

# **ALPINE COUNTY BEHAVIORAL HEALTH SERVICES**

**Mental Health Services Act  
Community Services and Supports**

**Plan Update for Fiscal Year 2008-2009**

**POSTED  
December 18, 2008**

This MHSА CSS Plan Update is available for public review and comment through January 19, 2009. We welcome your feedback.

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*Thank you!*

Table of Contents

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MHSA CSS Update Narrative .....1

Exhibit 1: Certification by the County Mental Health Director .....6

Exhibit 2: Program Workplan Listing for FY 2008/09.....7

Exhibit 3R: Total Amount of New Funding Required.....8

Exhibit 4: Local Prudent Reserve Plan .....9

Exhibit 5a: Administrative Budget and Budget Narrative .....10

Exhibit 5b: Approved Workplans Budget and Budget Narrative .....13

MHSA Community Services and Supports Annual Update  
Fiscal Year 2008/09

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Per the California Department of Mental Health Information Notices No. 08-10 and 08-16, Alpine County Behavioral Health (ACBH) submits the following documentation as the Community Services and Supports Plan Update for Fiscal Year 2008-09:

**A. Certification by the County Mental Health Director (Exhibit 1).**

Please refer to Exhibit 1, attached.

**B. Program Workplan Listing for FY 2008/09 (Exhibit 2).**

Please refer to Exhibit 2, attached.

**C. The total amount of new MHSA CSS funding required (Exhibit 3R).**

- 1) *In FY 2008/09 the amount of unexpended funds will not be used to reduce the FY 2008/09 funding request amount.*
- 2) *Each County requesting to establish FY 2008/09 CSS MHSA expenditures that exceed its FY 2008/09 Planning Estimate must describe how the programs established with these funds will be sustained.*

Please refer to Exhibit 3R, attached.

**D. Prudent reserve plan (Exhibit 4).**

Alpine County Behavioral Health has implemented its local prudent reserve plan. The County has utilized unspent Approved CSS Funds from Fiscal Year 2005-06 (\$99,428) to initiate a local prudent reserve account. ACBH has obtained the State DMH approval to utilize these funds as the initial deposit into its local prudent reserve.

ACBH is requesting, with this CSS Plan Update, that unspent Unapproved CSS Funds from Fiscal Year 2006-07 (\$99,041) be allocated to our local prudent reserve. This additional deposit will increase our prudent reserve to a total of \$198,469. Please refer to Exhibit 4, attached, for more information.

This additional deposit provides significant progress towards fulfilling the State DMH mandate that counties create a MHSA prudent reserve account. ACBH will continue to make deposits to its local prudent reserve as CSS funds are obtained and increases to the prudent reserve are required.

**E. Budgets and budget narratives for each Workplan (Exhibits 5a, 5b).**

Please refer to Exhibits 5a and 5b, and the budget narratives, attached.

**F. Calculation to ensure that the limit of 20% for prudent reserve, Capital Facilities and Technological Needs, and Workforce Education and Training is not exceeded.**

Per the following calculation, the 20% limit for prudent reserve has not been exceeded:

*Prudent Reserve Requested ÷ FY 08/09 Allocation = Prudent Reserve Percentage*

FY 2008/09 Prudent Reserve Requested	\$99,041
FY 2008/09 CSS Funding Allocation	\$622,600
Prudent Reserve Percentage	16%

**G. A brief description of how the requirements of the Community Program Planning Process in Section 3300 of the CCR were met.**

The planning process for our original Three-Year CSS Plan was comprehensive and included the input of over 150 diverse stakeholders through focus groups and surveys. With this information, we were able to determine the unique needs of our community and develop a MHSa program that is well designed for our county. The overall goals of the CSS Plan are still valid and provide an excellent guide for expanding our CSS services in FY 08/09.

As this Update simply expands our original CSS Plan, we did not conduct a new, formal stakeholder planning process. However, we have discussed the utilization of these funds with our key stakeholders, and engaged them in the planning process for expanding our CSS services and throughout the development of this request. The proposed expansion was developed and approved by our MHSa Steering Committee after reviewing our current programs, analyzing community needs based on past stakeholder input, and determining the most effective way to further meet the needs of our unserved/underserved populations.

**H. Documentation of the local 30 day review process per Section 3315(a) of the CCR.**

This proposed Plan Update has been posted for a 30-day public review and comment period beginning December 18, 2008. The Plan Update has been posted on our website. Hard copies have been distributed to the Steering Committee members, Board of Supervisor members, and various stakeholders. Copies of the draft Update are available in the Behavioral Health clinic, Health Department, local libraries, and local schools.

A summary and analysis of any substantive recommendations and/or changes resulting from the public review process will be included after the 30-day period ending January 19, 2009.

***I. When the update proposes a change in an existing program's population or service delivery, the following information should also be included:***

- a. A brief description of the proposed program change and the proposed effective date.*

The additional FY 08/09 CSS funding will be used to expand our Full Service Partnership (FSP) program to include Adults and Older Adults. Our original three-year CSS Plan outlined a FSP program for Children (ages 0-17) and Transition Age Youth (ages 16-25). During our discussions with stakeholders and a review of our data, it was determined that the adult and older adult populations will be the focus of our CSS expansion. We will continue to support and expand our FSP program for children and youth, as well as provide outreach and engagement and system development services to unserved and underserved individuals of all ages.

We will continue to work to reduce ethnic disparities, outreaching to the Native American population, as well as the lesbian, gay, bisexual, transgender, and questioning community. We will also expand our training efforts to increase our staff's understanding of consumer culture. Treatment will be culturally and linguistically appropriate and delivered in the client's community, when feasible.

Population to be served through the expanded program

The populations that will be served through our expanded FSP program are as follows:

- Adults (ages 18-59) who are at risk of inpatient hospitalization or recidivism, and/or involvement with the criminal justice system, and who have a mental health disorder, or co-occurring mental health and substance abuse disorders. These individuals may also be at risk for homelessness.
- Older Adults (ages 60+) who are at risk of losing their independence and/or being institutionalized and/or losing their independent living situation due to mental health problems. These individuals may have significant underlying medical problems and/or co-occurring substance abuse issues.

Number of clients anticipated

It is estimated that we will serve at least 30 individuals through Outreach and Engagement activities and at least 15 clients through our System Development funds. We anticipate that we will have served a total of seven (7) FSP clients (2 Children, 2 TAY, 2 Adults, and 1 Older Adult) by the end of FY 2008/09. As appropriate, our FSP clients will reflect the race/ethnicity of our county, with a number of our FSP clients from the Native American community.

Expanded services

The increased 08/09 CSS funding will allow us to expand our Full Service Partnership program to Adults and Older Adults, ensuring client-focused care and positive outcomes. In order to provide 'whatever it takes' to support our FSP clients' recovery, we will allocate a significant

portion of funding for use as flex funds. These funds will allow us to cover client expenses such as health and dental care, education expenses, and personal costs as determined by each client's treatment plan. It will also allow us to help clients create independent living situations and pay initial costs, such as first month's rent. We are excited about the opportunity to encourage our FSP clients to become more independent and meet their needs and personal goals.

In our original Three-Year CSS Plan, we underestimated the costs associated with opening a Wellness Center on Washoe tribal land, in the community of Hung-A-Lel-Ti. In this Update, we have budgeted for additional expenses related to this Wellness Center, including furnishings, staff and client workstations (cubicle panels, desks, computers, and chairs), and the addition of an external fire escape staircase for the second floor workspace. We still plan to open a second Wellness Center in the Markleeville area, but due to budget and time constraints, have decided to postpone the development of this second Wellness Center until FY 2009-10.

Due to the remote and rugged geography of our county, we have found that telepsychiatry is an effective tool for providing services to our clients. With the expanded funds, we plan to purchase the hardware for a telepsychiatry system for Bear Valley. This remote community is very difficult to reach during the winter months and we anticipate that implementing telepsychiatry will greatly expand our ability to effectively serve our clients.

Transportation is also significantly impacted by the geography and weather of our county; in addition, Alpine County has no public transportation. We purchased two vehicles with initial CSS funding; with this expanded funding, we will hire one (1) half-time staff driver to transport clients to and from appointments, Wellness Center classes, and other activities. Transportation will ensure that our clients receive a high-level of care in a timely manner.

#### Service delivery and new staffing

The expanded CSS funding will also enable us to hire a 1.0 FTE Mental Health Specialist. This non-clinical position will be responsible for conducting outreach and engagement activities, offering rehabilitation groups, and providing individual case management services. The Mental Health Specialist will enhance the delivery of recovery-oriented mental health services in the community and support positive outcomes for our clients. This individual will deliver services in the community, splitting time between the Wellness Center and other community locations, as appropriate.

In developing our Wellness Center, we have determined the need for additional administrative and office support. As a result, we have expanded our Office Support staff position from 0.50 FTE to 1.0 FTE; also, we have added a 0.25 FTE Administrative Analyst position. These positions support the CSS program by providing administrative and clerical support to MHSA staff and clients, planning and conducting activities for the Wellness Center, and ensuring that services meet the principles of MHSA. In addition, we have expanded our Adult Consumer Advocate position from 0.10 FTE to 0.50 FTE. This expansion will help our clients navigate the mental health system and provide necessary community support to ensure successful outcomes for our clients.

We have added a 0.50 FTE Janitor/Facilities Maintenance position to clean and maintain our Wellness Center. This position will provide regular cleaning, be available to help staff set up activities at the Wellness Center, and perform general repairs at the facility to ensure a safe, comfortable environment for our clients and the community.

Effective date of the Program Expansion

**February-March 2009:** We anticipate DMH approval of this Update and will commence hiring and training staff, developing and implementing program practices and service delivery strategies, and offering services to our target populations.

**June 2009:** By the end of Fiscal Year 2008-09, the expanded FSP program will be fully implemented. ACBH will have reached at least 45 individuals through Outreach and Engagement activities and System Development services, and enrolled 7 clients in Full Service Partnerships.

- b. For services/programs proposed for elimination, a brief description of the rationale for the elimination of any prior approved programs, if applicable, and the impact on the population to be affected by elimination.*

There are no MHSA CSS services or programs being eliminated in FY 2008-09.

**J. For each new CSS program/service, a description of each proposed program or service.**

There are no new MSHA CSS programs or services proposed for FY 2008-09.

Exhibit 1  
Community Services and Supports  
FY 2008/09 Plan Update

**COUNTY CERTIFICATION**

**I hereby certify that I am the official responsible for the administration of Community Mental Health Services in and for Alpine County and that the following are true and correct:**

This Community Services and Supports Plan Update is consistent with the Mental Health Services Act. This Plan Update is consistent with and supportive of the standards set forth in Title 9, California Code of Regulations (CCR) Section 3610 through 3650.

This Plan Update has been developed with the participation of stakeholders, in accordance with CCR Sections 3300, 3310, and 3315. The draft Plan Update was circulated for 30 days to stakeholders for review and comment. All input has been considered, with adjustments made, as appropriate.

Mental Health Services Act funds are and will be used in compliance with CCR Section 3410 of Title 9, Non-Supplant.

All documents in the attached Community Services and Supports Plan Update are true and correct.

**Date:** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Alpine County Mental Health Director**

**Executed at:** \_\_\_\_\_ **<to be signed prior to submittal to DMH>** \_\_\_\_\_

FY 2008/09 Mental Health Services Act Community Services and Supports Summary Workplan Listing

County: Alpine

Date: 12/16/2008

Workplans				Total Funds Requested				Funds Requested by Age Group			
No.	Name	New (N)/ Approved Existing (E)	Full Service Partnerships (FSP)	System Development	Outreach and Engagement	Total Request	Children, Youth, Families	Transition Age Youth	Adult	Older Adult	
1.	1 Alpine CSS Program	E	\$212,251	\$163,143	\$40,785	\$416,179					
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.						\$0					
17.						\$0					
18.						\$0					
19.						\$0					
20.						\$0					
21.						\$0					
22.						\$0					
23.						\$0					
24.						\$0					
25.						\$0					
<b>26. Subtotal: Workplans<sup>a/</sup></b>			\$212,251	\$163,143	\$40,785	\$416,179	\$0	\$0	\$0	\$0	
<b>27. Optional 10% Operating Reserve<sup>b/</sup></b>											
<b>28. CSS Administration<sup>c/</sup></b>						\$153,590					
<b>29. CSS Capital Facilities Projects<sup>d/</sup></b>											
<b>30. CSS Technological Needs Projects<sup>d/</sup></b>											
<b>31. CSS Workforce Education and Training<sup>d/</sup></b>											
<b>32. CSS Prudent Reserve<sup>e/</sup></b>						\$99,041					
<b>33. Total Funds Requested</b>						\$668,810					

a/ Majority of funds must be directed towards FSPs (Title 9, California Code of Regulations Section 3620(c)). Percent of Funds directed towards FSPs=

51.00%

b/ Cannot exceed 10% of line 26.

c/ Complete Exhibit 5a.

d/ Complete budget pages from relevant guidelines for each component.

e/ Complete Exhibit 4.

Exhibit 3R

**Mental Health Services Act Community Services and Supports Funding Request for FY 2008/09**

Date: 12/16/2008

County: Alpine

	Use of Funds	Source of Funds	
Total FY 2008/09 Funds Requested from line 33 of Exhibit 2	\$668,810		
		\$99,041	FY 06/07 CSS Unapproved Planning Estimates
		\$342,600	FY 07/08 CSS Unapproved Planning Estimates
		\$227,169	FY 08/09 CSS Planning Estimates*
		\$0	Unspent CSS Funds (Cash on Hand)
Total	\$668,810	\$668,810	

\* Funds requested for lines 29, 30 and 31 on Exhibit 2 must be funded from the FY 08/09 CSS Planning Estimate.

**Mental Health Services Act (MHSA)  
Community Services and Supports (CSS)  
FY 2008/09 Local Prudent Reserve Plan**

County: Alpine

Date: 12/16/2008

<b>Approved CSS Component Amount</b>	
1. Requested FY 08/09 CSS Services Funding (Exhibit 2, line 26)	\$ 416,179
2. Less: Non-Recurring Expenditures (from Exhibit 5a, 5b, and/or 5c)	\$ (50,000)
3. CSS Administration (Exhibit 2, line 28)	\$ 153,590
4. Total CSS Plan Component Amount	\$519,769
5. Maximum Prudent Reserve (50%)	\$259,885
<b>Prudent Reserve</b>	
6. Prudent Reserve Balance from Prior Approvals	\$99,428
7. Amount Requested to Dedicate to Prudent Reserve through this Plan update	\$ 99,041
8. Prudent Reserve Balance	\$198,469
9. Prudent Reserve Shortfall to Achieving 50% (Describe below)	\$61,416

The Department cannot approve a Plan update that does not achieve a local prudent reserve of 50% unless services would have to be reduced in order to attain the required amount. Please describe below how the County intends to reach the 50% requirement by July 1, 2010 (i.e., future increases in CSS planning estimates will be dedicated to prudent reserve before funding program expansion, other).

As new funds are made available, Alpine County Behavioral Health will continue to make deposits to the Prudent Reserve account to ensure that we meet the minimum reserve requirement by July 1, 2010.

**FY 2008/09 Mental Health Services Act Community Services and Supports  
Administration Budget Worksheet**

County: Alpine

Fiscal Year: 2008-09

Date: 12/16/2008

	Estimated FY 2007/08 Expenditures and Revenues	Estimated FY 2008/09 Expenditures and Revenues
<b>A. Expenditures</b>		
<b>1. Personnel Expenditures</b>		
a. MHSA Coordinator(s)		
b. MHSA Support Staff		\$53,685
c. Other Personnel (list below)		
<u>Janitor/Facility Maintenance</u>		\$20,000
_____		
iii. _____		
iv. _____		
v. _____		
vi. _____		
vii. _____		
d. Total Salaries		
e. Employee Benefits		\$22,105
f. Total Personnel Expenditures	\$0	\$95,790
<b>2. Operating Expenditures</b>		\$40,000
<b>3. County Allocated Administration</b>		
a. Countywide Administration (A-87)		\$17,800
b. Other Administration (provide description in budget narrative)		
c. Total County Allocated Administration	\$0	\$17,800
<b>4. Total Proposed County Administration Budget</b>	\$0	\$153,590
<b>B. Revenues</b>		
<b>1. New Revenues</b>		
a. Medi-Cal (FFP only)		
b. Other Revenue		
<b>2. Total Revenues</b>	\$0	\$0
<b>C. Non-Recurring Expenditures</b>		
<b>D. Total County Administration Funding Requirements</b>	\$0	\$153,590

**COUNTY CERTIFICATION**

I HEREBY CERTIFY under penalty of perjury that I am the official responsible for the administration of Community Mental Health Services in and for said County; that I have not violated any of the provisions of Section 5891 of the Welfare and Institution Code in that all identified funding requirements (in all MHSA program budgets and this administration budget) represent costs related to the expansion of mental health services since passage of the MHSA and do not represent supplanting of expenditures; that fiscal year 2004-05 funds required to be incurred on mental health services will be used in providing such services; and that to the best of my knowledge and belief this administration budget and all related program budgets in all respects are true, correct, and in accordance with the law.

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Local Mental Health Director or Designee

Executed at \_\_\_\_\_ <to be signed prior to submittal to DMH> \_\_\_\_\_, California

## CSS Program and Expenditure Budget Narrative for FY 2008-09

### Administration

The Department's FY 2008-09 County Budget is the basis for this CSS budget.

We anticipate that the Prudent Reserve (Exhibit 4) will be drawn from FY 2006-07 CSS funds in order to effectively utilize these monies prior to the end of FY 2008-09. Administrative and program costs (Exhibits 5a and 5b) would then be drawn on a 'first in, first out' basis, utilizing FY 2007-08 funds first.

#### A. Expenditures

1. **Personnel Expenditures** – Expenditures are based on current County Personnel Salary tables. Salary costs increased in FY08-09 to provide for annual steps and COLA allowances. Employee benefits are derived on a 30% rate for full- and half-time staff, and 18% for part-time staff.

**Clerical Support (1 position, 1.0 FTE, MHSA-funded)** – This expanded position will support the CSS Program by providing general clerical support to MHSA staff and monitoring activities at the Wellness Center.

**Janitor/Facility Maintenance (1 position, 0.5 FTE, MHSA-funded)** – This position will support the CSS Program by cleaning and maintaining our Wellness Center. This position will be available to help staff set up activities at the Wellness Center, provide regular cleaning, and perform general repairs at the facility to ensure a safe, comfortable environment for our clients and the community.

**Administrative Analyst (1 position, 0.25 FTE, MHSA-funded)** – This position supports the CSS Program by providing general administrative support to MHSA staff and clients, planning and conducting activities for the Wellness Center, and ensuring that services meet the principles of the MHSA.

2. **Operating Expenditures**

- a. Professional services – Estimated support costs for organizational contractor (ENKI), including reporting, travel, accounting functions, human resource functions, etc.
- b. Travel and Transportation – Amounts are based on mileage reimbursement rates for staff to use their personal vehicles in relation to MHSA programs.
- c. General Office Expenditures – Estimated cost for items such as office supplies and postage.
- d. Rent, Utilities, and Equipment - Estimated cost for rent expense, utilities, custodial service, and communication expenses.

- a. Other operating expenses – No expenses projected during this funding period.

**3. County Allocated Administration**

- a. Countywide Administration (A-87) – Amount of countywide administration (A-87) costs allocated to the CSS Program.
- b. Other Administration – No other county administrative expenses projected during this funding period.

**B. Revenues**

Medi-Cal revenues have not been estimated for Administration in this Fiscal Year.

**FY 2008/09 Mental Health Services Act Community Services and Supports Budget Worksheet-  
Approved Workplans**

County: Alpine Fiscal Year: 2008-09  
 Program Workplan # 1 Date: 12/16/2008  
 Program Workplan Name Alpine County CSS Program Page 1 of 1  
 Type of Funding 1. Full Service Partnership Months of Operation 12  
 Proposed Total Client Capacity of Program/Service: 51  
 Existing Client Capacity of Program/Service: \_\_\_\_\_ Prepared by: J. Guillot  
 Client Capacity of Program/Service Expanded through MHSA: 51 Telephone Number: \_\_\_\_\_

	Estimated FY 2007/08 Expenditures and Revenues	Estimated FY 2008/09 Expenditures and Revenues
<b>A. Expenditures</b>		
1. Client, Family Member and Caregiver Support Expenditures		
a. Housing		\$8,000
b. Other Supports		\$45,000
2. Personnel Expenditures		\$245,638
3. Operating Expenditures		\$82,541
4. Program Management		
5. Estimated Total Expenditures when service provider is not known		
6. Non-recurring expenditures		\$50,000
<b>7. Total Proposed Program Budget</b>	<b>\$0</b>	<b>\$431,179</b>
<b>B. Revenues</b>		
<b>1. Existing Revenues</b>		
<b>2. New Revenues</b>		
a. Medi-Cal (FFP only)		\$15,000
b. State General Funds		
c. Other Revenue		
d. Total New Revenue	\$0	\$15,000
<b>3. Total Revenues</b>	<b>\$0</b>	<b>\$15,000</b>
<b>C. Total Funding Requirements</b>	<b>\$0</b>	<b>\$416,179</b>

## CSS Program and Expenditure Budget Narrative for FY 2008-09

### Alpine MHA CSS Program – Children, TAY, Adults, and Older Adults

The Alpine MHA CSS Program consists of Full Service Partnerships, Systems Development services, and Outreach and Engagement activities for all age groups during FY 2008-09.

The Department's FY 2008-09 County Budget is the basis for this CSS budget.

We anticipate that the Prudent Reserve (Exhibit 4) will be drawn from FY 2006-07 CSS funds in order to effectively utilize these monies prior to the end of FY 2008-09. Administrative and program costs (Exhibits 5a and 5b) would then be drawn on a 'first in, first out' basis, utilizing FY 2007-08 funds first.

#### A. Expenditures

- 1. Client, Family Member and Caregiver Support Expenditures** – Expenditures identified in this category include funds for activities such as transitional housing, rent subsidies, housing vouchers, food, transportation/travel, childcare, education/training and flex funds for other essential client and family member expenditures.
- 3. Personnel Expenditures** – Expenditures are based on current County Personnel Salary tables. Base CSS salary and benefit costs increased in FY 08-09 to provide for annual steps, promotions, COLA allowances, and the expansion of our CSS positions. Employee benefits are derived on a 30% rate for full- and half-time staff, and 18% for part-time staff.

**MHA Coordinator/Clinician (1 position, 1.0 FTE, MHA-funded)** – This position will be a licensed clinician and will function in a lead role with the treatment and support staff at our proposed off-site center(s). The position will provide direct services and assure that all services (e.g., community, at the drop-in center(s), etc.) are delivered in a manner that meets the goals and vision of the MHA. This position will be the primary clinical position for the facilitation of group activities at the off-site center(s) and other direct clinical services. This position will work in close coordination with the Mental Health Director and other MH staff to assure that services delivered at the off-site center(s) are provided in a manner consistent with the proposed structure for this Program and that it adheres to the resiliency and recovery models.

**Mental Health Specialist (1 position, 1.0 FTE, MHA-funded)** – This new, non-clinical position will be responsible for conducting outreach and engagement activities, offering rehabilitation groups, and providing individual case management services. The Mental Health Specialist will enhance the delivery of recovery-oriented mental health services in the community and support positive outcomes for our clients. This individual will deliver services in the community, splitting time between the Wellness Center and other community locations, as appropriate.

**Case Manager (1 position, 1.0 FTE, MHSA-funded)** – This position functions as a Case Manager responsible for ensuring that mental health services delivered in the CSS Program are focused on individual needs, resulting in the development of skills necessary for living independently whenever feasible. The position is an advocate for clients and provide assistance to help individuals gain access to needed services and to obtain positive outcomes and maximize their potential. The Case Manager also helps the service system to be sensitive to, respectful of, and responsive to the mental health needs of clients and their families. The position advocates for recovery-based services and is responsive to requests for services, 24/7. This position promotes the delivery of culturally and linguistically competent services and helps engage diverse communities in services.

**Vehicle Driver (1 position, 0.50 FTE, MHSA-funded)** – This new position will be responsible for transporting MHSA clients to and from appointments, wellness center classes, and other activities. The driver will ensure that our clients receive a high-level of care in a timely manner.

**Consumer Advocate (1 position, 0.50 FTE, MHSA-funded)** – This position will be filled by a consumer or individual who can demonstrate an understanding of the issues that adults who experience severe emotional disorders encounter. Through his/her own personal experiences, the advocate will be familiar with community resources and know how to access them. This position will help clients navigate the system and provide for necessary community support systems to ensure successful benefit of these resources.

**Parent Partner (1 position, 0.25 FTE, MHSA-funded)** -This position serves as a Parent Partner and is a Consumer/Family Member. The position helps to create a welcoming environment and is dedicated to the provision of advocacy for families and their children involved in the MHSA program. The position ensures client and family engagement and support in the CSOC program MHSA expansion and helps families understand and obtain maximum benefit from services available to them. The position also assists service delivery systems to be sensitive to, respectful of and responsive to the mental health needs of CSOC enrolled clients and their families, and assists with a smooth and seamless bridge to transition age youth systems (TAY). This position is also assigned Personal Service Coordinator responsibility for access to the 24/7 system for clients and their families.

**Peer Mentors (2 positions, 0.25 FTE each, MHSA-funded)** – These positions will be filled by youth who have been consumers or can demonstrate an understanding of the issues that youth who experience severe emotional disorders encounter in their transition into adulthood. Through their own personal experiences, they will be familiar with community resources and know how to access them to help youth transition to adulthood. They will help youth navigate the system and provide linkages and necessary community support systems to ensure successful transitions.

#### **4. Operating Expenditures**

- a. Professional services – Estimated costs for a contract psychiatrist and an evaluation consultant.
- b. Translation and Interpreter services – No expenses projected during this funding period.
- c. Travel and Transportation – Expenditures include maintenance of MHSA vehicles, as well as mileage for reimbursement of staff vehicle use, as necessary.
- d. General Office Expenditures – Estimated cost for items such as office supplies and postage.
- e. Rent, Utilities, and Equipment – Estimated cost for the drop-in center lease on Tribal land and associated utilities, communications, etc.
- f. Medication and Medical Supports – No expenses projected during this funding period.
- g. Other operating expenses – Estimated non-recurring costs for telepsychiatry equipment, as well as to finish remodeling and furnishing the Wellness Center on tribal land. Recurring costs may include insurance, other fees, and maintaining art and therapeutic supplies. These funds will cover the miscellaneous expenses incurred during the implementation and maintenance of the CSS program and the Wellness Center.

#### **B. Revenues**

Revenues are based on FY 07/08 data, with projections annualized. The County intends to collect revenue when applicable through this program.