28	$41,905.45	$103,660.85	($61,755.40)	-147.4%
Los Angeles	77	375	-298	$186,186.00	$906,750.00	($720,564.00)	-387.0%
Merced	--	--	--	--	--	--	--
Orange	12	158	-146	$33,482.64	$440,854.76	($407,372.12)	-1216.7%
Placer	--	--	--	--	--	--	--
San Bernardino	39	6	33	$94,678.74	$14,565.96	$80,112.78	84.6%
San Diego	145	105	40	$384,943.59	$278,752.25	$106,191.34	27.6%
San Francisco	35	89	-54	$135,234.14	$343,881.09	($208,646.95)	-154.3%
San Joaquin	279	341	-62	$724,401.18	$885,379.22	($160,978.04)	-22.2%
San Luis Obispo	17	15	2	$47,972.76	$42,328.90	$5,643.86	11.8%
Santa Clara	17	42	-25	$80,439.41	$198,732.66	($118,293.25)	-147.1%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	68	198	-130	$181,992.19	$529,918.45	($347,926.26)	-191.2%
Solano	11	0	11	$43,427.13	$0.00	$43,427.13	100.0%
Sonoma	207	101	106	$689,454.90	$336,400.70	$353,054.20	51.2%
Stanislaus	26	78	-52	$55,439.75	$166,319.25	($110,879.50)	-200.0%
Tulare	54	0	54	$97,708.59	$0.00	$97,708.59	100.0%
Ventura	109	23	86	$255,451.31	$53,902.57	$201,548.74	78.9%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[156] See Appendix D for County Participants

[157] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.42
Full Service Partnership Services – Children, Youth and Families: Inpatient Skilled Nursing (Non-Psychiatric)
FY 08-09 New Enrollees Only [158]
Small Counties are grouped together in the table [159]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[158] See Appendix D for County Participants

[159] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.43

Full Service Partnership Services – Children, Youth and Families: Inpatient Skilled Nursing (Non-Psychiatric)
FY 09-10 New Enrollees Only [160]
Small Counties are grouped together in the table [161]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[160] See Appendix D for County Participants

[161] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.44
Full Service Partnership Services – Transition Age Youth: Inpatient Skilled Nursing (Non-Psychiatric)
FY 08-09 New Enrollees Only [162]
Small Counties are grouped together in the table [163]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	14	0	14	$1,503.34	$0.00	$1,503.34	100.0%
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	0	2	-2	$0.00	$178.62	($178.62)	0.0%
San Francisco	0	34	-34	$0.00	$3,844.72	($3,844.72)	0.0%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

[162] See Appendix D for County Participants

[163] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.45

Full Service Partnership Services – Transition Age Youth: Inpatient Skilled Nursing (Non-Psychiatric)
FY 09-10 New Enrollees Only [164]
Small Counties are grouped together in the table [165]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	10	0	10	$778.20	$0.00	$778.20	100.0%
Santa Clara	--	--	--	--	--	--	--
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

***No new enrollees in FY 09-10*

[164] See Appendix D for County Participants

[165] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.46
Full Service Partnership Services – Adults: Inpatient Skilled Nursing (Non-Psychiatric)
FY 08-09 New Enrollees Only [166]
Small Counties are grouped together in the table [167]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	0	19	-19	$0.00	$2,040.25	($2,040.25)	-100.0%
Fresno	91	76	15	$7,131.63	$5,956.09	$1,175.54	16.5%
Kern	--	--	--	--	--	--	--
Los Angeles	1,559	737	822	$118,063.07	$55,813.01	$62,250.06	52.7%
Merced	--	--	--	--	--	--	--
Orange	0	46	-46	$0.00	$4,257.30	($4,257.30)	0.0%
Placer	0	1	-1	$0.00	$81.74	($81.74)	0.0%
San Bernardino	0	314	-314	$0.00	$725,355.70	($725,355.70)	0.0%
San Diego	0	46	-46	$0.00	$178.62	($178.62)	0.0%
San Francisco	10	73	-63	$1,130.80	$8,254.85	($7,124.05)	-630.0%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	0	7	-7	$0.00	$530.11	($530.11)	0.0%
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	0	7	-7	$0.00	$1,497.73	($1,497.73)	0.0%
Solano	41	7	34	$4,416.62	$754.06	$3,662.56	82.9%
Sonoma	0	155	-155	$0.00	$16,380.40	($16,380.40)	0.0%
Stanislaus	30	29	1	$2,640.58	$2,552.56	$88.02	3.3%
Tulare	--	--	--	--	--	--	--
Ventura	300	4	296	$27,366.00	$364.88	$27,001.12	98.7%

[166] See Appendix D for County Participants

[167] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.47

Full Service Partnership Services – Adults: Inpatient Skilled Nursing (Non-Psychiatric)
FY 09-10 New Enrollees Only [168]
Small Counties are grouped together in the table [169]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	7	0	7	$596.47	$0.00	$596.47	100.0%
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	535	237	298	$41,633.70	$18,443.34	$23,190.36	55.7%
Merced	--	--	--	--	--	--	--
Orange	185	186	-1	$44,612.75	$44,853.90	($241.15)	-0.5%
Placer	0	135	-135	$0.00	$14,203.35	($14,203.35)	0.0%
San Bernardino	74	59	15	$179,646.84	$143,231.94	$36,414.90	20.3%
San Diego	687	670	17	$62,808.28	$61,254.07	$1,554.21	2.5%
San Francisco	--	--	--	--	--	--	--
San Joaquin	263	85	178	$24,782.49	$8,009.55	$16,772.94	67.7%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	$0.00	24	-24	$0.00	$2,571.60	($2,571.60)	0.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	510	337	173	$117,743.16	$77,802.84	$39,940.32	33.9%
Solano	17	0	17	$1,841.15	$0.00	$1,841.15	100.0%
Sonoma	22	0	22	$2,397.56	$0.00	$2,397.56	100.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	193	29	164	$36,820.54	$5,532.62	$31,287.92	85.0%

***No new enrollees in FY 09-10*

[168] See Appendix D for County Participants

[169] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.48
Full Service Partnership Services – Older Adults: Inpatient Skilled Nursing (Non-Psychiatric)
FY 08-09 New Enrollees Only [170]
Small Counties are grouped together in the table [171]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	361	3	358	$29,039.67	$241.33	$28,798.34	99.2%
Los Angeles	664	389	275	$50,284.72	$29,458.97	$20,825.75	41.4%
Merced	--	--	--	--	--	--	--
Orange	0	210	-210	$0.00	$19,435.50	($19,435.50)	0.0%
Placer	239	35	204	$24,421.02	$3,576.30	$20,844.72	85.4%
San Bernardino	0	28	-28	$0.00	$64,681.40	($64,681.40)	0.0%
San Diego	195	48	147	$17,415.91	$4,286.99	$13,128.92	75.4%
San Francisco	1	6	-5	$113.08	$678.48	($565.40)	-500.0%
San Joaquin	460	202	258	$41,354.00	$18,159.80	$23,194.20	56.1%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	298	61	237	$63,760.57	$13,051.66	$50,708.91	79.5%
Solano	77	28	49	$8,294.62	$3,016.23	$5,278.39	63.6%
Sonoma	--	--	--	--	--	--	--
Stanislaus	15	0	15	$1,320.29	$0.00	$1,320.29	100.0%
Tulare	--	--	--	--	--	--	--
Ventura	865	38	827	$78,905.30	$3,466.36	$75,438.94	95.6%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[170] See Appendix D for County Participants

[171] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.49

Full Service Partnership Services – Older Adults: Inpatient Skilled Nursing (Non-Psychiatric)
FY 09-10 New Enrollees Only [172]
Small Counties are grouped together in the table [173]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	691	121	570	$58,879.97	$10,310.39	$48,569.58	82.5%
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	152	197	-45	$11,828.64	$15,330.54	($3,501.90)	-29.6%
Merced	--	--	--	--	--	--	--
Orange	90	72	18	$21,703.50	$17,362.80	$4,340.70	20.0%
Placer	--	--	--	--	--	--	--
San Bernardino	21	76	-55	$50,980.86	$184,502.16	($133,521.30)	-261.9%
San Diego	323	121	202	$29,529.95	$11,062.30	$18,467.65	62.5%
San Francisco	--	--	--	--	--	--	--
San Joaquin	90	178	-88	$8,480.70	$16,772.94	($8,292.24)	-97.8%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	116	136	-20	$26,780.80	$31,398.18	($4,617.38)	-17.2%
Solano	162	0	162	$17,545.10	$0.00	$17,545.10	100.0%
Sonoma	30	42	-12	$3,269.40	$4,577.16	($1,307.76)	-40.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	26	25	1	$4,960.28	$4,769.50	$190.78	3.8%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[172] See Appendix D for County Participants

[173] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.50
Full Service Partnership Services – Children, Youth and Families: Emergency Room Use
FY 08-09 New Enrollees Only [174]
Small Counties are grouped together in the table [175]

County	Children, Youth, and Families						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	2	0	2	$372.33	$0.00	$372.33	100.0%
Contra Costa	5	1	4	$1,358.31	$271.66	$1,086.65	80.0%
Fresno	1	0	1	$271.53	$0.00	$271.53	100.0%
Kern	--	--	--	--	--	--	--
Los Angeles	129	14	115	$25,267.14	$2,742.17	$22,524.97	89.1%
Merced	6	0	6	$927.63	$0.00	$927.63	100.0%
Orange	52	6	46	$9,372.28	$1,081.42	$8,290.86	88.5%
Placer	4	0	4	$750.42	$0.00	$750.42	100.0%
San Bernardino	88	10	78	$14,622.36	$1,661.63	$12,960.73	88.6%
San Diego	18	3	15	$4,497.38	$749.56	$3,747.82	83.3%
San Francisco	5	1	4	$1,537.19	$307.44	$1,229.75	80.0%
San Joaquin	2	0	2	$370.42	$0.00	$370.42	100.0%
San Luis Obispo	10	0	10	$1,542.66	$0.00	$1,542.66	100.0%
Santa Clara	9	0	9	$2,903.19	$0.00	$2,903.19	100.0%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	39	0	39	$8,037.11	$0.00	$8,037.11	100.0%
Solano	1	0	1	$233.27	$0.00	$233.27	100.0%
Sonoma	2	0	2	$489.48	$73.42	$416.06	85.0%
Stanislaus	3	0	3	$540.75	$0.00	$540.75	100.0%
Tulare	--	--	--	--	--	--	--
Ventura	1	0	1	$180.24	$0.00	$180.24	100.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[174] See Appendix D for County Participants

[175] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.51

Full Service Partnership Services – Children, Youth and Families: Emergency Room Use
FY 09-10 New Enrollees Only [176]
Small Counties are grouped together in the table [177]

County	Children, Youth, and Families						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	4	4	0	$1,144.90	$1,144.90	$0.00	0.0%
Fresno	32	2	30	$8,119.61	$507.48	$7,612.13	93.7%
Kern	2	0	2	$410.68	$0.00	$410.68	100.0%
Los Angeles	140	6	134	$29,026.93	$1,244.01	$27,782.92	95.7%
Merced	6	2	4	$1,031.95	$343.98	$687.97	66.7%
Orange	31	2	29	$5,365.69	$346.17	$5,019.52	93.5%
Placer	--	--	--	--	--	--	--
San Bernardino	174	10	164	$29,094.85	$1,672.12	$27,422.73	94.3%
San Diego	158	9	149	$41,648.89	$2,372.40	$39,276.49	94.3%
San Francisco	16	4	12	$5,248.89	$1,312.22	$3,936.67	75.0%
San Joaquin	14	0	14	$2,547.44	$0.00	$2,547.44	100.0%
San Luis Obispo	12	6	6	$2,313.38	$1,156.69	$1,156.69	50.0%
Santa Clara	3	0	3	$981.47	$0.00	$981.47	100.0%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	44	2	42	$9,345.71	$424.81	$8,920.90	95.5%
Solano	7	1	6	$1,576.85	$225.26	$1,351.59	85.7%
Sonoma	1	0	1	$257.07	$0.00	$257.07	100.0%
Stanislaus	1	0	1	$220.03	$0.00	$220.03	100.0%
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[176] See Appendix D for County Participants

[177] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.52
Full Service Partnership Services – Transition Age Youth: Emergency Room Use
FY 08-09 New Enrollees Only [178]
Small Counties are grouped together in the table [179]

County	Transition Age Youth						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	5	1	4	$930.81	$186.16	$744.65	80.0%
Contra Costa	10	5	5	$2,716.62	$1,358.31	$1,358.31	50.0%
Fresno	48	3	45	$13,033.53	$814.60	$12,218.93	93.7%
Kern	48	1	47	$10,157.83	$211.62	$9,946.21	97.9%
Los Angeles	88	3	85	$17,236.50	$587.61	$16,648.89	96.6%
Merced	6	10	-4	$927.63	$1,546.06	($618.43)	-66.7%
Orange	97	6	91	$17,482.91	$1,081.42	$16,401.49	93.8%
Placer	5	3	2	$938.02	$562.81	$375.21	40.0%
San Bernardino	263	12	251	$43,700.92	$1,993.96	$41,706.96	95.4%
San Diego	80	5	75	$19,988.34	$1,249.27	$18,739.07	93.8%
San Francisco	15	1	14	$4,611.56	$307.44	$4,304.12	93.3%
San Joaquin	39	6	33	$7,223.12	$1,111.25	$6,111.87	84.6%
San Luis Obispo	4	4	0	$617.06	$617.06	$0.00	0.0%
Santa Clara	26	4	22	$8,387.00	$1,290.31	$7,096.69	84.6%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	212	33	179	$43,688.89	$6,800.63	$36,888.26	84.4%
Solano	4	0	4	$933.10	$0.00	$933.10	100.0%
Sonoma	8	0	8	$1,957.90	$0.00	$1,957.90	100.0%
Stanislaus	41	0	41	$7,390.27	$0.00	$7,390.27	100.0%
Tulare	55	0	55	$7,043.34	$0.00	$7,043.34	100.0%
Ventura	54	6	48	$9,732.76	$1,081.42	$8,651.34	88.9%

[178] See Appendix D for County Participants

[179] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.53

Full Service Partnership Services – Transition Age Youth: Emergency Room Use

FY 09-10 New Enrollees Only [180]

Small Counties are grouped together in the table [181]

County	Transition Age Youth						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	21	2	19	$4,098.87	$390.37	$3,708.50	90.5%
Contra Costa	38	10	28	$10,876.56	$2,862.25	$8,014.31	73.7%
Fresno	24	2	22	$6,089.71	$507.48	$5,582.23	91.7%
Kern	51	1	50	$10,472.36	$205.34	$10,267.02	98.0%
Los Angeles	138	9	129	$28,612.26	$1,866.02	$26,746.24	93.5%
Merced	15	1	14	$2,579.87	$171.99	$2,407.88	93.3%
Orange	48	4	44	$8,308.16	$692.35	$7,615.81	91.7%
Placer	2	0	2	$391.19	$0.00	$391.19	100.0%
San Bernardino	218	7	211	$36,452.16	$1,170.48	$35,281.68	96.8%
San Diego	135	6	129	$35,586.07	$1,581.60	$34,004.47	95.6%
San Francisco	9	4	5	$2,952.50	$1,312.22	$1,640.28	55.6%
San Joaquin	110	7	103	$20,015.61	$1,273.72	$18,741.89	93.6%
San Luis Obispo	19	7	12	$3,662.86	$1,349.47	$2,313.39	63.2%
Santa Clara	13	2	11	$4,253.03	$654.31	$3,598.72	84.6%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	89	17	72	$18,903.83	$3,610.84	$15,292.99	80.9%
Solano	5	0	5	$1,126.32	$0.00	$1,126.32	100.0%
Sonoma	17	0	17	$4,370.14	$0.00	$4,370.14	100.0%
Stanislaus	20	11	9	$4,400.64	$2,420.35	$1,980.29	45.0%
Tulare	8	5	3	$971.35	$607.09	$364.26	37.5%
Ventura	182	8	174	$32,285.89	$1,419.16	$30,866.73	95.6%

***No new enrollees in FY 09-10*

[180] See Appendix D for County Participants

[181] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.54
Full Service Partnership Services – Adults: Emergency Room Use
FY 08-09 New Enrollees Only [182]
Small Counties are grouped together in the table [183]

County	Adults						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	22	1	21	$4,095.58	$186.16	$3,909.42	95.5%
Contra Costa	26	3	23	$7,063.21	$814.99	$6,248.22	88.5%
Fresno	202	3	199	$54,849.42	$814.60	$54,034.82	98.5%
Kern	130	1	129	$27,510.79	$211.62	$27,299.17	99.2%
Los Angeles	721	52	669	$141,221.78	$10,185.20	$131,036.58	92.8%
Merced	29	8	21	$4,483.57	$1,236.85	$3,246.72	72.4%
Orange	240	15	225	$43,256.69	$2,703.54	$40,553.15	93.8%
Placer	16	2	14	$3,001.67	$375.21	$2,626.46	87.5%
San Bernardino	597	61	536	$99,199.42	$10,135.95	$89,063.47	89.8%
San Diego	112	28	84	$27,983.67	$6,995.92	$20,987.75	75.0%
San Francisco	293	19	274	$90,079.05	$5,841.30	$84,237.75	93.5%
San Joaquin	343	6	337	$63,526.38	$1,111.25	$62,415.13	98.3%
San Luis Obispo	35	8	27	$5,399.30	$1,234.13	$4,165.17	77.1%
Santa Clara	69	4	65	$22,257.80	$1,290.31	$20,967.49	94.2%
Santa Cruz	9	3	6	$1,986.04	$662.01	$1,324.03	66.7%
Small Counties	270	47	223	$55,641.51	$9,685.75	$45,955.76	82.6%
Solano	12	5	7	$2,799.29	$1,166.37	$1,632.92	58.3%
Sonoma	10	2	8	$2,447.38	$489.48	$1,957.90	80.0%
Stanislaus	252	16	236	$45,423.13	$2,884.01	$42,539.12	93.7%
Tulare	215	3	212	$27,533.07	$384.18	$27,148.89	98.6%
Ventura	25	32	-7	$4,505.91	$5,767.56	($1,261.65)	-28.0%

[182] See Appendix D for County Participants

[183] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.55

Full Service Partnership Services – Adults: Emergency Room Use
FY 09-10 New Enrollees Only [184]
Small Counties are grouped together in the table [185]

County	Adults						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	61	0	61	$11,906.24	$0.00	$11,906.24	100.0%
Contra Costa	18	3	15	$5,152.06	$858.68	$4,293.38	83.3%
Fresno	202	3	199	$51,255.06	$761.21	$50,493.85	98.5%
Kern	82	1	81	$16,837.91	$205.34	$16,632.57	98.8%
Los Angeles	336	29	307	$69,664.64	$6,012.72	$63,651.92	91.4%
Merced	3	5	-2	$515.97	$859.96	($343.99)	-66.7%
Orange	117	35	82	$20,251.14	$6,058.03	$14,193.11	70.1%
Placer	25	0	25	$4,889.85	$0.00	$4,889.85	100.0%
San Bernardino	261	54	207	$43,642.27	$9,029.43	$34,612.84	79.3%
San Diego	239	532	-293	$63,000.53	$140,235.49	-$77,234.96	-122.6%
San Francisco	76	31	45	$24,932.24	$10,169.73	$14,762.51	59.2%
San Joaquin	459	14	445	$83,519.68	$2,547.44	$80,972.24	96.9%
San Luis Obispo	40	11	29	$7,711.28	$2,120.60	$5,590.68	72.5%
Santa Clara	73	7	66	$23,882.39	$2,290.09	$21,592.30	90.4%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	539	42	497	$114,485.00	$8,920.91	$105,564.09	92.2%
Solano	15	8	7	$3,378.96	$1,802.11	$1,576.85	46.7%
Sonoma	20	2	18	$5,141.34	$514.13	$4,627.21	90.0%
Stanislaus	131	8	123	$28,824.22	$1,760.26	$27,063.96	93.9%
Tulare	19	4	15	$2,306.96	$485.68	$1,821.28	78.9%
Ventura	190	52	138	$33,705.05	$9,224.54	$24,480.51	72.6%

***No new enrollees in FY 09-10*

[184] See Appendix D for County Participants

[185] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.56
Full Service Partnership Services – Older Adults: Emergency Room Use
FY 08-09 New Enrollees Only [186]
Small Counties are grouped together in the table [187]

County	Older Adults						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	7	0	7	$1,900.72	$0.00	$1,900.72	100.0%
Kern	107	3	104	$22,643.50	$634.86	$22,008.64	97.2%
Los Angeles	151	6	145	$ 29,576.27	$1,175.22	$28,401.05	96.0%
Merced	0	7	-7	$0.00	$1,082.24	($1,082.24)	0.0%
Orange	20	3	17	$3,604.72	$540.71	$3,064.01	85.0%
Placer	6	1	5	$1,125.63	$187.60	$938.03	83.3%
San Bernardino	18	1	17	$2,990.94	$166.16	$2,824.78	94.4%
San Diego	83	17	66	$20,737.90	$4,247.52	$16,490.38	79.5%
San Francisco	126	2	124	$38,737.07	$614.87	$38,122.20	98.4%
San Joaquin	70	12	58	$12,964.57	$2,222.50	$10,742.07	82.9%
San Luis Obispo	12	7	5	$1,851.19	$1,079.86	$771.33	41.7%
Santa Clara	2	0	2	$645.15	$0.00	$645.15	100.0%
Santa Cruz	3	0	3	$662.01	$0.00	$662.01	100.0%
Small Counties	66	8	58	$13,601.26	$1,648.64	$11,952.62	87.9%
Solano	36	11	25	$8,397.87	$2,566.01	$5,831.86	69.4%
Sonoma	1	0	1	$244.74	$0.00	$244.74	100.0%
Stanislaus	15	3	12	$2,703.76	$540.75	$2,163.01	80.0%
Tulare	--	--	--	--	--	--	--
Ventura	44	64	-20	$7,930.39	$11,535.12	($3,604.73)	-45.5%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[186] See Appendix D for County Participants

[187] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.57

Full Service Partnership Services – Older Adults: Emergency Room Use
FY 09-10 New Enrollees Only [188]
Small Counties are grouped together in the table [189]

County	Older Adults						
	Number of ER Visits Per Year – Pre FSP	Number of ER Visits Per Year – Post FSP	Decrease in Number of ER Visits	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	52	0	52	$10,149.58	$0.00	$10,149.58	100.0%
Contra Costa*	--	--	--	--	--	--	--
Fresno	3	0	3	$761.21	$0.00	$761.21	100.0%
Kern	13	3	10	$2,669.42	$616.02	$2,053.40	76.9%
Los Angeles	47	11	36	$9,744.76	$2,280.69	$7,464.07	76.6%
Merced	--	--	--	--	--	--	--
Orange	15	6	9	$2,596.30	$1,038.52	$1,557.78	60.0%
Placer	--	--	--	--	--	--	--
San Bernardino	18	3	15	$3,009.81	$501.64	$2,508.17	83.3%
San Diego	76	12	64	$20,033.64	$3,163.21	$16,870.43	84.2%
San Francisco	31	5	26	$10,169.73	$1,640.28	$8,529.45	83.9%
San Joaquin	73	32	41	$13,283.09	$5,822.72	$7,460.37	56.2%
San Luis Obispo	7	14	-7	$1,349.47	$2,698.95	($1,349.48)	-100.0%
Santa Clara	3	0	3	$981.47	$0.00	$981.47	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	55	15	40	$11,682.14	$3,186.04	$8,496.10	72.7%
Solano	4	15	-11	$901.06	$3,378.96	($2,477.90)	-275.0%
Sonoma	51	7	44	$13,110.41	$1,799.47	$11,310.94	86.3%
Stanislaus	12	4	8	$2,640.39	$880.13	$1,760.26	66.7%
Tulare	1	1	0	$121.42	$84.99	$36.43	30.0%
Ventura	28	32	-4	$4,967.06	$5,676.64	($709.58)	-14.3%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[188] See Appendix D for County Participants

[189] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.58
Full Service Partnership Services – Children, Youth and Families: Division of Juvenile Justice
FY 08-09 New Enrollees Only [190]
Small Counties are grouped together in the table [191]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	415	42	373	$266,089.70	$26,929.56	$239,160.14	89.9%
Merced	--	--	--	--	--	--	--
Orange	4	0	4	$2,564.72	$0.00	$2,564.72	100.0%
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	0	12	-12	$0.00	$7,694.16	($7,694.16)	0.0%
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	335	10	325	$214,795.30	$6,411.80	$208,383.50	97.0%
Solano	0	62	-62	$0.00	$39,753.16	($39,753.16)	0.0%
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	3	0	3	$1,923.54	$0.00	$1,923.54	100.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[190] See Appendix D for County Participants

[191] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.59

Full Service Partnership Services – Children, Youth and Families: Division of Juvenile Justice
FY 09-10 New Enrollees Only [192]
Small Counties are grouped together in the table [193]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	3	0	3	$704.07	$0.00	$704.07	100.0%
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	70	20	50	$46,027.10	$13,150.60	$32,876.50	71.4%
San Diego	157	0	157	$103,232.21	$0.00	$103,232.21	100.0%
San Francisco	40	0	40	$26,301.20	$0.00	$26,301.20	100.0%
San Joaquin	12	0	12	$7,890.36	$0.00	$7,890.36	100.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	270	0	270	$177,533.10	$0.00	$177,533.10	100.0%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	1	0	1	$657.53	$0.00	$657.53	100.0%
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[192] See Appendix D for County Participants

[193] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.60
Full Service Partnership Services – Transition Age Youth: Division of Juvenile Justice
FY 08-09 New Enrollees Only [194]
Small Counties are grouped together in the table [195]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	365	0	365	$234,030.70	$0.00	$234,030.70	100.0%
Kern	--	--	--	--	--	--	--
Los Angeles	1,268	0	1,268	$813,016.24	$0.00	$813,016.24	100.0%
Merced	--	--	--	--	--	--	--
Orange	361	2	359	$231,465.98	$1,282.36	$230,183.62	99.4%
Placer	--	--	--	--	--	--	--
San Bernardino	31	0	31	$19,876.58	$0.00	$19,876.58	100.0%
San Diego	11	25	-14	$7,052.98	$16,029.50	($8,976.52)	-127.3%
San Francisco	151	0	151	$96,818.18	$0.00	$96,818.18	100.0%
San Joaquin	8	0	8	$5,129.44	$0.00	$5,129.44	100.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	240	0	240	$153,883.20	$0.00	$153,883.20	100.0%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	180	79	101	$115,412.40	$50,653.22	$64,759.18	56.1%
Ventura	--	--	--	--	--	--	--

[194] See Appendix D for County Participants

[195] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.61

Full Service Partnership Services – Transition Age Youth: Division of Juvenile Justice
FY 09-10 New Enrollees Only [196]
Small Counties are grouped together in the table [197]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	4	0	4	$2,630.12	$0.00	$2,630.12	100.0%
Los Angeles	956	0	956	$628,598.68	$0.00	$628,598.68	100.0%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	461	20	441	$303,121.33	$13,150.60	$289,970.73	95.7%
San Diego	40	0	40	$26,301.20	$0.00	$26,301.20	100.0%
San Francisco	1	2	-1	$657.53	$1,315.06	($657.53)	-100.0%
San Joaquin	240	0	240	$157,807.20	$0.00	$157,807.20	100.0%
San Luis Obispo	5	0	5	$3,287.65	$0.00	$3,287.65	100.0%
Santa Clara	330	0	330	$216,984.90	$0.00	$216,984.90	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	199	5	194	$127,594.82	$3,205.90	$124,388.92	97.5%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	426	18	408	$280,107.78	$11,835.54	$268,272.24	95.8%

***No new enrollees in FY 09-10*

[196] See Appendix D for County Participants

[197] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.62
Full Service Partnership Services – Adults: Division of Juvenile Justice
FY 08-09 New Enrollees Only [198]
Small Counties are grouped together in the table [199]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

[198] See Appendix D for County Participants

[199] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.63

Full Service Partnership Services – Adults: Division of Juvenile Justice
FY 09-10 New Enrollees Only [200]
Small Counties are grouped together in the table [201]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

***No new enrollees in FY 09-10*

[200] See Appendix D for County Participants

[201] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.64
Full Service Partnership Services – Older Adults: Division of Juvenile Justice
FY 08-09 New Enrollees Only [202]
Small Counties are grouped together in the table [203]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[202] See Appendix D for County Participants

[203] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.65

Full Service Partnership Services – Older Adults: Division of Juvenile Justice
FY 09-10 New Enrollees Only [204]
Small Counties are grouped together in the table [205]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[204] See Appendix D for County Participants

[205] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.66
Full Service Partnership Services – Children, Youth and Families: Juvenile Halls and Camps
FY 08-09 New Enrollees Only [206]
Small Counties are grouped together in the table [207]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	93	0	93	$24,690.57	$0.00	$24,690.57	100.0%
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	60	121	-61	$11,156.40	$22,498.74	($11,342.34)	-101.7%
Los Angeles	1,551	560	991	$491,760.06	$177,553.60	$314,206.46	63.9%
Merced	137	142	-5	$32,152.53	$33,325.98	($1,173.45)	-3.6%
Orange	1,217	128	1,089	$386,360.99	$40,636.16	$345,724.83	89.5%
Placer	25	0	25	$10,959.00	$0.00	$10,959.00	100.0%
San Bernardino	505	186	319	$221,886.90	$81,724.68	$140,162.22	63.2%
San Diego	60	707	-647	$12,246.00	$144,298.70	($132,052.70)	-1,078.3%
San Francisco	353	294	59	$156,026.00	$129,948.00	$26,078.00	16.7%
San Joaquin	94	6	88	$21,158.46	$1,350.54	$19,807.92	93.6%
San Luis Obispo	48	26	22	$16,138.08	$8,741.46	$7,396.62	45.8%
Santa Clara	395	631	-236	$150,890.00	$241,042.00	($90,152.00)	-59.7%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	1,394	632	762	$413,184.77	$187,326.24	$225,858.53	54.7%
Solano	22	0	22	$4,323.00	$0.00	$4,323.00	100.0%
Sonoma	64	18	46	$31,488.00	$8,856.00	$22,632.00	71.9%
Stanislaus	0	581	-581	$0.00	$109,663.75	($109,663.75)	0.0%
Tulare	--	--	--	--	--	--	--
Ventura	696	376	320	$191,365.20	$103,381.20	$87,984.00	46.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[206] See Appendix D for County Participants

[207] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.67

Full Service Partnership Services – Children, Youth and Families: Juvenile Halls and Camps
FY 09-10 New Enrollees Only [208]
Small Counties are grouped together in the table [209]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	200	49	151	$48,218.00	$11,813.41	$36,404.59	75.5%
Fresno	892	133	759	$286,412.28	$42,704.97	$243,707.31	85.1%
Kern	0	76	-76	$0.00	$14,131.44	($14,131.44)	0.0%
Los Angeles	2,172	484	1,688	$688,654.32	$153,457.04	$535,197.28	77.7%
Merced	25	212	-187	$11,734.50	$99,508.56	($87,774.06)	-748.0%
Orange	0	164	-164	$0.00	$52,065.08	($52,065.08)	0.0%
Placer	--	--	--	--	--	--	--
San Bernardino	3,128	900	2,228	$1,374,380.64	$395,442.00	$978,938.64	71.2%
San Diego	791	515	276	$161,443.10	$105,111.50	$56,331.60	34.9%
San Francisco	245	242	3	$108,290.00	$106,964.00	$1,326.00	1.2%
San Joaquin	307	155	152	$69,102.63	$34,888.95	$34,213.68	49.5%
San Luis Obispo	0	7	-7	$0.00	$2,353.47	($2,353.47)	0.0%
Santa Clara	1,025	955	70	$391,550.00	$364,810.00	$26,740.00	6.8%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	956	793	163	$279,913.61	$232,187.76	$47,725.85	17.1%
Solano	--	--	--	--	--	--	--
Sonoma	41	28	13	$20,172.00	$13,776.00	$6,396.00	31.7%
Stanislaus	603	798	-195	$113,816.25	$150,622.50	($36,806.25)	-32.3%
Tulare	--	--	--	--	--	--	--
Ventura	106	125	-19	$16,151.22	$19,046.25	($2,895.03)	-17.9%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[208] See Appendix D for County Participants

[209] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.68
Full Service Partnership Services – Transition Age Youth: Juvenile Halls and Camps
FY 08-09 New Enrollees Only [210]
Small Counties are grouped together in the table [211]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	97	3	94	$25,752.53	$796.47	$24,956.06	96.9%
Contra Costa	126	0	126	$30,377.34	$0.00	$30,377.34	100.0%
Fresno	368	0	368	$118,161.12	$0.00	$118,161.12	100.0%
Kern	31	0	31	$5,764.14	$0.00	$5,764.14	100.0%
Los Angeles	4,643	2	4,641	$1,472,109.58	$634.12	$1,471,475.46	100.0%
Merced	81	246	-165	$19,009.89	$57,733.74	($38,723.85)	-203.7%
Orange	17,030	560	16,470	$5,406,514.10	$177,783.20	$5,228,730.90	96.7%
Placer	--	--	--	--	--	--	--
San Bernardino	2,533	0	2,533	$1,112,949.54	$0.00	$1,112,949.54	100.0%
San Diego	1,238	198	1,040	$252,675.80	$40,411.80	$212,264.00	84.0%
San Francisco	1,543	382	1,161	$682,006.00	$168,844.00	$513,162.00	75.2%
San Joaquin	343	106	237	$77,205.87	$23,859.54	$53,346.33	69.1%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	2,084	336	1,748	$796,088.00	$128,352.00	$667,736.00	83.9%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	1,510	790	720	$447,567.43	$234,157.80	$213,409.63	47.7%
Solano	339	0	339	$66,613.50	$0.00	$66,613.50	100.0%
Sonoma	--	--	--	--	--	--	--
Stanislaus	661	172	489	$124,763.75	$32,465.00	$92,298.75	74.0%
Tulare	--	--	--	--	--	--	--
Ventura	751	110	641	$206,487.45	$30,244.50	$176,242.95	85.4%

[210] See Appendix D for County Participants

[211] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.69

Full Service Partnership Services – Transition Age Youth: Juvenile Halls and Camps
FY 09-10 New Enrollees Only [212]
Small Counties are grouped together in the table [213]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	50	0	50	$13,274.50	$0.00	$13,274.50	100.0%
Contra Costa	789	34	755	$190,220.01	$8,197.06	$182,022.95	95.7%
Fresno	1,221	33	1,188	$392,050.89	$10,595.97	$381,454.92	97.3%
Kern	827	0	827	$153,772.38	$0.00	$153,772.38	100.0%
Los Angeles	7,518	455	7,063	$2,383,657.08	$144,262.30	$2,239,394.78	93.9%
Merced	353	0	353	$165,691.14	$0.00	$165,691.14	100.0%
Orange	8,249	116	8,133	$2,618,810.03	$36,826.52	$2,581,983.51	98.6%
Placer	127	0	127	$55,671.72	$0.00	$55,671.72	100.0%
San Bernardino	5,706	505	5,201	$2,507,102.28	$221,886.90	$2,285,215.38	91.1%
San Diego	2,211	552	1,659	$451,265.10	$112,663.20	$338,601.90	75.0%
San Francisco	1,159	294	865	$512,278.00	$129,948.00	$382,330.00	74.6%
San Joaquin	1,004	70	934	$225,990.36	$15,756.30	$210,234.06	93.0%
San Luis Obispo	0	41	-41	$0.00	$13,784.61	($13,784.61)	0.0%
Santa Clara	2,959	248	2,711	$1,130,338.00	$94,736.00	$1,035,602.00	91.6%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	2,301	813	1,488	$673,725.13	$238,043.69	$435,681.44	64.7%
Solano	--	--	--	--	--	--	--
Sonoma	156	0	156	$76,752.00	$0.00	$76,752.00	100.0%
Stanislaus	351	202	149	$66,251.25	$38,127.50	$28,123.75	42.5%
Tulare	461	0	461	$106,564.76	$0.00	$106,564.76	100.0%
Ventura	2,630	609	2,021	$400,733.10	$92,793.33	$307,939.77	76.8%

***No new enrollees in FY 09-10*

[212] See Appendix D for County Participants

[213] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.70
Full Service Partnership Services – Adults: Juvenile Halls and Camps
FY 08-09 New Enrollees Only [214]
Small Counties are grouped together in the table [215]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

[214] See Appendix D for County Participants

[215] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.71

Full Service Partnership Services – Adults: Juvenile Halls and Camps
FY 09-10 New Enrollees Only [216]
Small Counties are grouped together in the table [217]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

***No new enrollees in FY 09-10*

[216] See Appendix D for County Participants

[217] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.72
Full Service Partnership Services – Older Adults: Juvenile Halls and Camps
FY 08-09 New Enrollees Only [218]
Small Counties are grouped together in the table [219]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[218] See Appendix D for County Participants

[219] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.73

Full Service Partnership Services – Older Adults: Juvenile Halls and Camps
FY 09-10 New Enrollees Only [220]
Small Counties are grouped together in the table [221]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[220] See Appendix D for County Participants

[221] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.74
Full Service Partnership Services – Children, Youth and Families: Jail
FY 08-09 New Enrollees Only [222]
Small Counties are grouped together in the table [223]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[222] See Appendix D for County Participants

[223] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.75

Full Service Partnership Services – Children, Youth and Families: Jail
FY 09-10 New Enrollees Only [224]
Small Counties are grouped together in the table [225]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	0	5	-5	--	$668.10	($668.10)	0.0%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[224] See Appendix D for County Participants

[225] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.76
Full Service Partnership Services – Transition Age Youth: Jail
FY 08-09 New Enrollees Only [226]
Small Counties are grouped together in the table [227]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	73	143	-70	$6,853.97	$13,426.27	($6,572.30)	-95.9%
Contra Costa	149	71	78	$22,098.19	$10,530.01	$11,568.18	52.3%
Fresno	592	8	584	$34,596.48	$467.52	$34,128.96	98.6%
Kern	1,937	37	1,900	$192,014.81	$3,667.81	$188,347.00	98.1%
Los Angeles	3,488	628	2,860	$3,812,384.00	$686,404.00	$3,125,980.00	82.0%
Merced	82	0	82	$12,944.52	$0.00	$12,944.52	100.0%
Orange	4,322	918	3,404	$566,182.00	$120,258.00	$445,924.00	78.8%
Placer	105	39	66	$16,590.00	$6,162.00	$10,428.00	62.9%
San Bernardino	3,608	969	2,639	$277,491.28	$74,525.79	$202,965.49	73.1%
San Diego	2,050	1,093	957	$303,195.00	$161,654.70	$141,540.30	46.7%
San Francisco	342	380	-38	$36,778.68	$40,865.20	($4,086.52)	-11.1%
San Joaquin	1,732	145	1,587	$204,445.28	$17,115.80	$187,329.48	91.6%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	2,698	460	2,238	$360,506.76	$61,465.20	$299,041.56	83.0%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	799	361	438	$113,835.81	$51,404.21	$62,431.60	54.8%
Solano	11	9	2	$132.00	$108.00	$24.00	18.2%
Sonoma	814	103	711	$125,144.36	$15,835.22	$109,309.14	87.3%
Stanislaus	674	175	499	$76,903.40	$19,967.50	$56,935.90	74.0%
Tulare	511	70	441	$32,959.50	$4,515.00	$28,444.50	86.3%
Ventura	829	220	609	$104,909.95	$27,841.00	$77,068.95	73.5%

[226] See Appendix D for County Participants

[227] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.77

Full Service Partnership Services – Transition Age Youth: Jail

FY 09-10 New Enrollees Only [228]

Small Counties are grouped together in the table [229]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	66	0	66	$6,196.74	$0.00	$6,196.74	100.0%
Contra Costa	1,443	1,115	328	$214,011.33	$165,365.65	$48,645.68	22.7%
Fresno	445	274	171	$26,005.80	$16,012.56	$9,993.24	38.4%
Kern	1,883	326	1,557	$186,661.79	$32,316.38	$154,345.41	82.7%
Los Angeles	3,998	549	3,449	$4,369,814.00	$600,057.00	$3,769,757.00	86.3%
Merced	9	133	-124	$1,420.74	$20,995.38	($19,574.64)	-1,377.8%
Orange	1,925	757	1,168	$252,175.00	$99,167.00	$153,008.00	60.7%
Placer	405	9	396	$63,990.00	$1,422.00	$62,568.00	97.8%
San Bernardino	3,670	183	3,487	$282,259.70	$14,074.53	$268,185.17	95.0%
San Diego	2,189	434	1,755	$323,753.10	$64,188.60	$259,564.50	80.2%
San Francisco	0	15	-15	$0.00	$1,613.10	($1,613.10)	0.0%
San Joaquin	128	245	-117	$15,109.12	$28,919.80	($13,810.68)	-91.4%
San Luis Obispo	0	94	-94	$0.00	$9,697.04	($9,697.04)	0.0%
Santa Clara	3,594	1,063	2,531	$480,230.28	$142,038.06	$338,192.22	70.4%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	594	504	90	$89,951.56	$76,322.53	$13,629.03	15.2%
Solano	225	0	225	$2,700.00	$0.00	$2,700.00	100.0%
Sonoma	510	187	323	$78,407.40	$28,749.38	$49,658.02	63.3%
Stanislaus	921	218	703	$105,086.10	$24,873.80	$80,212.30	76.3%
Tulare	409	201	208	$26,380.50	$12,964.50	$13,416.00	50.9%
Ventura	1,170	578	592	$128,957.40	$63,707.16	$65,250.24	50.6%

***No new enrollees in FY 09-10*

[228] See Appendix D for County Participants

[229] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.78
Full Service Partnership Services – Adults: Jail
FY 08-09 New Enrollees Only [230]
Small Counties are grouped together in the table [231]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	141	0	141	$13,238.49	$0.00	$13,238.49	100.0%
Contra Costa	317	256	61	$47,014.27	$37,967.36	$9,046.91	19.2%
Fresno	2,636	311	2,325	$154,047.84	$18,174.84	$135,873.00	88.2%
Kern	5,527	130	5,397	$547,891.51	$12,886.90	$535,004.61	97.6%
Los Angeles	26,074	2,210	23,864	$28,498,882.00	$2,415,530.00	$26,083,352.00	91.5%
Merced	387	3	384	$61,091.82	$473.58	$60,618.24	99.2%
Orange	10,032	1,774	8,258	$1,314,192.00	$232,394.00	$1,081,798.00	82.3%
Placer	506	412	94	$79,948.00	$65,096.00	$14,852.00	18.6%
San Bernardino	9,593	1,403	8,190	$737,797.63	$107,904.73	$629,892.90	85.4%
San Diego	3,451	1,147	2,304	$510,402.90	$169,641.30	$340,761.60	66.8%
San Francisco	665	483	182	$71,514.10	$51,941.82	$19,572.28	27.4%
San Joaquin	4,203	340	3,863	$496,122.12	$40,133.60	$455,988.52	91.9%
San Luis Obispo	0	39	-39	$0.00	$4,023.24	($4,023.24)	0.0%
Santa Clara	11,526	2,063	9,463	$1,540,104.12	$275,658.06	$1,264,446.06	82.1%
Santa Cruz	72	0	72	$5,556.24	$0.00	$5,556.24	100.0%
Small Counties	3,056	544	2,512	$435,397.05	$77,505.23	$357,891.82	82.2%
Solano	372	10	362	$4,464.00	$120.00	$4,344.00	97.3%
Sonoma	1,880	109	1,771	$289,031.20	$16,757.66	$272,273.54	94.2%
Stanislaus	2,206	738	1,468	$251,704.60	$84,205.80	$167,498.80	66.5%
Tulare	891	298	593	$57,469.50	$19,221.00	$38,248.50	66.6%
Ventura	1,219	329	890	$154,264.45	$41,634.95	$112,629.50	73.0%

[230] See Appendix D for County Participants

[231] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.79

Full Service Partnership Services – Adults: Jail

FY 09-10 New Enrollees Only [232]

Small Counties are grouped together in the table [233]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	74	0	74	$6,947.86	$0.00	$6,947.86	100.0%
Contra Costa	949	212	737	$140,746.19	$31,441.72	$109,304.47	77.7%
Fresno	1,815	386	1,429	$106,068.60	$22,557.84	$83,510.76	78.7%
Kern	4,128	390	3,738	$409,208.64	$38,660.70	$370,547.94	90.6%
Los Angeles	20,803	1,907	18,896	$22,737,679.00	$2,084,351.00	$20,653,328.00	90.8%
Merced	--	--	--	--	--	--	--
Orange	8,034	1,299	6,735	$1,052,454.00	$170,169.00	$882,285.00	83.8%
Placer	711	79	632	$112,338.00	$12,482.00	$99,856.00	88.9%
San Bernardino	8,529	395	8,134	$655,965.39	$30,379.45	$625,585.94	95.4%
San Diego	4,592	1,836	2,756	$679,156.80	$271,544.40	$407,612.40	60.0%
San Francisco	2,021	423	1,598	$217,338.34	$45,489.42	$171,848.92	79.1%
San Joaquin	2,588	312	2,276	$305,487.52	$36,828.48	$268,659.04	87.9%
San Luis Obispo	0	222	-222	$0.00	$22,901.52	($22,901.52)	0.0%
Santa Clara	9,724	1,710	8,014	$1,299,320.88	$228,490.20	$1,070,830.68	82.4%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	3,149	581	2,568	$476,864.41	$87,982.92	$388,881.49	81.5%
Solano	1,216	5	1,211	$14,592.00	$60.00	$14,532.00	99.6%
Sonoma	682	101	581	$104,850.68	$15,527.74	$89,322.94	85.2%
Stanislaus	915	262	653	$104,401.50	$29,894.20	$74,507.30	71.4%
Tulare	1,031	292	739	$66,499.50	$18,834.00	$47,665.50	71.7%
Ventura	1,665	640	1,025	$183,516.30	$70,540.80	$112,975.50	61.6%

***No new enrollees in FY 09-10*

[232] See Appendix D for County Participants

[233] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.80
Full Service Partnership Services – Older Adults: Jail
FY 08-09 New Enrollees Only [234]
Small Counties are grouped together in the table [235]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	1	0	1	$58.44	$0.00	$58.44	100.0%
Kern	--	--	--	--	--	--	--
Los Angeles	1,771	36	1,735	$1,935,703.00	$39,348.00	$1,896,355.00	98.0%
Merced	--	--	--	--	--	--	--
Orange	464	13	451	$60,784.00	$1,703.00	$59,081.00	97.2%
Placer	14	0	14	$2,212.00	$0.00	$2,212.00	100.0%
San Bernardino	--	--	--	--	--	--	--
San Diego	182	0	182	$26,917.80	$0.00	$26,917.80	100.0%
San Francisco	0	28	-28	$0.00	$3,011.12	($3,011.12)	0.0%
San Joaquin	0	11	-11	$0.00	$1,298.44	($1,298.44)	0.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	60	0	60	$8,017.20	$0.00	$8,017.20	100.0%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	138	0	138	$19,661.25	$0.00	$19,661.25	100.0%
Solano	0	7	-7	$0.00	$84.00	($84.00)	0.0%
Sonoma	196	0	196	$30,133.04	$0.00	$30,133.04	100.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	128	0	128	$16,198.40	$0.00	$16,198.40	100.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[234] See Appendix D for County Participants

[235] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.81

Full Service Partnership Services – Older Adults: Jail
FY 09-10 New Enrollees Only [236]
Small Counties are grouped together in the table [237]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	149	0	149	$14,770.37	$0.00	$14,770.37	100.0%
Los Angeles	861	82	779	$941,073.00	$89,626.00	$851,447.00	90.5%
Merced	--	--	--	--	--	--	--
Orange	108	42	66	$14,148.00	$5,502.00	$8,646.00	61.1%
Placer	2	0	2	$316.00	$0.00	$316.00	100.0%
San Bernardino	230	0	230	$17,689.30	$0.00	$17,689.30	100.0%
San Diego	75	43	32	$11,092.50	$6,359.70	$4,732.80	42.7%
San Francisco	--	--	--	--	--	--	--
San Joaquin	364	0	364	$42,966.56	$0.00	$42,966.56	100.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	365	0	365	$48,771.30	$0.00	$48,771.30	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	158	4	154	$23,926.51	$605.73	$23,320.78	97.5%
Solano	22	0	22	$264.00	$0.00	$264.00	100.0%
Sonoma	--	--	--	--	--	--	--
Stanislaus	0	54	-54	$0.00	$6,161.40	($6,161.40)	0.0%
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[236] See Appendix D for County Participants

[237] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.82
Full Service Partnership Services – Children, Youth and Families: Prison
FY 08-09 New Enrollees Only [238]
Small Counties are grouped together in the table [239]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[238] See Appendix D for County Participants

[239] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.83
Full Service Partnership Services – Children, Youth and Families: Prison
FY 09-10 New Enrollees Only [240]
Small Counties are grouped together in the table [241]

County	Children, Youth, and Families						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[240] See Appendix D for County Participants

[241] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.84
Full Service Partnership Services – Transition Age Youth: Prison
FY 08-09 New Enrollees Only [242]
Small Counties are grouped together in the table [243]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	180	0	180	$23,229.00	$0.00	$23,229.00	100.0%
Kern	--	--	--	--	--	--	--
Los Angeles	488	0	488	$62,976.40	$0.00	$62,976.40	100.0%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	390	0	390	$50,329.50	$0.00	$50,329.50	100.0%
San Diego	0	25	-25	$0.00	$3,226.25	($3,226.25)	0.0%
San Francisco	--	--	--	--	--	--	--
San Joaquin	185	0	185	$23,874.25	$0.00	$23,874.25	100.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

[242] See Appendix D for County Participants

[243] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.85

Full Service Partnership Services – Transition Age Youth: Prison
FY 09-10 New Enrollees Only [244]
Small Counties are grouped together in the table [245]

County	Transition Age Youth						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	98	0	98	$13,425.02	$0.00	$13,425.02	100.0%
Los Angeles	200	0	200	$27,398.00	$0.00	$27,398.00	100.0%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	187	0	187	$24,132.35	$0.00	$24,132.35	100.0%
San Diego	200	0	200	$27,398.00	$0.00	$27,398.00	100.0%
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	0	180	-180	$0.00	$24,658.20	($24,658.20)	0.0%
Santa Clara	457	0	457	$62,604.43	$0.00	$62,604.43	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

***No new enrollees in FY 09-10*

[244] See Appendix D for County Participants

[245] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.86
Full Service Partnership Services – Adults: Prison
FY 08-09 New Enrollees Only [246]
Small Counties are grouped together in the table [247]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	271	0	271	$34,972.55	$0.00	$34,972.55	100.0%
Contra Costa	4	0	4	$516.20	$0.00	$516.20	100.0%
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	558	0	558	$72,009.90	$0.00	$72,009.90	100.0%
Merced	30	0	30	$3,871.50	$0.00	$3,871.50	100.0%
Orange	794	0	794	$102,465.70	$0.00	$102,465.70	100.0%
Placer	--	--	--	--	--	--	--
San Bernardino	753	0	753	$97,174.65	$0.00	$97,174.65	100.0%
San Diego	333	0	333	$42,973.65	$0.00	$42,973.65	100.0%
San Francisco	265	0	265	$34,198.25	$0.00	$34,198.25	100.0%
San Joaquin	434	0	434	$56,007.70	$0.00	$56,007.70	100.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	172	0	172	$22,196.60	$0.00	$22,196.60	100.0%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	179	0	179	$23,099.95	$0.00	$23,099.95	100.0%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	167	0	167	$21,551.35	$0.00	$21,551.35	100.0%
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

[246] See Appendix D for County Participants

[247] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.87
Full Service Partnership Services – Adults: Prison
FY 09-10 New Enrollees Only [248]
Small Counties are grouped together in the table [249]

County	Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	834	0	834	$114,249.66	$0.00	$114,249.66	100.0%
Merced	--	--	--	--	--	--	--
Orange	930	0	930	$127,400.70	$0.00	$127,400.70	100.0%
Placer	--	--	--	--	--	--	--
San Bernardino	697	0	697	$89,947.85	$0.00	$89,947.85	100.0%
San Diego	371	0	371	$50,823.29	$0.00	$50,823.29	100.0%
San Francisco	243	0	243	$33,288.57	$0.00	$33,288.57	100.0%
San Joaquin	368	0	368	$50,412.32	$0.00	$50,412.32	100.0%
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	2,732	0	2,732	$374,256.68	$0.00	$374,256.68	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	245	0	245	$31,617.25	$0.00	$31,617.25	100.0%
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	324	0	324	$44,384.76	$0.00	$44,384.76	100.0%
Tulare	120	0	120	$16,438.80	$0.00	$16,438.80	100.0%
Ventura	--	--	--	--	--	--	--

***No new enrollees in FY 09-10*

[248] See Appendix D for County Participants

[249] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.88
Full Service Partnership Services – Older Adults: Prison
FY 08-09 New Enrollees Only [250]
Small Counties are grouped together in the table [251]

County	Older Adults						
	Number of Days Per Year Pre FSP	Number of Days Per Year Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	562	0	562	$72,526.10	$0.00	$72,526.10	100.0%
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	--	--	--	--	--	--	--
Santa Cruz	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[250] See Appendix D for County Participants

[251] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.89

Full Service Partnership Services – Older Adults: Prison
FY 09-10 New Enrollees Only [252]
Small Counties are grouped together in the table [253]

County	Older Adults						
	Number of Days Per Year – Pre FSP	Number of Days Per Year – Post FSP	Decrease in Number of Days	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	--	--	--	--	--	--	--
Los Angeles	--	--	--	--	--	--	--
Merced	--	--	--	--	--	--	--
Orange	--	--	--	--	--	--	--
Placer	--	--	--	--	--	--	--
San Bernardino	--	--	--	--	--	--	--
San Diego	--	--	--	--	--	--	--
San Francisco	--	--	--	--	--	--	--
San Joaquin	--	--	--	--	--	--	--
San Luis Obispo	--	--	--	--	--	--	--
Santa Clara	65	0	65	$8,904.35	$0.00	$8,904.35	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	--	--	--	--	--	--	--
Solano	--	--	--	--	--	--	--
Sonoma	--	--	--	--	--	--	--
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	--	--	--	--	--	--	--

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[252] See Appendix D for County Participants

[253] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

Table H.90
Full Service Partnership Services – Children, Youth and Families: Arrests
FY 08-09 New Enrollees Only [254]
Small Counties are grouped together in the table [255]

County	Children, Youth, and Families						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	3	0	3	$26.26	$0.00	$26.26	100.0%
Contra Costa	4	1	3	$215.13	$53.78	$161.35	75.0%
Fresno	--	--	--	--	--	--	--
Kern	9	1	8	$122.33	$13.59	$108.74	88.9%
Los Angeles	95	9	86	$149.99	$14.21	$135.78	90.5%
Merced	12	1	11	$247.10	$20.59	$226.51	91.7%
Orange	15	2	13	$818.60	$109.15	$709.45	86.7%
Placer	2	0	2	$69.72	$0.00	$69.72	100.0%
San Bernardino	65	24	41	$1,617.39	$597.19	$1,020.20	63.1%
San Diego	24	13	11	$1,121.29	$607.37	$513.92	45.8%
San Francisco	30	18	12	$1,529.56	$917.74	$611.82	40.0%
San Joaquin	7	4	3	$129.26	$73.86	$55.40	42.9%
San Luis Obispo	8	13	-5	$272.00	$441.99	($169.99)	-62.5%
Santa Clara	25	9	16	$1,155.88	$416.12	$739.76	64.0%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	96	13	83	$2,052.58	$277.95	$1,774.63	86.5%
Solano	7	2	5	$285.89	$81.68	$204.21	71.4%
Sonoma	5	0	5	$152.86	$9.17	$143.69	94.0%
Stanislaus	12	0	12	$343.74	$0.00	$343.74	100.0%
Tulare	--	--	--	--	--	--	--
Ventura	48	25	23	$2,333.18	$1,215.20	$1,117.98	47.9%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[254] See Appendix D for County Participants

[255] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.91
Full Service Partnership Services – Children, Youth and Families: Arrests
FY 09-10 New Enrollees Only [256]
Small Counties are grouped together in the table [257]

County	Children, Youth, and Families						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa	2	0	2	$93.15	$0.00	$93.15	100.0%
Fresno	62	11	51	$1,388.71	$246.38	$1,142.33	82.3%
Kern	2	4	-2	$23.12	$46.24	($23.12)	-100.0%
Los Angeles	89	5	84	$121.96	$6.85	$115.11	94.4%
Merced	3	6	-3	$54.88	$109.76	($54.88)	-100.0%
Orange	3	1	2	$139.96	$27.99	$111.97	80.0%
Placer	--	--	--	--	--	--	--
San Bernardino	162	59	103	$3,666.78	$1,335.43	$2,331.35	63.6%
San Diego	39	17	22	$1,524.51	$664.53	$859.98	56.4%
San Francisco	34	6	28	$1,520.18	$268.27	$1,251.91	82.4%
San Joaquin	14	2	12	$238.88	$34.13	$204.75	85.7%
San Luis Obispo	4	3	1	$110.60	$82.95	$27.65	25.0%
Santa Clara	23	9	14	$972.35	$380.48	$591.87	60.9%
Santa Cruz*	--	--	--	--	--	--	--
Small Counties	99	19	80	$1,766.55	$339.04	$1,427.51	80.8%
Solano	2	0	2	$77.93	$0.00	$77.93	100.0%
Sonoma	3	1	2	$22.47	$4.49	$17.98	80.0%
Stanislaus	17	4	13	$444.63	$104.62	$340.01	76.5%
Tulare	--	--	--	--	--	--	--
Ventura	20	7	13	$810.61	$283.71	$526.90	65.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for CYF in study*

[256] See Appendix D for County Participants

[257] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Imperial, Lake, Lassen, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Humboldt, Inyo, Mono and Tehama counties did not provide FSP services in FY 08-09/FY 09-10 to CYF, nor claim expenditures for CYF in the study, and are therefore not included in the *Small County* pool.

Table H.92
Full Service Partnership Services – Transition Age Youth: Arrests
FY 08-09 New Enrollees Only [258]
Small Counties are grouped together in the table [259]

County	Transition Age Youth						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	17	12	5	$148.80	$105.04	$43.76	29.4%
Contra Costa	16	4	12	$860.51	$215.13	$645.38	75.0%
Fresno	45	6	39	$1,137.60	$151.68	$985.92	86.7%
Kern	61	1	60	$829.11	$13.59	$815.52	98.4%
Los Angeles	173	13	160	$273.15	$20.53	$252.62	92.5%
Merced	17	2	15	$350.06	$41.18	$308.88	88.2%
Orange	258	57	201	$14,079.98	$3,110.69	$10,969.29	77.9%
Placer	3	0	3	$104.58	$0.00	$104.58	100.0%
San Bernardino	253	51	202	$6,295.39	$1,269.03	$5,026.36	79.8%
San Diego	80	10	70	$3,737.65	$467.21	$3,270.44	87.5%
San Francisco	59	12	47	$3,008.14	$611.83	$2,396.31	79.7%
San Joaquin	81	8	73	$1,495.73	$147.73	$1,348.00	90.1%
San Luis Obispo	7	0	7	$238.00	$0.00	$238.00	100.0%
Santa Clara	67	13	54	$3,097.75	$601.06	$2,496.69	80.6%
Santa Cruz	2	0	2	$75.87	$0.00	$75.87	100.0%
Small Counties	146	34	112	$3,121.63	$735.51	$2,386.12	76.4%
Solano	8	3	5	$326.73	$122.53	$204.20	62.5%
Sonoma	11	0	11	$336.29	$0.00	$336.29	100.0%
Stanislaus	26	0	26	$744.77	$0.00	$744.77	100.0%
Tulare	23	2	21	$702.40	$61.08	$641.32	91.3%
Ventura	79	24	55	$3,840.02	$1,166.59	$2,673.43	69.6%

[258] See Appendix D for County Participants

[259] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.93

Full Service Partnership Services – Transition Age Youth: Arrests

FY 09-10 New Enrollees Only [260]

Small Counties are grouped together in the table [261]

County	Transition Age Youth						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	12	1	11	$89.88	$7.49	$82.39	91.7%
Contra Costa	22	13	9	$1,024.69	$605.50	$419.19	40.9%
Fresno	79	12	67	$1,769.48	$268.78	$1,500.70	84.8%
Kern	72	4	68	$832.25	$46.24	$786.01	94.4%
Los Angeles	222	12	210	$304.21	$16.44	$287.77	94.6%
Merced	13	1	12	$237.82	$18.29	$219.53	92.3%
Orange	133	17	116	$6,204.96	$793.12	$5,411.84	87.2%
Placer	5	0	5	$159.29	$0.00	$159.29	100.0%
San Bernardino	318	66	252	$7,197.75	$1,493.87	$5,703.88	79.2%
San Diego	172	17	155	$6,723.47	$664.53	$6,058.94	90.1%
San Francisco	39	6	33	$1,743.74	$268.27	$1,475.47	84.6%
San Joaquin	56	10	46	$955.53	$170.63	$784.90	82.1%
San Luis Obispo	18	6	12	$497.68	$165.89	$331.79	66.7%
Santa Clara	108	29	79	$4,565.81	$1,226.00	$3,339.81	73.1%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	226	33	193	$4,032.74	$588.85	$3,443.89	85.4%
Solano	14	0	14	$545.51	$0.00	$545.51	100.0%
Sonoma	16	1	15	$119.84	$5.99	$113.85	95.0%
Stanislaus	48	15	33	$1,255.41	$392.32	$863.09	68.7%
Tulare	26	1	26	$687.95	$13.23	$674.72	98.1%
Ventura	218	49	169	$8,835.69	$1,986.00	$6,849.69	77.5%

***No new enrollees in FY 09-10*

[260] See Appendix D for County Participants

[261] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.94
Full Service Partnership Services – Adults: Arrests
FY 08-09 New Enrollees Only [262]
Small Counties are grouped together in the table [263]

County	Adults						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	15	1	14	$131.30	$8.75	$122.55	93.3%
Contra Costa	30	9	21	$1,613.45	$484.03	$1,129.42	70.0%
Fresno	62	8	54	$1,567.36	$202.24	$1,365.12	87.1%
Kern	98	2	96	$1,332.01	$27.18	$1,304.83	98.0%
Los Angeles	463	61	402	$731.02	$96.31	$634.71	86.8%
Merced	11	2	9	$226.51	$41.18	$185.33	81.8%
Orange	225	12	213	$12,279.06	$654.88	$11,624.18	94.7%
Placer	23	7	16	$801.79	$244.02	$557.77	69.6%
San Bernardino	250	102	148	$6,220.74	$2,538.06	$3,682.68	59.2%
San Diego	96	11	85	$4,485.18	$513.93	$3,971.25	88.5%
San Francisco	64	20	44	$3,263.07	$1,019.71	$2,243.36	68.7%
San Joaquin	134	10	124	$2,474.42	$184.66	$2,289.76	92.5%
San Luis Obispo	8	2	6	$272.00	$68.00	$204.00	75.0%
Santa Clara	147	20	127	$6,796.55	$924.70	$5,871.85	86.4%
Santa Cruz	8	1	7	$303.46	$30.35	$273.11	90.0%
Small Counties	149	25	124	$3,185.77	$534.52	$2,651.25	83.2%
Solano	3	2	1	$122.53	$81.68	$40.85	33.3%
Sonoma	25	0	25	$764.30	$0.00	$764.30	100.0%
Stanislaus	80	20	60	$2,291.60	$572.90	$1,718.70	75.0%
Tulare	42	10	32	$1,282.64	$305.39	$977.25	76.2%
Ventura	48	15	33	$2,333.18	$729.12	$1,604.06	68.7%

[262] See Appendix D for County Participants

[263] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Sierra, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.95
Full Service Partnership Services – Adults: Arrests
FY 09-10 New Enrollees Only [264]
Small Counties are grouped together in the table [265]

County	Adults						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	11	0	11	$82.39	$0.00	$82.39	100.0%
Contra Costa	21	15	6	$978.11	$698.65	$279.46	28.6%
Fresno	34	7	27	$761.55	$156.79	$604.76	79.4%
Kern	100	0	100	$1,155.90	$0.00	$1,155.90	100.0%
Los Angeles	373	52	321	$511.13	71.26	$439.87	86.1%
Merced	1	0	1	$18.29	$0.00	$18.29	100.0%
Orange	156	13	143	$7,278.00	$606.50	$6,671.50	91.7%
Placer	18	0	18	$573.44	$0.00	$573.44	100.0%
San Bernardino	212	29	183	$4,798.50	$656.40	$4,142.10	86.3%
San Diego	159	66	93	$6,215.30	$2,579.93	$3,635.37	58.5%
San Francisco	48	6	42	$2,146.14	$268.27	$1,877.87	87.5%
San Joaquin	100	13	87	$1,706.30	$221.82	$1,484.48	87.0%
San Luis Obispo	32	7	25	$884.77	$193.54	$691.23	78.1%
Santa Clara	146	14	132	$6,172.29	$591.86	$5,580.43	90.4%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	152	48	104	$2,712.28	$854.73	$1,857.55	68.5%
Solano	48	1	47	$1,870.32	$38.96	$1,831.36	97.9%
Sonoma	40	2	38	$299.61	$14.98	$284.63	95.0%
Stanislaus	23	5	18	$601.55	$130.77	$470.78	78.3%
Tulare	44	3	41	$1,164.22	$79.38	$1,084.84	93.2%
Ventura	96	35	61	$3,890.95	$1,418.57	$2,472.38	63.5%

***No new enrollees in FY 09-10*

[264] See Appendix D for County Participants

[265] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Mono, Napa, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted.

Table H.96
Full Service Partnership Services – Older Adults: Arrests
FY 08-09 New Enrollees Only [266]
Small Counties are grouped together in the table [267]

County	Older Adults						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	--	--	--	--	--	--	--
Contra Costa*	--	--	--	--	--	--	--
Fresno	1	0	1	$25.28	$0.00	$25.28	100.0%
Kern	--	--	--	--	--	--	--
Los Angeles	17	1	16	$26.84	$1.58	$25.26	94.1%
Merced	--	--	--	--	--	--	--
Orange	3	0	3	$163.72	$21.83	$141.89	86.7%
Placer	3	0	3	$104.58	$0.00	$104.58	100.0%
San Bernardino	--	--	--	--	--	--	--
San Diego	4	0	4	$186.88	$0.00	$186.88	100.0%
San Francisco	3	0	3	$152.96	$0.00	$152.96	100.0%
San Joaquin	3	1	2	$55.40	$12.93	$42.47	76.7%
San Luis Obispo	2	0	2	$68.00	$0.00	$68.00	100.0%
Santa Clara	1	0	1	$46.24	$0.00	$46.24	100.0%
Santa Cruz	--	--	--	--	--	--	--
Small Counties	2	0	2	$42.76	$0.00	$42.76	100.0%
Solano	1	0	1	$40.84	$0.00	$40.84	100.0%
Sonoma	3	0	3	$91.72	$0.00	$91.72	100.0%
Stanislaus	--	--	--	--	--	--	--
Tulare	--	--	--	--	--	--	--
Ventura	3	0	3	$145.82	$0.00	$145.82	100.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*

[266] See Appendix D for County Participants

[267] Small counties included for purpose of FY 08-09 analyses = El Dorado, Glenn, Imperial, Lake, Madera, Napa, San Benito, Shasta, Siskiyou, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra County did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claimed expenditures for Older Adults in the study, and is therefore not included in the *Small County* pool.

Table H.97
Full Service Partnership Services – Older Adults: Arrests
FY 09-10 New Enrollees Only [268]
Small Counties are grouped together in the table [269]

County	Older Adults						
	Number of Arrests Per Year – Pre FSP	Number of Arrests Per Year – Post FSP	Decrease in Number of Arrests	Pre FSP Cost	Post FSP Cost	Total Offset	Percent
Butte	11	0	11	$82.39	$0.00	$82.39	100.0%
Contra Costa*	--	--	--	--	--	--	--
Fresno	--	--	--	--	--	--	--
Kern	3	0	3	$34.68	$0.00	$34.68	100.0%
Los Angeles	13	4	9	$17.81	$5.48	$12.33	69.2%
Merced	--	--	--	--	--	--	--
Orange	7	0	7	$326.58	$0.00	$326.58	100.0%
Placer	1	0	1	$31.86	$0.00	$31.86	100.0%
San Bernardino	2	0	2	$45.27	$0.00	$45.27	100.0%
San Diego	8	3	5	$312.72	$117.27	$195.45	62.5%
San Francisco	1	0	1	$44.71	$0.00	$44.71	100.0%
San Joaquin	3	2	1	$51.19	$34.13	$17.06	33.3%
San Luis Obispo	4	0	4	$110.60	$0.00	$110.60	100.0%
Santa Clara	4	0	4	$169.10	$0.00	$169.10	100.0%
Santa Cruz**	--	--	--	--	--	--	--
Small Counties	13	2	11	$231.97	$35.69	$196.28	84.6%
Solano	6	0	6	$233.79	$0.00	$233.79	100.0%
Sonoma	--	--	--	--	--	--	--
Stanislaus	0	1	-1	$0.00	$26.15	($26.15)	0.0%
Tulare	--	--	--	--	--	--	--
Ventura	2	1	2	$81.06	$20.27	$60.79	75.0%

**Did not provide FSP services in FY 08-09/FY 09-10, nor claim FSP expenditures for Older Adults in study*
***No new enrollees in FY 09-10*

[268] See Appendix D for County Participants

[269] Small counties included for purpose of FY 09-10 analyses = Amador, Calaveras, El Dorado, Glenn, Humboldt, Imperial, Inyo, Lake, Lassen, Madera, Napa, San Benito, Shasta, Siskiyou, Tehama, Trinity, Tuolumne, and Yolo. Although Alpine, Berkeley, and Mendocino are considered "small," they do not submit data on individual FSPs into the DCR, and therefore the annualized expenditure per person and cost offset analyses could not be conducted. Sierra, Colusa, Del Norte, and Mono counties did not provide FSP services in FY 08-09/FY 09-10 to Older Adults, nor claim expenditures for Older Adults in the study, and are therefore not included in the *Small County* pool.

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