

Board of Directors Meeting

AGENDA

April 15, 2010

3:30 p.m. – 5:30 p.m.

This meeting is dedicated to the memory of

Michael Oprendeck

*Solano County Mental Health Director and Founding Member
of CalMHSA*



Meeting Location:

Marriott Courtyard Cal Expo

1782 Tribute Road

Sacramento, CA 95815

(916) 929-7900

California Mental Health Service Authority

(CalMHSA)

Board of Directors Meeting

Agenda

Thursday, April 15, 2010

3:30 p.m. – 5:30 p.m.

Marriott Courtyard Cal Expo

1782 Tribute Road

Sacramento, CA 95815

(916) 929-7900

In compliance with the Americans with Disabilities Act, if you are a disabled person and you need a disability-related modification or accommodation to participate in this meeting, please contact Kim Santin at (916) 859-4820 or (916) 859-4805 (fax). Requests must be made as early as possible, and at least one full business day before the start of the meeting.

Materials relating to an item on this agenda submitted to this Board after distribution of the agenda packet are available for public inspection at: 3043 Gold Canal Drive, Rancho Cordova, CA 95670, during normal business hours.

1. CALL TO ORDER

2. INTRODUCTIONS

3. PUBLIC COMMENTS

A. Public Comments

This time is reserved for members of the public to address the Board relative to matters of the CalMHSA not on the agenda. No action may be taken on non-agenda items unless authorized by law. Comments will be limited to five minutes per person and twenty minutes in total.

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B. Stakeholder Input	
This time is reserved for members of the public to address the Board relative to matters of the CalMHSA not on the agenda. No action may be taken on non-agenda items unless authorized by law. Comments will be limited to five minutes per person and twenty minutes in total.	
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A. Discussion regarding CalMHSA membership development	
Recommendation: Approve membership to CalMHSA for Sonoma County and Glenn County.	
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A. Financial statements for the quarter ending March 31, 2010	20
Recommendation: Staff recommends the Board accept the financial statements for the quarter ending March 31, 2010.	
B. Budget projection for the fourteen months ending June 30, 2011	25
Recommendation: For discussion and/or action should action be deemed appropriate.	

***=Material on Agenda Item Enclosed**

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A. CalMHSA Agreement with the Department of Mental Health (DMH)* Recommendation: For discussion and/or action should action be deemed appropriate.	27
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D. Report from Strategic Planning* Recommendation: For discussion and/or action should action be deemed appropriate.	78
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***=Material on Agenda Item Enclosed**

10. CLOSING COMMENTS

This time is reserved for comments by Board members and staff to identify matters for future Board business.

- A. Board Members
- B. Staff Members

11. ADJOURNMENT

Notice: The next Board of Directors Meeting is scheduled to be held on Thursday, May 13, 2010, at 3:30pm, at the Holiday Inn Capital Plaza, 300 J Street, Sacramento, CA 95814.

***=Material on Agenda Item Enclosed**

BROWN ACT REQUIREMENTS

Agenda Item 4

SUBJECT: BOARD OF DIRECTORS STUDY SESSION – Rules for Conducting Meetings and Taking Action

BACKGROUND AND STATUS:

As a JPA, CalMHSA must comply with the Brown Act open meeting laws. With the anticipated growth and increased public involvement, it is important the JPA conduct its meetings, prepare and post its agendas, and interact with the public, in accordance with this Act.

Doug Alliston of Murphy, Campbell, Guthrie and Alliston, and council for CalMHSA, will begin a series of short presentations to educate the Board on the salient points of the Brown Act.

RECOMMENDATION:

None – Information Only

REFERENCE MATERIALS ATTACHED:

None

CONSENT CALENDAR

Agenda Item 6

SUBJECT: Consent Calendar

BACKGROUND AND STATUS:

The Consent Calendar consists of items that require approval or acceptance but are self-explanatory and require no discussion. If the Board would like to discuss any item listed, it may be pulled from the Consent Calendar.

- A. Minutes from the March 12, 2010, Board of Director's Meeting*
- B. Letter from the National Alliance on Mental Illness (NAMI)*
- C. Vendor Check Register Report: Inception to March 31, 2010*

Recommendation: Formally Approve the Consent Calendar

RECOMMENDATION:

Staff recommends the Board formally consider approval of the Consent Calendar.

REFERENCE MATERIALS ATTACHED:

- Minutes from the March 12, 2010 Board of Director's Meeting*
- Letter from National Alliance on Mental Illness (NAMI)*
- Vendor Check Register Report*

MINUTES

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

BOARD OF DIRECTORS MEETING – REGULAR MEETING

CiMH – Sugar Pine Room

March 12, 2010

MEMBERS PRESENT

Allan Rawland, MSW, CalMHSA President, San Bernardino County

Mike Opredek, LCSW, CalMHSA Vice President, Solano County

Dr. Wayne Clark, PhD, CalMHSA Secretary, Monterey County

Dr. Karen Baylor, PhD, MFT, CalMHSA Southern Area Rep., San Luis Obispo County

Maureen Bauman, LCSW, Board Member, Placer County

Denise Hunt, MFT, CalMHSA Central Area Rep., Stanislaus County

Brad Luz, MFT, Sutter/Yuba County (alternate)

Ann Marie Rucker, MBA, Sacramento County (alternate)

MEMBERS ABSENT

Curtis Boewer, MPA, MFT, CalMHSA Treasurer, Colusa County

Robert Martinez, CalMHSA Board Member, Butte County

STAFF PRESENT

John Chaquica, CPA, MBA, ARM, George Hills Company, Inc.

Doug Alliston, Murphy, Campbell, Guthrie & Alliston

Kim Santin, CPA, George Hills Company, Inc.

Margo Walls, George Hills Company, Inc.

MEMBERS OF THE PUBLIC

Stephanie Welch, California Mental Health Directors Association (CMHDA)

Delphine Brody, CA Network of Mental Health Clients

Kathleen Derby, National Alliance on Mental Illness (NAMI)

Karen Stockton, Modoc County

Gwen Wilson, GOALS for Women

1. CALL TO ORDER

Board President, Mr. Allan Rawland, called the meeting to order at 9:17am.

2. INTRODUCTIONS

Those present introduced themselves.

John Chaquica announced Margo Walls as a new member of George Hills Company. He also stated that Curtis Boewer is out ill and may be away for an undetermined amount of time.

3. PUBLIC COMMENT

Ms. Kathleen Derby presented and distributed a letter from the National Alliance on Mental Illness (NAMI) regarding stakeholder involvement. The letter outlined key concerns with regard to client and family member stakeholder participation in Statewide PEI Projects. The intent of this directive was to ensure that stakeholders would be included as partners. The letter further indicated that stakeholders should be involved in the process of identifying and prioritizing “recommended actions” from Statewide Strategic Plans, at the beginning of the planning stage, not after the plan has already been developed.

Ms. Delphine Brody briefly stated that her concerns mirror the NAMI letter and that stakeholder involvement should occur at the beginning of the planning stage.

Ms. Gwen Wilson, representing GOALS for Women, reiterated the same concerns regarding stakeholder involvement.

4. APPROVAL OF THE AGENDA AS POSTED

The Board considered approval of the agenda as posted or amended.

John Chaquica of George Hills Company recommended to the Board that Agenda Item 7A, 8A, 9A and 9D could be moved to the first and subsequent items.

A future meeting will include a study session on Roberts Rules of Order and the Brown Act.

Dr. Clark motioned to approve the agenda with modifications. Seconded by Mr. Orpendek. Motion carried unanimously.

5. CONSENT CALENDER

5.A. Approval of New Applicants for Membership in CalMHSA

Ann Marie Rucker submitted a new application for Sacramento County.

5.B. Minutes from the February 10, 2010 Board of Directors Meeting

5.C. Governing Document: Review and Discuss Draft CalMHSA Bylaws

5.D. Vendor Check Register Report – December 2009 to March 3, 2010

5.E. National Alliance on Mental Illness (NAMI) Letter

Ms. Kathleen Derby presented the letter from NAMI.

Recommendation: Formally approve the Consent Calendar with modification.

Ms. Maureen Bauman motioned to approve the consent calendar with the addition of the NAMI letter (as an official document). The motion was seconded by Dr. Wayne Clark and the motion was carried unanimously.

7. FINANCIAL MATTERS

A. Budget Projection 2010/2011 and Formation Costs

Mr. Chaquica, Ms. Santin and Mr. Rawland reviewed financial, cash flow and budgetary information for the JPA.

Ms. Santin began with revenue and budget formation costs over the next three years which include administrative operational budget information.

Mr. Rawland indicated that he would like to have Ms. Santin meet with his CFO (County of San Bernardino) to discuss financial matters and planning expenses in more detail.

Additional information was presented by Mr. Chaquica concerning funding for the 2009/2010 calendar year. He explained that outside funding has been limited to technical assistance and then proceeded to provide more detailed information regarding cash flow over the next nine months. He added that staff will prepare a 14-month budget.

The group discussed the CalMHSA staffing budget, how costs are broken out and how staffing costs affect the budget.

Mr. Rawland turned the discussion to job descriptions and the recruitment process. Mr. Chaquica shared the new job description for the JPA Program Director. Several comments were made by the Board regarding the job description in its' current form and some minor changes were suggested. Mr. Chaquica will make the suggested changes and will post and recruit for the position.

The Board agreed that there should be a sub-committee that would be responsible to assist George Hills Company to review resumes and to assist with interviews. The advisory sub-committee is comprised of the following Board members: Mr. Allan Rawland, Mr. Mike Oprendeck, and Ms. Maureen Bauman.

Staff was directed to bring an updated 2010/2011 budget implementation cost analysis during the next meeting.

8. NEW MEMBER OUTREACH / DEVELOPMENT

A. Discussion regarding CalMHSA Membership Development

Mr. Chaquica discussed our involvement at the Policy Forum Conference on February 10-11, 2010 where many positive comments were made. The JPA membership should grow rapidly in the next 3-6 months.

John Chaquica formally acknowledged the application for the County of Sacramento as the newest member of the JPA.

Dr. Karen Baylor motioned to approve the JPA membership application for Sacramento County. Dr. Wayne Clark seconded the motion. The motion carried unanimously.

The members of the Board suggested that it would be nice to come up with a lapel pin with the CalMHSA logo on it. It would be distributed to new members of the JPA. Dr. Karen Baylor and other members of the Board encouraged Mr. Allan Rawland to come up with a symbol and/or design for the pin.

9. ADMINISTRATIVE MATTERS

A. CalMHSA Agreement with the Department of Mental Health (DMH)

Mr. John Chaquica and Mr. Doug Alliston provided an update to the Board regarding the current status of the contract with DMH and DMH information notice 08-25. It was discussed that the contract could be signed and completed as early as next week. This was affirmed by Mr. Rawland's conversation with Director Mayberg.

As a result of the change to information notice 08-25, the OAC required approval from Commissioners Gould and Patting, in order for this document to move forward.

Dr. Wayne Clark motioned to approve administrative matters. Mr. Mike Oprendeck seconded the motion. The motion carried unanimously.

Discussion further ensued that all counties were informed of approvals. Subsequent press releases included the approval information as well.

9.D. TECHNICAL ASSISTANCE CAPACITY BUILDING

Mr. Carter from CiMH mentioned the preparation of survey documentation for each member. A contact of each member would be the result.

6. STRATEGIC PLANNING

A. CalMHSA Strategic Planning

Discussion was opened up by Mr. John Chaquica. He reminded the group of the current and revised goals to the meeting agenda and began with a walk through of today's planning session.

Mr. Chaquica began with a visioning exercise. The purpose of this exercise was to better understand the vision and to prepare a vision statement to present to the Board at the next meeting. Members were to project where CalMHSA would be in a three year time frame. Each member provided input on their vision and discussion ensued. The results of that discussion will be brought back in the form of a vision statement.

The group determined the CalMHSA Mission Statement which was adopted and approved in September 2009 by the Board to be continued as the CalMHSA mission statement.

CalMHSA's Vision

Discussion followed with regard to CalMHSA's goals. The Board elected to review the goals in the following four areas, from the September meeting:

- JPA Administration
- Funding
- Project Development and Implementation
- Accountability

Mr. Chaquica proceeded to draft program accomplishments which included the execution of the JPA agreement, the increase in membership base, Board cohesiveness, the execution of programs, the approval of the contract with the Department of Mental Health and the increase of public trust. The Board acknowledged their list from the September 9, 2009 and has accomplished five of the six general areas.

The Board then focused on specific goals. Mr. Chaquica led the discussion and created detailed charts which indicated specific goals in an outline format. Mr. Chaquica explained the importance of each goal at it relates to the JPA. A strategic planning document with goals and objectives will be developed and will be included in the next meeting.

Preceding the CalMHSA goal exercise, the group revisited CalMHSA accomplishments for the September 2009 meeting. Each of the goals were met, with the exception of #5, which is entitled Research/Analyze Effectiveness of those Projects (listed on page 17 of 38).

Mr. Chaquica and the Board will develop a vision statement in a subsequent meeting.

Dr. Wayne Clark motioned to approve the CalMHSA Strategic Planning session. Maureen Bauman seconded the motion. The motion carried unanimously.

ACTIONS

Approve the hiring of CiMH for preplanning forms (goal #3).

Engage CiMH in a contract to develop a process and procedures to define parties involved relative to stakeholder input.

9. B. County participation for non-JPA members

These items were specifically discussed in the Strategy Planning Session.

9. C. Stakeholder Process

These items were specifically discussed in the Strategy Planning Session.

Staff Comments

John Chaquica will be traveling for business and will not be able to attend the next Board meeting.

Mr. Chaquica was directed to draft a letter, for Mr. Rawland’s signature, if we do not have new guidelines by the end of March.

10. ADJOURNEMENT

Meeting was adjourned at 3:35pm by President, Allan Rawland.

Mr. Allan Rawland motioned to adjourn the meeting. Mr. Mike Opredek seconded the motion. The motion carried unanimously.

Respectfully submitted,

Dr. Wayne Clark, PhD

Secretary, CalMHSA

Date



The State's Voice on Mental Illness

March 12, 2010

By email to john.chaquica@georgehills.com
and Hand Delivery

CalMHSA Officers
c/o John E. Chaquica, Executive Director
3043 Gold Canal Drive, Suite 200
Rancho Cordova, CA 95670-6394

Re: Stakeholder Involvement in PEI Statewide Projects

Dear CalMHSA Officers,

NAMI California submits our written comments to you for inclusion in the discussion of the afternoon session of the CalMHSA Meeting on March 12, 2010, when you will be discussing in more detail the stakeholder process for Statewide PEI Projects.

Our positions regarding the stakeholder process on this issue have been publicly outlined at least twice before: First, in our letter to the MHSOAC Services Committee on January 19, 2010, and again in our letter regarding Stakeholder Participation to MHSOAC Chair Andrew Poat on February 17, 2010.

The following paragraphs outline our key concerns with regard to client and family member stakeholder participation in the Statewide PEI Projects:

The MHSOAC made it clear in their Guidelines that:

A JPA acting on behalf of counties acting jointly as a lead organization must obtain stakeholder input to identify from the State Strategic Plans the priority "recommended actions" to be implemented. (p. 5)

The intent of this directive was made clear in Services Committee meetings that stakeholders would be included as partners and involved in the process of identifying and prioritizing "recommended actions" from Statewide Strategic Plans at the beginning of planning and not after a plan has already been developed. However, NAMI California has asserted publicly, both in the Services Committee and at the two subsequent MHSOAC Commission meetings, that the wording given in the guidelines was too vague to ensure necessary and full participation by stakeholders. In response, we were assured twice by CalMHSA President, Allan Rawland, that the intention of the JPA is for full participation by stakeholders from the outset for the purposes of identifying and prioritizing "recommended actions" in the development of these projects. This was asserted first during the November 2009 Services Committee meeting, again at the January 28, 2010 MHSOAC Commission meeting, where he stated in response to public comment by stakeholders:

1010 Hurley Way, Suite 195, Sacramento, CA 95825

Phone: 916-567-0163 * FAX: 916-567-1757

E-MAIL: support@namicalifornia.org WEBSITE: www.namicalifornia.org

The JPA is a government entity and it's the counties that come together to implement the statewide projects that we all support. We have no objective to strengthening the language in the guidelines and we are supportive of the guidelines. We feel very strongly about the stakeholder process and understand its importance and value. Also, we have no objection to adding language that further clarifies what the JPA will be required (rather than "recommended") to do.

CalMHSA's commitment to the stakeholder process was reiterated in the February 25, 2010, when President Rawland spoke again in more detail of the organization's commitment to an inclusive stakeholder process in the development of PEI Statewide Projects at the JPA level.

NAMI California was unable to be present at CalMHSA's February 2010 meeting in Riverside. However, after a review of the minutes on this topic, there appears to be a discrepancy between the stakeholder process being asserted by CalMHSA leadership and what appears to be a hesitant posture adopted by CalMHSA staff, who advised that the OAC intended limited stakeholder involvement at the end of the process:

Mr. Chaquica explained that the OAC drafted the guidelines to be very general and simplistic. They want a check in with the stakeholders after plans have been developed to determine whether or not priorities have been established. There must be a process however to his knowledge the OAC has never mandated retooling. (p. 11)

Since representatives of CalMHSA have attended the Services Committee and full Commission meetings relevant to this issue, they are aware that the above interpretation by CalMHSA staff is incorrect. If the above posture is adopted, it would be extremely harmful to the implementation of the PEI Statewide Projects.

It is imperative that continued inclusion of stakeholders in the process of outlining the procedures for involvement in planning take place to allay stakeholder concerns and ensure that the process of developing PEI Statewide Projects is inclusive of the diverse stakeholder representation in this state.

Sincerely,



Kathleen Derby
MHSA Policy Coordinator

cc: CalMSHA Members
Trula LaCalle, PhD, Executive Director
MHSOAC Commissioners
MHSOAC Services Committee
Beverly Whitcomb, MHSOAC Interim Executive Director

CHECKBOOK BALANCE INQUIRY REPORT

California Mental Health Services Authority

Bank Reconciliation

Checkbook ID: CB&T CHECKING
 Description: CA Bank & Trust Checking

Current Checkbook Balance: \$181,154.75
 Current Cash Account Balance: \$181,154.75

Ranges: From: To:
 Date First Last

* Voided transaction ^ Cleared amount is different than posted amount

Number	Date	Type	Paid To/Rcvd From	Payment	Deposit	Balance
Reconciled	Cleared	Description				
0001 Yes	12/9/2009 12/31/2009	DEP			\$50,000.00	\$50,000.00
IAJ000000001 Yes	12/9/2009 12/31/2009	IAJ			\$13,570.00	\$63,570.00
100000 Yes	12/10/2009 12/31/2009	CHK	George Hills Company	\$25,000.00		\$38,570.00
100001 Yes	12/10/2009 12/31/2009	CHK	Murphy, Campbell, Guthrie & Alliston	\$12,339.50		\$26,230.50
0002 Yes	12/16/2009 12/31/2009	DEP			\$115,400.00	\$141,630.50
0003 Yes	12/22/2009 12/31/2009	DEP			\$68,400.00	\$210,030.50
0004 Yes	12/31/2009 12/31/2009	DEP			\$4,366.00	\$214,396.50
0005 Yes	1/7/2010 1/31/2010	DEP			\$3,054.00	\$217,450.50
100002 Yes	1/12/2010 1/31/2010	CHK	George Hills Company	\$11,241.81		\$206,208.69
100003 Yes	1/12/2010 1/31/2010	CHK	Murphy, Campbell, Guthrie & Alliston	\$7,263.85		\$198,944.84
0006 Yes	1/19/2010 1/31/2010	DEP			\$2,724.00	\$201,668.84
100004 Yes	1/27/2010 2/26/2010	CHK	John O Bronson Company	\$2,500.00		\$199,168.84
0008 Yes	1/29/2010 1/31/2010	DEP			\$348.00	\$199,516.84
100005 Yes	2/9/2010 2/26/2010	CHK	George Hills Company	\$7,500.00		\$192,016.84
100006 Yes	2/9/2010 2/26/2010	CHK	Murphy, Campbell, Guthrie & Alliston	\$10,267.50		\$181,749.34
0007 Yes	2/19/2010 2/26/2010	DEP			\$11,598.00	\$193,347.34
0009 Yes	2/24/2010 2/26/2010	DEP			\$401.00	\$193,748.34
100007 Yes	2/25/2010 3/31/2010	CHK	Mady Gorrell	\$2,257.75		\$191,490.59
0010 Yes	3/9/2010 3/31/2010	DEP			\$785.00	\$192,275.59
100008 Yes	3/9/2010 3/31/2010	CHK	George Hills Company	\$9,049.34		\$183,226.25
0011 Yes	3/18/2010 3/31/2010	DEP			\$580.00	\$183,806.25
100009 No	3/18/2010 0/0/0000	CHK	Murphy, Campbell, Guthrie & Alliston	\$5,067.50		\$178,738.75
0012 Yes	3/30/2010 3/31/2010	DEP			\$2,416.00	\$181,154.75
23 Total Transaction(s)				Balance As Of	Today	\$181,154.75

NEW MEMBER OUTREACH/DEVELOPMENT

Agenda Item 7.A.

SUBJECT: Discussion Regarding CalMHSA Membership Development

BACKGROUND AND STATUS:

During each Board meeting, the staff and members shall update the Board on the status of prospective members.

Sonoma County has submitted their application for membership in CalMHSA. The new membership application will be submitted to the Board for approval.

Glenn County has expressed their interest in joining the JPA. Scott Gruendl, MPA, Director of the Glenn County Health Services Agency, will bring the request to the Glenn County Board of Supervisors during the month of April. A new membership application was received on March 30, 2010.

RECOMMENDATION:

Approve membership to CalMHSA for Sonoma County and Glenn County.

REFERENCE MATERIALS ATTACHED:

- New Membership Application from Sonoma County*
- New Membership Application from Glenn County*

CalMHSA

Membership Application
California Mental Health Services Authority

3043 Gold Canal Drive, Suite 200 • Rancho Cordova, CA 95670 • PH: (916) 859-4800 FAX: (916) 859-4805

MICHAEL KENNEDY, MFT

707 - 565 - 4850

Name/Title
SONOMA

Telephone
MKennedy@sonoma-county.org

County

Email Address

County Information

	2008	Estimated 2009
I. Population Information:	<u>466,741</u>	<u>470,000</u>

II. Application Fee Schedule (Based on 2008 population)

- Population greater than 10 million: \$1,000
- Population 1 million to 10 million: \$ 750
- Population 100,000 to 1 million: \$ 500
- Population less than 100,000: \$ 250

Please issue warrant to California Mental Health Services Authority \$ 500.00

OR

Application Fee will be paid upon the first reassignment of program funds to CMHSA

III. Requested Date of Membership: 4/13/2010

[Signature] FOR MK

Signature

3/17/10

Date

Please complete form and submit via email to kim.santin@georgehills.com. Print and/or save completed form for your records.

CMHSA

3043 GOLD CANAL DRIVE, SUITE 200 + RANCHO CORDOVA, CA 95670 + PH: (916) 859-4800 FAX: (916) 859-4805

(530) 934-6582

Scott Gruendl

Name/Title

Telephone

Glenn

sgruendl@glenncountyhealth.net

County

Email Address

County Information

2008

Estimated 2009

I. Population Information:

28,237

28,519

II. Application Fee Schedule (Based on 2008 population)

- Population greater than 10 million: \$1,000
- Population 1 million to 10 million: \$ 750
- Population 100,000 to 1 million: \$ 500
- Population less than 100,000: \$ 250

Please issue warrant to California Mental Health Services Authority \$ _____

OR

Application Fee will be paid upon the first reassignment of program funds to CMHSA

III. Requested Date of Membership: 4-6-10



Signature

3/30/10

Date

Please complete form and submit via email to kim.santin@georgehills.com. Print and/or save completed form for your records.

FINANCIAL MATTERS

Agenda Item 8.A.

SUBJECT: Financial Statements for the Quarter Ending March 31, 2010

BACKGROUND AND STATUS

Attached are the financial statements for the quarter ending March 31, 2010. Some key items to note in these financial statements are as follows:

1. Accounts receivable was reduced by \$139,000 for San Bernardino County for an adjustment for Technical Assistance funding. The current receivable from San Bernardino County for technical assistance is \$60,714.
2. Accounts receivable, for administrative fees, are related to the March invoices and the accounts receivable for the Technical Assistance are:

Placer County	\$42,000
San Bernardino County	<u>\$60,714</u>
	<u>\$102,714</u>

3. Accounts payable of \$33,033 is for the Technical Assistance Program – 25% to CiMH for project initiation.

Staff will be in attendance to present the financial statements and answer any questions.

RECOMMENDATION:

Staff recommends the Board accept the financial statements for the quarter ending March 31, 2010.

REFERENCE MATERIALS ATTACHED:

- Financial Statements for the Quarter Ending March 31, 2010*

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

BALANCE SHEET

March 31, 2010

ASSETS

Current Assets:	2010
Cash CB&T	\$ 181,155.00
Accounts Receivable - Admin Fee	13,283.00
Accounts Receivable - Tech Asst	102,714.00
Total Current Assets	<u>\$ 297,152.00</u>

LIABILITIES AND NET ASSETS

Current Liabilities:	
Accounts Payable - Tech Asst Contract with CiMH	\$ 30,033.00
Unearned Revenue - Solano County	-
Total Current Liabilities	<u>30,033.00</u>
Net Assets - Since Inception of July 1, 2009	<u>267,119.00</u>
Total Liabilities and Net Assets	<u>\$ 297,152.00</u>

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

**STATEMENT OF REVENUES, EXPENSES AND
CHANGES IN NET ASSETS**

Inception through March 31, 2010

	<u>JPA</u> <u>Administration</u>	<u>Tech Asst/ Capacity Building</u>	<u>2010</u> <u>Total</u>
OPERATING REVENUES:			
Technical Assistance/Capacity Building		\$ 339,614.00	\$ 339,614.00
Application Fee	\$ 1,000.00		1,000.00
Administrative Fees	72,000.00		72,000.00
Total Operating Revenue	<u>73,000.00</u>	<u>339,614.00</u>	<u>412,614.00</u>
 PROJECT EXPENSES:			
Technical Assistance/Capacity Building-CimH Contract		\$ 30,033.00	\$ 30,033.00
 OPERATING EXPENSES:			
Administration Services	\$ 60,500.00		\$ 60,500.00
Conferences	4,091.00		4,091.00
Formation Fees	10,000.00		10,000.00
Insurance	2,500.00		2,500.00
Legal Expense	34,938.00		34,938.00
Web-Site Development/Maintenance	3,433.00		3,433.00
Total Operating Expenses	<u>115,462.00</u>	<u>-</u>	<u>115,462.00</u>
Change in Net Assets	<u>(42,462.00)</u>	<u>309,581.00</u>	<u>267,119.00</u>
Net Assets, Inception			<u>-</u>
Net Assets, January 31, 2010	<u>\$ (42,462.00)</u>	<u>\$ 309,581.00</u>	<u>\$ 267,119.00</u>

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

STATEMENT OF CASH FLOWS

Inception through March 31, 2010

Cash Flows from Operating Activities:	2009
Cash Received from Members for Administrative Fee	\$ 58,716.00
Cash Received from Members for Application Fee	1,000.00
Cash Payments for GHC Services	(67,500.00)
Cash Payments for Cimh	(3,000.00)
Cash Payments for Conference Attendance	(4,091.00)
Cash Payments for Legal Services	(34,937.00)
Cash Payments for Insurance	(2,500.00)
Cash Payments for Web-Site Development/Maintenance	(3,433.00)
Tech Asst Money - Members	236,900.00
Net Cash Provided by Operating Activities	<u>181,155.00</u>
Cash and Cash Equivalents, Inception	<u>0</u>
Cash and Cash Equivalents, October 15, 2009	<u>\$ 181,155.00</u>
Reconciliation of Operating Income to Net Cash Provided by Operating Activities:	
Operating Income	\$ 267,119.00
Adjustment to net cash used by operating activities:	
(Increase) Decrease in A/R	(115,997.00)
(Decrease) Increase in Accounts Payable	30,033.00
(Decrease) Increase in Unearned Revenue	<u>-</u>
Net Cash Provided By (Used For) Operating Activities	<u>\$ 181,155.00</u>

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

**TECHNICAL ASSISTANCE/CAPACITY BUILDING
BUDGET**

Inception through March 31, 2010

TECHNICAL ASSISTANCE/CAPACITY BUILDING:	Population	2009	Budgeted	Tech Ass/ Capacity Building
		Revenues	Expenses (1)	
			\$120,134	
Butte County	Not participating	\$ -		\$ -
Colusa County	21,997	3,100.00	648.02	2,451.98
Monterey County	431,892	68,400.00	12,723.26	55,676.74
Placer County	339,577	42,000.00	10,003.72	31,996.28
San Bernardino County	2,060,950	60,714.27	60,714.27	0.00
San Luis Obispo County	270,429	38,400.00	7,966.67	30,433.33
Solano County	426,729	50,000.00	12,571.16	37,428.84
Stanislaus County	526,383	77,000.00	15,506.91	61,493.09
Sutter/Yuba	Not participating	-		-
	<u>4,077,957</u>	<u>\$ 339,614.27</u>	<u>\$ 120,134.00</u>	<u>\$ 219,480.27</u>

(1) Contract with CiMH is allocated based on the participating members population.

TECHNICAL ASSISTANCE/CAPACITY BUILDING:	Population	Payable
		3/31/2010
		30033.48
Butte County	Not participating	
Colusa County	21,997	162.00
Monterey County	431,892	3,180.81
Placer County	339,577	2,500.93
San Bernardino County	2,060,950	15,178.56
San Luis Obispo County	270,429	1,991.66
Solano County	426,729	3,142.79
Stanislaus County	526,383	3,876.72
Sutter/Yuba	Not participating	
	<u>4,077,957</u>	<u>30,033.48</u>

FINANCIAL MATTERS

Agenda Item 8.B.

SUBJECT: Budget Projection for the Fourteen Months Ending June 30, 2011

Budget Projection:

CalMHSA is working with the Department of Mental Health (DMH) to have the PEI funds transferred to CalMHSA to carry out the purpose of the Mental Health Services Act. The recently approved Oversight and Accountability Commission (OAC) guidelines will assist in the completion of our contract with DMH and hopefully the planning funds would be available in thirty (30) days, with the annual apportionments coming after plan preparation and approval. As such, staff has prepared a draft budget with varying levels of County member participation for review, consideration, as well as providing staff with an idea of staff needs.

Formation Costs:

At the inception of the JPA the original members agreed to share the formation costs on a temporary basis until funding was generated by the JPA. To date the JPA has been operating for seven (7) months and recently the JPA has been receiving Technical Assistance and capacity Building Funds. In addition to the known administrative costs there are the unanticipated extent of legal costs in working with the State Department of Mental Health (DMH) and the Oversight and Accountability Commission (OAC). As such, most of these costs can be defined as formation costs. The staff met with Treasurer Curtis Boewer and is prepared to present the proposed plan in dealing with such issues today and in the future.

At the March 12, 2010 meeting, the Board requested staff modify the budget and present for discussion at the April 15, 2010 Board meeting.

RECOMMENDATION:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

None

ADMINISTRATIVE MATTERS

Agenda item 9.A.

SUBJECT: CalMHSA Agreement with the Department of Mental Health (DMH)

BACKGROUND AND STATUS:

CalMHSA Board and Staff have been working with the DMH and the MHSOAC from the conceptual framework to the execution of the contract and DMH Information Notice 08-25.

It is exciting and rewarding to have achieved the successful completion of these documents.

Attached for your review is the contract between CalMHSA and DMH and Information Notice 08-25.

RECOMMENDATIONS:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

- Exhibit A to the Contract with the DMH*
- DMH Information Notice 08-25*

EXHIBIT A
 SCOPE OF WORK

1. California Mental Health Services Authority (CalMHSA), a joint powers authority of counties acting jointly pursuant to Welfare and Institutions Code section 5897(a) herein referred to as Contractor, agrees to provide to the California Department of Mental Health (CDMH) program development, administrative oversight and fiscal management services for its members and other county program participants, in accordance with the terms of the Joint Powers Agreement and this Agreement. Specifically the Contractor will, consistent with the requirements of the MHSOA and as approved by the Mental Health Services Oversight and Accountability Commission (MHSOAC) and CDMH, develop and implement Prevention and Early Intervention (PEI) programs, on a statewide or regional basis, that conform with the "Guidelines for Prevention and Early Intervention (PEI) Statewide Programs" issued by MHSOAC and the three State Strategic Plans referenced therein. The purpose of these programs will be reducing suicides, eliminating stigma and discrimination related to mental illness, and promoting student mental health. Funding for these programs will come exclusively from funds in the "Prevention and Early Intervention State-Administered Projects Planning Estimates published on September 11, 2008.
2. The services shall be performed at the offices of CalMHSA, c/o George Hills Co., 3043 Gold Canal Drive, Ste. 200, Rancho Cordova, CA 95670-6394.
3. The services shall be provided during working hours, Monday through Friday, except holidays.
4. The program representatives during the term of this agreement will be:

State Agency: Department of Mental Health (DMH)	Contractor: California Mental Health Services Authority (CalMHSA)
Name: (1) Sandy Lyon (for Administrative matters) (2) Mark Heilman (for Program matters)	Name: John Chaquica
DMH	CalMHSA c/o George Hills Co.
1600 9 th Street Room 150	3043 Gold Canal Drive, Suite 200
Sacramento, CA 95814	Rancho Cordova, CA 95670-6394
916-651-3966 (Sandy); 916-651-8037 (Wendy)	916.859.4800
Fax: 916-651-3862 or 916-654-6394	916.859.4805

5. Responsibilities of the parties:

A. CDMH responsibilities:

- (1) Enactment of all regulations required to implement programs pursuant to this Agreement.

- (2) Prompt notification to the Contractor of any legislation, regulations, and guidelines that may affect the programs subject to this agreement.
- (3) Identification of any and all funds that Counties have assigned to the State for the purpose of funding the development and implementation of Statewide PEI programs by CalMHSA.
- (4) Prompt distribution of funds to the Contractor, contingent upon approval by the MHSOAC and notification of approval to CDMH by the MHSOAC, of Three-Year Program and Expenditure Plans or updates submitted by the Contractor on behalf of counties. "Prompt distribution" means distribution within 60 days of satisfaction of the conditions stated in this Section 5.A.4.

Upon the approval date of this Agreement and pursuant to MHSOAC approval of the Contractor's Three-Year Program and Expenditure Plan or update, with the exception of funds approved for local planning purposes, the CDMH shall distribute MHSA funds for approved Three-Year Program and Expenditure Plans and updates to the Contractor as follows:

- Seventy-Five percent (75%) of State Fiscal Year Plan Approved amount upon Three-Year Program and Expenditure Plan(s) approval or the start of the State Fiscal year, whichever is later;
- Twenty-Five percent (25%) of State Fiscal Year Plan Approved amount upon receipt by the State of completed fiscal and programmatic reports, as required by this Agreement.

Funds requested by the Contractor and approved for planning purposes will be distributed in total upon approval. Such funds will be limited to the amounts prescribed by Welfare and Institutions Code section 5892 (c).

- (5) Review, comment and approval for Three-Year Program and Expenditure Plans or updates submitted by the Contractor or its members as provided for by Welfare and Institutions Code section 5847, subdivisions (b) and (d).
- (6) Accounting of and report, as necessary, to the Contractor, the MHSOAC and CDMH, on the distribution of monies from the Mental Health Services Fund to the Contractor for the purposes outlined in this Agreement.
- (7) Provision of technical assistance, as needed, to the Counties or the Contractor, as provided for in Welfare and Institutions Code section 5846.

B. Contractor responsibilities:

- (1) Utilization of funds provided under this agreement in accordance with the MHSA, state regulations and directives, policies, procedures, and guidelines and the Three-Year Program and Expenditure Plan or updates approved by the MHSOAC and CDMH.

- (2) Adherence to controls, record keeping reporting and fund accounting procedure requirements of the MHSA, and all applicable regulations, directives, policies and procedures to ensure the proper disbursement of, and accounting for, program funds paid to the Contractor and disbursed by the Contractor, under this Agreement.
- (3) Development of Three-Year Program and Expenditure Plans or updates, on behalf of and in coordination with individual Counties and consistent with applicable laws, regulations and guidelines issued by the State, for the provision of services and the expenditure of funds encumbered under this Agreement for statewide or regional PEI programs designed in accordance with the "Guidelines for Prevention and Early Intervention (PEI) Statewide Programs" issued by MHSOAC.
- (4) Submission of Three-Year Program and Expenditure Plans or updates, in coordination with individual Counties and consistent with Guidelines issued by the MHSOAC pursuant to section 5846, subdivision (c), to CDMH for review and comment and to the MHSOAC for review and approval.
- (5) Placement of funds distributed under this Agreement from the Mental Health Services Fund into a separate account established for this Agreement (Account). The Contractor shall account for MHSA funds in accordance with MHSA Section 5892 (f) and in a manner to allow the State to exercise its responsibility under MHSA Section 5892 (h).
- (6) Accounting of funds received on behalf of a County in a separate subaccount within the account established pursuant to this Agreement.
- (7) Investment of funds received from the State Mental Health Services Fund and transfer of interest and other income earned from such investments, in accordance with Welfare and Institutions Code section 5892, subdivision (f) and all applicable laws, regulations, policies and procedures.
- (8) Accounting for income generated from investment of funds received from the State Mental Health Services Fund in a manner that distinguishes this income from other MHSA funds.
- (9) Assurance that the expenditure of funds distributed under this Agreement is consistent with a currently approved Three-Year Program and Expenditure plan or update pursuant to Welfare and Institutions Code section 5847.
- (10) Development and submission of reports of services, activities, performance attainment, expenditures, status of cash and closeout information or additional reports by the dates specified by the State in regulations, directives, guidelines, and policies.

- (11) Acting in tandem with other statewide entities that hold County funds for PEI State Level Programs to coordinate such programs between CalMHSa and other statewide entities.

6. Deliverables

- A. In order to receive funds to administer and/or implement an MHSa program, the Contractor shall, on behalf of and in coordination with individual Counties and consistent with all applicable statutes, regulations, guidelines, policies and requirements, submit to CDMH for review and comment and to the MHSOAC for review and approval a Three-Year Program and Expenditure Program Plan or update that requests funds for that program.
1. This Agreement shall be amended at a later date to include specific deliverables consistent with the approved Three-Year Program and Expenditure Plan or update submitted by CalMHSa on behalf of Counties.
- B. Commencing in FY2010/2011 and each fiscal year thereafter, not later than December 31, the Contractor shall provide to CDMH the following information for the previous fiscal year:
- (1) An accounting of the funds administered by the Contractor in aggregate, to include:
- a.) Amount at the beginning of the fiscal year in the account specified in item 5. B. 5.
 - b.) Amounts received.
 - c.) Amount disbursed throughout the fiscal year.
- (2) An accounting of funds by County sub-account specified in item 5. B. 6. to include:
- a.) Amount at the beginning of the reporting term.
 - b.) Amount of funds received for each County.
 - c.) Amount of interest earned on funds by date posted to the account.
 - d.) Amount in the County sub-account at the end of the reporting term.
 - e.) A report on the total amount of encumbered and unencumbered funds.
- C. The Contractor shall prepare and distribute at its meetings quarterly reports of all of its revenues and expenditures.

- D. The Contractor shall keep such books and records of the operation of the programs and the Account, pursuant to common accounting principles, practices and applicable laws and regulations. CDMH, or its representative, shall have the right to audit the programs and Account at its expense and upon reasonable notice to the Contractor.

7. Other Conditions

- A. CDMH may terminate this Agreement in whole or in part when it has determined that the Contractor has willfully violated a specific provision of the MHSA or affiliated regulations. In the event of a violation that CDMH does not determine to be willful, CDMH will request from Contractor a plan of correction with a specific timeline to achieve improvements. If Contractor fails to timely make the necessary improvements, CDMH may terminate this Agreement. If CDMH terminates this Agreement, it will provide a termination notice in writing to the Contractor.
- B. This Agreement is of no force and effect until signed by both of the parties hereto. The Contractor will not commence performance prior to the beginning of this Agreement or upon final approval whichever is later.
- C. Failure to adhere to the specified reporting requirements contained in this Agreement may result in funds not being released by CDMH to the Contractor.

DMH INFORMATION NOTICE NO.: (Replaces DMH Information Notice No. 08-25)

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: ASSIGNMENT OF MENTAL HEALTH SERVICES ACT (MHSA)
PREVENTION AND EARLY INTERVENTION (PEI) FUNDS FOR PEI STATEWIDE
PROGRAMS

REFERENCE: WELFARE AND INSTITUTIONS CODE (WIC) SECTION 5840

This Information Notice supersedes DMH Information Notice 08-25 and transmits updated instructions to Counties¹ choosing to assign Prevention and Early Intervention (PEI) funds to the California Department of Mental Health (DMH) for the following PEI Statewide Programs:

1. Suicide Prevention
2. Student Mental Health Initiative
3. Stigma and Discrimination Reduction

Funds may be assigned to DMH for the following purposes: (1) for DMH to administer PEI Statewide Programs; and/or (2) to fund a contract between DMH and the California Mental Health Services Authority (CaMHSA) for the development and implementation of these programs.

Please refer to Enclosure 1 for the amount of funding available to each County for assignment in support of these three PEI Statewide Programs. The Planning Estimates these Statewide Programs are in addition to (not a part of) the original Planning Estimates provided through Information Notice 07-19 (September 2007) that transmitted the PEI Proposed Guidelines.

¹ "County" may be a county mental health program, two or more counties acting jointly, or a city-operated mental health program pursuant to Welfare and Institutions Code section 5701.5.

DMH INFORMATION NOTICE NO.:

Page 2

Background

Assembly Bill 3X 5 (Chapter 20, Statutes of 2009) provides the Mental Health Services Act Oversight and Accountability Commission (OAC) full authority over PEI funds. As a result, the initial plan for funding of PEI Statewide Programs has been revised. This letter reflects those changes. The OAC will issue Guidelines and instruction for the submission of County PEI statewide work plans.

Procedure for Assigning Funds

Section 5897 (a) of the MHSa requires that services provided pursuant to the Act be implemented through contracts with individual Counties or Counties acting jointly. The MHSa Agreement, DMH's contract with each individual county, allows each County to assign funds in its Planning Estimates for any of the components to DMH for the implementation of statewide MHSa programs on behalf of Counties. Provision 10 of the MHSa Agreement indicates that such assignment will occur through an assignment agreement executed between the County and the state. The state retains the right under this assignment to sub-contract for the provision of services identified in the assignment.

Counties choosing to act jointly through CalMHSa may choose to assign funds to DMH specifically for the purpose of funding a contract between DMH and CalMHSa to implement statewide PEI programs. DMH will secure the necessary authority in the State Budget Act to support this contract and when funds are assigned by counties, DMH will encumber these funds against this contract. *(G; Need to be careful how we phrase this or we will end up back in the discussion of whether reversion applies)*

Enclosure 2 is the modified MHSa PEI Statewide Programs Assignment Agreement that each County may use to designate that its assigned PEI Statewide Program Planning Estimate be used specifically to fund a contract between the state and CalMHSa to fund the implementation of the PEI Statewide Programs. A County choosing to assign funds for this purpose must complete the Assignment Agreement by [date], and mail the signed form to:

California Department of Mental Health
[NAME] Unit
Attn: PEI Statewide Projects Assignment Agreement
16009thStreet, Room [number]
Sacramento, CA 95814

This PEI Statewide Projects Assignment Agreement must either be:

- signed by the individual designated by your County to act as fiscal and programmatic administrative agent for the purposes of your MHSa Agreement, or

DMH INFORMATION NOTICE NO.:

Page 3

- accompanied by a copy of the resolution, order, motion, or ordinance of the local governing body which by law has authority to enter into an agreement authorizing this assignment.

Additionally, since the PEI Statewide Program Assignment Agreement is an update to the County's Three-Year Program and Expenditure Plan it is subject to the requirements contained in California Code of Regulations Title 9, sections 3300, Community Program Planning Process; 3310, The Three Year Program and Expenditure Plan; and 3315, subdivision (b), Local Review Process. If a County does not yet have a fully executed MHSA Agreement in place, the assignment will become effective with the execution of the County's MHSA Agreement. If a County does not yet have a Three-Year Program and Expenditure Plan that contains a PEI component, the County must submit the PEI component as a Plan, subject to section 3315, subdivision (a), Local Review Process, which requires that a public hearing be held on the draft Plan. The County may include the assignment agreement in this Plan, or it may be submitted after the Plan is approved as an update to the approved Plan.

If you have any questions about the assignment and MHSA Agreement process, please contact **Liaison [contact-DMH or OAC?]** identified from the following link:
<http://www.dmh.ca.gov/docs/CoOpRoster.pdf>.

If you have questions or need additional information about the three Statewide Programs or the County Guidelines, please contact the OAC.

We look forward to working jointly with you in these endeavors.

Sincerely,

STEPHEN W. MAYBERG, Ph.D.
Director

Enclosures

Enclosure 1- PEI State-Administered Projects Planning Estimates

Enclosure2- Supplemental MHSA PEI Statewide Projects Assignment Agreement

cc: California Mental Health Directors Association
California Mental Health Planning Council
Mental Health Services Oversight and Accountability Commission

Enclosure 2
SUPPLEMENTAL MHSA PEI STATEWIDE PROJECTS ASSIGNMENT AGREEMENT
_____ (name of County¹)

_____ (name of County) (the County) agrees to participate in the Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) Statewide Programs funded from the PEI component of the MHSA Three-Year Program and Expenditure Plan. The three Statewide Programs intended to be funded by this agreement are: Suicide Prevention, Student Mental Health Initiative, and Stigma and Discrimination Reduction.

The County agrees that upon its execution of this Agreement, (in addition to any funds previously assigned) the following amounts will be assigned to DMH concurrent with the start of the State Fiscal Year (SFY) from which they are assigned subject to the conditions specified below:

- \$ (_____) of the County's SFY 08/09 PEI Statewide Program Planning Estimate
- \$ (_____) of the County's SFY 09/10 PEI Statewide Program Planning Estimate
- \$ (_____) of the County's SFY 10/11 PEI Statewide Program Planning Estimate
- \$ (_____) of the County's SFY 11/12 PEI Statewide Program Planning Estimate

Funds in the amount specified will be transferred from the Mental Health Services Fund Local Assistance portion of the DMH state budget, item 4440-601-3085 to the DMH state budget, item 4440-101-3085, Program 10, Local Assistance

Specifically the County makes the assignment to (please check one):

- Fund DMH administration of these programs
- Fund a contract pursuant to WIC 5897 (a) between DMH and the California Mental Health Services Authority (CalMHSA) to support CalMHSA administration of these programs

Assignment shall be effective only upon:

- approval by DMH;
- a fully executed County MHSA Agreement with DMH; and
- appropriation of sufficient budget authority in the State Budget Act to allow DMH to expend the funds assigned by counties to support the PEI Statewide Programs outlined above.

Approved for County (by signature)

Date:

Printed Name and Title:

¹ "County" may be a county mental health program, two or more counties acting jointly, or a city-operated mental health program to Welfare and Institutions Code section 5701.5

ADMINISTRATIVE MATTERS
Agenda item 9.B.

SUBJECT: Discussion of the Mental Health Services and Oversight Accountability Commission (MHSOAC) Guidelines for Statewide PEI Projects

BACKGROUND AND STATUS:

The MHSOAC has issued Guidelines for Prevention and Early Intervention (PEI) Statewide Programs. These Guidelines are applicable to all requests for PEI Statewide Funds submitted to the MHSOAC.

These Guidelines provide Counties the option to implement Statewide Programs through a Joint Powers Authority (JPA) and to provide an expedited approval process referred to as “Phase 1 Approval” for initial requests from Counties choosing this option.

RECOMMENDATIONS:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

- MHSOAC Approved Guidelines*

~~MHSOAC~~

Mental Health Services
Oversight and Accountability Commission

GUIDELINES FOR PREVENTION AND EARLY INTERVENTION (PEI) STATEWIDE PROGRAMS¹

The Mental Health Services Oversight and Accountability Commission (MHSOAC) issues these Guidelines pursuant to the authority granted it by Welfare and Institutions Code Section 5846(c). These Guidelines provide: (1) additional information to Counties² on allowable uses for PEI Statewide funds made available in planning estimates for Suicide Prevention, Stigma and Discrimination Reduction and Student Mental Health in DMH Information Notice 08-25³; and (2) provide content and format instructions for updates to the Three-Year Program and Expenditure Plans that include PEI Statewide Funds.

These guidelines are applicable to all requests for PEI Statewide Funds submitted to the MHSOAC as of January 28, 2010, the date the Guidelines were approved by the MHSOAC.

As described throughout these Guidelines, programs developed with PEI Statewide Funds must be consistent with the following documents including any additions or revisions approved by the MHSOAC:

- Strategic Plan for Suicide Prevention
- Strategic Plan for Stigma and Discrimination Reduction
- Student Mental Health Initiative⁴

For the purposes of these Guidelines the documents cited above shall be referred to as **State Strategic Plans**.

¹ "PEI Statewide Programs" means the PEI statewide programs funded from the PEI component of the MHSA Three-Year Program and Expenditure Plan made available in planning estimates in DMH Information Notice 08-25.

² "County" means the County Mental Health Department, two or more County Mental Health Departments acting jointly, and/or city-operated programs receiving funds per Welfare and Institutions Code Section 5701.5. (Title 9 California Code of Regulations, Section 3200.090)

³ For purposes of these Guidelines these funds will be referred to as "PEI Statewide Funds."

⁴ The MHSOAC may update the State Strategic Plan for Student Mental Health.

The Strategic Plans for Suicide Prevention and Reducing Stigma and Discrimination were developed by DMH and approved by the MHSOAC. The Student Mental Health Initiative was developed and approved by the MHSOAC. There was a significant stakeholder process involved in producing the State Strategic Plans. This process is described further in the Background section of this document.

I. BACKGROUND

The MHSOAC approved five PEI Statewide Programs and corresponding funding amounts in January and September of 2007. These Guidelines apply only to the following three PEI Statewide Programs identified in DMH Information Notice No.: 08-25: (1) Suicide Prevention, (2) Stigma and Discrimination Reduction, and (3) the Student Mental Health Initiative. A fourth program, Training and Technical Assistance and Capacity Building, is being implemented locally and is not subject to these Guidelines. A strategic plan is being developed for the fifth program, Reducing Disparities through Racial, Ethnic and Cultural Specific Programs, and is also not subject to these Guidelines.

MHSOAC core principles:

- Client and Family Driven
- Wellness, Recovery and Resilience Focused
- Cultural Competency
- Community Collaboration
- Co-occurring Disorder Services Competency
- Integrated Services

With these Guidelines the Commission reaffirms its commitment to the core principles identified above and affirms its expectation that programs developed with PEI Statewide Funds will reflect these core principles. Additionally, any core principles identified in the State Strategic Plans should be considered in developing programs with these funds. (See link to State Strategic Plans provided on Page 1.)

In May 2008 the MHSOAC determined that Suicide Prevention, Stigma and Discrimination Reduction and Student Mental Health programs would be implemented most efficiently and effectively if administered through a single statewide entity. Over a two year period a significant "state level" stakeholder process occurred in each of these areas to identify broad strategic direction and more specific "recommended actions" that if implemented at the statewide level would most benefit California, would result in a statewide impact and provide a statewide foundation for counties to build upon in the future. The results of that stakeholder process are the State Strategic Plans previously identified.

To meet the goals of the State Strategic Plans and enable the implementation of statewide programs through a single statewide entity, a process for counties to assign PEI Statewide Funds to DMH for administration of these programs was provided in DMH Information Notice No.: 08-25 issued in September 2008.

In August 2009 the Commission determined that additional options were necessary to support the implementation of PEI statewide goals and programs. As a result the MHSOAC approved the development of guidelines specifically to identify additional options for accessing PEI Statewide Funds for statewide and/or multi-County programs.

In September 2009 the MHSOAC adopted eight principles which were to serve as the basis for the PEI Statewide Fund Guidelines. Those principles included a commitment to preserving statewide goals previously identified in the State Strategic Plans for Suicide Prevention, Stigma and Discrimination Reduction, and Student Mental Health. As a result the MHSOAC approved the development of guidelines that would preserve statewide PEI program efforts through various incentives including a streamlined approval process for counties choosing to assign their PEI Statewide Funds to a centralized statewide entity such as a joint powers authority (JPA) or DMH for the development and implementation of "statewide" programs.

As stated, the Commission previously approved the strategic direction and "recommended actions" identified in the State Strategic Plans and intends that all programs developed with PEI Statewide Funds further the goals and strategies in the State Strategic Plans by conforming with identified "recommended actions" in those documents. Additionally the Commission intends for the expenditure of these one-time PEI Statewide Funds to result in programs that have a statewide impact and provide a statewide foundation for counties to build upon for long lasting results. Consistent with this intent the programs approved with these funds shall focus on building system infrastructure, expanding community capacity, creating new knowledge and developing needed resources.

II. REQUIREMENTS FOR USE OF PEI STATEWIDE FUNDS **(Made available in Planning Estimates provided in DMH Information Notice No.: 08-25.)**

In addition to statutory or regulatory requirements, all programs/activities implemented with PEI Statewide Funds must be consistent with these Guidelines developed in compliance with the eight principles adopted by the MHSOAC in September 2009.

The following sections A through F represent six of the principles adopted by the Commission. A seventh principle regarding incentives and a streamlined process for jointly funded "statewide" programs is represented in Section III, Phase I Approval. The eighth principle regarding MHSOAC core principles was addressed previously in this document.

Programs must meet all of the following requirements categorized by guideline principle:

A. Collaboration

Counties are required to collaborate with at least one other County in the development of all programs. Such collaboration is authorized by Section 5897(a) and (b) of the Welfare and Institutions Code. Collaboration, for the purpose of these Guidelines, requires that programs are: (1) jointly funded by more than one County; and/or (2) developed with resources that are shared by more than one County. Shared resources must be documented and may include but are not limited to joint staffing, joint operations, and shared infrastructure. Additionally collaboration with other non-mental health entities and community-based entities is encouraged.

B. Conform With MHSOAC Approved State Strategic Plans

Programs developed with PEI Statewide Funds shall conform with MHSOAC approved State Strategic Plans by implementing “recommended actions” identified in those plans. (See link to State Strategic Plans provided on Page 1.)

C. Preserve State-wideness

To preserve state-wideness these Guidelines identify three options for the expenditure of PEI Statewide Funds to implement “statewide programs”. One of these options also allows for the development of multi-County collaborative programs that could be replicated statewide. The three options are identified below with more administrative and process detail provided for each in Section III of this document.

Counties must choose to expend their PEI Statewide Funds in *one or more* of the following ways:

Option 1: Implement Statewide Programs through a JPA

Option 2: Implement Statewide and/or Replicable Programs through Multi-County Collaboration

Option 3: Implement Statewide Programs through Assignment to DMH

As described, any of the three options provides a mechanism for Counties to use their PEI Statewide Funds to implement “statewide programs” whether through a JPA, multi-County collaboration or assignment of those funds to DMH.

“Statewide programs” require that “recommended actions” identified in the State Strategic Plans be implemented to have a statewide impact.

As indicated, a County may choose Option 2 and use their PEI Statewide Funds to implement “**multi-County replicable programs**”. However, to ensure that multi-County programs also meet the goal of having a statewide impact, these programs must be designed to be “replicable”, with an evaluation and reporting component that will provide information necessary to learn from these programs and replicate these programs if appropriate.

D. Stakeholder Input

These guidelines require different types of stakeholder input at various points in the plan development process for the use of PEI Statewide Funds. Consistent with the Mental Health Services Act and the MHSOAC core principles clients and family members are to provide input at local, state/JPA, and multi-County collaborative levels.

Local Level

Individual Counties developing their plans for the expenditure of PEI Statewide Funds must comply with the requirements for the Community Program Planning process (CPP) and the Local Review Process in Title 9, California Code of Regulations, Sections 3300 and 3315(b) including requirements related to stakeholder input. If a County does not have an already approved PEI Plan the County must also have a public hearing pursuant to Title 9, California Code of Regulations, Section 3315(a).

For the purpose of these Guidelines, individual Counties are required to gain local stakeholder input about whether to pursue “statewide programs” through a JPA, multi-County collaboration, or DMH and/or enter into collaboratives to implement “multi-County replicable programs”. As described previously DMH and the MHSOAC directed, conducted and approved a significant “state level” stakeholder process that occurred over two years and resulted in the State Strategic Plans. With the approval of those plans the Commission approved the “recommended actions” identified in the State Strategic Plans and intends that all programs developed and implemented with PEI Statewide Funds conform with those “recommended actions”. It is not the Commission’s intent that the local County stakeholder process revisits the specific actions to be implemented or to propose program design.

State Level - JPA

A JPA acting as a lead organization on behalf of Counties acting jointly must obtain stakeholder input to identify from the State Strategic Plans the priority “recommended actions” to be implemented. It is expected that this process will

build on the previous state level process that produced the State Strategic Plans. The JPA is encouraged to: (1) collaborate with other non-mental health, community based entities to achieve the greatest statewide impact; (2) include racial, ethnic and cultural populations; and (3) consider “across the life span” strategies in the programs designed. A JPA implementing “statewide programs” shall post all “statewide program” plans for 30 days prior to plan submission.

Multi-County Collaborative Level

A lead organization acting on behalf of Counties in a multi-County collaborative must obtain stakeholder input to identify from the State Strategic Plans, the priority “recommended actions” to be implemented either as “statewide programs” or “replicable programs.” It is expected that this process will build on the previous state level process that produced the State Strategic Plans. The multi-County collaborative is encouraged to: (1) collaborate with other non-mental health, community based entities to achieve the greatest statewide impact if implementing statewide programs; (2) include racial, ethnic and cultural populations; and (3) consider “across the life span” strategies in the programs designed.

If a multi-County collaborative implements statewide and/or replicable programs, each individual County is responsible for a local review process that includes posting their multi-County collaborative plan for 30 days with budget detail specific to their County.

E. Address Three Project Areas

Counties are required to use PEI Statewide Funds to address goals identified for all three program areas: (1) Suicide Prevention, (2) Stigma and Discrimination Reduction, and (3) Student Mental Health. Whether programs are developed through a JPA or a multi-County collaborative, it is the intent of the MHSOAC that the expenditure of PEI Statewide Funds be consistent with the general proportion of funds originally intended for the three program areas as identified in Planning Estimates provided in DMH Information Notice No.: 08-25: Suicide Prevention 25%; Stigma and Discrimination Reduction 37.5%; and Student Mental Health 37.5%.

If a JPA is implementing statewide programs and proportionality is not evident in the program and budget detail provided by the JPA, additional information must be included about how proportionality will be maintained in the larger context of PEI Statewide Fund expenditures.

If a multi-County collaborative is implementing statewide or replicable programs, total expenditures in the budget detail provided for that collaborative shall be generally consistent with the proportions of funds originally intended for the three program areas as cited above and evident in the budget detail provided.

The goal of the MHSOAC is not to enforce strict proportionality in the expenditure of PEI Statewide Funds but rather to work with Counties and/or a JPA to ensure that California maintains the significant and intended investment in the three program areas as originally intended.

A multi-County collaborative that *only includes* Counties with a population of less than 100,000, is exempt from addressing three program areas but must address one program area.

F. Evaluation

The MHSOAC is committed to evaluating the effectiveness of programs developed with PEI Statewide Funds. **As such pursuant to these Guidelines, all Counties are required to participate in a “statewide evaluation”.**

Statewide Evaluation

For “statewide programs” developed through either a JPA or a multi-County collaborative strategies for evaluation of each program proposed must be provided with the submission of program descriptions. (Strategies for evaluation of each program may be combined into one evaluation.) The JPA or multi-County collaborative may use PEI Statewide Funds to support evaluation efforts. Evaluation expenditures should be in proportion to funds available to the JPA or multi-County collaborative. It is generally not uncommon to spend 5-15% of funds on evaluation efforts.

Counties not implementing “statewide programs” are also required to participate in a statewide evaluation. Currently a statewide evaluation is being developed by the MHSOAC for evaluation of the MHSA. This evaluation is expected to include a focus on programs developed with PEI Statewide Funds. Multi-County collaboratives implementing “replicable programs” must participate in this MHSOAC-sponsored evaluation to meet the “statewide” evaluation requirement and may use PEI Statewide Funds to support participation in the effort. The MHSOAC will keep Counties and stakeholders informed as this evaluation is designed and implemented.

Multi-County Collaborative – Replicable Projects

In addition to participating in the MHSOAC “statewide” evaluation described above, multi-County collaboratives implementing “replicable programs” must design a local evaluation of each proposed program and a plan for disseminating

evaluation findings. This information is to be submitted with the program description. (See Enclosure D.) The lead organization acting on behalf of the multi-County collaborative and/or individual participating Counties may use PEI Statewide Funds to support evaluation efforts. Evaluation expenditures should be in proportion to funds available to the multi-County collaborative. It is generally not uncommon to spend 5-15% of funds on evaluation efforts.

G. Funding

1. Expending Funds

As noted, PEI Statewide Funds identified in DMH Information Notice No.: 08-25 must be used to support statewide or multi-County replicable programs that conform with MHSOAC approved strategic direction and "recommended actions" for Suicide Prevention, Stigma and Discrimination Reduction and Student Mental Health found in the State Strategic Plans. Expenditure of PEI Statewide Funds is limited to activities for prevention and early intervention including planning, evaluation and administration.

2. Tracking Funds

For funds not assigned to DMH or a JPA for "statewide" programs, Counties are required to track and report on the revenues and expenditures for PEI Statewide Funds separate from other PEI funds. Additional guidance will be provided in the applicable annual MHSA Revenue and Expenditure report guidelines. A JPA implementing "statewide" programs must also track and report to DMH on the expenditures for PEI Statewide Funds separate from other funds.

3. Requesting Funds

See the next section of this document for content and format requirements to request PEI Statewide Funds pursuant to these guidelines.

III. THREE-YEAR PROGRAM AND EXPENDITURE PLAN: CONTENT AND FORMAT REQUIREMENTS TO REQUEST PEI STATEWIDE FUNDS

A County choosing to implement "statewide" programs through assignment of PEI Statewide Funds to DMH must follow the procedures specified in DMH Information Notice No.: 08-25 or any subsequently issued Information Notice that supersedes 08-25 as noted in Option 3 below.

A County choosing to implement “statewide” or “replicable” programs through Options 1 and/or 2, will submit a request for PEI Statewide Funds as an update to a County’s Three-Year Program and Expenditure Plan or with the initial submission of a County’s PEI Plan.

What follows are specific instructions about the plan information to be submitted if a County is choosing Options 1 and/or 2 to implement “statewide” or multi-County “replicable” programs. The following instructions also apply to a JPA requesting PEI Statewide Funds under Options 1, 2, and/or 3.

The plan information required to request PEI Statewide Funds under Options 1 and/or 2 is contained in Enclosures A through F.2 attached to these Guidelines.

All County funding requests submitted must include the information in Enclosures A and B certifying that the County will comply with the requirements of the MHSA, including the Community Program Planning Process of Title 9, CCR Sections 3300, 3310, 3315, and non-supplant requirements of Title 9, CCR Section 3410. **Enclosures A and B are standard forms required with the submission of any plan or update to the Three-Year Program and Expenditure Plan.** All JPA funding requests submitted must complete the certification in Enclosure A.1

In addition to submitting Enclosures A, B, and A.1 respectively with any funding request, Counties and JPAs are required to provide specific information about their request for PEI Statewide Funds by submitting the information requested on Enclosure C, D, and/or E. If a County is choosing to expend PEI Statewide Funds under both Option 1 and Option 2 they may submit Enclosures C and D together as one plan update or separately as individual plan updates.

What follows are descriptions of the two new options available to Counties and the required plan information associated with each. See Enclosure G for a matrix of required plan information associated with each of the options described below.

Counties must choose *one or more* of the following options for expenditure of PEI Statewide Funds:

Option 1: Implement Statewide Programs through a JPA

County delegates authority for the administration of PEI Statewide Funds to a Joint Powers Authority (JPA) for the implementation of “**statewide programs**”.

There is an expedited approval process referred to as “Phase I Approval” for **initial requests** from Counties choosing Option 1 to provide PEI Statewide Funds to a JPA for the implementation of “statewide programs”.

Phase I Approval allows for the transfer of up to four years of planning estimates to the JPA and distribution of 5% of available PEI Statewide Funds to the JPA prior to the identification of “recommended actions” from the State Strategic Plans and prior to program design. (Available funding is the amount of each annual planning estimate transferred to the JPA for prior and current fiscal years.)

Phase I Approval – County Completes Enclosure C

To receive Phase I approval a County must Enclosure C which: (1) delegates the administration of PEI Statewide Funds to a JPA; (2) certifies that the intended purpose for the delegation includes the selection, design and “statewide” implementation of specific “recommended actions” identified in the State Strategic Plans and the authority to develop and submit plans, plan updates and reports to DMH and the MHSOAC related to PEI Statewide Funds; and (3) requests that up to four years of planning estimates for PEI Statewide Funds be transferred to the JPA. Counties may also request that 5% per year of available PEI Statewide Funds be immediately distributed to the JPA for the planning, provided that 5% of the planning estimate has not previously been requested and distributed and the state fiscal year for which the funds are intended has begun. Counties may also request planning funding for the upcoming fiscal year for distribution upon the start of the new fiscal year.

The JPA may expend these funds on necessary planning activities including identifying priority “recommended actions” to be implemented and developing the program(s) design. **Phase II approval is required before a JPA can expend any PEI Statewide Funds on program implementation.**

The specified funds will be distributed to the JPA after the execution of an amendment to the County’s Mental Health Services Act agreement providing DMH specific authority to implement the county’s delegation. Counties may request that DMH initiate such an amendment at any time.

Phase II Approval – JPA Completes Enclosure E

Phase II Approval will occur when the JPA, acting on behalf of Counties, completes its design of a statewide program and submits a plan update requesting approval to expend PEI Statewide Funds on program implementation. **Phase II approval requires the JPA to submit program information that identifies the specific “recommended actions” to be implemented as “statewide programs” that are consistent with the State Strategic Plans; and provide associated program descriptions, budgets and evaluation strategies.** (See specific content requirements for Enclosure E.) *The JPA may submit this information as an update to a County’s Three-Year Program and Expenditure Plan.*

Option 2: Implement Statewide and/or Replicable Programs through Multi-County Collaboration

County provides PEI Statewide Funds or other resources to a multi-County collaborative to implement “statewide” or “replicable” programs.

Funding Approval - County Completes Enclosure D

Counties proposing to implement statewide or replicable programs through a multi-County collaborative may request funding from planning estimates from previous or current fiscal years for immediate distribution and for the upcoming fiscal year for distribution in that upcoming fiscal year. These funding requests submitted by individual Counties must include program information that identifies the specific “recommended actions” to be implemented as “statewide” and/or “replicable” programs” that are consistent with the State Strategic Plans and provide associated program descriptions, budgets and evaluation strategies. Information is also required about collaboration with other Counties. For Counties proposing to implement “replicable” programs additional information is required about strategies for the dissemination of evaluation findings. (See specific content requirements for Enclosure D.)

Directions for subsequent year funding requests will be included in the overall directions for updates to the Three Year Program and Expenditure Plan. The funding requests and plan information described in these Guidelines shall be submitted by individual Counties as an update to a Three-Year Program and Expenditure Plan or as a request submitted with a County’s initial PEI Plan.

Note: As mentioned previously Counties may select more than one of the options identified for expenditure of their PEI Statewide Funds. If a County is choosing both Option 1 and Option 2 they may submit Enclosures C and D at the same time as one plan update or as separate plan updates.

Option 3: Statewide Programs through Assignment to DMH

County assigns PEI Statewide Funds to DMH to implement “statewide programs” pursuant to DMH Info. Notice No.: 08-25 or any subsequently issued Information Notice that supersedes 08-25.

Note: All direction for assigning PEI Statewide Funds to DMH can be found in DMH Info. Notice No.: 08-25 or any subsequently issued Information Notice that supersedes 08-25. Counties choosing to assign funds to DMH should follow that guidance. (At time of release of this draft there is a continuing discussion with DMH which may result in a revision to DMH Information Notice No.: 08-25.)

These Guidelines provide direction for counties choosing Option 1 and/or 2 only.

If a county chooses Option 3 specifically to fund a contract between DMH and a JPA funded by PEI Statewide Funds for the development and implementation of

PEI Statewide programs the JPA must follow these Guidelines and submit required enclosures.

As stated previously, the two new options developed for Counties to request PEI Statewide Funds represent the Commission's intent to: (1) preserve "statewide" efforts with regard to programs developed for Suicide Prevention, Stigma and Discrimination Reduction and Student Mental Health; (2) streamline approval processes to support statewide program efforts developed through a single state entity; and (3) develop efficient and accountable processes for approval of PEI Statewide Funds.

IV. PLAN SUBMISSION

Counties and/or a JPA should submit a hard copy and an electronic copy of the Program and Expenditure Plan for PEI Statewide Funding which includes the original signature of the County mental health director or designee or JPA designee to:

Mental Health Oversight and Accountability Commission
PEI Statewide Program Funds
1300 17th Street, Suite 1000
Sacramento, CA 95814
www.mhsoac@dmh.ca.gov

and

California Department of Mental Health
Attention: Sandra Black
Prevention, Education and Training Section
State Level Program Branch
1600 9th Street, Room 150
Sacramento, CA 95814
PEI@dmh.ca.gov

V. REVIEW, APPROVAL AND PAYMENT

The MHSA specifies that PEI proposed expenditures are to be reviewed jointly by DMH and the MHSOAC with the final approval by the MHSOAC. The MHSOAC will notify the County of the approval of its funding request in writing. Funds will not be allowed for expenditures that are incurred prior to receiving MHSOAC's approval.

VI. TECHNICAL ASSISTANCE

Programs focused on Suicide Prevention, Stigma and Discrimination Reduction and Student Mental Health have received support from state-level stakeholders and are considered by the MHSOAC and DMH to be important areas of

investment. The MHSOAC and DMH are committed to providing assistance in clarifying Guidelines for plan development and for program design. For further information, clarification or questions about these Guidelines, please contact MHSOAC staff, Vivian Lee at (916) 445-8721 or Vivian.lee@dmh.ca.gov. For statewide program design and planning questions you may contact DMH staff Sandra Black at Sandra.black@dmh.ca.gov, (916) 651-1120 or Cielo Avalos at cielo.avalos@dmh.ca.gov, (916)651-5769.

The MHSOAC is pleased to provide this guidance which supports the strategic direction and recommended actions identified in the State Strategic Plans and provides additional opportunities to strengthen our joint efforts to reduce suicide, enhance the mental health of students, and reduce stigma and discrimination throughout California.

Enclosures:

- Enclosure A: County Certification
- Enclosure A.1: JPA Certification
- Enclosure B: Description of Local Review Process
- Enclosure C: County Distribution Agreement – Provide PEI Statewide Funds to JPA for Implementation of Statewide Programs
- Enclosure D: Implementation of Statewide or Replicable Programs through Multi-County Collaboratives
- Enclosure E: Phase II Approval - JPA Statewide Program Implementation
- Enclosure F: PEI Statewide Funding Request Budget Form
- Enclosure F.1: PEI Statewide Funding Request Budget Narrative
- Enclosure F.2: PEI Statewide Funding Request Budget Summary
- Enclosure G: Matrix of Plan Requirement Documents

ADMINISTRATIVE MATTERS

Agenda item 9.C.

SUBJECT: State Department of Mental Health Information Notice 10-05 and 10-06

BACKGROUND AND STATUS:

On March 29, 2010, the State Department of Mental Health (DMH) published DMH Information Notice No. 10-05 and No. 10-06.

The Purpose of Information Notice 10-05:

This Information Notice, which replaces DMH Information Notice 08-25, transmits updated instructions to Counties choosing to expand their Prevention and Early Intervention (PEI) funds on one or more of the following programs:

1. Suicide Prevention
2. Student Mental Health Initiative
3. Stigma and Discrimination Reduction

Additionally, the Notice provides option for implementing these programs, of which, option one is, "A county may act jointly with one or more counties to implement a statewide program through CalMHSA", a Joint Powers Authority (JPA).

The Purpose of Information Notice 10-06:

This Information Notice transmits to Counties the Proposed Guidelines for Counties to submit their request for PEI Statewide Funds made available in planning estimates for Suicide Prevention. Stigma and Discrimination Reduction and Student Mental Health in DMH Information Notice 08-25. These guidelines provide information to Counties on allowable use of PEI Statewide Funds. In addition, they contain content and format instructions for updates to the PEI Component of the County's Three-Year Program and Expenditure Plans that includes Statewide Funds.



1600 9th Street,, Sacramento, CA 95814
(916) 654-2309

March 29, 2010

DMH INFORMATION NOTICE NO.: 10-05

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: ASSIGNMENT OF MENTAL HEALTH SERVICES ACT (MHSA)
PREVENTION AND EARLY INTERVENTION (PEI) FUNDS FOR
PEI STATEWIDE PROGRAMS

REFERENCE: WELFARE AND INSTITUTIONS CODE (WIC) SECTION 5840

Purpose of this Information Notice

Pursuant to the responsibilities of the California Department of Mental Health (DMH) and the Mental Health Services Oversight and Accountability Commission (MHSOAC) as outlined in Welfare and Institutions Code sections 5846 and 5847, this Information Notice, which replaces DMH Information Notice 08-25, transmits updated instructions to Counties¹ choosing to expend their Prevention and Early Intervention (PEI) funds on one or more of the following PEI statewide programs:

1. Suicide Prevention
2. Student Mental Health Initiative
3. Stigma and Discrimination Reduction

Please refer to Enclosure 1 in Information Notice 08-25 for a list of each County's Component Allocations for these three PEI statewide programs. The Component

¹ "County" means a county mental health program, two or more county mental health programs acting jointly, or a city-operated mental health program acting pursuant to section 5701.5 of the Welfare and Institutions Code.

Allocation, previously called the "Planning Estimate"², is the amount of funding available to each County for the purpose of funding these three programs.

County Options for Implementing Statewide PEI Programs

In accordance with the guidelines for statewide PEI programs developed by the MHSOAC pursuant to its authority to issue guidelines for PEI expenditures, Counties may choose one or more of the following three options to implement statewide PEI programs:

- Option 1: A County may act jointly with one or more other Counties to implement a statewide program through CalMHSA, a Joint Powers Authority (JPA), pursuant to Welfare and Institutions Code section 5897, subdivision (a);
- Option 2: A County may act jointly with one or more other Counties to implement a statewide and/or a regional replicable program³ through a multi-County collaborative;
- Option 3: A County may assign funds to DMH for DMH to implement a statewide program.

The MHSOAC guidelines issued in Information Notice 10-06 provide the instructions under all three options for Plans and updates that include PEI statewide programs. This Information Notice provides additional instructions to Counties choosing to implement statewide PEI programs using Option 3.

Option 3 Assignment of Funds

The MHSA Agreement currently allows each County to assign funds in the Component Allocation for any of the components in its Three-Year Program and Expenditure Plan to DMH for DMH to implement statewide MHSA programs on behalf of Counties. Provision 10 of the MHSA Agreement provides for this assignment to occur through an assignment agreement executed between the County and the State. The assignment clause in the MHSA Agreement allows DMH to subcontract for the provision of the services and activities specified in the assignment agreement.

Under Option 3, Counties may assign funds to DMH for one of the following purposes:

- ✓ for DMH to administer PEI statewide programs; and/or
- ✓ to fund a contract between DMH and California Mental Health Services Authority (CalMHSA) for the development and implementation of one or more of the three statewide programs.

² The term "Planning Estimate" has been replaced with the term "Component Allocation".

³ For a description of regional replicable programs, see the PEI Statewide Program Guidelines

Under this option, the County may either assign funds to DMH with no conditions placed on which entity is to administer the program, or it may specify that it is assigning funds to DMH for DMH to subcontract with the JPA to administer the program. To assign funds, the County should submit a completed Enclosure 1 as an update to its Plan. As an update, the assignment document must comply with the requirements contained in California Code of Regulations Title 9, sections 3300, Community Program Planning Process; 3310, The Three Year Program and Expenditure Plan; and 3315, subdivision (b), Local Review Process.

Assigned funds shall be distributed to CalMHSA only after a PEI statewide program work plan has been approved by the MHSOAC. Funds for an approved work plan may be distributed prior to approval of the entire Plan/update of which the work plan is part.

Counties That Have Already Assigned Funds to DMH for Statewide PEI Programs

Pursuant to former Information Notice 08-25 (which is now replaced by this Information Notice) some Counties have already assigned a portion of their PEI Component Allocations to DMH for DMH to implement a statewide PEI program(s). These Counties may either proceed with their assignments as executed or elect to change their previously executed assignments to elect to fund a contract between DMH and CalMHSA. Counties that have previously assigned under former Information Notice 08-25 must affirmatively reassign under this Information Notice not later than December 31, 2010.

Enclosure 1: The PEI Statewide Programs Assignment Agreement

Enclosure 1 of this Information Notice is the modified MHSA PEI Statewide Programs Assignment Agreement. A County choosing to expend its PEI funds for a PEI statewide program(s) under Option 3 should complete the Assignment Agreement and mail the signed form to:

**California Department of Mental Health
MHSA Plan Review & Community Programs Unit
Attn: PEI Statewide Programs Assignment Agreement
1600 9th Street, Room 150
Sacramento, CA 95814**

With a copy to

**Mental Health Oversight and Accountability Commission
PEI Statewide Program Funds
1300 17th Street, Suite 1000
Sacramento, CA 95814
www.mhsoac@dmh.ca.gov**

This PEI Statewide Programs Assignment Agreement must either be:

- signed by the individual designated by the County to act as fiscal and programmatic administrative agent for the purposes of the County's MHSA Agreement, or
- accompanied by a copy of the resolution, order, motion, or ordinance of the local governing body that by law has authority to enter into an agreement authorizing this assignment.

The PEI Statewide Program Assignment Agreement may be submitted as part of the Plan/update containing the County's work plan for the PEI statewide program(s) or it may be submitted separately. If submitted separately, the Assignment Agreement constitutes an update to the County's Three-Year Program and Expenditure Plan and is subject to the requirements contained in California Code of Regulations Title 9, sections 3300, Community Program Planning Process; 3310, The Three Year Program and Expenditure Plan; and 3315, subdivision (b), Local Review Process. If a County does not yet have a fully executed MHSA Agreement in place, the assignment will become effective with the execution of the County's MHSA Agreement. If the County does not yet have a Three-Year Program and Expenditure Plan that contains a PEI component, the County must submit the PEI component as a Plan, subject to sections 3300, 3310 and 3315, subdivision (a), Local Review Process, which requires that a public hearing be held on the draft Plan.

Planning for PEI Statewide Programs

Planning funds may be requested for the purpose of conducting the Community Program Planning and Local Review Processes, for preparing, drafting and submitting Plan/updates and for other planning activities. Requests for planning funds are subject to the 5% limit specified in section 5892, subdivision (c), of the Welfare and Institutions Code and section 3300, subdivision (d), of Title 9 of the California Code of Regulations. However, a County may request up to 5% of both the current fiscal year's Component Allocation for PEI statewide programs and the unspent PEI statewide program Component Allocations for past fiscal years. Accordingly, if a County has three years of unspent PEI statewide program Component Allocations, and has not yet requested and received 5% of the Component Allocation for Community Program Planning purposes, it may request and receive up to 5% of both the current and past years' Component Allocations for planning purposes.

To request planning funds, Counties should follow the guidance contained in the guidelines for statewide PEI programs developed by the MHSAOAC. However, Counties electing to fund the JPA to implement statewide PEI programs on their behalf through election of Option 3, may also use the attached Assignment form to authorize the release of Planning Funds to the JPA.

DMH INFORMATION NOTICE NO.: 10-05

March 29, 2010

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If you have any questions about the PEI Statewide Program Assignment Agreement and MHPA Agreement process, please contact your DMH Program Liaison identified from the following link: <http://www.dmh.ca.gov/docs/CoOpRoster.pdf>.

If you have questions or need additional information about the three Statewide Programs or the MHPA's Guidelines, please contact the MHPA.

We look forward to working jointly with you in these endeavors.

Sincerely,

Original Signed by

STEPHEN W. MAYBERG, Ph.D.

Director

Enclosures

Enclosure 1– Supplemental MHPA PEI Statewide Projects Assignment Agreement

cc: California Mental Health Directors Association
California Mental Health Planning Council
Mental Health Services Oversight and Accountability Commission

SUPPLEMENTAL MHSA PEI STATEWIDE PROGRAMS ASSIGNMENT AGREEMENT

_____ (Name of County¹)

_____ (Name of County) (the County) agrees to participate in the Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) Statewide Programs funded from the PEI Component of the MHSA Three-Year Program and Expenditure Plan. The three Statewide Programs intended to be funded by this agreement are: Suicide Prevention, Student Mental Health Initiative, and Stigma and Discrimination Reduction.

The County agrees that upon its execution of this Agreement, the following amounts will be assigned to DMH concurrent with the start of the State Fiscal Year (SFY) for which they are made available subject to the effective conditions specified below:

- \$ (_____) of the County's SFY 08/09 PEI Statewide Program Component Allocation
- \$ (_____) of the County's SFY 09/10 PEI Statewide Program Component Allocation
- \$ (_____) of the County's SFY 10/11 PEI Statewide Program Component Allocation
- \$ (_____) of the County's SFY 11/12 PEI Statewide Program Component Allocation

Assignment to the Department of Mental Health

Funds in the amount specified will be transferred from the Mental Health Services Fund Local Assistance portion of the DMH state budget, item 4440-601-3085 to the DMH state budget, item 4440-101-3085, Program 10, Local Assistance.

The County makes the assignment to (please check one):

- Fund DMH administration of these programs.
- Fund a contract pursuant to WIC 5897 (a) between DMH and California Mental Health Services Authority (CalMHSA) to support CalMHSA administration of these programs.

Assignment shall be effective only upon:

- review and comment by DMH and approval by Mental Health Services Oversight and Accountability Commission (MHSOAC);
- a fully executed County MHSA Agreement with DMH; and
- appropriation of sufficient funds in the State Budget Act to allow DMH to expend the funds assigned by counties to support the PEI Statewide Programs outlined above.

Pursuant to WIC 5892(a)(3) assigned funds intended to fund a contract between DMH and CalMHSA may be distributed to CalMHSA only after a PEI Statewide Program and Expenditure Plan or update has been approved by the MHSOAC.

¹ "County" may be a county mental health program, two or more counties acting jointly, or a city-operated mental health program pursuant to Welfare & Institutions Code Section 5701.5.

Release of Planning Funds

The County may request funds for the purpose of conducting the Community Program Planning and Local Review Processes, for preparing, drafting and submitting Plan/updates and for other planning activities be distributed to the JPA.

- Pursuant to its Assignment above to fund a contract pursuant to WIC 5897 (a) between DMH and California Mental Health Services Authority (CalMHSA) to support CalMHSA administration of these programs, the County authorizes the release of Planning funds under this contract to the JPA in the following amounts:

- \$ (_____) of the County's SFY 08/09 PEI Statewide Program Component Allocation
- \$ (_____) of the County's SFY 09/10 PEI Statewide Program Component Allocation
- \$ (_____) of the County's SFY 10/11 PEI Statewide Program Component Allocation

Approved for County (by signature)	Date:
Printed Name and Title:	



C A L I F O R N I A D E P A R T M E N T O F

Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-2309

March 29, 2010

DMH INFORMATION NOTICE NO.: 10-06

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: GUIDELINES FOR PREVENTION AND EARLY INTERVENTION
(PEI) STATEWIDE PROGRAMS¹

REFERENCE IMPLEMENTATION OF THE MENTAL HEALTH SERVICES ACT,
WELFARE AND INSTITUTIONS CODE SECTIONS 5840

This Information Notice transmits to Counties² the Proposed Guidelines for Counties to submit their request for PEI Statewide Funds made available in planning estimates for Suicide Prevention, Stigma and Discrimination Reduction and Student Mental Health in DMH Information Notice 08-25³. These guidelines provide information to Counties on allowable use of PEI Statewide Funds. In addition they contain content and format instructions for updates to the PEI Component of the County's Three-Year Program and Expenditure Plans that includes PEI Statewide Funds.

These Guidelines are applicable to all requests for PEI Statewide Funds submitted to the Mental Health Services Oversight and Accountability Commission (MHSOAC) after January 28, 2010, the date the Guidelines were approved by the MHSOAC.

¹ "PEI Statewide Programs" means the PEI statewide programs funded from the PEI component of the MHSA Three-Year Program and Expenditure Plan made available in planning estimates in DMH Information Notice 08-25.

² "County" means a County Mental Health Department, two or more County Mental Health Departments acting jointly, and/or a city-operated program receiving funds per Welfare and Institutions Code Section 5701.5 (California Code of Regulations, Section 3200.090).

³ For purposes of these Guidelines these funds will be referred to as "PEI Statewide Funds."

DMH INFORMATION NOTICE NO.: 10-06

March 29, 2010

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For further information, clarification or questions about these Guidelines, please contact MHSOAC staff, Vivian Lee at (916) 445-8721 or Vivian.lee@dmh.ca.gov. For statewide program design and planning questions you may contact DMH staff Sandra Black at Sandra.black@dmh.ca.gov, (916) 651-1120 or Cielo Avalos at Cielo.avalos@dmh.ca.gov, (916) 651-5769.

Sincerely,

Original Signed by

STEPHEN W. MAYBERG, Ph.D.

Director

Enclosures (11)

cc: California Mental Health Directors Association
California Mental Health Planning Council
Mental Health Services Oversight and Accountability Commission
Community Programs Branch, County Technical Assistance

**Enclosure A
COUNTY CERTIFICATION
PEI STATEWIDE PROGRAM FUNDING REQUEST**

County Name: _____

County Mental Health Director	Program Lead
Name:	Name:
Telephone Number:	Telephone Number:
E-mail:	E-mail:
Mailing Address:	

I hereby certify that I am the official responsible for the administration of public community mental health services in and for said County and that the County has complied with all pertinent regulations, laws and statutes for this update to the Three-Year Program and Expenditure Plan. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code Section 5891 and California Code of Regulations (CCR), Title 9, Section 3410, Non-Supplant.

This Plan or update has been developed with the participation of stakeholders, in accordance with CCR, Title 9, Sections 3300, 3310(d) and 3315. The draft Program and Expenditure Plan or update was circulated for 30 days to stakeholders for review and comment. If this is the county's first submission of a PEI component, the local mental health board or commission has held a public hearing on the Plan. All input has been considered with adjustments made, as appropriate.

All documents in the attached Program and Expenditure Plan or Update are true and correct.

Signature
Local MH Director/Designee

Date

Title

**Enclosure A.1
JPA CERTIFICATION
PEI STATEWIDE PROGRAM FUNDING REQUEST**

JPA Name: _____

Contact Person
Name:
Telephone Number:
E-mail:
Mailing Address:

I hereby certify that I am the official responsible for the administration of the above-named JPA and that the JPA has complied with all pertinent regulations, laws and statutes for this update to the Three-Year Program and Expenditure Plan for use of the PEI Statewide Fund. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code Section 5891 and California Code of Regulations (CCR), Title 9, Section 3410, Non-Supplant.

This update has been developed with the participation of stakeholders, in accordance with CCR, Title 9, Sections 3300 and 3315(b). The draft update was circulated for 30 days to stakeholders for review and comment. All input has been considered with adjustments made, as appropriate.

All documents in the attached update to the Three-Year Program and Expenditure Plan for use of the PEI Statewide Fund are true and correct.

Signature
Title

Print name

Date

Enclosure B
Description of Community Program Planning (CPP) and Local Review
Processes
PEI Statewide Program Funding Request

County Name: _____

Instructions: Utilizing the following format please provide a brief description of the Community Program planning and Local Review Processes that were conducted in developing this Three Year Program and Expenditure Plan or update.

NOTE: If this is the initial submission of the county's PEI Three Year Program and Expenditure Plan please respond to questions 1- 5.

If this is an update to an already approved PEI Plan please respond to questions 1, 2, 4 and 5.

1. Describe how the Plan update was developed in collaboration with stakeholders.
2. Describe the methods to obtain input and review of draft Plan/update from stakeholders and interested parties. (A 30 day review and public comment period is required.)
3. Date of Public Hearing.
(Only required with submission of initial PEI Plan.)
4. Describe or attach substantive comments received during the local review process and responses to those comments. Indicate if none received.
5. Describe substantive revisions made to the draft Plan/Update that was circulated to stakeholders. Indicate if no substantive changes were made.

Enclosure C
COUNTY DISTRIBUTION AGREEMENT FOR
DISTRIBUTION OF PEI STATEWIDE FUNDS to JPA
FOR IMPLEMENTATION OF PEI STATEWIDE PROGRAMS
_____ (name of County)

_____ (name of County) (the County) agrees to participate in the Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) Statewide Programs funded from the PEI Component of the MHSA Three-Year Program and Expenditure Plan. The three Statewide Programs intended to be funded by this agreement are: Suicide Prevention, Student Mental Health Initiative, and/or Stigma and Discrimination Reduction.

The County agrees that upon its execution of this Agreement, and in accordance with the elected Option the following amounts will be distributed by DMH concurrent with the start of the State Fiscal Year (SFY) for which they are made available subject to the effective conditions specified below:

\$ (_____) of the County's SFY 08/09 PEI Statewide Program Planning Estimate
\$ (_____) of the County's SFY 09/10 PEI Statewide Program Planning Estimate
\$ (_____) of the County's SFY 10/11 PEI Statewide Program Planning Estimate
\$ (_____) of the County's SFY 11/12 PEI Statewide Program Planning Estimate

- This Distribution agreement will allow DMH to do all of the following:
- ✓ Enter into a contract with the JPA for the purpose of distributing the County's funds to the JPA;
 - ✓ Encumber the funds against this contract; and
 - ✓ Distribute the funds directly to the JPA.

Option 1 – Distribution to a Joint Powers Authority

- The County delegates the administration of the PEI Statewide Program Planning Estimate as delineated above to _____ (name of JPA), a Joint Powers Authority.

By electing this option the County agrees this delegation includes:

- ✓ Selection of specific recommended actions identified in the State Strategic Plans;
- ✓ The planning design and statewide implementation of the selected recommended actions; and,
- ✓ The development and submittal of Plans, Plan updates and reports to DMH and the MHSOAC related to PEI Statewide Funds

Funds in the amount specified will be distributed from the Mental Health Services Fund to _____(name of JPA) in accordance with the provisions set forth in these Guidelines only upon:

- review and comment by DMH and approval by the Mental Health Services Oversight and Accountability Commission (MHSOAC) of the Plan/update indicating the County's decision to implement one or more of the PEI statewide program through the JPA;
- submission and approval by the MHSOAC of a work plan for each program and
- execution of an amendment to the County's MHSA Agreement by the County and DMH.

Release of Planning Funds

The County requests that up to 5% of the planning estimates be distributed to the JPA for the purpose of conducting the Community Program Planning and, for preparing, drafting and submitting Plan/updates and for other planning activities as follows:

Pursuant to its election of Option 1 above the County authorizes the release of planning funds to the JPA in the following amounts:

\$ (_____) of the County's SFY 08/09 PEI Statewide Program Planning Estimate

\$ (_____) of the County's SFY 09/10 PEI Statewide Program Planning Estimate

\$ (_____) of the County's SFY 10/11 PEI Statewide Program Planning Estimate

Approved for County (by signature)	Date:
Printed Name and Title:	

Enclosure D
PEI STATEWIDE PROGRAM FUNDING REQUEST
Implementation of Statewide and/or Replicable Programs
Through Multi-County Collaborative

County Name: _____

1. Amount of Funds Requested

For "statewide programs" to be implemented through multi-County collaborative:

<u>From FY</u>		<u>For FY</u>
08-09		
09-10 _____	09-10 _____	10-11 _____
10-11 _____		

For "replicable" programs to be implemented through multi-County collaborative:

<u>From FY</u>		<u>For FY</u>
08-09		
09-10 _____	09-10 _____	10-11 _____
10-11 _____		

2. Identify the specific "recommended actions" identified from the State Strategic Plans to be implemented either as "statewide" and/or "replicable" programs by title and number. (See link to State Strategic Plans provided on Page 1 which includes "recommended actions" by number.)

For example, if identifying Suicide Prevention activities for "statewide" and/or "replicable" program implementation, provide the following type of information under Suicide Prevention, Statewide and/or Replicable Program Activities based on the specific "recommended actions" chosen for implementation:

Suicide Prevention:

Statewide Project Activities:

Example of information to be provided:

SP 1.5 – Expand the number and capacity of accredited suicide prevention hotlines based in California.

SP 1.6 – Create statewide consortium of suicide prevention hotlines.

Multi-County Replicable Program Activities:

Example of information to be provided:

SP 3.6 – Build grassroots outreach and engagement efforts to coordinate with and tailor the statewide suicide prevention education campaign and activities to best meet community needs.

Stigma and Discrimination Reduction:

Statewide Program Activities:

Multi-County Replicable Program Activities:

Student Mental Health:

Statewide Program Activities:

Multi-County Replicable Program Activities:

2A. Recommended actions identified above must address all three of the program areas unless:

- 1) The multi-County collaborative involves **only** very small counties with populations less than 100,000. In that instance a multi-County collaborative is required to address one program area.

or

- 2) Information is provided about how "recommended actions" to be implemented in one program area address goals and strategies identified in other program areas.

If either or both (a) and (b) applies to this funding request provide explanatory information.

3. Program Description

Provide a detailed program description for each proposed program to be implemented.

(This narrative should be no longer than one page per program.)

4. Budget Detail by Program

Provide budget information for each program on the PEI Statewide Program Funding Request Budget Forms F, F.1 and F.2 enclosed. (See Budget Instructions provided with budget forms.)

5. Evaluation

a. Statewide Programs

Describe the methodology for evaluation of each statewide program proposed.

b. Replicable Programs

Describe the methodology for evaluation of each replicable program including how information and evaluation findings will be shared and disseminated for possible program replication in other areas of the state. Confirm participation of County staff or contractors in any statewide evaluation conducted that includes a focus on the expenditure of PEI Statewide Funds.

6. Collaboration

- a. Identify other Counties involved in the multi-County collaborative implementing the "recommended actions" identified in this funding request. If the Counties involved vary between those proposing to implement statewide programs and those proposing to implement replicable programs please provide that information.
- b. If collaboration has included shared resources such as joint staffing, joint operations and/or shared infrastructure please describe that collaboration.

Enclosure E
PEI STATEWIDE PROGRAM FUNDING REQUEST
PHASE II APPROVAL
JPA STATEWIDE PROGRAM IMPLEMENTATION
(To Be Submitted by JPA)

1. JPA Name:

- 2. Identify each County in the JPA participating in the implementation of the programs described in this funding request and the funding amount contributed by each County.**
- 3. Identify the specific “recommended actions” identified from the State Strategic Plans to be implemented as “statewide” programs by title and number. (See link to State Strategic Plans provided on Page 1 which include “recommended actions” by number.)**

For example, if identifying a Suicide Prevention activity for “statewide” implementation, provide the following type of information under Suicide Prevention/Statewide Program Activities based on the specific “recommended actions” chosen for implementation:

A. Suicide Prevention – Statewide Program Activities:

Example of information to be provided:

SP 1.5 – Expand the number and capacity of accredited suicide prevention hotlines based in California.

SP 1.6 – Create statewide consortium of suicide prevention hotlines.

B. Stigma and Discrimination Reduction – Statewide Program Activities:

C. Student Mental Health – Statewide Program Activities:

D. Recommended actions identified above must address all three of the program areas unless:

- a) Information is provided about how “recommended actions” to be implemented in one program area address goals and strategies identified in other program areas. If this exception applies to this funding request provide explanatory information.

4. Program Description

Provide a detailed program description for each program to be implemented.
(This description should be no longer than one page per program.)

5. Budget Detail by Program

Provide budget information as identified on the PEI Statewide Program Funding Request Budget Forms F, F.1 and F.2 for each program. (See Budget Instructions provided with budget forms.)

6. Evaluation

Describe the methodology for a JPA-administered evaluation of each statewide program proposed.

7. Stakeholder Input and Review

- a. Describe the methods to obtain stakeholder input to identify the priority "recommended actions" to be implemented from the State Strategic Plans.
- b. Describe the methods to obtain input and review of the draft Plan/Update from stakeholders and interested parties. (A 30 day review and public comment period is required.)
- c. Describe or attach substantive comments received during the stakeholder review period and responses to those comments. Indicate if none were received.
- d. Describe substantive revisions made to the draft Plan/Update that was circulated to stakeholders. Indicate if no substantive changes were made.

Enclosure F

PEI STATEWIDE PROGRAM FUNDING REQUEST

Budget Form

COUNTY: _____

PEI Statewide Funds Program Name and #: _____

		Total
PEI STATEWIDE PROGRAM		
A. EXPENDITURES		
	1. Personnel	
	2. Operating Expenditures	
	3. Non-recurring Expenditures	
	4. Subcontracts/Professional Services	
	5. Evaluation	
	6. Other	
	7. Total Proposed Expenditures	\$0
B. REVENUES		
	8. Medi-Cal (FFP only)	
	9. State General Funds	
	10. Other Revenue	
	11. Total Revenues	\$0
C. TOTAL MHSA PEI STATEWIDE PROGRAM FUNDING REQUESTED		\$0

Prepared by : _____

Telephone Number: _____

PEI STATEWIDE PROGRAM FUNDING REQUEST INSTRUCTIONS
Enclosure F - Budget Form

Expenditures

1. Personnel Expenditures - Enter the projected personnel expenditures associated with the work plan. Include all anticipated salaries, wages and fringe benefits.
2. Operating Expenditures - Enter amounts projected to be incurred on all operating costs such as travel and transportation, general office expenditures, rent, and utilities.
3. Non-Recurring Expenditures - Enter non-recurring expenditures for the program. Examples of non-recurring expenditures could include the cost of equipping new employees with all technology necessary to perform MHSA duties (cellular telephones, computer hardware and software, etc.).
4. Subcontracts/Professional Services--Enter the amount budgeted for subcontracts and other professional services.
5. Evaluation--Enter the amount projected for evaluation of the program.
6. Other - Enter the amount projected to be incurred on other expenditures not listed above.
7. **Total Proposed Expenditures are the sum of lines 1 through 6.**

B. Revenues

8. Medi-Cal (FFP Only) - Enter the projected Medi-Cal federal financial participation associated with the work plan.
9. State General Funds - Enter the projected state general funds associated with the workplan.
10. Other Revenue - Enter the amount of revenue from other sources projected to be received for this workplan. Do not include MHSA funds requested for PEI Statewide Program in this amount.
11. **Total Revenues are the sum of lines 8 through 10.**

C. Total MHSA PEI Statewide Program Funding Requested - Line 7 less line 11.

Enclosure F-1
PEI STATEWIDE PROGRAM FUNDING REQUEST
Budget Narrative

County: _____

PEI Statewide Funds Program Name and #: _____

Please provide a one or two sentence narrative description for each budget item below.

PEI STATEWIDE PROGRAM

A. EXPENDITURES

1. Personnel
2. Operating Expenditures
3. Non-recurring Expenditures
4. Subcontracts/Professional Services
5. Evaluation
6. Other

B. REVENUES

8. Medi-Cal (FFP only)
9. State General Funds
10. Other Revenue

Prepared by : _____

Telephone Number: _____

PEI STATEWIDE PROGRAM FUNDING REQUEST INSTRUCTIONS
Enclosure F.1 - Budget Narrative

General: Narrative requests should be brief, i.e., generally a one or two sentence description.

Expenditures

1. Personnel Expenditures - Provide the number of budgeted positions in full-time equivalents.
2. Operating Expenditures - Provide a brief description of budgeted expenditures.
3. Non-Recurring Expenditures - Provide a brief description of the budgeted non-recurring expenditures. Examples of non-recurring expenditures could include the cost of equipping new employees with all technology necessary to perform MHSA duties (cellular telephones, computer hardware and software, etc.).
4. Subcontracts/Professional Services - List subcontracts/professional services by organization name (if known) and by purpose.
5. Evaluation - Provide a brief description of the types of budgeted evaluation expenditures.
6. Other - Provide a brief description of the other expenditures not listed above and provide a justification for the expenditures.

B. Revenues

8. Medi-Cal (FFP Only) - Provide a description of how the amount of FFP was calculated.
9. State General Funds - Provide a brief description of showing the basis for the amount of revenue projected.
10. Other Revenue - Provide the source of the revenue from other sources projected to be received for this workplan. (Do not include MHSA funds requested for PEI Statewide Program in this amount.)

C. Total MHSA PEI Statewide Program Funding Requested - This amount must be less than the available planning estimates.

Enclosure F-2

PEI STATEWIDE PROGRAM SUMMARY FUNDING REQUEST

County: _____ Date: _____

PROGRAM NAME	MHSA Funding Request	Suicide Prevention		Stigma and Discrimination Reduction		Student Mental Health Initiative				
		Statewide	Replicable	Total	Statewide	Replicable	Total	Statewide	Replicable	Total
1.	\$0									
2.	\$0									
3.	\$0									
4.	\$0									
5.	\$0									
6.	\$0									
7.	\$0									
8.	\$0									
9.	\$0									
10.	\$0									
11.	\$0									
12.	\$0									
13.	\$0									
14.	\$0									
15.	\$0									
16. Subtotal: Programs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
17. Plus up to 15% County/JPA Administration										
18. Plus up to 10% Operating Reserve										
19. Total: PEI Statewide Program Funds	\$0									

Calculation of Proportionality	Sub-Total	% of Total
Suicide Prevention		
Stigma and Discrimination Reduction		
Student Mental Health Initiative		
Total: PEI Statewide Program Funds	\$0	100%

PEI STATEWIDE PROGRAM SUMMARY FUNDING REQUEST INSTRUCTIONS
Enclosure F.2 - BUDGET SUMMARY

General: Round all expenditures to the nearest whole dollar

Heading: Enter the County name and the date the worksheet is completed.

1-15. Program Name: Enter the name of the program.

MHSA Funding Request: For each program, enter the total amount of MHSA PEI Statewide Program Funding requested

For each program, show the estimated total amount budgeted for each of the three statewide programs--suicide prevention, stigma and discrimination reduction and student mental health. (A single program may address more than one statewide program.) Also, show the estimated amount targeted towards programs that are statewide or other multi-county collaboratives that are replicable programs. Show totals for each column.

16. Sub-Total: Sum of MHSA Funding Requests for all programs

17. Administration: A maximum of 15% of the sub-total may be requested.

18. Operating Reserve: A maximum of 10% of the sub-total may be requested.

19. Total: Sum of sub-total, administration and operating reserve.

Calculation of Proportionality: Enter the Total amounts budgeted for Suicide Prevention, Stigma and Discrimination Reduction, and Student Mental Health. Show % of the total for each. Administration and operating reserves are not included in these

Enclosure G

Matrix of Plan Requirement Documents Associated with Options for Expenditure of PEI Statewide Funds*

Enclosure to be Submitted	Option 1 Statewide Program Through JPA		Option 2 Statewide or Replicable Programs Through Multi-County Collaboration
	County	JPA	County
A—County Certification (Compliance with MHSA Statutes and Regulations)	X		X
A.1. - JPA Certification (Compliance with MHSA Statutes and Regulations)		X**	
B - Description of Community Program Planning and Local Review Processes	X		X
C - County Certification – Funds to JPA for Implementation of Statewide Programs	X		
D - Implementation of Statewide Programs or Replicable Programs Through Multi-County Collaboratives			X
E - Phase II Approval - JPA Statewide Program Implementation		X	
F - PEI Statewide Program Funding Request - Budget Form		X	X
F.1 - PEI Statewide Program Funding Request - Budget Narrative		X	X
F.2 - PEI Statewide Project Funding Request - Budget Summary		X	X

* Updates for previously approved programs need to complete Enclosures A (or A.1 for JPA), F, F.1, and F.2

**The JPA is required to submit plan information required on Enclosure A.1 when it submits the information required on Enclosure E during the Phase II approval process.

These Guidelines are applicable to all requests for PEI Statewide Funds submitted to the Mental Health Services Oversight and Accountability Commission (MHSOAC) after January 28, 2010, the date the Guidelines were approved by the MHSOAC.

RECOMMENDATIONS:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

- State Department of Mental Health - Information Notice 10-05*
- State Department of Mental Health - Information Notice 10-06*

ADMINISTRATIVE MATTERS

Agenda item 9.D.

SUBJECT: Report from Strategic Planning

BACKGROUND AND STATUS:

At the March 12, 2010 Board meeting, a strategic planning session was held. Below, are notes from that meeting. The updated goals and the strategic planning notes are attached.

In light of recent CalMHSA development and anticipated future, it was deemed necessary to allow time to revisit CalMHSA vision, the mission statement and goals during the March 12, 2010 Board meeting.

An update to the CalMHSA vision statement and strategic planning documents are attached for review.

RECOMMENDATIONS:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

- CalMHSA Vision Statement*
- CalMHSA Purpose Statement*
- CalMHSA Goals and Objectives as Discussed at the March 12, 2010 Strategic Planning Meeting*

CalMHSA Vision Statement



CalMHSA shall serve all 58 Counties in California in the dynamic delivery of mental health services. As a nationally recognized leader in developing and implementing programs efficiently, CalMHSA inspires the mental health community through its commitment to results and values. Through leadership, expertise, innovation and accountability successful statewide, regional, and local programs are achieved. This intergovernmental agency provides the synergistic delivery of fiscal and administration excellence enabling the voice of many to be heard.

CalMHSA Purpose Statement



Promoting Efficiency, Effectiveness, and Enterprise among Counties

CaLMHSA STRATEGIC PLANNING

MARCH 2010

GOALS and OBJECTIVES

The following represents CalMHSA's four strategic goal areas. These goals are prepared to coincide with both our Vision and Mission Statement and are to be achieved within three years. The underlying objectives represent the steps needed to accomplish this by June 30, 2011. Focusing on these steps will enable CalMHSA to move forward with the progress of each goal.

GOAL #1: JPA Administration—shall be fully operational with all key positions filled, that the structure shall provide the leadership, delivery of service, quality controls, and accountability of operation.

- Finalize JPA Governing Documents
 - JPA Agreement
 - Bylaws
 - Participant Memorandum of Understanding (non-JPA members—not on Board of Directors and must agree to indirect cost allocation)
 - Policies and Procedures
- Finalize Budget
 - Staffing Plan
 - Programs
- Develop a Public Relations / Marketing Plan
- Prepare an Annual Report
- Established Governance Meeting and Reporting Structure
 - Board
 - Executive Committee
 - Other Committee (program, finance, etc)
 - Input from Others

GOAL #2: FUNDING—to secure CalMHSA funding for all 58 counties and to develop alternative funding sources.

- Execute contract with DMH
- Assist with completion of DMH Informational Disclosure 08-25
- Submit request for 5% planning funds for years ending 2009 and 2010.
- Develop MHSA Plans and submit to OAC for approval (6 separate plans throughout the year)
- Develop plan to avoid the “Reversion” rules

- Obtain Written Response from DMH?
- Continue, and expand, with current expenditure of Technical Assistance and Capacity Building Funds
- Explore additional Funding Sources
 - SAMSHA
 - Joint Programs / Additional Counties

GOAL #3: PROJECT DEVELOPMENT and IMPLEMENTATION—Establish process and protocols for successful plan submission, implementation/project management, and evaluation methodologies.

- Develop a Statewide Model for Stakeholder input
- Arrange and conduct Pre-Planning Forum or Webinar to be conducted by June 1, 2010
 - Input for Priority of Projects
 - Plan Development as it Relates to 3 Areas
 - Approval
 - Implementation
- Incorporate the “8 Step Regional” Process
- Develop protocols for plan development process
 - County Input for development
 - Vetting
 - Counties Back Out / Ensured Local Proposal Agreement’s
 - JPA
 - Work Group / Sub-Committee
 - Opens up to All Interested Counties
 - Plan Develop
 - Advisory Committee (review and ensure local stakeholder)
 - OAC / Planning Council / DMH
 - JPA Final Approval Process
 - OAC / DMH
- Develop a database to track other county/regions activities in the execution of mental health services programs

GOAL #4: ACCOUNTABILITy—Develop necessary quality control procedures surrounding fiscal and administrative operations and establish benchmarks for evaluation of results.

- Develop and implement the Evaluation Methodologies from the Technical Assistant Project
- Adhere to the Brown Act
- Develop Monthly, Quarterly and Annual Reporting
 - Fiscal
 - Program
 - Stakeholder Feedback (standing agenda item)
- Develop internal accounting and reporting controls
- Engage and execute annual (or biennial) financial audit

- Ensure the Web Site is current and inclusive of all relevant information
- Evaluation of Governance on an annual basis at Strategic Planning event
- Evaluation of Service Providers on an annual basis at Strategic Planning event
- Comply with fiscal requirements of all funding sources
- Establish benchmarks for success for plan development process and approval by OAC/DMH

ADMINISTRATIVE MATTERS

Agenda item 9.E.

SUBJECT: Contract for Administrative and Financial Services – GHC Contract

BACKGROUND AND STATUS:

CMHSA has utilized the services of ORA/George Hills Company for JPA Administration Services. The agreement states ORA will provide General and Management Services, Recording Secretarial Services, Financial and Support Services. The agreement shall be in effect July 2009 through June 30, 2014.

Due to the recent positive development of the JPA and the expected executed contract with the Department of Mental Health, an increase in staff will be needed to support the JPA membership and future membership going forward. As a result, staff has prepared an amended contract for the Boards consideration.

RECOMMENDATIONS:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

- To be Distributed Under Separate Cover

ADMINISTRATIVE MATTERS

Agenda item 9.F.

SUBJECT: Technical Assistance Capacity Building

BACKGROUND AND STATUS:

Dr. Sandra Naylor-Goodwin and staff will be present to update the Board as to the development in this program since the last meeting.

RECOMMENDATIONS:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

None

ADMINISTRATIVE MATTERS

Agenda item 9.G.

SUBJECT: Revised Procurement Policy - Resolution No. 09-09

BACKGROUND AND STATUS:

The CalMHSA Board has approved a Procurement Policy Resolution (Resolution No. 09-09). Mr. Alliston has prepared an amended version for your review and approval.

RECOMMENDATIONS:

For discussion and/or action should action be deemed appropriate.

REFERENCE MATERIALS ATTACHED:

- Procurement Policy (09-08)*
- Revised Procurement Policy (09-09)*

PROCUREMENT POLICY
FOR
CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

Resolution No. 09-08

WHEREAS, the California Mental Health Services Authority (“CalMHSA”) will have need to procure the services of service providers;

WHEREAS, the policy of CalMHSA is that its procurement policies should be efficient, fair and open;

NOW THEREFORE BE IT RESOLVED THAT:

The Board of Directors of CalMHSA hereby adopts the following policy to govern its procurement of services.

1. Procurement of services by CalMHSA must be approved by the Board, or by a Committee of the Board to whom such authority is delegated; provided, however, that any contract for administrative or legal services shall be approved by the full Board.
2. No Board member shall vote or take part in deliberations concerning the choice of service providers if the members has a disqualifying relationship with any service provider under consideration. As used in this paragraph, disqualifying relationship refers to the positions of officer, director, employee, or volunteer.
3. Except as otherwise provided below, procurement of services shall be through a competitive process based on demonstrated competence, professional qualifications necessary to perform the services to be provided, and fair and reasonable price. While not necessarily the primary factor, price shall be an important factor in the evaluation and selection process.
4. Service expected to cost in excess of \$150,000 in any one year require the use of a Request For Proposals (RFP) process. Before release, Requests For Proposals must be approved by the Board, or by a Committee of the Board to whom such authority is delegated.
5. Non-competitive procurement of services may be approved by the Board if there has been a good faith review of available service providers and there is detailed written justification for proceeding without a competitive process, and the written justification is distributed with the agenda materials in advance of the meeting. Non-competitive procurement may be justified by factors such as a lack of qualified alternate service providers, a need for immediate action, lack of response to a RFP, the relative cost of a RFP process as compared to the amount of the contract, or the retention of a current

provider being more cost effective due to avoidance of delay and the expense of educating a new provider.

6. If State or Federal law governs the procurement of services and is in conflict with this policy, the State or Federal law shall govern.

7. The Board may make exceptions to this Policy by affirmative action to waive it.

Date Adopted: 12/10/2009

Date of Last Revision: N/A

Replaces Resolution No: N/A

Ayes: 14 Noes: 0 Abstains: 0 Absent: 2

[Signature]
NAME

Secretary
TITLE

1/14/10
DATE

PROCUREMENT POLICY
FOR
CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

Resolution No. 09-09
Replacement of Resolution 09-08

WHEREAS, the California Mental Health Services Authority (“CalMHSA”) has adopted a procurement policy (Resolution 09-08) which includes reference to certain disqualifying relationships;

WHEREAS, the existing definition of disqualifying relationships does not address the relationships held by spouses of Board members;

WHEREAS, CalMHSA wishes to avoid all appearance of conflict of interest by replacing the original procurement policy with a new policy which addresses family relationships; and

WHEREAS, CalMHSA wishes to clarify that its procurement policy imposes restrictions on Board members in addition to, and not in place of, those imposed by the Government Code;

NOW THEREFORE BE IT RESOLVED THAT:

The Board of Directors of CalMHSA hereby adopts the following revised policy to govern its procurement of services.

1. Procurement of services by CalMHSA must be approved by the Board, or by a Committee of the Board to whom such authority is delegated; provided, however, that any contract for administrative or legal services shall be approved by the full Board.
2. No Board member shall vote or take part in deliberations concerning the choice of service providers if the member has a disqualifying relationship with any service provider under consideration. As used in this paragraph, “disqualifying relationship” means that the Board member is (a) an officer, director, employee or volunteer of the service provider, or (b) the spouse, domestic partner, parent, or child of an officer, director, employee or volunteer of the service provider. This paragraph applies in addition to, and not in lieu of, the Board member’s obligations under the Political Reform Act (Gov. Code, § 81000 et seq.) and Government Code Sections 1090 to 1099.
3. Except as otherwise provided below, procurement of services shall be through a competitive process based on demonstrated competence, professional qualifications necessary to perform the services to be provided, and fair and reasonable price. While not

necessarily the primary factor, price shall be an important factor in the evaluation and selection process.

4. Service expected to cost in excess of \$150,000 in any one year require the use of a Request For Proposals (RFP) process. Before release, Requests For Proposals must be approved by the Board, or by a Committee of the Board to whom such authority is delegated.

5. Non-competitive procurement of services may be approved by the Board if there has been a good faith review of available service providers and the staff provides a detailed written justification for proceeding without a competitive process, and the written justification is distributed with the agenda materials in advance of the meeting. Non-competitive procurement may be justified by factors such as a lack of qualified alternate service providers, a need for immediate action, lack of response to a RFP, the relative cost of a RFP process as compared to the amount of the contract, or the retention of a current provider being more cost effective due to avoidance of delay and the expense of educating a new provider.

6. If State or Federal law governs the procurement of services and is in conflict with this policy, the State or Federal law shall govern.

7. The Board may make exceptions to this Policy by affirmative action to waive it.

Date Adopted:

Date of Last Revision: N/A

Replaces Resolution No: N/A

Ayes: _____ Noes: _____ Abstains: _____ Absent: _____

_____	_____	_____
NAME	TITLE	DATE