

**GLENN COUNTY  
HEALTH SERVICES AGENCY  
Mental Health Department**

Mental Health Services Act  
Annual Update  
Fiscal Year 2010/11

Submitted  
April 15, 2010

## Table of Contents

---

Exhibit A: County Summary Sheet.....	1
Exhibit B: County Certification .....	2
Exhibit C: Community Program Planning and Local Review Process.....	3
Exhibit C1: Implementation Progress Report on FY08/09 Activities .....	5
Exhibit D: Previously Approved Program Description – CSS .....	10
Exhibit D: Previously Approved Program Description – PEI .....	12
Exhibit D: Previously Approved Program Description – PEI .....	14
Exhibit E: MHSA Summary Funding Request – FY 2010/11.....	16
Exhibit E1: CSS Budget Summary – FY 2010/11.....	17
Exhibit E2: WET Budget Summary – FY 2010/11 .....	18
Exhibit E4: PEI Budget Summary – FY 2010/11 .....	19

COUNTY SUMMARY SHEET

This document is intended to be used by the County to provide a summary of the components included within this annual update. In addition, it serves to provide the County with a listing of the exhibits pertaining to each component.

<b>County:</b>		Glenn																			
		<i>Exhibits</i>																			
		<b>A</b>	<b>B</b>	<b>C</b>	<b>C1</b>	<b>D</b>	<b>D1*</b>	<b>E</b>	<b>E1</b>	<b>E2</b>	<b>E3</b>	<b>E4</b>	<b>E5</b>	<b>F**</b>	<b>F1**</b>	<b>F2**</b>	<b>F3**</b>	<b>F4**</b>	<b>F5**</b>	<b>G***</b>	<b>H****</b>
For each annual update/update:		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>													
<b>Component</b>	<b>Previously Approved</b>	<b>New</b>																			
<input checked="" type="checkbox"/> CSS	\$ 1,644,017	\$ -			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> WET	\$ -	\$ -			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/> CF	\$ -	\$ -					<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>					
<input type="checkbox"/> TN	\$ -	\$ -					<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>				
<input checked="" type="checkbox"/> PEI	\$ 195,700	\$ -			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>			
<input type="checkbox"/> INN	\$ -	\$ -				<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>		
<b>Total</b>	\$ 1,839,717	0																			
<b>Dates of 30-day public review comment period:</b>		<b>March 12 through April 12, 2010</b>																			
<b>Date of Public Hearing:</b>		<b>Monday, April 12, 2010</b>																			
<b>Date of submission of the Annual MHSA Revenue and Expenditure Report to DMH:</b>		<b>March 12, 2010</b>																			

\*Exhibit D1 is only required for program/project elimination.  
 \*\*Exhibit F - F5 is only required for new programs/projects.  
 \*\*\*Exhibit G is only required for assigning funds to the Local Prudent Reserve.  
 \*\*\*\*Exhibit H is only required for assigning funds to the MHSA Housing Program.

**COUNTY CERTIFICATION**

County: **Glenn**

<b>County Mental Health Director</b>	<b>Project Lead</b>
Name: Scott Gruendl	Name: Kathy Montero
Telephone Number: 530-934-6582	Telephone Number: 530-934-6582
E-mail: sgruendl@glenncountyhealth.net	E-mail: kmontero@glenncountyhealth.net
Mailing Address: 242 N. Villa, Willows, CA 95988	

I hereby certify that I am the official responsible for the administration of county mental health services in and for said county and that the County has complied with all pertinent regulations, laws and statutes for this annual update/update, including all requirements for the Workforce Education and Training component. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code section 5891 and Title 9 of the California Code of Regulations section 3410, Non-Supplant.

This annual update has been developed with the participation of stakeholders, in accordance with sections 3300, 3310, subdivision (d), and 3315, subdivision (a). The draft FY 2010/11 annual update was circulated for 30 days to stakeholders for review and comment and a public hearing was held by the local mental health board of commission. All input has been considered with adjustments made, as appropriate.

The County Mental Health Director approves all Capital Facilities and Technological Needs (CFTN) projects.

The County has complied with all requirements for the Workforce Education and Training component and the Capital Facilities segment of the CFTN component.

The costs of any Capital Facilities renovation projects in this annual update are reasonable and consistent with what a prudent buyer would incur.

The information provided for each work plan is true and correct.

All documents in the attached FY 2010/11 annual update/update are true and correct.

SCOTT GRUENDL  
Mental Health Director/Designee (PRINT)

  
Signature

4/14/10  
Date

**COMMUNITY PROGRAM PLANNING  
AND LOCAL REVIEW PROCESS**

County: **Glenn**  
Date: **03/12/10**

**Instructions:** Utilizing the following format please provide a brief description of the Community Program Planning and Local Review Processes that were conducted as part of this annual update/update per title 9 of the California Code of Regulations, sections 3300 and 3315. Counties may elect to attach the Mental Health Board meeting minutes in which the annual update was discussed if it provides additional information that augments the responses to these questions.

<b>Community Program Planning</b>
<p><b>1. Briefly describe the Community Program Planning (CPP) Process for development of the FY 2010/11 annual update. Include the methods used to obtain stakeholder input.</b></p> <p>The Community Program Planning (CPP) process for the development of the FY 2010/11 Annual Update builds upon the planning process that we utilized for the development of our original Three-Year Community Services and Supports (CSS) Plan and our original Prevention and Early Intervention (PEI) Plan. These planning processes were comprehensive and included the input of over 900 diverse stakeholders through focus groups and surveys. With this information, we were able to determine the unique needs of our community and develop an MHSA program that is well designed for our county. The overall goals of the CSS and PEI Plans are still valid and provide an excellent guide for maintaining our MHSA services in FY 2010/11.</p> <p>As this Annual Update simply maintains our original MHSA Plans, we did not conduct a new, formal stakeholder planning process. However, we routinely discuss and obtain input on the utilization of these funds with our key stakeholders through our monthly MHSA Executive Leadership Team (MELT) meetings, our MHSA monthly consumer meetings, and the monthly Mental Health, Alcohol and Drug Advisory Board. In addition, we engaged stakeholders throughout the development of this request. There are also a number of consumers, family members, and other stakeholders who provide ongoing input into our MHSA services and activities. All stakeholder groups and boards are in full support of this MHSA Annual Update and the strategy to maintain services as originally outlined in the CSS and PEI Plans.</p> <p>We have analyzed data on our Full Service Partnership (FSP) clients to ensure that clients are successfully achieving positive outcomes. Outcome and service utilization data is analyzed and reviewed by the MELT to monitor clients' progress over time. This data has helped us to understand service utilization and evaluate client progress, and has been instrumental in our planning process to continually improve services for our clients and families.</p> <p>The proposed Annual Update was developed and approved by the MELT after reviewing data on our current programs (including FSP data), analyzing community needs based on past stakeholder input, and determining the most effective way to further meet the needs of our unserved/ underserved populations. In addition, the MHSA Annual Update was shared with the Advisory Board, at staff meetings, and with the Children's Interagency Coordinating Council (CICC).</p>

**2. Identify the stakeholder entities involved in the Community Program Planning (CPP) Process.**

A number of different stakeholders were involved in the CPP process. Input was obtained from members of the MELT, which is comprised of MHSA staff, Consumer Advocate/Coaches, consumers, Health Services Agency Director and Deputy Directors, fiscal staff, Quality Improvement staff, and others involved in the delivery of MHSA services. The CPP also included input from child and adult staff meetings in mental health and substance abuse services, the multiple agencies involved with the Children's Interagency Coordinating Council, and the Mental Health, Alcohol and Drug Advisory Board.

**3. If eliminating a program/project, please include how the stakeholders were involved and had the opportunity to participate in the decision to eliminate the program/project.**

No MHSA programs or projects will be eliminated at this time.

**Local Review Process**

**4. Describe methods used to circulate, for the purpose of public comment, the annual update.**

This proposed MHSA Annual Update was posted for a 30-day public review and comment period from March 12, 2010 through April 12, 2010. An electronic copy was posted on the County website with an announcement of the public review and comment period, as well as the Public Hearing information. The website posting provided contact information to allow input on the Update in person, by phone, by mail, or through e-mail. A hard copy of the Annual Update was distributed to all members of the Mental Health Advisory Board, MHSA Executive Leadership Team, consumer groups, and staff. Copies of the Annual Update were placed at the clinics in Willows and Orland; at the Family Resource Center in Hamilton City; at Harmony House (the Adult Wellness Center); at the TAY Center; with partner agencies; and at the local library. The Annual Update was available to clients and family members at all of these sites and on the County website.

**5. Include substantive comments received during the stakeholder review and public hearing, responses to those comments, and a description of any substantive changes made to the proposed annual update/update that was circulated. The County should indicate if no substantive comments were received.**

A public hearing was held on Monday, April 12, 2010, from 10:00-11:00 a.m., in the Glenn County Board of Supervisors' Chamber (526 West Sycamore Street, 2nd Floor, Willows, CA).

We received very positive feedback from stakeholders on our 10/11 MHSA Annual Update. A community member questioned the text, "*There are a small number of births each year, with a small number of at-risk mothers*" (Exhibit C1.1). The individual wanted to know how we gathered this information. County staff explained that this information is collected by Public Health through referrals from hospitals and public vital statistics records. The individual suggested also outreaching to 2<sup>nd</sup> or 3<sup>rd</sup> time mothers who may be stressed.

No other substantive comments were made. No substantive changes were made to the posted Update.

**IMPLEMENTATION PROGRESS REPORT  
ON FY 08/09 ACTIVITIES**

County: **Glenn**  
Date: **03/12/10**

**Instructions:** Welfare and Institutions Code section 5848 specifies that DMH shall establish requirements for the content of the annual update and updates including reports on the achievement of performance outcomes for services. Provide an update on the overall progress of the County's implementation of the MHSA including CSS, PEI, and WET components during FY 2008/09.

**CSS, WET, and PEI**

**1. Briefly report on how the implementation of the MHSA is progressing: whether implementation activities are generally proceeding as described in the County's approved Plan, any key differences, and any major challenges.**

The implementation of our MHSA activities in FY 2008/09 was very successful. During this fiscal year, we combined the four separate work plans (Children, TAY, Adult, Older Adult) into one "MHSA CSS Comprehensive Service Plan." We expanded our Full Service Partnership (FSP) program from serving only Adults to including Transition Age Youth and Older Adults as FSP clients. (Note: We further expanded our FSP program in FY 2009/10 to include children.)

The goal of our TAY FSP program is to divert high-risk youth from juvenile hall and other out-of-home placements, including inpatient services, through intensive services, involvement of families and other support persons, and coordination with probation, the courts, and social services. For those youth who are already in juvenile hall or out-of-home placement, we work with families and provide them with the skills to successfully transition back into the home and community. Whenever possible, we utilize our TAY Team to prevent out-of-home placements, and/or return youth home and to the community as soon as possible.

The FSP program fully engages youth and families, provides 24/7 response, and has the availability of flexible funds to support youth's goals. FSP clients utilize our TAY Center in Orland, which provides youth with a safe, comfortable place to receive services and participate in age-appropriate activities.

We utilize four (4) Youth Peer Mentors (2.5 FTE) to help deliver age-appropriate, youth-focused services. Peer Mentors have experience with the mental health system and the circumstances which youth encounter in their transition into adulthood. Through their personal experiences, they are knowledgeable of community resources and how to access them to help with these transitions. Our Peer Mentors are intimately involved with our TAY FSP clients, their families, and community support systems, ensuring that the youth receive "whatever it takes" to attain their goals and achieve positive outcomes.

The Adult and Older Adult programs, including the FSP component, include the consumer-run, adult drop-in center, Harmony House. This program is located in a warm, welcoming house near downtown Orland. Harmony House allows adults and older adults to come together, participate in a number of different groups and classes, practice cooking skills in the fully equipped kitchen, and socialize in the living room and/or family room. This consumer-run program is designed to promote recovery and wellness for adults and older adults. It provides an opportunity for individuals to develop WRAP plans and receive comprehensive mental health services.

We also implemented our PEI and WET programs in late FY 2008/09. The PEI Plan developed two programs: the “Welcoming Families” and the “Welcoming Line” programs. The Welcoming Families program offers outreach and early intervention with mothers/families with newborns and infants. The program links services with Public Health, Child Protective Services, and Probation. By providing early support and linkage to services, high-risk mothers are able to develop positive parenting skills with their new babies.

The Welcoming Line is a “warm line” which is available to anyone in the community who has questions about mental health, needs linkage to other services, or needs a friendly voice to talk with. This “warm line” provides preventative services, responding to callers’ questions about services, and linking individuals to services. The Welcoming Line is located at our MHSA Adult Wellness Center, Harmony House, and is staffed by trained individuals who are Case Managers; one of these individuals is Spanish bilingual/bicultural. This project is designed to improve access to unserved and underserved populations by immediately connecting the call to an individual who is knowledgeable about resources, and is willing to listen to the caller and determine the need for services. The Welcoming Line is utilized by many different high-risk populations, including transition age youth, stressed individuals and family members; lesbian, gay, bisexual, transsexual, questioning, intersex, and two-spirit (LGBTQI2-S) individuals; and older adults. By offering immediate interactions and supportive responses to callers, we help prevent individuals from worsening symptoms of mental illness.

The WET Plan was approved on April 9, 2009. Initial implementation included planning activities to discuss how to implement the WET Plan components, including making an initial contact with Essential Learning and Consumer Pathways web-based programs and implementation strategies for developing internships. Full implementation of the WET Plan was completed in FY 2009/10.

With our MHSA programs, we continue to work to reduce ethnic disparities, outreaching to the Spanish-speaking community and the Native American population, as well as the lesbian, gay, bisexual, transgender, questioning, intersex, and two-spirit communities. We have also expanded our training efforts to enhance our staff’s understanding of consumer culture. Treatment is culturally and linguistically appropriate and delivered in the client’s community, when feasible.

Our biggest challenge to implementation in FY08/09 was identifying families to participate in our PEI Welcoming Families program. There are a small number of births each year, with a small number of at-risk mothers. Many of the births are to second and third time mothers who do not need any assistance with their infants. As a result, we are expanding our program to provide outreach to high risk families from Child Welfare, Probation, and other community agencies.

**2. Provide a brief narrative description of progress in providing services to unserved and underserved populations, with emphasis on reducing racial/ethnic service disparities.**

The CSS programs have provided the opportunity to outreach to persons who are unserved and underserved. We have been able to effectively outreach to the homeless community in our county, through the guidance of one of our consumers and his knowledge of this population. We have been able to offer services to some of these individuals and invite them to visit Harmony House. The Coaches and Case Managers at the Harmony House create a welcoming environment. In addition, the Case Managers answer the Welcoming Line and engage callers and provide information and support.



Our TAY Center offers a welcoming environment for youth who need a supportive, youth-friendly, safe place to hang out and receive services. This Center offers an alternative to delivering mental health services in the clinic and helps to ensure inclusion and non-discrimination. The TAY Center has also been a safe environment for youth who are LGBTQI2-S and providing advocacy and support for the youth at the local high school to help resolve issues.

Services for all clients, including the persons who have been identified as FSP, are culturally and linguistically competent, as well as offering services to persons who are visually and/or physically challenged. The race/ethnicity of persons served in the CSS, FSP, and PEI programs reflect the race/ethnicity of our county, with a number of our FSP clients from the Latino and/or Native American communities.

**3. Provide the following information on the number of individuals served:**

Age Group	CSS	PEI	WET	
	# of individuals	# of individuals (for universal prevention, use estimated #)*	Funding Category	# of individuals
Child and Youth	345	Not collected	Workforce Staff Support	
Transition Age Youth	411	Not collected	Training/Technical Assist.	2
Adult	563	Not collected	MH Career Pathway	
Older Adult	56	Not collected	Residency & Internship	
<b>Race/Ethnicity</b>			Financial Incentive	
White	452	83		
African/American	15		[ ] WET not implemented in 08/09	
Asian	20		*Limited PEI data is available for FY 08/09 due to our late start in delivering services.	
Pacific Islander				
Native	5			
Hispanic	179	6		
Multi	20			
Other	12			
Unknown/Not Reported	672			
<b>Other Cultural Groups</b>				
LGBTQ		Not collected		
Other		Not collected		
<b>Primary Language</b>				
English	388			
Spanish	45	5		
Vietnamese				
Cantonese				
Mandarin				
Tagalog				
Cambodian				
Hmong	2			
Russian				
Lao	5			
Farsi				
Arabic				
American Sign Language	1			
Other	1			
Unknown/Not Reported	545			

**PEI**

**4. Please provide the following information for each PEI Project:**

- a) The problems and needs addressed by the Project.**
- b) The type of services provided.**
- c) Any outcomes data, if available. (Optional)**
- d) The type and dollar amount of leveraged resources and/ or in-kind contributions (if applicable).**

**Project: Welcoming Families**

**a) Problems and needs addressed by the project:** As indicated through our planning process, the highest priority population for PEI funding was to promote healthy families by building upon the foundation of a Public Health model of service delivery. Survey results showed that individuals were interested in having services delivered in the community and to provide early screening, diagnosis, and treatment for mental illness (65%). Other priorities include children and youth in stressed families (87%), those whose parents have drug and alcohol problems (88%), and those who are abused or neglected (88%). These populations were a factor in the decision to develop a team to visit families with newborns. We are working closely with Public Health, Child Protective Services, and Probation to identify teen mothers, first time mothers, and other high-risk families who could benefit from this in-home prevention and early intervention service.

**b) Types of services provided:** The Welcoming Families Program receives referrals from the Visiting Public Health Nurse Program, and other child serving agencies, to support new mothers during the first year of their newborn's life. The Public Health Nurse Program is an effective program through which a Public Health Nurse visits all mothers with a newborn while in the hospital, or shortly after returning home. Following the home visit, the Nurse completes a health and mental health screening tool, which assesses the mother's attachment, bonding, and mother-infant behavior and interactions. This screening tool indicates when there is a need for linkage with the Mental Health Case Manager with the Welcoming Families Program. Once the referral is made, the Welcoming Families Case Manager will visit with the mother and newborn and observe parenting behaviors, assess for stressors in the home, and provide immediate support to the family.

Teen mothers are also referred to our MHSA Transition Age Youth (TAY) Program, which offers a Young Parents Forum. A teen dad's support group is also available to teen fathers at the TAY Center. The Young Parents Forum is offered once a month. Each group has topics that were developed by the young parents. Each group has a focus on a parenting topic and on a self-care topic for parents. We plan to develop a support community for young parents that will meet more often; however, in the past, we tried to hold a weekly meeting, but the busy young mothers indicated that it was too hard to attend every week. Women with newborns who have ongoing mental health needs (for example, post partum depression) are referred to our MHSA Wellness Center, Harmony House.

**c) Outcomes data:** The families who have been served by this program have reported that the services were helpful and supportive. These services helped to develop positive parenting skills and provided information on child development, managing infant behaviors (e.g., crying, sleeping), and how to promote healthy child development. The

parent also received support and guidance regarding time management, shopping, and budgeting.

- d) Leveraged resources:** For the PEI Welcoming Families Leveraged Resources, we used 1% of a Senior Public Health Nurse's time in providing orientation and training on the home visiting program. The Public Health Nurse also wrote up an orientation sheet and provided a mini in-service on post-partum depression and the assessment questionnaire used in the public health program. Total salaries and benefits were \$878.

### **Project: Welcoming Line**

- a) Problems and needs addressed by the project:** The development of the Welcoming Line has provided an excellent supportive service in our small, rural community. In the past, the only resource was the mental health crisis line. While this is an essential function of the mental health system, many persons in the community needed a more supportive way to reach out and talk with someone. The Welcoming Line provides that support line: taking the time to talk with people, linking them to services, and providing a resource to help address suicidal ideation behavior.
- b) Types of services provided:** The Welcoming Line provides a live answering service which offers a warm, welcoming response to all callers. This "warm line" provides preventative services, responding to callers' questions about services, and linking individuals to services, when appropriate. The Welcoming Line is located at our MHSA Adult Wellness Center, Harmony House, and is staffed by trained individuals who are case managers and who have a prior history with the mental health system; one of these individuals is Spanish bilingual/bicultural. This project is designed to improve access to unserved and underserved populations by immediately connecting the call to an individual who is knowledgeable about resources, and is willing to listen to the caller and determine the need for services. The Welcoming Line then links the caller to available services.
- c) Outcomes data:** In FY 2008/09, the first year of our Welcoming Line, we had 89 calls to the line. We received positive feedback from the persons calling the number and reported that they found the line helpful and supportive.
- d) Leveraged resources:** Leveraged resources for this program included 15% (\$14,703) of a Mental Health Coordinator to provide supervision, and 15% (\$10,624) of a Health Services Case Manager to cover program staff leave time.

**PREVIOUSLY APPROVED PROGRAM**

County: **Glenn**  
Program Number/Name: **MHSA CSS Comprehensive Service Plan**  
Date: **03/12/10**

Select one:  
 **CSS**  
 **WET**  
 **PEI**  
 **INN**

**CSS and WET**

**Previously Approved**

No.	Question	Yes	No							
1.	Is this an existing program with no changes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>If yes, answer question #5 and complete Exh.E1 or E2 accordingly; If no, answer question #2</b>						
2.	Is there a change in the service population to be served?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. F1; If no, answer question #3						
3.	Is there a change in services?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. F1; If no, answer question #4						
4.	Is there a change in funding amount for the existing program?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, answer question #4(a); If no, complete Exh. E1 or E2 accordingly						
a)	Is the change within ±15% of previously approved amount?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, answer question #5 and complete Exh. E1 or E2; If no, complete Exh. F1 and complete table below.						
		<table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th>FY 09/10 funding</th> <th>FY 10/11 funding</th> <th>Percent Change</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			FY 09/10 funding	FY 10/11 funding	Percent Change			
FY 09/10 funding	FY 10/11 funding	Percent Change								
5.	<b>For CSS programs:</b> Describe the services/strategies and target population to be served. This should include information about targeted age, gender, race/ethnicity and language spoken of the population to be served.									

The MHSA CSS Community Services program encompasses all ages [children (ages 0-17); transition age youth (ages 16-25); adults (ages 18-59); older adults (ages 60+)]; all genders; and all races/ethnicities. Bilingual Spanish services are available; other languages are accommodated through the use of interpreters, or the Universal Language Line if necessary. The CSS Program includes comprehensive assessment services; wellness and recovery action planning (WRAP); case management services; individual and group mental health services; crisis services; short-term hospitalizations; peer-led self-help/support groups; education and employment support; anti-stigma events; linkages to needed services; and housing support. Our consumer-run Adult Wellness Center (Harmony House) provides adults and older adults with necessary services and supports in a welcoming environment. In addition, our Transition Age Youth Center provides youth with a safe, comfortable place to receive services and participate in age-appropriate activities.

<b>Existing Programs to be Consolidated – *NOT APPLICABLE TO THIS ANNUAL UPDATE*</b>				
<b>No.</b>	<b>Question</b>	<b>Yes</b>	<b>No</b>	
1.	Is this a consolidation of two or more existing programs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, answer question #2; <b>If no, answer questions for existing program above</b>
2.	Will all populations of existing program continue to be served?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, answer question #3; If no, complete Exh. F1
3.	Will all services from existing program continue to be offered?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, answer question #4 If no, complete Exh. F1
4.	Is the funding amount $\pm$ 15% of the sum of the previously approved amounts?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, answer question #5 and complete Exh. E1 or E2 accordingly If no, complete Exh. F1
5.	Description of Previously Approved Programs to be consolidated. Include in your description: a) The names of Previously Approved programs to be consolidated, b) Describe the target population to be served and the services/strategies to be provided (include targeted age, gender, race/ethnicity, and language spoken by the population to be served)., and c) Provide the rationale for consolidation.			

**PREVIOUSLY APPROVED PROGRAM**

County: **Glenn**  
Program Number/Name: **Welcoming Families**  
Date: **03/12/10**

Select one:  
 CSS  
 WET  
 PEI  
 INN

Prevention and Early Intervention				
No.	Question	Yes	No	
1.	Is this an existing program with no changes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. E4; If no, answer question #2
2.	Is there a change in the Priority Population or the Community Mental Health Needs?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, completed Exh. F4; If no, answer question #3
3.	Is the current funding requested greater than 15% of the previously approved amount?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. F4; If no, answer question #4
4.	Is the current funding requested greater than 35% less of the previously approved amount?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. F4; If no, answer questions 5, 5a, and 5b
5.	Describe the proposed changes to the Previously Approved Program and the rationale for those changes.			
5a.	If the total number of Individuals to be served annually is different than previously reported please provide revised estimates  Total Individuals: _____ Total Families: _____			
5b.	If the total number of clients by type of prevention annually is different than previously reported please provide revised estimates:	<b>Universal Prevention</b>	<b>Selective/Indicated Prevention</b>	<b>Early Intervention</b>
	<b>Total Individuals:</b>			
	<b>Families: Total</b>			

Existing Programs to be Consolidated				
No.	Question	Yes	No	
1.	Is this a consolidation of two or more existing programs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, answer question #2; If no, answer questions for existing program above
2.	Is there a change in the Priority Population or the Community Mental Health Needs?	<input type="checkbox"/>	<input type="checkbox"/>	If no, answer question #3; If yes, complete Exh. F4

3.	Will the consolidated programs continue to serve the same estimated number of individuals?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, answer question #4; If no, complete Exh. F4
4.	Description of Previously Approved Programs to be consolidated. Include in your description: a) The names of Previously Approved programs to be consolidated, b) How the Previously approved programs will be consolidated; and c) Provide the rationale for consolidation			

**PREVIOUSLY APPROVED PROGRAM**

County: **Glenn**  
 Program Number/Name: **Welcoming Line**  
 Date: **03/12/10**

Select one:  
 CSS  
 WET  
 PEI  
 INN

Prevention and Early Intervention				
No.	Question	Yes	No	
1.	Is this an existing program with no changes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. E4; If no, answer question #2
2.	Is there a change in the Priority Population or the Community Mental Health Needs?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, completed Exh. F4; If no, answer question #3
3.	Is the current funding requested greater than 15% of the previously approved amount?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. F4; If no, answer question #4
4.	Is the current funding requested greater than 35% less of the previously approved amount?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, complete Exh. F4; If no, answer questions 5, 5a, and 5b
5.	Describe the proposed changes to the Previously Approved Program and the rationale for those changes.			
5a.	If the total number of Individuals to be served annually is different than previously reported please provide revised estimates  Total Individuals: _____ Total Families: _____			
5b.	If the total number of clients by type of prevention annually is different than previously reported please provide revised estimates:	<b>Universal Prevention</b>	<b>Selective/Indicated Prevention</b>	<b>Early Intervention</b>
	<b>Total Individuals:</b>			
	<b>Families: Total</b>			

Existing Programs to be Consolidated				
No.	Question	Yes	No	
1.	Is this a consolidation of two or more existing programs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, answer question #2; <b>If no, answer questions for existing program above</b>
2.	Is there a change in the Priority Population or the Community Mental Health Needs?	<input type="checkbox"/>	<input type="checkbox"/>	If no, answer question #3; If yes, complete Exh. F4



3.	Will the consolidated programs continue to serve the same estimated number of individuals?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, answer question #4; If no, complete Exh. F4
4.	Description of Previously Approved Programs to be consolidated. Include in your description: d) The names of Previously Approved programs to be consolidated, e) How the Previously approved programs will be consolidated; and f) Provide the rationale for consolidation			

County: Glenn

Date: 2/22/2010

	MHSA Funding					
	CSS	WET	CFTN	PEI	INN	Local Prudent Reserve
<b>A. FY 2010/11 Planning Estimates</b>						
1. Published Planning Estimate	\$1,379,600			\$168,600	\$185,300	
2. Transfers	\$0	\$0	\$0			
3. Adjusted Planning Estimates	\$1,379,600					
<b>B. FY 2010/11 Funding Request</b>						
1. Requested Funding in FY 2010/11	\$1,644,017	\$0	\$0	\$195,700	\$0	
2. Requested Funding for CPP	\$0			\$0	\$0	
3. Net Available Unexpended Funds						
a. Unexpended FY 06/07 Funds		\$87,777				
b. Unexpended FY 2007/08 Funds <sup>a/</sup>	\$0	\$0	\$0			
c. Unexpended FY 2008/09 Funds	\$642,967		\$0	\$151,315	\$0	
d. Adjustment for FY 2009/2010	\$642,967	\$87,777	\$0	\$151,315	\$0	
e. Total Net Available Unexpended Funds	\$0	\$0	\$0	\$0	\$0	
<b>4. Total FY 2010/11 Funding Request</b>	<b>\$1,644,017</b>	<b>\$0</b>	<b>\$0</b>	<b>\$195,700</b>	<b>\$0</b>	
<b>C. Funds Requested for FY 2010/11</b>						
<b>1. Previously Approved Programs/Projects</b>						
a. Unapproved FY 06/07 Planning Estimates		\$0				
b. Unapproved FY 07/08 Planning Estimates <sup>a/</sup>	\$0	\$0				
c. Unapproved FY 08/09 Planning Estimates	\$0			\$0	\$0	
d. Unapproved FY 09/10 Planning Estimates	\$7			\$27,100	\$0	
e. Unapproved FY10/11 Planning Estimates	\$1,379,600			\$168,600	\$0	
<b>Sub-total</b>	<b>\$1,379,607</b>	<b>\$0</b>		<b>\$195,700</b>	<b>\$0</b>	
f. Local Prudent Reserve	\$264,410			\$0		
<b>2. New Programs/Projects</b>						
a. Unapproved FY 06/07 Planning Estimates		\$0				
b. Unapproved FY 07/08 Planning Estimates <sup>a/</sup>	\$0	\$0	\$0			
c. Unapproved FY 08/09 Planning Estimates	\$0	\$0	\$0	\$0	\$0	
d. Unapproved FY 09/10 Planning Estimates	\$0			\$0	\$0	
e. Unapproved FY10/11 Planning Estimates	\$0			\$0	\$0	
<b>Sub-total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
f. Local Prudent Reserve	\$0			\$0		
<b>3. FY 2010/11 Total Allocation<sup>b/</sup></b>	<b>\$1,644,017</b>	<b>\$0</b>	<b>\$0</b>	<b>\$195,700</b>	<b>\$0</b>	

a/Only applies to CSS augmentation planning estimates released pursuant to DMH Info. Notice 07-21, as the FY 07/08 Planning Estimate for CSS is scheduled for reversion on June 30, 2010.

b/ Must equal line B.4. for each component.

CSS BUDGET SUMMARY

County: Glenn

Date: 2/22/2010

CSS Programs			FY 10/11 Requested MHA Funding	Estimated MHA Funds by Service Category				Estimated MHA Funds by Age Group			
No.	Name	Full Service Partnerships (FSP)		General System Development	Outreach and Engagement	MHA Housing Program	Children and Youth	Transition Age Youth	Adult	Older Adult	
<b>Previously Approved Programs</b>											
1.	1	MHA CSS Comprehensive Services Plan	\$1,299,618	\$662,805	\$509,450	\$127,363	\$0	\$376,889	\$337,901	\$480,859	\$103,969
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 <sup>a/</sup>		\$1,299,618	\$662,805	\$509,450	\$127,363	\$0	\$376,889	\$337,901	\$480,859	\$103,969
17.	Plus up to 15% County Administration		\$194,943								
18.	Plus up to 10% Operating Reserve		\$149,456								
19.	Subtotal: Previously Approved Programs/County Admin./Operating Reserve		\$1,644,017								
<b>New Programs</b>											
1.			\$0								
2.			\$0								
3.			\$0								
4.			\$0								
5.			\$0								
6.	Subtotal: Programs <sup>a/</sup>		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
7.	Plus up to 15% County Administration										
8.	Plus up to 10% Operating Reserve										
9.	Subtotal: New Programs/County Admin./Operating Reserve		\$0								
10.	<b>Total MHA Funds Requested for CSS</b>		\$1,644,017								

a/ Majority of funds must be directed towards FSPs (Cal. Code Regs., tit. 9, § 3620, subd. (c)). Percent of Funds directed towards FSPs=

51.00%

**Additional funding sources for FSP requirement:**

County must provide the majority of MHA funding toward Full Service Partnerships (FSPs). If not, the county must list what additional funding sources and amount to be used for FSPs. In addition, the funding amounts must match the Annual Cost Report. Refer to DMH FAQs at [http://www.dmh.ca.gov/Prop\\_63/MHA/Community\\_Services\\_and\\_Supports/docs/FSP\\_FAQs\\_04-17-09.pdf](http://www.dmh.ca.gov/Prop_63/MHA/Community_Services_and_Supports/docs/FSP_FAQs_04-17-09.pdf)

**CSS Majority of Funding to FSPs**

**Other Funding Sources**

	CSS	State General Fund	Other State Funds	Medi-Cal FFP	Medicare	Other Federal Funds	Re-alignment	County Funds	Other Funds	Total	Total %
<b>Total Mental Health Expenditures:</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	51%

County: Glenn

Date: 2/22/2010

Workforce Education and Training			FY 10/11 Requested MHSA Funding	Estimated MHSA Funds by Category				
No.	Name	Workforce Staffing Support		Training and Technical Assistance	Mental Health Career Pathway	Residency and Internship	Financial Incentive	
<b>Previously Approved Programs</b>								
1.	1	WET Coordination	\$0					
2.	2	Essential Learning	\$0					
3.	3	Consumer Pathways	\$0					
4.	4	Internships	\$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: Previously Approved Programs		\$0	\$0	\$0	\$0	\$0	
17.	Plus up to 15% County Administration							
18.	Plus up to 10% Operating Reserve							
19.	Subtotal: Previously Approved Programs/County Admin./Operating Reserve		\$0					
<b>New Programs</b>								
1.			\$0					
2.			\$0					
3.			\$0					
4.			\$0					
5.			\$0					
6.	Subtotal: WET New Programs		\$0	\$0	\$0	\$0	\$0	
7.	Plus up to 15% County Administration							
8.	Plus up to 10% Operating Reserve							
9.	Subtotal: New Programs/County Admin./Operating Reserve		\$0					
10.	<b>Total MHSA Funds Requested</b>		\$0					

**Note:** Previously Approved programs to be expanded, reduced, eliminated and consolidated are considered New.

PEI BUDGET SUMMARY

County: Glenn

Date: 2/22/2010

PEI Programs			FY 10/11 Requested MHSA Funding	Estimated MHSA Funds by Type of			Estimated MHSA Funds by Age Group			
No.	Name	Universal Prevention		Selected/ Indicated Prevention	Early Intervention	Children and Youth	Transition Age Youth	Adult	Older Adult	
<b>Previously Approved Programs</b>										
1.	1 Welcoming Families	\$77,350	\$54,145		\$23,205	\$77,350				
2.	2 Warm Line	\$77,350	\$38,675		\$38,675	\$4,641	\$15,470	\$46,410	\$10,829	
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	\$154,700	\$92,820	\$0	\$61,880	\$81,991	\$15,470	\$46,410	\$10,829	
17.	Plus up to 15% County Administration	\$23,205								
18.	Plus up to 10% Operating Reserve	\$17,795								
19.	Subtotal: Previously Approved Programs/County Admin./Operating Reserve	\$195,700								
<b>New Programs</b>										
1.		\$0								
2.		\$0								
3.		\$0								
4.		\$0								
5.		\$0								
6.	Subtotal: Programs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
7.	Plus up to 15% County Administration									
8.	Plus up to 10% Operating Reserve									
9.	Subtotal: New Programs/County Admin./Operating Reserve	\$0								
10.	<b>Total MHSA Funds Requested for PEI</b>	\$195,700								

Note: Previously Approved Programs that propose changes to Key Community Health Needs, Priority Populations, and/or funding as described in the Information Notice are considered New.