

Board of Directors Meeting

AGENDA

August 12, 2010

2:45 p.m. – 5:30 p.m.



Meeting Location:

Doubletree Hotel

2001 Point West Way

Sacramento, CA 95815

(916) 929-8855

California Mental Health Service Authority
(CalMHSA)

Board of Directors Meeting

Agenda

Thursday, August 12, 2010

2:45 p.m. – 5:30 p.m.

Doubletree Hotel
2001 Point West Way
Sacramento, CA 95815
(916) 929-8855

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 (telephone) or (916) 859-4805 (facsimile). 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, Suite 200, Rancho Cordova, CA, 95670, during normal business hours.

1. CALL TO ORDER

2. ROLL CALL AND INTRODUCTIONS

3. PUBLIC COMMENTS

A. Public Comments Non-Agenda Items

This time is reserved for members of the public to address the Board relative to matters of 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. The Board may also limit public comment time regarding agenda items, if necessary, due to a lengthy agenda.

B. Stakeholder Non-Agenda Items

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.

C. Instructions for Public Comment and Stakeholder Input - Agenda Items

The Board welcomes and encourages public participation in its meetings. This time is reserved for members of the public (including Stakeholders) to address the Board concerning matters on the Agenda. Comments will be limited to five minutes per person and twenty minutes total.

For Agenda items, public comment will be invited at the time those items are addressed. When it appears there are several members of the public wishing to address the Board on a specific item, at the outset of the item, the Board President may announce the maximum amount of time that will be allowed for presentation of testimony on that item.

4. BOARD OF DIRECTORS STUDY SESSION

- A. Closed Session - Compliance with the Brown Act
Recommendation: For discussion and/or action should action be deemed appropriate.

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5. APPROVAL OF AGENDA AS POSTED (OR AMENDED)

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- 6. CONSENT CALENDAR** - If the Board would like to discuss any item listed, it may be pulled from the Consent Calendar
- A. Minutes from the July 15, 2010, Board of Director's Meeting 15
 - B. Memorandum of Understanding (MOU) Between CalMHSA and Non-Member Counties
Recommendation: Staff recommends the Board formally consider approval of the Consent Calendar.
- 7. NEW MEMBER OUTREACH/DEVELOPMENT**
- A. CalMHSA New County Membership Application(s) 41
Recommendation: Approve membership to CalMHSA for applying Counties.
 - B. Regional Representatives – Membership Development and Member Support 45
Recommendation: No action required. Information only.
 - C. CalMHSA Membership and PEI Assignment Status 48
Recommendation: No action required. Information only.
- 8. ADMINISTRATIVE MATTERS**
- A. CalMHSA Vision and Purpose Statements 52
Recommendation: For discussion and/or action should action be deemed appropriate.
 - B. Program Participation Agreement 56
Recommendation: For discussion only.
- 9. PROGRAM MATTERS**
- A. Report from CalMHSA Program Director – Edward Walker 62
Recommendation: Approval of the proposed ad hoc committee recommendations regarding stakeholder input and implementation plan.
 - B. Technical Assistance and Capacity Building 68
Recommendation: Provide direction to Staff and California Institute for Mental Health (CiMH) regarding discussion points.

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- C. Information Notice 08-37 – Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) Funds for Training, Technical Assistance, and Capacity Building Statewide Projects
- Recommended: Provide direction to Staff regarding discussion points above.**

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10. NEW BUSINESS

- A. General Discussion Regarding any New Business Topics for Future Meetings

11. CalMHSA – GENERAL DISCUSSION

- A. Report from CalMHSA Executive Director – John Chaquica
- Recommendation: For discussion and/or action should action be deemed appropriate.**

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

- A. Board
- B. Staff

13. ADJOURNMENT

Notice: The next Board of Directors Meeting is scheduled for Friday, September 10, 2010 from 8:30 am - 12 noon at the California Institute for Mental Health (CiMH), 2125 19th Street, 2nd Floor, Sacramento, CA 95818.

BOARD OF DIRECTORS STUDY SESSION
Agenda Item 4

SUBJECT: Closed Sessions – Compliance with the Brown Act

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 counsel for CalMHSA, is conducting a series of short presentations to educate the Board on the salient points of the Brown Act.

Mr. Alliston will lead today's topic, which will be a study session on the circumstances under which the Brown Act allows for closed sessions. Topics Mr. Alliston has previously covered include:

- Rules for Conducting Meetings and Taking Action
- How to Define a Legislative Body
- Teleconference Capabilities and Compliance with the Brown Act
- Agendas, Notices, and Public Participation

RECOMMENDATION:

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

REFERENCE MATERIALS ATTACHED:

- California League of Cities IV – Chapter 5: Closed Sessions

CHAPTER 5:

CLOSED SESSIONS



The Brown Act begins with a strong statement in favor of open meetings; private discussions among a majority of a legislative body are prohibited, unless expressly authorized under the Brown Act. It is not enough that a subject is sensitive, embarrassing, or controversial. Without specific authority in the Brown Act for a closed session, a matter must be discussed in public. As an example, a board of police commissioners cannot generally meet in closed session, even though some matters are sensitive and the commission considers their disclosure contrary to the public interest.¹

Practice Tip:

Meetings are either open or closed – there is no “in between.”

Meetings of a legislative body are either fully open or fully closed; there is nothing in between. Closed sessions may involve only the members of the legislative body and only agency counsel, management and support staff, and consultants necessary for consideration of the matter that is the subject of closed session. Individuals who do not have an official role in advising the legislative body on closed session subject matters must be excluded from closed session discussions.²

- Q.** May the lawyer for someone suing the agency attend a closed session in order to explain to the legislative body why it should accept a settlement offer?
- A.** *No, attendance in closed sessions is reserved exclusively to the agency’s advisors.*

In general, the most common purpose of a closed session is to avoid revealing confidential information that may, in specified circumstances, prejudice the legal or negotiating position of the agency or compromise the privacy interests of employees. Closed sessions should be conducted keeping those narrow purposes in mind.

In this chapter, the grounds for convening a closed session are called “exceptions,” because they are exceptions to the general rule that meetings must be conducted openly. In some circumstances, none of the closed session exceptions apply to an issue or information the legislative body wishes to discuss privately. In these cases, it is not proper to convene a closed session, even to protect confidential information. For example, the Brown Act does not authorize closed sessions for general contract negotiations.

■ AGENDAS AND REPORTS

Closed session items must be briefly described on the posted agenda and the description must state the specific statutory exemption. An item that appears on the open meeting portion of the agenda may not be taken into closed session until it has been properly agendized as a closed session or unless it is properly added as a closed session item by a two-thirds vote of the body after making the appropriate urgency findings.

The Brown Act supplies a series of fill-in-the-blank sample, agenda descriptions for various types of authorized closed sessions, which provide a “safe harbor” from legal attacks. These sample agenda descriptions cover license and permit determinations, real property negotiations, existing or anticipated litigation, liability claims, threats to security, public employee appointments, evaluations and discipline, labor negotiations, multi-jurisdictional drug cases, hospital boards of directors, and medical quality assurance committees.³

If the legislative body intends to convene in closed session, it must include the section of the Brown Act authorizing the closed session in advance on the agenda and it must make a public announcement prior to the closed session discussion. In most cases, the announcement may simply be a reference to the agenda item.⁴

Following a closed session the legislative body must provide an oral or written report on certain actions taken and the vote of every elected member present. The timing and content of the report varies according to the reason for the closed session.⁵ The announcements may be made at the site of the closed session, so long as the public is allowed to be present to hear them.

If there is a standing or written request for documentation, any copies of contracts, settlement agreements, or other documents finally approved or adopted in closed session must be provided to the requestor(s) after the closed session, if final approval of such documents does not rest with any other party to the contract or settlement. If substantive amendments to a contract or settlement agreement approved by all parties requires retyping, such documents may be held until retyping is completed during normal business hours, but the substance of the changes must be summarized for any person inquiring about them.⁶

The Brown Act does not require minutes, including minutes of closed session. A confidential “minute book” may be kept to record actions taken at closed sessions.⁷ If one is kept, it must be made available to members of the legislative body, provided that the member asking to review minutes of a particular meeting was not disqualified from attending the meeting due to a conflict of interest.⁸ A court may order the disclosure of minutes books for the court’s review if a lawsuit makes sufficient claims of an open meeting violation.

Practice Tip:

Some problems over closed sessions arise because secrecy itself breeds distrust. The Brown Act does not require closed sessions and legislative bodies may do well to resist the tendency to call a closed session simply because it may be permitted. A better practice is to go into closed session only when necessary.

Practice Tip:

Give close attention to closed session agenda descriptions. Using the wrong label can lead to invalidation of an action taken in closed session.

■ LITIGATION

There is an attorney/client relationship, and legal counsel may use it for privileged written and verbal communications—outside of meetings—to members of the legislative body. But protection of the attorney/client privilege cannot by itself be the reason for a closed session.⁹

The Brown Act expressly authorizes closed sessions to discuss what is considered litigation. The rules that apply to holding a litigation closed session involve complex, technical definitions and procedures. The essential thing to know is that a closed session can be held by the body to confer with, or receive advice from, its legal counsel when open discussion would prejudice the position of the local agency in litigation in which the agency is a party.¹⁰ The Attorney General believes that if the agency's attorney is not a participant, a litigation closed session cannot be held.¹¹ In any event, local agency officials should always consult the agency's attorney before placing this type of closed session on the agenda, in order to be certain that it is being done properly.

Litigation that may be discussed in closed session includes the following three types of matters:

Existing litigation

Existing litigation includes any adjudicatory proceedings before a court, administrative body exercising its adjudicatory authority, hearing officer, or arbitrator. The clearest situation in which a closed session is authorized is when the local agency meets with its legal counsel to discuss a pending matter that has

- Q.** May the legislative body agree to settle a lawsuit in a properly-noticed closed session, without placing the settlement agreement on an open session agenda for public approval?
- A.** *Yes, but the settlement agreement is a public document and must be disclosed on request. Furthermore, a settlement agreement cannot commit the agency to matters that are required to have public hearings.*

been filed in a court or with an administrative agency and names the local agency as a party. The legislative body may meet under these circumstances to receive updates on the case from attorneys, participate in developing strategy as the case develops, or to consider alternatives for resolution of the case. Generally an agreement to settle litigation may be approved in closed session. However, an agreement to settle litigation that requires actions that are subject to public hearings cannot be approved in closed session.¹²

Threatened litigation against the local agency

Closed sessions are authorized for legal counsel to inform the legislative body of specific facts and circumstances that suggest that the local agency has significant exposure to litigation. The Brown Act lists six separate categories of such facts and circumstances.¹³ The legislative body may also meet under this exception to determine whether a closed session is authorized based on information provided by legal counsel or staff.

Initiation of litigation by the local agency

A closed session may be held under the pending litigation exception when the legislative body seeks legal advice on whether to protect the agency's rights and interests by initiating litigation.

In certain cases, the circumstances and facts justifying the closed session must be publicly noticed on the agenda or announced at an open meeting. Before holding a closed session under the pending litigation exception, the legislative body must publicly state which of the three basic situations apply. It may do so simply by making a reference to the posted agenda.

Practice Tip:

Protection of the attorney/client privilege cannot by itself be the reason for a closed session.

Certain actions must be reported in open session at the same meeting following the closed session. Other actions, as where final approval rests with another party or the court, may be announced when they become final and upon inquiry of any person. Each agency attorney should be aware of and should make other disclosures that may be required in specific instances.

■ REAL ESTATE NEGOTIATIONS

A legislative body may meet in closed session with its negotiator to discuss the purchase, sale, exchange,

Q. May other terms of a real estate transaction, aside from price and terms of payment, be addressed in closed session?

A. *No. However, there are differing opinions over the scope of the phrase “price and terms of payment” in connection with real estate closed sessions. Many agency attorneys believe that any term that directly affects the economic value of the transaction falls within the ambit of “price and terms of payment.” Others take a narrower, more literal view of the phrase.*

or lease of real property by or for the local agency. A “lease” includes a lease renewal or renegotiation. The purpose is to grant authority to the legislative body’s negotiator on price and terms of payment.¹⁴ Caution should be exercised to limit discussion to price and terms of payment without straying to other related issues such as site design, architecture, or other aspects of the project for which the transaction is contemplated.¹⁵

The agency’s negotiator may be a member of the legislative body itself. Prior to the closed session, or on the agenda, the legislative body must identify its negotiator, the real property that the negotiations may concern and the names of the persons with whom its negotiator may negotiate.¹⁶

After real estate negotiations are concluded, the approval of the agreement and the substance of the agreement must be reported. If its own approval makes the agreement final, the body must report in open session at the public meeting during which the closed session is held. If final approval rests with another party, the local agency must report the approval as soon as informed of it. Once final, the substance of the agreement must be disclosed to anyone who inquires.

“Our population is exploding, and we have to think about new school sites,” said Board Member Baker.

“Not only that,” interjected Board Member Charles, “we need to get rid of a couple of our older facilities.”

“Well, obviously the place to do that is in a closed session,” said Board Member Doe. “Otherwise we’re going to set off land speculation. And if we even mention closing a school, parents are going to be in an uproar.”

A closed session to discuss potential sites is not authorized by the Brown Act. The exception is limited to meeting with its negotiator over specific sites—which must be identified at an open and public meeting.





■ PUBLIC EMPLOYMENT

The Brown Act authorizes a closed session “to consider the appointment, employment, evaluation of performance, discipline, or dismissal of a public employee or to hear complaints or charges brought against the employee.”¹⁷ The purpose of this exception – commonly referred to as the “personnel exception” – is to avoid undue publicity or embarrassment for an employee or applicant for employment and to allow full and candid discussion by the legislative body; thus, it is restricted to discussing individuals, not general personnel policies.¹⁸ The body must possess the power to appoint, evaluate, or dismiss the employee to hold a closed session under this exception.¹⁹ That authority may be delegated to a subsidiary appointed body.²⁰

An employee must be given at least 24 hours notice of any closed session convened to hear specific complaints or charges against him or her. This occurs when the legislative body is reviewing evidence, which could include live testimony, and adjudicating conflicting testimony offered as evidence. The employee has the right to have the specific complaints and charges discussed in a public session rather than closed session. If the employee is not given notice, any disciplinary action is null and void.²¹

However, an employee is not entitled to notice and a hearing where the purpose of the closed session is to consider a performance evaluation. The Attorney General and the courts have determined that personnel

- Q.** Must 24 hours’ notice be given to an employee whose negative performance evaluation is to be considered by the legislative body in closed session?
- A.** *No, the notice is reserved for situations where the body is to hear complaints and charges from witnesses.*

Practice Tip:

Discussions of who to appoint to an advisory body and whether or not to censure a fellow member of the legislative body must be held in the open.

performance evaluations do not constitute complaints and charges, which are more akin to accusations made against a person.²²

Correct labeling of the closed session on the agenda is critical. A closed session agenda that identified discussion of an employment contract was not sufficient to allow dismissal of an employee.²³ An incorrect agenda description can result in invalidation of an action and much embarrassment.

For purposes of the personnel exception, “employee” specifically includes an officer or an independent contractor who functions as an officer or an employee. Examples of the former include a city manager, district general manager or superintendent. An example of the latter is a legal counsel or engineer hired on contract to act as local agency attorney or chief engineer.

Elected officials, appointees to the governing body or subsidiary bodies, and independent contractors other than those discussed above are not employees for purposes of the personnel exception.²⁴ Action on individuals who are not “employees” must also be public—including discussing and voting on appointees to committees, or debating the merits of independent contractors, or considering a complaint against a member of the legislative body itself.

The personnel exception specifically prohibits discussion or action on proposed compensation in closed session, except for a disciplinary reduction in pay. Among other things, that means there can be no personnel closed sessions on a salary change (other than a disciplinary reduction) between any unrepresented individual and the legislative body. However, a legislative body may address the compensation of an unrepresented individual, such as a city manager, in a closed session as part of a labor negotiation (discussed later in this chapter), yet another example of the importance of using correct agenda descriptions.

Reclassification of a job must be public, but an employee's ability to fill that job may be considered in closed session. Any closed session action to appoint, employ, dismiss, accept the resignation of, or otherwise affect the employment status of a public employee must be reported at the public meeting during which the closed session is held. That report must identify the title of the position, but not the names of all persons considered for an employment position.²⁵ However, a report on a dismissal or non-renewal of an employment contract must be deferred until administrative remedies, if any, are exhausted.²⁶

"I have some important news to announce," said Mayor Jones. "We've decided to terminate the contract of the city manager, effective immediately. The council has met in closed session and we've negotiated six months' severance pay."

"Unfortunately, that has some serious budget consequences, so we've had to delay phase two of the East Area Project."

This may be an improper use of the personnel closed session if the Council agenda described the item as the city manager's evaluation. In addition, other than labor negotiations, any action on individual compensation must be taken in open session. Caution should be exercised to not discuss in closed session issues, such as budget impacts in this hypothetical, beyond the scope of the posted closed session notice.

Q. The school board is meeting in closed session to evaluate the superintendent and to consider giving her a pay raise. May the superintendent attend the closed session?

A. *The superintendent may attend the portion of the closed session devoted to her evaluation, but may not be present during discussion of her pay raise. Discussion of the superintendent's compensation in closed session is limited to giving direction to the school board's negotiator. Also, the clerk should be careful to notice the closed session on the agenda as both an evaluation and a labor negotiation.*

■ LABOR NEGOTIATIONS

The Brown Act allows closed sessions for some aspects of labor negotiations. Different provisions (discussed below) apply to school and community college districts.

A legislative body may meet in closed session to instruct its bargaining representatives, which may be one or more of its members,²⁷ on employee salaries and fringe benefits for both union and non-union employees. For represented employees, it may also consider working conditions that by law require negotiation. These sessions may take place before or during negotiations with employee representatives. Prior to the closed session, the legislative body must hold an open and public session in which it identifies its designated representatives.

Practice Tip:

The personnel exception specifically prohibits discussion or action on proposed compensation in closed session, except for a disciplinary reduction in pay.

Practice Tip:

Prior to the closed session, the legislative body must hold an open and public session in which it identifies its designated representatives.

During its discussions with representatives on salaries and fringe benefits, the legislative body may also discuss available funds and funding priorities, but only to instruct its representative. The body may also meet in closed session with a conciliator who has intervened in negotiations.²⁸

The approval of an agreement concluding labor negotiations with represented employees must be reported after the agreement is final and has been accepted or ratified by the other party. The report must identify the item approved and the other party or parties to the negotiation.²⁹ The labor sessions specifically cannot include final action on proposed compensation of one or more unrepresented employees. For purposes of this prohibition, an “employee” includes an officer or an independent contractor who functions as an officer or an employee. Independent contractors who do not serve in the capacity of an officer or employee are not covered by this closed session exception.

■ **LABOR NEGOTIATIONS—SCHOOL AND COMMUNITY COLLEGE DISTRICTS**

Employee relations for school districts and community college districts are governed by the Rodda Act, where different meeting and special notice provisions apply. The entire board, for example, may negotiate in closed sessions.

Four types of meetings are exempted from compliance with the Act:

- (1) a negotiating session with a recognized or certified employee organization;
- (2) a meeting of a mediator with either side;
- (3) a hearing or meeting held by a fact finder or arbitrator; and
- (4) a session between the board and its bargaining agent, or the board alone, to discuss its position regarding employee working conditions and instruct its agent.³⁰

Public participation under the Rodda Act also takes another form.³¹ All initial proposals of both sides must be presented at public meetings and are public records. The public must be given reasonable time to inform itself and to express its views before the district may adopt its initial proposal. In addition, new topics of negotiations must be made public within 24 hours. Any votes on such a topic must be followed within 24 hours by public disclosure of the vote of each member.³² The final vote must be in public.

■ **OTHER EDUCATION CODE EXCEPTIONS**

Student disciplinary meetings by boards of school districts and community college districts are governed by the Education Code. District boards may hold a closed session to consider the suspension or discipline

of a student, if a public hearing would reveal personal, disciplinary, or academic information about students contrary to state and federal pupil privacy law. The pupil’s parent or guardian may request an open meeting.

Final action concerning kindergarten through 12th grade students must be taken at a public meeting, and is a public record.³³ In the case of community colleges, only expulsions need be made public.

Community college districts may also hold closed sessions to discuss some student disciplinary matters, awarding of honorary degrees, or gifts from donors who prefer to remain anonymous.³⁴ Kindergarten through 12th grade districts may also meet in closed session to review the contents of the statewide assessment instrument.³⁵



■ GRAND JURY TESTIMONY

A legislative body, including its members as individuals, may testify in private before a grand jury, either individually or as a group.³⁶ Attendance by the entire legislative body before a grand jury would not constitute a closed session meeting under the Brown Act, since the body would not be meeting to make decisions or reach a consensus on issues within the body's subject matter jurisdiction.

■ LICENSE APPLICANTS WITH CRIMINAL RECORDS

A closed session is permitted when an applicant, who has a criminal record, applies for a license or license renewal and the legislative body wishes to discuss whether the applicant is sufficiently rehabilitated to receive the license. If the body decides to deny the license, the applicant may withdraw the application. If the applicant does not withdraw, the body must deny the license in public, immediately or at its next meeting. No information from the closed session can be revealed without consent of the applicant, unless the applicant takes action to challenge the denial.³⁷

■ PUBLIC SECURITY

Legislative bodies may meet in closed session to discuss matters posing a threat to the security of public buildings, essential public services, including water, sewer, gas, or electric service, or to the public's right of access to public services or facilities over which the legislative body has jurisdiction. Closed session meetings for these purposes must be held with designated security or law enforcement officials including the Attorney General, district attorney, agency attorney, sheriff or chief of police, or their deputies or agency security consultant or security operations manager.³⁸ Action taken in closed session with respect to such public security issues is not reportable action.

■ MULTIJURISDICTIONAL DRUG LAW ENFORCEMENT AGENCY

A joint powers agency formed to provide drug law enforcement services to multiple jurisdictions may hold closed sessions to discuss case records of an on-going criminal investigation, to hear testimony from persons involved in the investigation, and to discuss courses of action in particular cases.³⁹

The exception applies to the legislative body of the joint powers agency and to any body advisory to it. The purpose is to prevent impairment of investigations, to protect witnesses and informants, and to permit discussion of effective courses of action.⁴⁰

■ HOSPITAL PEER REVIEW AND TRADE SECRETS

Two specific kinds of closed sessions are allowed for district hospitals and municipal hospitals, under other provisions of law.⁴¹

- One is to hear reports of hospital medical audit or quality assurance committees, or for related deliberations. However, an applicant or medical staff member whose staff privileges are the direct subject of a hearing may request a public hearing.
- The other allows district or municipal hospitals to hold closed sessions to discuss "reports involving trade secrets"—provided no action is taken.

A "trade secret" is defined as information which is not generally known to the public or competitors and which: (1) "derives independent economic value, actual or potential" by virtue of its restricted knowledge; (2) is necessary to initiate a new hospital service or program or facility; and (3) would, if prematurely disclosed, create a substantial probability of depriving the hospital of a substantial economic benefit.

Practice Tip:

Attendance by the entire legislative body before a grand jury would not constitute a closed session meeting under the Brown Act.

The provision prohibits use of closed sessions to discuss transitions in ownership or management, or the district's dissolution.⁴²

■ THE CONFIDENTIALITY OF CLOSED SESSION DISCUSSIONS

It is not uncommon for agency officials to complain that confidential information is being “leaked” from closed sessions. The Brown Act prohibits the disclosure of confidential information acquired in a closed session by any person present and offers various remedies to address willful breaches of confidentiality.⁴³ It is incumbent upon all those attending lawful closed sessions to protect the confidentiality of those discussions. One court has held that members of a legislative body cannot be compelled to divulge the content of closed session discussions through the discovery process.⁴⁴ Only the legislative body acting as a body may agree to divulge confidential closed session information; as regards attorney/client privileged communications, the entire body is the holder of the privilege and only the entire body can decide to waive the privilege.⁴⁵

Before adoption of the Brown Act provision specifically prohibiting disclosure of closed session communications, agency attorneys and the Attorney General long believed that officials have a fiduciary duty to protect the confidentiality of closed session discussions. The Attorney General issued an opinion that it is “improper” for officials to disclose information received during a closed session regarding pending litigation,⁴⁶ though the opinion also concluded that a local agency may not go so far as to adopt an ordinance criminalizing public disclosure of closed session discussions,⁴⁷ making it difficult to plug closed session leaks.

The Brown Act now prescribes remedies for breaches of confidentiality. These include injunctive relief, disciplinary action against an employee, and referral of a member of the legislative body to the grand jury.⁴⁸

The duty of maintaining confidentiality, of course, must give way to the obligation to disclose improper matters or discussions that may come up in closed sessions. In recognition of this public policy, the Brown Act exempts from its prohibition against disclosure of closed session communications disclosure of closed session information to the district attorney or the grand jury due to a perceived violation of law, expressions of opinion concerning the propriety or legality of actions taken in closed session, including disclosure of the nature and extent of the illegal action, and disclosing information that is not confidential.⁴⁹

The interplay between these possible sanctions and an official's first amendment rights is complex and beyond the scope of this guide. Suffice it to say that this is a matter of great sensitivity and controversy.

“I want the press to know that I voted in closed session against filing the eminent domain action,” said Council Member Arnold.

**“Don't settle too soon,” reveals Council Member Baker to the property owner, over coffee.
“The city's offer coming your way is not our bottom line.”**

The first comment to the press is appropriate - the Brown Act requires that certain final votes taken in closed session be reported publicly.⁵⁰ The second comment to the property owner is not - disclosure of confidential information acquired in closed session is expressly prohibited and harmful to the agency.

Practice Tip:

There is a strong interest in protecting the confidentiality of proper and lawful closed sessions.

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 July 15, 2010 Board of Directors Meeting
- B. Memorandum of Understanding (MOU) Between CalMHSA and Non-Member Counties

RECOMMENDATION:

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

REFERENCE MATERIALS ATTACHED:

- Minutes from the July 15, 2010 Board of Director's Meeting
- Memorandum of Understanding (MOU) – Final Draft

MINUTES

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY

BOARD OF DIRECTORS MEETING – REGULAR MEETING

Holiday Inn Capital Plaza

July 15, 2010

MEMBERS PRESENT

Allan Rawland, MSW, ACSW, CalMHSA President, San Bernardino County

Wayne Clark, PhD, Vice-president, Monterey County

Karen Baylor, PhD, MFT, CalMHSA Treasurer, San Luis Obispo County

Maureen Bauman, Secretary, LCSW, Placer County

Tom Sherry, MFT, Sutter/Yuba County (Alternate)

Denise Hunt, MFT, Stanislaus County

Scott Gruendl, MPA, Glenn County

Mary Ann Bennett, Sacramento County

Anne Robin, MFT, Butte County

Noel J. O'Neill, MFT, Trinity County

Glenda Lingenfelter, RN, Solano County

William Cornelius, PhD, Colusa County

Karen Stockton, PhD, MSW, Modoc County

NON-VOTING ALTERNATE

None

MEMBERS ABSENT

Marvin J. Southard, DSW, Los Angeles County

Dr. Leslie Tremaine, EdD, Santa Cruz County

Michael Kennedy, MFT, Sonoma County

STAFF PRESENT

John Chaquica, CPA, MBA, ARM, CalMHSA Executive Director

Kim Santin, CPA, CalMHSA Finance and Administration Director

Edward Walker, LCSW, CalMHSA Program Director

Laura Li, CalMHSA Program Executive Assistant

Maya Maas, CalMHSA Executive Assistant

MEMBERS OF THE PUBLIC

Eduardo Vega, MA, Commissioner, Mental Health Service Oversight and Accountability Commission

Asha George, Humboldt County

Barbara La Haie, Humboldt County

Stephanie Oprendeck, California Institute for Mental Health (CiMH)

Donna Matthews, California Institute for Mental Health (CiMH)

Sabine Whipple, California Institute for Mental Health (CiMH)

Doretha Williams-Flournoy, California Institute for Mental Health (CiMH)

Gale Bataille, California Institute for Mental Health (CiMH)

Stephanie Welch, MSW, California Mental Health Directors Association (CMHDA)

David Kopperud, California Department of Education

Lin Benjamin, California Department of Aging

Monica Nepomuceno, California Department of Education

Betsy Sheldon, California Community Colleges, Chancellor's Office

Stacie Hiramoto, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO)

Phil Crandall, Humboldt County

Ann Arneill-Py, California Mental Health Planning Council

Zoey Todd, California Department of Mental Health (DMH)

Ann Collentine, Mental Health Service Oversight and Accountability Commission (MHSOAC)

Pat Ryan, California Mental Health Directors Association (CMHDA)

Raja Mitry, Anti-stigma Council, San Mateo County

Michelle Callejas, Sacramento County

Ron Manderscheid, PhD, National Association of County Behavioral Health and Developmental Disability Directors (NACBHDDD)

1. CALL TO ORDER

CalMHSA Board President, Allan Rawland, PhD, called the meeting to order at 3:18 pm.

2. INTRODUCTIONS

President Rawland requested that Ms. Li, CalMHSA Administrative Staff, proceeded with taking roll. After confirmation of a quorum each County present introduced themselves as well as the members of the public.

John Chaquica, Executive Director of CalMHSA, introduced Maya Maas as new member of the CalMHSA staff. President Rawland acknowledged the board's appreciation of Margo Wall's work and wished her well in future endeavors.

President Rawland announced the one-year anniversary of the formation of the JPA and with that wanted to celebrate the many accomplishments to date. President Rawland made special acknowledgement of one of the founding members, Mike Opredek, Solano County, for his

work and commitment. It was also noted that Curtis Boewer of Colusa County was improving and that there would be more information in the future regarding his return to the board.

President Rawland stated that the JPA commenced with seven county members and currently at 17 counties that exceeds a 100% increase, which is something to celebrate. President Rawland emphasized that collaboration among CalMHSA, DMH and OAC was crucial to the JPA Agreement and the Bylaws which will be approved at this meeting today.

Staff was also recognized for their rolls' in assisting with moving the program forward.

Members of the board echoed Presidents Rawland's comments and thanked him for his leadership and dedication to moving the program through many obstacles.

3. PUBLIC COMMENTS

President Rawland explained the process then asked for public comment.

No comments were made.

4. APPROVAL OF AGENDA AS POSTED (OR AMENDED)

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

A motion was made to approve the agenda.

Motion: Tom Sherry, MFT, Sutter/Yuba County

Second: Wayne Clark, PhD, Monterey County

The motion carried unanimously.

5. Consent Calendar

A. Minutes from the June 10, 2010 Board of Directors Meeting

B. Information Notice 10-13 Mental Health Services Act (MHSA) Reversion Policy – Memorandum

A motion was made to formally approve the Consent Calendar as posted.

Motion: Karen Stockton, PhD, MSW, Sutter/Yuba County

Second: Wayne Clark, PhD, Monterey County

The motion carried unanimously.

6. NEW MEMBER OUTREACH/DEVELOPEMENT

A. CalMHSA New County Membership Application(s)

During each Board meeting, staff and members provide an update to the Board on the status of prospective new membership. Attachments provided such update.

Mr. Edward Walker reported that two counties were requesting BOS for approval to join the JPA during July. There were no County applications for approval on this Board agenda.

B. CalMHSA Membership Survey and PEI Assignment Status

Mr. Walker indicated staff had concluded the use of the questionnaire regarding counties' intentions to join the JPA and will now be working with regional representatives for outreach to prospective member counties.

Regarding PEI Assignment of Funds, Mr. Walker stated that seven (7) counties had submitted Enclosure 1 to the Department of Mental Health (DMH) and that the MHSOAC had already issued approval letters. The transfer of those funds now lies with DMH. DMH indicated that they would be sending CalMHSA staff a regular report on assignments to CalMHSA issuances.

Mr. John Chaquica stated that the PEI Membership/Funding spreadsheet in the meeting agenda was somewhat incomplete and asked board members to please take a moment to review their counties' information (hard copies were being provided) and to complete the missing information to ensure that everything was current.

C. Discussion Regarding CalMHSA Conference Participation

Staff identified three (3) conferences that were important for marketing CalMHSA and recommended Board approval of a budget for attendance.

It was noted CiMH may not have a Policy Forum in May 2011.

Board Member Noel O'Neill asked if the JPA would pay for board members to attend these conferences. President Rawland asked for this question to be brought back for further discussion at a future meeting.

Board member Scott Gruendl mentioned that CSAC had a "New Supervisors Institute" that takes place during a course of 3-4 months for incoming county supervisors and thought it might be a good opportunity for the marketing of CalMHSA. Staff agreed to look into the possibility of doing a presentation during one of those sessions.

A motion was made to formally approve the attendance to the CiMH Policy Forum September 2010, the CSAC Annual Conference November 2010 and CiMH Policy Forum May 2011.

Motion: Karen Baylor, PhD, MFT, San Luis Obispo County

Second: Wayne Clark, PhD, Monterey County

The motion carried unanimously.

7. ADMINISTRATIVE MATTERS

A. Memorandum of Understanding (MOU) Between CalMHSA and Non-Member Counties.

Board member Karen Baylor indicated that William Arroyo (Board Member) requested that it be brought to the board's attention that Los Angeles County was concerned with the membership fee vs. non-member fee being the same and leaving non-members no incentive to join the JPA.

President Rawland explained that structure of the fees and reasoning behind the structure to which members concurred. It was noted as the JPA membership grew changes could be made to the MOU should the board choose to do so.

President Rawland asked as to Indemnification. Mr. John Chaquica said that staff could add the same indemnification language that is in the agreement. The board agreed to the addition of indemnification language.

Public comment:

Stephanie Welch requested that this document be shared with the County MHSA Coordinators to enhance understanding of CalMHSA process.

A motion was made to formally approve the CalMHSA Memorandum of Understanding (MOU), with added indemnification language between CalMHSA and Non-Member Counties.

Motion: Karen Stockton, PhD, MSW Modoc County

Second: Maureen Bauman, LCSW, Placer County

B. CalMHSA Bylaws for Review, Discussion and Adoption

Mr. John Chaquica indicated that the bylaws had been presented several times and had concluded the 30-day review period. A redlined version of the changes is provided and the only significant addition came about from conversations with Santa Clara County dealing with section 13.4.3 of page 54 of the agenda, re: California Tort Law and as it relates to exposure to any one member of the JPA.

Mr. Chaquica noted that if the Board approved the bylaws today, the Board had the authority to make any necessary changes moving forward. This is not a document to be changed often but it is normal to have changes in a growing organization.

A motion was made to formally approve the CalMHSA JPA Bylaws as presented.

Motion: Denise Hunt, MFT, Stanislaus County

Second: William Cornelius, PhD, Colusa County

The motion to approve the CalMHSA JPA Bylaws as presented and carried unanimously.

C. Program Participation Agreement

Mr. John Chaquica reported that the Participation Agreement was a new document that the board had not formally discussed at a previous meeting. This document formalizes the counties intentions to participate or not, in a particular program. This would currently apply to the Technical Assistance program.

Board members agreed this was a working administrative document; staff could make changes as need without the need of bringing it back to the board.

Discussion included the need to separate governance of the programs. It was discussed, no changes were needed but the matter would be addressed as the number of future programs grew and matured.

Public comment was made by Stephanie Welch and requested this document be shared with MHSA Coordinators.

A motion was made to formally approve the CalMHSA Program Participation Agreement.

Motion: Tom Sherry, MFT, Sutter/Yuba County

Second: Karen Stockton, PhD, Modoc County

The motion to approve the CalMHSA Program Participation Agreement with legal counsel providing further clarification as it relates to liability at the next meeting carried unanimously.

D. CalMHSA Vision and Purpose Statements

A board member observed that the vision statement did not reference the two city programs, only counties.

President Rawland asked that the two cities be acknowledged in the vision statement.

Mr. Chaquica indicated that these documents were important and asked if it would be a good idea to defer this item for another meeting.

A motion was made to defer this item to the next board meeting and asked that board members take the time to review and provide feedback prior to the next board meeting.

Public comment: Eduardo Vega, MHSOAC as it relates to the "Mental Health Services" verbiage in the vision statement which alludes to clinical services and it is much more than that.

Stephanie Welch, CMHDA, commented that the board might want to incorporate integration with general health care and not just limit its vision to mental health.

Ron Manderscheid, NACBHDDD, recommended the vision include reform.

President Rawland asked that everyone assist in providing ideas for re-drafting the vision and purpose statements. All suggestions are to be submitted to the program director, Edward Walker.

No action taken.

8. FINANCIAL MATTERS

A. Consideration of CalMHSA Financial Audit

Kim Santin gave a report on the CalMHSA reporting requirements and the need to do an annual audit then file within the County of Sacramento.

Ms. Santin stated they had already initiated contact with an auditor (James P. Marta) and disclosed the fees for their services in addition to provide information on the company's expertise in dealing with JPAs. In accordance with state law, the staff asks that a biennial audit for a two-year period ending June 30, 2011 be approved.

Board members asked if there was an interest in soliciting an RFP for services to which staff agreed to do so should the board choose to move in that direction. It was noted the CalMHSA procurement policy did not call for an RFP but still was asked to bring back more information at the appropriate time (Spring 2011).

A motion was made to formally approve a biennial audit for the two year period ending June 30, 2011 and provide direction on getting the biennial quote in April 2011 form James P. Marta, CPA.

Motion: Karen Baylor, PhD, MFT, San Luis Obispo County

Second: Maureen Bauman, LCSW, Placer County

The motion carried unanimously.

B. Financial Statements for Fiscal Year Ending June 30, 2010

Ms. Santin presented the financial statements and reviewed them with the board. She indicated that currently no receivables were recorded. In discussion with Mr. Mark Heilman, he has indicated the approved assignments will be transferred soon.

Public Comment:

Stephanie Welch, CMHDA, stated it was important to them that the authority make timely payments for contractor services. CMHDA understands that the authority is waiting for assignment dollars to come through and has offered assistance in communicating with DMH to ensure the monies are not being held up at the state level.

A motion was made to accept and file the financial statements for fiscal year ending June 30, 2010 with an agreement that reference notes should be added to the statement provided.

Motion: Mary Ann Bennett, Sacramento County

Second: William Cornelius, PhD, Colusa County

The motion carried unanimously.

9. PROGRAM MATTERS

A. REPORT ROM CalMHSA Program Director

The program director, Edward Walker, asked the board approve the sequence for stakeholder input process. The process being stakeholder input process , complete draft implementation plans for each of the three strategic plans and submit to board for approval.

Public comment:

Lin Benjamin, CA Department of Aging, indicated that she found the language confusing as it relates to the first sentence of the third paragraph of page 75 of the agenda "Regional County Collaborative". Ms. Benjamin felt that the verbiage referred to the Option 2 of Information Notice 10-05. Mr. Walker clarified that the sentence did not refer to Option 2, but to a group of counties working cooperatively to create a component of a statewide program.

A motion was made to approve the proposed sequence for plan development.

Motion: Scott Gruendl, MPA, Glenn County

Second: Glenda Lingenfelter, RN, Solano County

The motion carried unanimously.

B. Stakeholder Input for Priorities in Development of Implementation Plans for Statewide Prevention and Early Intervention.

Mr. Walker presented the Stakeholder Input Plan Process and asked that the board approve the process as presented.

Board Member Karen Baylor indicated that many individuals have voiced their concern with getting input as it is the summer and people are on vacation and asked about the possibility of extending the time line. Being mindful of the urgency to implement, therefore there is a need in finding a balance between the two.

Board Member Denise Hunt stated that she was hesitant to extend the time line as notice of input has been well noted.

Public Comment

Eduardo Vega, MHSOAC, said it was essential to extend the time line as it would be of great benefit for us to receive as much input as possible.

Stacey Hiramoto, REMHCO, supported time line extension, as individuals had not received the invitation for input. Ms. Hiramoto had concerns in how the underserved communities would be included in the stakeholder input process. She asked how would the decisions be made and by whom. Her last concern was that the documents were not translated into other languages and there is a need for that in addition to a need for input in other forms other than in writing.

Lin Benjamin, California Department of Aging, echoed the time extension request and wanted to reinforce the use of county mental health departments for input in this process.

Betsy Sheldon, Comm. College Chancellor Office, requested an extension of the time line because school staff are not around during the summer; they are on vacations. She has

forwarded the invitation for stakeholder input process to her list serve and there is no one around due to vacations, therefore a need to extend the time line. In addition, Ms. Sheldon stated that the Mental Health Services Initiative is not well flushed out as the other strategic plans and doesn't know how we will navigate through that. She offered her assistance in working with staff on this plan.

Stephanie Welch, CMHDA, had forwarded the stakeholder input invitation to the CMHDA list serve, which is extensive, and people are not receiving the notice due to vacations. She added the number one comment from MHSA coordinators was that the documents were not translated at the very least into Spanish. Ms. Welch also indicated that her working group had participated in creating and providing input for each of the strategic plans and offered to retrieve those documents and share them with CalMHSA staff to assist in the current planning stages.

Mr. Manderscheid, NACBHDDD, concurred with the comments made by the public and stated that this was a good opportunity to reach out to new partners like county health associations within California and circulation of the documents to some of the national groups, which he is happy to assist with.

Raja Mistry, Anti-Stigma Council, San Mateo County, commented that he was in support of having an extension of the time line in addition to having documents available in other languages. Mr. Mistry added that it was important to add the CALMH/C Board in the distribution list as they have the capability to further distribute to pertinent individuals.

Anne Collentine, MHSOAC, stated that they were not prepared to respond to the question of the translation of documents but would work with DMH and look into it.

Zoey Todd, DMH, commented the Department had the strategic plans executive summary translated but that was not helpful without the complete plans translated. There were no funds to finish the project. Ms. Todd indicated that they would look into doing so again.

President Rawland volunteered to translate one of the CalMHSA stakeholder input documents and asked other county board members to do the same, following which they would forward to staff and allow for distribution as requested. President Rawland did mention that they could not

resolve the issue of the source documents not being translated and would leave that with DMH to address.

Board member Karen Stockton stated that at each board meeting there is a different set of stakeholders that come and each time there are different requests. She stressed to the stakeholders the importance of coordination so that their concerns are heard so that we could move forward in implementing projects and avoid delays due to changing requests.

Board Member Denise Hunt reminded everyone that someone had asked the question as to how CalMHSA will make the decisions on selecting the priorities from the input provided and she asked that staff prepare a report to this effect at the next board meeting.

A motion was made to approve the CalMHSA Stakeholder Input process with the time line extended to August 31, 2010 with a summary report to the Board on September 10th and explore with DMH having the source documents translated as well.

Motion: Wayne Clark, PhD, Monterey County

Second: Tom Sherry, MFT, Sutter/Yuba County

The motion carried unanimously.

C. Technical Assistance and Capacity Building

This item was deferred to the next meeting.

10. New Business

Board Member William Cornelius stated that his legal counsel had asked why they were asked to approve the revised JPA Agreement as opposed to just approving the amendments made to the JPA Agreement. He added that requesting approval of just the amendments would be easier and more understandable to do as opposed to having to review the entire document a second time.

President Rawland asked that the instructions be modified for existing board members to make the approval process easier and re-distribute.

President Rawland stated that the September CiMH meeting will be going longer than normal and asked the Board members their thoughts on how we should schedule our September board meeting. Board members agreed to hold their board meeting on Friday, September 10, 2010, commencing at 8:30am until 12 noon. This would allow for a longer and more productive meeting.

Staff was directed to secure a meeting location for the September meeting.

Mr. Chaquica clarified that with the time line being extended the board could expect the meeting agenda for September to be distributed on September 3 followed by an update on September 7th with the meeting held on the 10th.

Edward Walker was asked to work with the ad hoc committee on the stakeholder input.

President Rawland confirmed with Ms. Li that an announcement would be sent to all stakeholders and business partners as it relates to the time line extension.

No additional public comment was made.

President Allan Rawland adjourned the meeting at 5:44 pm.

Respectfully submitted,

Ms. Maureen Bauman

Secretary, CalMHSA

Date

**Memorandum of Understanding
Between
CalMHSA and _____ County
For Development and Administration of Statewide PEI Programs**

WHEREAS, in November 2004, California voters passed Proposition 63, which was enacted into law in 2005 as the Mental Health Services Act (MHSA) and which imposed a 1% tax on adjusted annual income over \$1,000,000 for the purpose of reducing the long-term adverse impact on individuals, families and state and local budgets resulting from untreated serious mental illness; and

WHEREAS, California Mental Health Services Authority (CalMHSA) is a Joint Powers Authority formed to be a single agency acting for its member counties to develop mental health services and education programs, obtain funding, contract for services, collect data, make reports, and act as a repository of information and expertise for such programs; and

WHEREAS, CalMHSA has entered into a contract with the California Department of Mental Health (DMH) to administer Statewide Programs for Prevention and Early Intervention (PEI), and has worked with the Mental Health Services Oversight and Accountability Commission (OAC) to facilitate compliance with OAC Guidelines; and

WHEREAS, CalMHSA welcomes participation by non-member Counties in Statewide PEI Programs administered by CalMHSA; and

WHEREAS, _____ County (“Partner”) desires to participate in Statewide PEI programs administered by CalMHSA;

NOW THEREFORE, the parties agree that Partner will participate in CalMHSA Programs pursuant to the Participation Agreement for each Project in which Partner participates, and pursuant to the following provisions:

I. Definitions

Throughout this MOU, the following terms are defined as follows:

- A. CalMHSA - California Mental Health Services Authority, a Joint Powers Authority created to jointly develop and fund mental health services and education programs for its Member Counties and Partner Counties, which has entered into a contract with DMH to conduct Statewide PEI Programs
- B. Department of Mental Health (DMH) - The California Department of Mental Health.
- C. Member – refers to a County (or JPA of two or more Counties) that has joined CalMHSA and executed the CalMHSA Joint Powers Agreement.
- D. Mental Health Services Act (MHSA) – Initially known as Proposition 63 in the November 2004 election, which added sections to the Welfare and Institutions Code providing for, among other things, PEI Programs.
- E. Mental Health Services Oversight and Accountability Commission (OAC) - The oversight body to ensure the activities are in accordance with the Mental Health Services Act.
- F. Partner - The County entering into this MOU with CalMHSA.

- G. Participating Counties – Counties participating in a PEI Program either as Members of CalMHSA or as Partners under a Memorandum of Understanding with CalMHSA.
- H. Prevention and Early Intervention (PEI) – Per Guidelines issued by the OAC, there are three PEI Statewide Projects--Suicide Prevention, Student Mental Health Initiative, and Stigma and Discrimination Reduction—that are to be conducted by Counties acting jointly or in collaboration, or by DMH. Per OAC Guidelines, the PEI Statewide Project on Training, Technical Assistance and Capacity Building is administered at the County level, but Counties can jointly engage in this project as well.
- I. Program – Statewide PEI Program administered by CalMHSA implemented consistent with the California Strategic Plans for Suicide Prevention, and Stigma and Discrimination Reduction, the concepts identified in the consensus document for the Student Mental Health Initiative, and applicable laws, regulations and guidelines. Also refers to the Training, Technical Assistance and Capacity Building project.
- J. Student Mental Health Initiative – See <http://www.dmh.ca.gov/PEIStatewideProjects/StudentMentalHealthInitiative.asp>
- K. Stigma and Discrimination Reduction – See http://www.dmh.ca.gov/PEIStatewideProjects/docs/Reducing_Disparities/CDMH_MH_Stigma_Plan_09_V5.pdf.
- L. Suicide Prevention – See http://www.dmh.ca.gov/PEIStatewideProjects/docs/Reducing_Disparities/CDMH_MH_Stigma_Plan_09_V5.pdf.

II. Responsibilities

- A. Responsibilities of CalMHSA:
 - 1. Develop Three-Year Program and Expenditure Plans, updates, and/or work plans on behalf of and in coordination with participating counties that are consistent with applicable laws, regulations and guidelines issued by the State, for the provision of services and the expenditure of funds for statewide or regional PEI programs designed in accordance with the “Guidelines for Prevention and Early Intervention (PEI) Statewide Programs” issued by OAC, consistent with any applicable contract between CalMHSA and DMH.
 - 2. Act as fiscal and administrative agent for Partner in PEI programs in which Partner participates.
 - 3. Directly or indirectly (through a contracted JPA Management firm) hire and employ Program Directors and other administrative staff as necessary to perform under this Memorandum.
 - 4. Submission of Three-Year Program and Expenditure Plans, updates, and/or work plans on behalf of and/or in coordination with participating counties to DMH and OAC for review and approval.

5. Management of funds received for PEI Statewide programs consistent with the requirements of the MHSA and the contract between CalMHSA and DMH.
 6. Provide regular fiscal reports to participating Member and Partner counties and as required by the contract between CalMHSA and DMH.
- C. Responsibilities of Partner:
1. Pay an application fee in same amount as Members pay to join CalMHSA: \$1,000 if population exceeds 10,000,000; \$750 if population between 1,000,000 and 10,000,000; \$500 for population between 100,000 and 1,000,000; and \$250 if population less than 100,000.
 2. Timely assignment, payment or other transfer of amounts assessed for PEI programs in which Partner is participating.
 3. Attend advisory committee meetings for Program(s) in which Partner participates, and provide input as necessary to accomplish the purposes of this MOU and such Program(s).
 4. Cooperate by providing CalMHSA with requested information and assistance in order to fulfill the purpose of this MOU.
 5. Provide feedback on Program performance.
 6. Identification of a representative authorized to act for Partner, and preferably an alternate to attend meetings in absence of representative.

III. Duration and Term

- A. The term of the MOU is April 15, 2010 through June 30, 2015. The MOU may be extended or terminated depending on the availability of funds.
- B. Any Party may terminate this MOU immediately with cause or after thirty days written notice without cause, unless otherwise specified. Notice shall be deemed served on the date of mailing. Cause shall be defined as any breach of this MOU, any misrepresentation, or fraud on the part of any Party.

IV. Withdrawal, Cancellation and Termination

- A. The withdrawal of a Partner from a Program shall not automatically terminate its responsibility for its share of the expenses and liabilities of the Program. The contributions of current and past Partners and Members are chargeable for their respective share of unavoidable expenses and liabilities arising during the period of their participation
- B. Upon cancellation, termination or other conclusion of a Program, any funds remaining undisbursed after CalMHSA satisfies all obligations arising from the operation of the Program shall be distributed and apportioned among the Members and Partners that have participated in the program in proportion to their contributions.

V. Fiscal Provisions

- A. Funding required from Partner shall not exceed the lesser of (1) the amount allocated to Partner by DMH pursuant to Enclosure 2 to Information Notice 08-25, or (2) the aggregate amount specified in the Program Participation Agreement(s) entered into by Partner.
- B. Funds contributed by Partner shall be allocated to planning, administration and evaluation in the same proportions as are Member funds.

VI. General Provisions

- A. This MOU contains the entire agreement of the parties and supersedes all negotiations, verbal or otherwise and any other agreement between the parties hereto.
- B. The individual signing below on behalf of Partner represents and warrants that he or she is authorized to do so.
- C. Partner will provide CalMHSA with a copy of a resolution of its governing body authorizing execution of this MOU.
- D. In the event of a dispute between the parties, Partner and CalMHSA will first attempt informal resolution by having CalMHSA's president (or designee) meet and confer with the representative appointed by Partner. During the meet and confer process, if the parties cannot resolve the dispute they will attempt to agree on a further informal dispute resolution process such as arbitration. If they cannot agree upon an informal dispute resolution process, then the parties can pursue the remedies otherwise available at law.

VII. Indemnification

CalMHSA agrees to indemnify and hold harmless Partner and Partner's directors, officers, employees, agents and volunteers for any and all claims, actions, losses, damages and/or liability caused by negligent or intentional acts committed by or on behalf of CalMHSA.

Partner agrees to indemnify and hold harmless CalMHSA, other non-Member Participating Counties, and their directors, officers, employees, agents and volunteers for any and all claims, actions, losses, damages and/or liability caused by negligent or intentional acts committed by or on behalf of Partner.

VIII. Conclusion

- A. This MOU and any Participation Agreement(s) executed by Partner are the full and complete document describing services to be rendered by CalMHSA including all covenants, conditions and benefits.
- B. The signatures of the parties affixed to this MOU affirm that they are duly authorized to commit and bind their respective entities to the terms and conditions set forth in this document.

CaIMHSA

Name: John Chaquica
Title: Executive Director
Address:
3043 Gold Canal Drive, Suite 200
Rancho Cordova, CA 95670-6394

Date: _____

Partner

Name:
Title:
Address:

Date: _____

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Between
CalMHSA and _____ County
For Development and Administration of Statewide PEI Programs**

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WHEREAS, California Mental Health Services Authority (CalMHSA) is a Joint Powers Authority formed to be a single agency acting for its member counties to develop mental health services and education programs, obtain funding, contract for services, collect data, make reports, and act as a repository of information and expertise for such programs; and

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- L. Suicide Prevention – See http://www.dmh.ca.gov/PEIStatewideProjects/docs/Reducing_Disparities/CDMH_MH_Stigma_Plan_09_V5.pdf.

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 2. Act as fiscal and administrative agent for Partner in PEI programs in which Partner participates.
 3. Directly or indirectly (through a contracted JPA Management firm) hire and employ Program Directors and other administrative staff as necessary to perform under this Memorandum.
 4. Submission of Three-Year Program and Expenditure Plans, updates, and/or work plans on behalf of and/or in coordination with participating counties to DMH and OAC for review and approval.

5. Management of funds received for PEI Statewide programs consistent with the requirements of the MHSA and the contract between CalMHSA and DMH.
 6. Provide regular fiscal reports to participating Member and Partner counties and as required by the contract between CalMHSA and DMH.
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 2. Timely assignment, payment or other transfer of amounts assessed for PEI programs in which Partner is participating.
 3. Attend advisory committee meetings for Program(s) in which Partner participates, and provide input as necessary to accomplish the purposes of this MOU and such Program(s).
 4. Cooperate by providing CalMHSA with requested information and assistance in order to fulfill the purpose of this MOU.
 5. Provide feedback on Program performance.
 6. Identification of a representative authorized to act for Partner, and preferably an alternate to attend meetings in absence of representative.

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- A. The term of the MOU is April 15, 2010 through June 30, 2015. The MOU may be extended or terminated depending on the availability of funds.
- B. Any Party may terminate this MOU immediately with cause or after thirty days written notice without cause, unless otherwise specified. Notice shall be deemed served on the date of mailing. Cause shall be defined as any breach of this MOU, any misrepresentation, or fraud on the part of any Party.

IV. Withdrawal, Cancellation and Termination

- A. The withdrawal of a Partner from a Program shall not automatically terminate its responsibility for its share of the expenses and liabilities of the Program. The contributions of current and past Partners and Members are chargeable for their respective share of unavoidable expenses and liabilities arising during the period of their participation
- B. Upon cancellation, termination or other conclusion of a Program, any funds remaining undisbursed after CalMHSA satisfies all obligations arising from the operation of the Program shall be distributed and apportioned among the Members and Partners that have participated in the program in proportion to their contributions.

V. Fiscal Provisions

- A. Funding required from Partner shall not exceed the lesser of (1) the amount allocated to Partner by DMH pursuant to Enclosure 2 to Information Notice 08-25, or (2) the aggregate amount specified in the Program Participation Agreement(s) entered into by Partner.
- B. Funds contributed by Partner shall be allocated to planning, administration and evaluation in the same proportions as are Member funds.

VI. General Provisions

- A. This MOU contains the entire agreement of the parties and supersedes all negotiations, verbal or otherwise and any other agreement between the parties hereto.
- B. The individual signing below on behalf of Partner represents and warrants that he or she is authorized to do so.
- C. Partner will provide CalMHSA with a copy of a resolution of its governing body authorizing execution of this MOU.
- D. In the event of a dispute between the parties, Partner and CalMHSA will first attempt informal resolution by having CalMHSA's president (or designee) meet and confer with the representative appointed by Partner. During the meet and confer process, if the parties cannot resolve the dispute they will attempt to agree on a further informal dispute resolution process such as arbitration. If they cannot agree upon an informal dispute resolution process, then the parties can pursue the remedies otherwise available at law.

VII. Indemnification

CalMHSA agrees to indemnify and hold harmless Partner and Partner's directors, officers, employees, agents and volunteers for any and all claims, actions, losses, damages and/or liability caused by negligent or intentional acts committed by or on behalf of CalMHSA.

Partner agrees to indemnify and hold harmless CalMHSA, other non-Member Participating Counties, and their directors, officers, employees, agents and volunteers for any and all claims, actions, losses, damages and/or liability caused by negligent or intentional acts committed by or on behalf of Partner.

VIII. Conclusion

- A. This MOU and any Participation Agreement(s) executed by Partner are the full and complete document describing services to be rendered by CalMHSA including all covenants, conditions and benefits.
- B. The signatures of the parties affixed to this MOU affirm that they are duly authorized to commit and bind their respective entities to the terms and conditions set forth in this document.

CaIMHSA

Name: ~~Allan Rawland~~ John Chaquica

Title: ~~President~~ Executive Director

Address:

3043 Gold Canal Drive, Suite 200

~~Rancho Cordova, CA 95670-6394~~ 268 W. Hospitality Lane, Suite 400

~~San Bernardino, CA 92415-0026~~

Date: _____

Partner

Name: _____

Title:

Address:

Date: _____

NEW MEMBER OUTREACH/DEVELOPMENT

Agenda Item 7.A.

SUBJECT: CalMHSA New County Membership Application(s)

BACKGROUND AND STATUS:

During each Board meeting, the staff and members shall update the Board on the status of prospective new members. Additionally, staff has developed a spreadsheet to track activity of members and prospective members.

As of this meeting, the Counties of Marin, Orange and Yolo have received approval from their Board of Supervisors, submitted their new membership applications to CalMHSA, and may now be approved as members of CalMHSA.

RECOMMENDATION:

Approve membership to CalMHSA for applying Counties.

REFERENCE MATERIALS ATTACHED:

- Marin County Membership Application
- Orange County Membership Application
- Yolo County Membership Application



New Member Data Fee Form California Mental Health Services Authority

3043 GOLD CANAL DRIVE, SUITE 200 • RANCHO CORDOVA, CA 95670 • PHONE: (916) 859-4900 FACSIMILE: (916) 859-4805

County Information

Population	Date Population Recorded
<u>258,618</u>	<u>2009</u>

I. Population Information:
(Based on most recent population published by State Department of Finance)

II. Application Fee Schedule (Based on most recent population published by State Department of Finance)

- 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 CalMHSA

III. Requested Date of Membership: August 12, 2010

IV. Participation in CalMHSA represents your four year intention to assign program funds and the intention to release three years of planning funds (Enclosure 1/Information Notice 12-05).

Bruce Gurganus, MFT

Printed Name

Signature

July 29, 2010

Date

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



New Member Data Fee Form California Mental Health Services Authority

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

County Information

Population

Measurement Data

3,260,162

2010

I. **Population Information:**
(Based on most recent population published by State Department of Finance)

II. **Application Fee Schedule (Based on most recent population published by State Department of Finance)**

- 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: 07/20/2010

IV. Participation in CalMHSA represents your four year intention to assign program funds and the intention to release three years of planning funds (Enclosure 1/Information Notice 12-05).

Mark Refowitz, Deputy Agency Director

Printed Name

Signature

July 23, 2010

Date

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

**New Member Data Fee Form
California Mental Health Services Authority**

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

County Information

Population

Date Population Recorded

199,407

2009

I. Population Information:

(Based on most recent population published by State Department of Finance)

II. Application Fee Schedule (Based on most recent population published by State Department of Finance)

- 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 CalMHSA

III. Requested Date of Membership: July 27, 2010

IV. Participation in CalMHSA represents your four year intention to assign program funds and the intention to release three years of planning funds (Enclosure 1/Information Notice 12-05).

Kim Suderman, Director

Printed Name

Mark Bryan for Kim Suderman

Signature

8/2/10

Date

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

NEW MEMBERSHIP OUTREACH/DEVELOPMENT

Agenda Item 7.B.

SUBJECT: Regional Representatives – Membership Development and Member Support

BACKGROUND AND STATUS:

CalMHSA's regional representatives are as follows:

Superior Area – Scott Gruendl, MPA, Glenn County

Central Area – Denise Hunt, MFT, Stanislaus County

Bay Area – Michael Kennedy, MFT, Sonoma County

Southern Area – pending appointment

Los Angeles Area – William Arroyo, MD, Los Angeles County

RECOMMENDATIONS:

No action required. Information only.

REFERENCE MATERIALS ATTACHED:

- Regional Representatives – Membership Development and Member Support

MEMBERSHIP DEVELOPMENT AND MEMBER SUPPORT

Regional Representatives¹ are appointed to the Board's Executive Committee by the CalMHSA Board President to represent their respective regions. At the June 2010 Board Meeting, the Board President asked the Regional Representatives to participate in outreach to prospective counties in their regions. CalMHSA staff will provide support to the Regional Representatives for membership expansion. Below are the complementing roles of Regional Representative and staff for membership expansion and ongoing member support.

Regional Representative

(A) MEMBERSHIP EXPANSION - Priority focus until 30-member threshold achieved, anticipated by December 2010; priority will then phase down.

Regional Representative Role:

- Identified as the CalMHSA Board resource for non-member counties within respective regions.
- Available to non-member counties for consultation and information regarding:
 - process for membership,
 - assigning statewide PEI and other projects a county may consider within CalMHSA.

CalMHSA Staff Role:

- Coordinate with Regional Representatives.
- Refer non-member county to Regional Representative.
- Provide regular status reports on membership expansion activities, including issues and question from non-member counties.
- Initiate conference calls with Regional Representatives.
- Attend local events such as stakeholder meetings when requested by prospective member MHD.

¹ CalMHSA regions parallel the regions of the California Mental Health Directors Association, which are recognized by the California Department of Mental Health.

(B) MEMBER SUPPORT - Ongoing

Regional Representative Role:

- Provide orientation and Director-to-Director support to new CalMHSA counties
- Provide orientation and support to new Directors in CalMHSA counties.
- Provide ongoing member communication regarding JPA accomplishments and activities.

CalMHSA Staff Role:

- Prepare and provide orientation packet for new MHD.
- Available as requested by new MHD and/or Regional Representative for member support.

NEW MEMBERSHIP OUTREACH/DEVELOPMENT

Agenda Item 7.C.

SUBJECT: CalMHSA Membership and PEI Assignment Status

BACKGROUND AND STATUS:

During CalMHSA's growth and development stage, it is critical to track the status of members, prospective members and those counties still deciding. The attached is presented to track the current status of each county. PEI assignment status, (per DMH), as of June 25, 2010 is as follows:

New Assignments: none to report

Regional representatives shall report on outreach status, if any.

RECOMMENDATIONS:

No action required. Information only.

REFERENCE MATERIALS ATTACHED:

- County Membership and PEI Funding Assignment Status Sheet
- Summary of County Outreach

CalMHSA Membership and PEI Assignment Status

MENTAL HEALTH DIRECTOR LISTING							30-DAY POSTING	Assigned Funds to DMH	Assigned Funds to CalMHSA	Balance
Member/Prospect	Contact Name	Telephone	Interest	BOS Approval	CalMHSA Board Approval	JPA Signature	End Date			
Alameda	Marye L. Thomas, MD	(510) 567-8120	Unknown	No	No	No		No		\$5,830,000.00
Alpine	Pamela Knorr	(530) 694-2287	Unknown	No	No	No		No		\$100,000.00
Amador	George E Sonsel, LCSW	(209) 223-6296	Unknown	No	No	No		1/13/09		\$126,400.00
Berkeley City	Jo Ruffin	(510) 981-5213	Yes	No	No	No		No		\$511,600.00
Butte	Anne Robin, MFT	(530) 891-3044	Member	Yes	Yes	Yes	7/11/10	No		\$875,200.00
Calaveras	Rita Downs, MPA	(209) 754-6555	Yes	No	No	No		No		\$165,200.00
Colusa	Edmund Smith	(530) 458-0822	Member	Yes	Yes	Yes		No		\$100,000.00
Contra Costa	Donna Wilgand, LCSW	(925) 957-5111	Yes	No	No	No		No		\$3,668,800.00
Del Norte	Gary Blatnick	(707) 464-7224	Unknown	No	No	No		No		\$101,200.00
El Dorado	Christine Kondo-Lister, LCSW	(530) 621-6270	Yes	No	No	No		No		\$580,800.00
Fresno	Donna Taylor, RN	(559) 253-9183	Unknown	No	No	No		No		\$3,994,000.00
Glenn	Scott Gruendl, MPA	(530) 934-6582	Member	Yes	Yes	Yes	5/31/10	12/26/08		\$108,400.00
Humboldt	Karolyn Rim Stein, RN	(707) 268-2990	Yes	No	No	No		12/12/08		\$502,800.00
Imperial	Michael Horn, MFT	(760) 482-4068	Unknown	No	No	No		No		\$750,000.00
Inyo	Gail Zwier, PhD	(760) 873-6533	No	No	No	No		No		\$100,000.00
Kern	Jim Waterman, PhD	(661) 686-6009	Yes	No	No	No		No		\$3,423,600.00
Kings	Mary Anne Ford Sherman	(559) 582-3211	Unknown	No	No	No		No		\$600,000.00
Lake	Kristy Kelly, MFT	(707) 263-4338	Unknown	No	No	No		2/4/09		\$236,800.00
Lassen	Ken Crandall, ASW	(530) 251-8108	Yes	No	No	No		No		\$101,200.00
Los Angeles	Marvin J Southard, DSW	(213) 738-4601	Yes	Yes	Yes	Pending		No		\$46,713,600.00
Madera	Janice Melton, LCSW	(559) 675-7926	Yes	No	No	No		No		\$649,600.00
Marin	Bruce Gurganus, MFT	(415) 499-6769	Yes	7/20/10	8/12/10	Pending	5/31/10	12/9/08		\$889,600.00
Mariposa	James A Rydingsword	(209) 966-2000	Unknown	No	No	No		No		\$100,000.00
Mendocino	Mary Elliott	(707) 463-5481	Yes	No	No	No		3/11/09		\$328,000.00
Merced	Manuel J. Jimenez, MFT	(209) 381-6805	Yes	No	No	No		12/22/08		\$1,132,800.00
Modoc	Karen Stockton, PhD, MSW	(530) 233-6312	Member	Yes	Yes	Yes	5/31/10	1/9/09		\$100,000.00
Mono	Ann Gimpel, PhD, MSW	(760) 924-1740	No	No	No	No		No		\$100,000.00
Monterey	Wayne W. Clark, PhD	(831) 755-4509	Member	Yes	Yes	Yes	5/31/10	5/11/10		\$1,826,400.00
Napa	Jaye Vanderhurst	(707) 453-4279	Yes	No	No	No		No		\$484,400.00
Nevada	Michael Heggarty, MFT	(530) 265-1437	Unknown	No	No	No		Opt Out		\$346,000.00
Orange	Mark A. Refowitz	(714) 834-6023	Yes	7/20/10	8/12/10	7/23/10		1/6/09		\$13,336,800.00
Placer	Maureen Bauman, LCSW	(530) 889-7256	Member	Yes	Yes	Yes		No		\$1,096,400.00
Plumas	John Sebold, LCSW	(530) 283-6307	No	No	No	No		No		\$100,000.00
Riverside	Jerry A. Wengerd, LCSW	(951) 358-4501	Yes	No	No	No		No		\$8,856,000.00
Sacramento	Mary Ann Bennett	(916) 875-9904	Member	Yes	Yes	Yes		No		\$5,327,200.00
San Benito	Alan Yamamoto, LCSW	(831) 636-4020	Unknown	No	No	No		No		\$221,600.00
San Bernardino	Allan Rawland, ACSW, MSW	(909) 382-3133	Member	Yes	Yes	Yes		No		\$8,615,200.00
San Diego	Alfredo Aguirre, LCSW	(619) 563-2765	Yes	No	No	No		12/17/08		\$13,506,800.00

CalMHSA Membership and PEI Assignment Status

MENTAL HEALTH DIRECTOR LISTING							30-DAY POSTING			
Member/Prospect	Contact Name	Telephone	Interest	CalMHSA			End Date	Assigned Funds to DMH	Assigned Funds to CalMHSA	Balance
				BOS Approval	Board Approval	JPA Signature				
San Francisco	Jo Robbins, MFT	(415) 255-3447	Yes	No	No	No		No		\$3,020,400.00
San Joaquin	Victor Singh, LCSW	(209) 468-8750	Unknown	No	No	No		Opt Out		\$2,678,000.00
San Luis Obispo	Karen Baylor, PhD	(805) 781-4734	Member	Yes	Yes	Yes		No		\$1,032,000.00
San Mateo	Louise Rogers, MPA	(650) 573-2532	Yes	No	No	No		No		\$2,610,800.00
Santa Barbara	Ann Detrick, PhD	(805) 681-5233	Unknown	No	No	No		12/9/08		\$1,808,800.00
Santa Clara	Nancy Pena, PhD	(408) 885-5782	Yes	8/10/2010	Pending	Pending		12/16/08		\$7,707,600.00
Santa Cruz	Leslie Tremaine, Ed.D.	(831) 454-4515	Yes	Yes	Yes	Pending		1/5/09		\$1,130,000.00
Shasta	Mark Montgomery, Psy.D.	(530) 225-5900	No	No	No	No		Opt Out		\$704,400.00
Sierra	Carol Roberts, PhD	(530) 993-6700	Unknown	No	No	No		No		\$100,000.00
Siskiyou	Lauri A. Hunner, LCSW	(530) 841-4801	Yes	No	No	No		No		\$143,200.00
Solano	Glenda Lingenfelter, RN	(707) 784-8320	Member	Yes	Yes	Yes		1/27/09		\$1,604,400.00
Sonoma	Michael Kennedy, MFT	(707) 565-5157	Member	Yes	Yes	Yes	5/31/10	No		\$1,758,800.00
Stanislaus	Denise C. Hunt, RN, MFT	(209) 525-6225	Member	Yes	Yes	Yes		12/11/08		\$2,040,800.00
Sutter/Yuba	Brad Luz, PhD	(530) 822-7200	Member	Yes	Yes	Yes		6/18/09		\$600,800.00
Tehama	Ann Houghtby, MFT	(530) 527-8491	Unknown	No	No	No		No		\$242,800.00
Tri-City	Jesse H. Duff	(909) 623-6131	Unknown	No	No	No		No		\$817,200.00
Trinity	Noel O'Neill, LMFT	(530) 623-1362	Member	Yes	Yes	Yes		No		\$100,000.00
Tulare	Cheryl L. Duerksen, PhD	(559) 737-4660	Unknown	No	No	No		No		\$1,928,400.00
Tuolumne	Tracy Riggs	(209) 533-6245	Unknown	No	No	No		No		\$193,200.00
Ventura	Meloney Roy, LCSW	(805) 981-2214	Yes	No	No	No		No		\$3,339,200.00
Yolo	Kim Suderman	(530) 666-8516	Yes	7/27/10	8/12/10	Pending	6/14/10	4/24/09		\$832,800.00
Legend										\$160,000,000.00
Member Counties										Updated as of July 28, 2010

SUMMARY OF COUNTY OUTREACH

July 30, 2010

LIST A

(Chance of becoming a member, have indicated interest and moving forward)

Contra Costa, El Dorado, Fresno, Humboldt, Imperial, Kern, Kings, Mendocino, Napa, Riverside, San Diego (MOU Participation), Santa Clara, Siskiyou, Ventura

LIST B

(Have expressed interest but not sure what to do, internal discussions necessary)

City of Berkeley, Calaveras, Madera, Merced, San Mateo

LIST C

(Don't know, have many questions)

Alameda, Alpine, Amador, Del Norte, Lake, Lassen, Mariposa, Nevada, San Benito, San Francisco, San Joaquin, Santa Barbara, Shasta, Tehama, Tri-City, Tulare, Tuolumne

LIST D

(Have opted out)

Inyo, Mono, Plumas

MEMBER COUNTIES

Butte, Colusa, Glenn, Los Angeles, Modoc, Monterey, Placer, Sacramento, San Bernardino, San Luis Obispo, Santa Cruz, Solano, Sonoma, Stanislaus, Sutter, Yuba, Trinity, Orange (Pending CalMHSA BD Approval), Marin (Pending CalMHSA BD Approval), Yolo (Pending CalMHSA BD Approval)

ADMINISTRATIVE MATTERS
Agenda Item 8.A.

SUBJECT: CalMHSA Vision and Purpose Statements

BACKGROUND AND STATUS:

At the June 10, 2010 Board meeting, the group decided to table the decision regarding the CalMHSA Vision and Purpose Statements. The group collectively decided to review both statements at the Board meeting on July 15, 2010. Feedback was requested by the August 12, 2010 meeting.

RECOMMENDATIONS:

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

REFERENCE MATERIALS ATTACHED:

- CalMHSA Vision Statement
- CalMHSA Purpose Statement
- Input Received

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.

DRAFT

CalMHSAs Purpose Statement



Promoting Efficiency, Effectiveness, and Enterprise among Counties

DRAFT

CalMHSA Vision and Purpose Statements



Input is forthcoming.

ADMINISTRATIVE MATTERS
Agenda Item 8.B.

SUBJECT **Program Participation Agreement**

BACKGROUND AND STATUS:

At the July 15, 2010 board meeting members took action to approve the Program Participation Agreement with discussion relating to governance and liabilities for members of separate programs. The board requested that Doug Alliston, legal counsel, provide further clarification as it relates to liability.

RECOMMENDATIONS:

For discussion only.

REFERENCE MATERIALS ATTACHED:

- Program Participation Agreement

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY
PARTICIPATION AGREEMENT
COVER SHEET

1. _____ (“Participant”) desires to participate in the Program identified below.

Name of Program: _____

2. California Mental Health Services Authority (“CalMHSA”) and Participant acknowledge that the Program will be governed by CalMHSA’s Joint Powers Agreement and its Bylaws, and by the MOU through which non-Members participate. The following exhibits are intended to clarify how the provisions of those documents will be applied to this particular Program.

- Exhibit A Program Description and Funding
- Exhibit B General Terms and Conditions
- Exhibit C Special Terms and Conditions (optional)

3. The term of the Program is _____ through _____.

4. Authorized Signatures:

CalMHSA

Signed: _____ Name (Printed): _____

Title: _____ Date: _____

Participant

Signed: _____ Name (Printed): _____

Title: _____ Date: _____

PARTICIPATION AGREEMENT
Exhibit B – General Terms and Conditions

I. Definitions

Throughout this Participation Agreement, the following terms are defined as follows:

- A. CalMHSA - California Mental Health Services Authority, a Joint Powers Authority created to jointly develop and fund mental health services and education programs for its Member Counties and Partner Counties.
- B. Department of Mental Health (DMH) - The California Department of Mental Health.
- C. Member – refers to a County (or JPA of two or more Counties) that has joined CalMHSA and executed the CalMHSA Joint Powers Agreement.
- D. Mental Health Services Act (MHSA) – Initially known as Proposition 63 in the November 2004 election, which added sections to the Welfare and Institutions Code providing for, among other things, PEI Programs.
- E. Mental Health Services Oversight and Accountability Commission (OAC) - The oversight body to ensure the activities are in accordance with the Mental Health Services Act.
- F. Partner - A non-Member County (or multi-county JPA) participating in a Program with CalMHSA Members.
- G. Participant– Counties participating in the Program either as Members of CalMHSA or as Partners under a Memorandum of Understanding with CalMHSA.
- H. Program – The program identified in the Cover Sheet.

II. Responsibilities

- A. Responsibilities of CalMHSA:
 - 1. Develop Program plan, updates, and/or work plans as necessary on behalf of and in coordination with Participants that are consistent with applicable laws, regulations, guidelines and/or contractual obligations. These may include, but are not limited to, obligations imposed by DMH and/or OAC.
 - 2. Act as fiscal and administrative agent for Participants in the Program.
 - 3. Directly or indirectly (through a contracted JPA Management firm) hire and employ Program Directors and other administrative staff as necessary to perform under this Memorandum.
 - 4. Submission of plans, updates, and/or work plans on behalf of and/or in coordination with Participants for review and approval by any public agency with authority over the Program.

5. Management of funds received the Program consistent with the requirements of any applicable laws, regulations, guidelines and/or contractual obligations.
 6. Provide regular fiscal reports to Participants and/or other public agencies with a right to such reports.
 7. Develop allocation model for allocation of funds and expenses among Participants, years, and Programs.
 8. Compliance with CalMHSA's Joint Powers Agreement and Bylaws.
- C. Responsibilities of Participants:
1. Timely assignment, payment or other transfer of amounts assessed for the Program.
 2. Identification of a representative authorized to act for Participant and receive notices on behalf of Participant. Identification of an alternate to attend meetings in absence of representative.
 3. Attend advisory committee meetings for the Program, and provide input as necessary to accomplish the purposes of the Program.
 4. Cooperate by providing CalMHSA with requested information and assistance in order to fulfill the purpose of the Program.
 5. Provide feedback on Program performance.
 6. Timely and complete submission in response to requests for information and items needed.
 7. Acknowledgement that funds contributed by the Participant will be pooled with the funds of other Participants in the Program, and jointly used to meet the objectives of the Program, pursuant to the allocation formula adopted for the Program. Program expenses will normally include a proportionate share of CalMHSA's general administrative expenses, since there is no independent source of funding for such expenses.
 8. Compliance with applicable laws, regulations, guidelines, contractual agreements, joint powers agreements and bylaws.

III. Duration and Term

- A. The term of the Program is as shown on the Cover Sheet. The Program may be extended or terminated early depending on the availability of funds.
- B. Any Participant may withdraw from the Program upon six months written notice. Notice shall be deemed served on the date of mailing.
- C. The majority of the Participants may vote to expel a Participant from the Program for cause. Cause shall be defined as any breach of this Participation Agreement, any misrepresentation, or fraud on the part of any Participant.

IV. Withdrawal, Cancellation and Termination

- A. The withdrawal of a Participant from the Program shall not automatically terminate its responsibility for its share of the expenses and liabilities of the Program. The contributions of current and past Participants are chargeable for their respective share of unavoidable expenses and liabilities arising during the period of their participation
- B. Upon cancellation, termination or other conclusion of the Program, any funds remaining undisbursed after CalMHSA satisfies all obligations arising from the operation of the Program shall be distributed and apportioned among the Participants in proportion to their contributions.

V. Fiscal Provisions

- A. Funding required from the Participants will not exceed the amount stated in the Cover Sheet.
- B. Participants will share in the costs of planning, administration and evaluation in the same proportions as their overall contributions.

PARTICIPATION AGREEMENT
Exhibit A – Program Description and Funding

- I. Name of Program**

- II. Term of Program**

- III. Program Objectives and Overview**

- IV. Project Activities**

- V. Evaluation**

- VI. Program Expenses**

- VII. Administrative Expenses for Program**

- VIII. Administration Expenses of CalMHSA for All Programs**

- IX. Allocation Among Participants (Formula)**

PROGRAM MATTERS
Agenda Item 9.A.

SUBJECT: Report from CalMHSA Program Director – Edward Walker

BACKGROUND AND STATUS:

During each Board meeting, Mr. Edward Walker, CalMHSA Program Director, will provide a verbal report on the status regarding stakeholder input as well as an update on the Implementation Ad Hoc Committee.

The Implementation Ad Hoc Committee had an initial meeting on Tuesday, July 27, 2010. Action was taken to make Wayne Clark, PhD, the committee chair. The Scope of Responsibilities report was amended and approved. Discussion was held regarding criteria, evaluation requirements, and tasks around RFPs and RFQs.

RECOMMENDATION:

Approval of the proposed ad hoc committee recommendations regarding stakeholder input and implementation plan.

REFERENCE MATERIALS ATTACHED:

- Implementation Ad Hoc Committee – July 27, 2010 Meeting Notes
- Implementation Ad Hoc Committee – Scope of Responsibilities

California Mental Health Services Authority
Implementation Ad Hoc Committee
Meeting Notes
July 27, 2010
1:06 – 2:42p.m.

Members Present:

Anne Marie Rucker, MBA, Sacramento County
Wayne Clark, PhD, Monterey County
William Arroyo, MD, Los Angeles County
Karen Baylor, PhD, MFT, San Luis Obispo County
Maureen Bauman, LCSW, Placer County (came at item 6)

Staff Present:

John Chaquica
Edward Walker
Laura Li
Maya Maas

1. Select Committee Chair

Wayne Clark, PhD, will serve as chair.

2. Review Implementation Ad Hoc Committee Scope of Responsibilities

- The second sentence, first paragraph, page two, revised: “Committee members will recommend to CalMHSA Board guidelines and protocols”
- November 2010 timeline revised as follows:
“Dissolution of the Implementation Ad Hoc Committee pending completed implementation and Board assignments of additional responsibilities.”

3. Proposed meeting schedule:

- August 19, 2010 from 3:00 p.m. to 5:00 p.m.
- September 3, 2010 from 11:00 a.m. to 1:00 p.m.
- Will set additional meetings if needed.

4. Review stakeholder input summary template

Set following criteria:

- Statewide, regional and local organization's input to be weighted over individual comments
- Resources available
- Timeliness (may include phased implementation by project by year)

Staff will provide a preliminary summary as input comes in.

5. Discuss initial implementation planning approach

6. Identify major issues for implementation (i.e., statewide plan with regional components, budget, number of counties selecting Option 1 or 3; RFP/RFA, exceptions.)

State-wideness in balance with regional projects; RFP/RFQ or non-competitive options

7. Discuss Monterey 1st Five purchasing and procurement document as illustrative model for CalMHSA

Doug, John and Ed to discuss how the current CalMHSA Procurement Resolution can be modified to incorporate some of Monterey's procurement policies and take to the CalMHSA Board meeting for addition input. Note: Section 4: consider % of funding rather than fixed dollar amount.

8. Future Meeting Agenda Items

- Discussion of Review Panels Composition
- Scoring Rubric
- Scope of Work - RFPs/RFQs
- Criteria for sole source/non-competitive
- Evaluation Requirements
- Preliminary timeline for first set of RFPs
- Ed to create flow chart with steps, decision points, timeline for implementation

Implementation Ad Hoc Committee

Scope of Responsibilities



"A George Hills Company Administered JPA"

Introduction

As an on-going efficient delivery mechanism for statewide California mental health projects, a central component of California Mental Health Services Authority's (CalMHSA) vision is to continually promote systems and services arising from a commitment to community mental health, and to the values of the California Mental Health Services Act

- 1) community collaboration; cultural competence
- 2) client/family-driven mental health system for children, transition age youth, adults, older adults
- 3) family-driven system of care for children and youth
- 4) wellness focus, including recovery and resilience
- 5) integrated mental health system service experiences and interactions.

The CalMHSA Board called for the creation of an Implementation Ad Hoc Committee in order to establish a system for compiling, analyzing and reporting the stakeholder feedback being gathered on the three statewide Prevention and Early Intervention (PEI) programs set forth by the Advisory Committee, the Mental Health Services Oversight and Accountability Commission and the California Department of Mental Health (DMH):

- Strategic Plan for Reducing Stigma & Discrimination
- Student Mental Health Initiative
- Strategic Plan on Suicide Prevention

Pursuant to OAC Guidelines, Stakeholders have been asked to prioritize the recommended actions for each strategic direction in order to ensure that CalMHSA has stakeholder input for implementation planning. CalMHSA staff will prepare a summary report of stakeholder input for Board review. The Implementation Ad Hoc Committee will continue through to execution of an implementation plan for each Strategic Plan.

Committee Membership

The Implementation Ad Hoc Committee will be comprised of Board members or designated staff of a member county:

Karen Baylor, PhD, MFT, Treasurer, San Luis Obispo County

Maureen Bauman, LCSW, Secretary, Placer County

Wayne Clark, PhD, Vice-President, Monterey County

William Arroyo, MD, Los Angeles County

Anne-Marie Rucker, MBA, Division Planner, Sacramento County

Proposed Responsibilities

The Implementation Ad Hoc Committee is charged with determining a method for the selection of priorities in the development of implementation plans for statewide PEI programs. Committee members will recommend to CalMHSA Board guidelines and protocols in compiling, analyzing and reporting on the stakeholder input being gathered prior to the August 31, 2010 deadline. Implementation planning will be concurrent to the stakeholder input process and completed following the September 10, 2010 Board meeting.

Proposed Timeline

To ensure efficiency of time and resources, the Implementation Ad Hoc Committee shall dissolve following execution of the implementation plan.

June 10, 2010 - Creation of the Implementation Ad Hoc Committee, establish definition of membership, elect leadership, schedule future meeting dates

November 2010 - Dissolution of the Implementation Ad Hoc Committee pending completed implementation and Board assignments of additional responsibilities

PROGRAM MATTERS
Agenda Item 9.B.

SUBJECT: Technical Assistance and Capacity Building

BACKGROUND AND STATUS

The CalMHSA Technical Assistance and Capacity Building Evaluation Project is a statewide initiative that provides an array of evaluation training and support services that will strengthen Counties and their community partners' ability to implement a PEI component plan. The project proposes JPA Counties work together within a Learning Collaborative framework that will allow Counties to create and share a common framework for PEI evaluation, learn from each other in peer-to-peer activities, strengthen individual County efforts, and create and disseminate information, particularly lessons learned, to other California entities evaluating PEI projects. CalMHSA has contracted with CiMH for these services.

"Component A" in the Agreement with CiMH states, "The CalMHSA PEI Evaluation Learning Collaborative - JPA Counties will participate in a joint PEI Project Evaluation process that results in a common framework sharing approaches that support local evaluation and disseminates state level information regarding PEI Evaluation."

"Component B" in the Technical Assistance and Capacity Building Proposal, Item III, System and Design Change. This project area consists of technical assistance and capacity building activities supporting the design and development of a mental health system that is wellness focused, integrates prevention and early intervention, and fosters the promotion of mental health as an endeavor engaged in by the broader community.

Dr. Sandra Naylor Goodwin will present an update to the Board regarding the status of the following:

- 1). Component A: Including new member's participation
- 2). Component B: Discuss further as introduced at CalMHSA Board meeting on June 10, 2010

The Board discussion to follow shall be to:

- 1). Address challenges raised for progress on Component A

- 2). Input from new members for participation in Technical Assistance in general
- 3). Determine interest and start definitions of Component B, if interested

RECOMMENDATION:

Provide direction to Staff and California Institute for Mental Health (CiMH) regarding discussion points.

REFERENCE MATERIALS ATTACHED:

- Technical Assistance and Capacity Building Status Report

Report to: Board of Directors
California Mental Health Services Authority

From: Sandra Naylor Goodwin, PhD, President & CEO
Lynne Marsenich, LCSW, Project Lead
California Institute for Mental Health

Re: Evaluation Capacity Building

Date: July 30, 2010

Goal: To assist county behavioral health departments and their contractors to develop evaluations that demonstrate the impact of prevention and early intervention programs.

Participating Counties: Butte, Colusa, Monterey, Placer, San Bernardino, San Luis Obispo, Solano, Stanislaus and Sutter-Yuba

Activities: Initial phone calls with mental health directors and/or designees. The purpose is to describe the project and to begin a discussion regarding evaluation activities and technical assistance needs. Calls have been completed with all participating counties.

Site visits: The purpose of the site visits is to review PEI programs, assess evaluation plans and develop specific technical assistance activities that support current and ongoing evaluation. We have had five site visits; have dates for two additional visits and in the process of planning two others.

A matrix is attached delineating the individual counties and their participation progress.

Successes: Developing clarification on the diversity of evaluation needs among counties, leading to development of tools to address multiple issues. This is still in the development phase and will require further assessment.

Barriers/Action Plans to Alleviate:

1) The major barrier experienced to date is the time constraints on staff in county mental health departments. Specifically, departments are understaffed and stressed by the demands of the current workload and declining budgets. As a consequence it is difficult to arrange site visits (cancellations are common). Therefore, the original time line for learning collaboratives and project reports will have to be re-negotiated. Participation by the County Mental Health Director at the beginning of the project to get it started is critical for staff to prioritize.

2) Small counties have limited capacity for developing and carrying out evaluations. We will cluster the small counties in a learning collaborative or process that explores the use of qualitative approaches such as case studies.

3) There is tremendous variability across the counties regarding evaluation capacity. We have developed a “menu of options” that we believe is responsive to the diversity of needs. Examples include: evaluation design; developing measurement and data collection tools, developing protective factor surveys and evaluations, strategies for communicating outcomes to diverse audiences.

4) As budgets continue to be cut, travel out of county meetings is going to be a barrier for some of the participants. We will work with the new JPA director to explore options for including travel in the budget for this project at a future date.

5) New counties are joining the JPA, thus calls will be initiated with each county to determine whether or not they wish to join the project.

6) As additional counties join the project, and counties are clustered by level of capacity and evaluation development, the budget will need to be renegotiated with September the projected date.

Budget Report:

Income \$30,033.48

Expenditures \$33,000.00

**JPA Evaluation Capacity Building Project
Status Report
July 29, 2010**

County	Date of Call	Date of Site Visit	TA Needs
Butte	6.16.10	Likely mid-September	Site visit scheduled for 7.28.10 had to be rescheduled. Likely date is mid-September
Colusa	4.23.10	5.26.10	Case study methods which demonstrate how PEI funded programs increase access to prevention and early intervention mental health programs.
Monterey	4.5.10	7.1.10	Engaging stakeholders in the evaluation design and developing effective communication plans
Placer	4.9.10	5.24.10	Developing a matrix: PEI contracted programs – populations and intended outcomes. Increasing protective factors as a common evaluation strategy
Sacramento	4.6.10		They have decided to decline this opportunity as staff is currently very busy with a system re-design.
San Bernardino	4.8.10	6.23.10	Implementation evaluation to help determine outcome strategies. Engaging stakeholders in designing evaluation.
San Luis Obispo	5.4.10	8.17.10	CBO capacity building
Solano	4.6.10	7.30.10	Interest in continuous quality improvement project
Stanislaus	4.12.10	Likely mid-September	Desire to wait until they hire a research staff who will carry much of the evaluation responsibility
Sutter Yuba	3.31.10	8.11.10	Case study methods which demonstrate how PEI funded programs increase access to prevention and early intervention mental health programs.

PROGRAM MATTERS
Agenda Item 9.C.

**SUBJECT: Information Notice 08-37 - Mental Health Services Act (MHSA)
Prevention and Early Intervention (PEI) Funds for Training, Technical
Assistance, and Capacity Building Statewide Projects**

BACKGROUND AND STATUS

In 2007, the Mental Health Oversight and Accountability Commission (MHSOAC) approved five PEI Statewide Projects including the Training, Technical Assistance and Capacity Building Project. These Statewide Projects were also identified in the PEI proposed guidelines.

The primary goal of the Statewide Training, Technical Assistance and Capacity Building project is to improve the capacity of local partners outside the mental health system (i.e., education, primary health care, law enforcement, older adult services) as well as County staff and partners who work on the development, implementation and evaluation of prevention and early intervention work plans and programs that will be funded through the PEI component of the County's Plan. Counties may submit a written request for these funds to pay for training, technical assistance and capacity building activities that meet the given criteria in accordance with the MHSOAC.

Counties may utilize training technical assistance and capacity building methods that have demonstrated the capacity to increase skills and promote positive outcomes consistent with the MHSA and the PEI guidelines. All funded activities must comply with the requirements of the American Disabilities Act (ADA).

Counties may begin expending the funds for Training, Technical Assistance and Capacity Building Projects only upon written notification of the MHSOAC's approval.

- Role for CalMHSA

RECOMMENDATION:

Provide direction to Staff regarding discussion points above.

REFERENCE MATERIALS ATTACHED:

- Department of Mental Health Information Notice No.: 08-37



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

December 12, 2008

DMH INFORMATION NOTICE NO.: 08-37

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

SUBJECT: MENTAL HEALTH SERVICES ACT (MHSA) PREVENTION
AND EARLY INTERVENTION (PEI) FUNDS FOR TRAINING,
TECHNICAL ASSISTANCE AND CAPACITY BUILDING
STATEWIDE PROJECTS

REFERENCE: IMPLEMENTATION OF THE MHSA, WELFARE AND
INSTITUTIONS CODE (WIC) SECTION 5848

This Department of Mental Health (DMH) Information Notice provides instructions and guidance to Counties¹ about the Prevention and Early Intervention (PEI) Statewide Project for Training, Technical Assistance and Capacity Building. This Information Notice contains:

1. The Planning Estimate, which represents the amount of funding available annually for four years to implement the PEI Statewide Training, Technical Assistance and Capacity Building Project (Enclosure 1), and
2. The instructions and form (Enclosure 2) for requesting this additional funding.

This DMH Information Notice applies only to the PEI component of the Three-Year Program and Expenditure Plan (Three-Year Plan, Plan).

¹ "County" means the County Mental Health Department, two or more County Mental Health Departments acting jointly, and/or city-operated programs receiving funds per WIC Sections 5701.5 (California Code of Regulations, Section 3200.090)

I. Background of the PEI Statewide Training, Technical Assistance and Capacity Building Project

In 2007, the Mental Health Services Oversight and Accountability Commission (MHSOAC) approved five PEI Statewide Projects including the Training, Technical Assistance and Capacity Building Project. These Statewide Projects were also identified in the PEI proposed guidelines.

At its July 2008 meeting, the MHSOAC determined that the PEI Statewide Training, Technical Assistance and Capacity Building Project would be implemented through the Counties. The MHSOAC approved the funding level of \$6 million each year for four years for this Statewide PEI Project. Enclosure 1 contains the Planning Estimate for the amount of funding available annually for four years to implement the PEI Statewide Training, Technical Assistance and Capacity Building Project. Counties may request this funding through the process outlined in this Information Notice.

The primary goal of the Statewide Training, Technical Assistance and Capacity Building Project is to improve the capacity of local partners outside the mental health system (i.e., education, primary health care, law enforcement, older adult services) as well as County staff and partners who work on the development, implementation and evaluation of prevention and early intervention work plans and programs that will be funded through the PEI component of the County's Plan. The County may submit a written request for these funds to pay for training, technical assistance and capacity building activities that meet the following two criteria in accordance with the MHSOAC decision referenced above:

- Ability to develop and provide statewide training, technical assistance and capacity building services and programs, and
- Ability to partner with local and community partners via subcontracts or other arrangements to assure the appropriate provision of community-based prevention and early intervention activities.

Counties may utilize training technical assistance and capacity building methods that have demonstrated the capacity to increase skills and promote positive outcomes consistent with the MHSA and the PEI guidelines. All funded activities must comply with the requirements of the Americans with Disabilities Act (ADA).

Training and technical assistance may include:

- Interactive and practicum sessions
- Peer support
- Materials development and dissemination
- Web resources and online sessions
- On site or by phone consultation
- Train-the-trainer and other effective approaches in working with diverse audiences

Capacity building activities may include:

- Establishing communication venues (e.g., listservs, conference calls, etc.) to enhance the sharing of information and resources across systems
- Joint/co-sponsored multi-disciplinary conferences, webinars, etc.
- Mentoring and other collaborative opportunities (e.g., job shadowing, cross-discipline training)

II. Instructions for Requesting Funding

When requesting funds for the statewide Training, Technical Assistance and Capacity Building Project for FY 2008/09 and 2009/10, the County should submit Enclosure 2 and follow the instructions listed below. The initial funding of \$6 million for Fiscal Year (FY) 2008-2009 is now available to the Counties. Under the current disbursement policy, each County will receive 75 percent of its approved annual Plan amount upon execution of an MSHA Agreement or at the start of the fiscal year, whichever is later. The remaining 25 percent will be distributed upon submission of required reports, including the semi-annual Local MHS Fund Cash Flow Statement and the Annual MSHA Revenue and Expenditure Report. For Counties with an approved Plan that has a PEI component, FY 2009/10 funds will be distributed with the County's annual update.

Depending on the approval status of the PEI component of the County's Three-Year Plan, a County will follow one of the procedures described below to request funds for FY 2008/09 and 2009/10. Please note that Counties may begin expending the funds for Training, Technical Assistance and Capacity Building Projects only upon written notification of the MHSOAC's approval.

- A. County without an approved PEI component: The County may request Training, Technical Assistance and Capacity Building funding by completing the Training, Technical Assistance and Capacity Building Funding Request form (Enclosure 2). In accordance with all applicable regulations, a 30-day public comment period and a public hearing is required for Counties without an approved PEI component Plan. The Training, Technical Assistance and Capacity Building Funding Request Form (Enclosure 2) can be submitted by either of the following means:
1. As a part of the PEI component of the County's Three-Year Plan. To access the additional PEI Planning Estimates for the PEI Statewide Training, Technical Assistance and Capacity Building Project identified in Enclosure 1, the County should complete and submit the Training, Technical Assistance and Capacity Building Funding Request Form (Enclosure 2), along with all other required forms and narrative descriptions, as outlined in the DMH Information Notices 07-19 and 08-23.
 2. Or separately and in advance of completing and submitting the PEI component of the County's Three-Year Expenditure Plan for the full review

and approval process. If the County is only submitting the Training, Technical Assistance and Capacity Building Funding Request Form (Enclosure 2), the County should also follow the instructions provided in DMH Information Notice 07-19 for submitting Form No. 2 to describe the County's Community Program Planning Process relevant to the Training, Technical Assistance and Capacity Building funding request. Please submit a hard copy (with an original signature) and an electronic copy to each of the following offices:

California Department of Mental Health
Prevention and Early Intervention Section
Attention: Caitlin Viscardi
Training, Technical Assistance and Capacity Building Request
1600 9th Street, Room 150
Sacramento, CA 95814
PEI@dmh.ca.gov

Mental Health Services Oversight and Accountability Commission
Attention: Nicole Behler
1300 17th Street, Suite 1000
Sacramento, CA 95814
Nicole.Behler@dmh.ca.gov

- B. County with an approved PEI component: Counties must post their Training, Technical Assistance and Capacity Building Projects for a 30-day public comment period prior to submission. The County should complete and submit the Training, Technical Assistance and Capacity Building Funding Request Form (Enclosure 2). To submit this form, the County should send the request for funding to the offices as indicated in Section II.A.2 above.

For the last two remaining years, each County is expected to include the amount requested for the statewide Training, Technical Assistance and Capacity Building Project as part of the County's Plan or annual update for FY 2010/11 and FY 2011/12, respectively. The budget forms for FY 2010/11 and FY 2011/12 will include further instructions about this funding request.

III. Review and Approval

The MHSOAC specifies that PEI proposed expenditures are to be reviewed jointly by DMH and the MHSOAC with the final approval by the MHSOAC. If a County chooses to submit its Training, Technical Assistance and Capacity Building funding request with its initial PEI component submission, the review and approval process of the funding request will be part of the review and approval of the PEI component of the County's Plan.

However, for those Counties with an approved PEI component, the request for funding for Training, Technical Assistance and Capacity Building can be sent separately. The

combined review by DMH and the MHSOAC will generally not exceed 30 days from the date of submission.

The MHSOAC will notify the County of the approval of its funding request in writing. DMH will initiate a unilateral modification to the County's executed MHSA Agreement before funds are released. Funds will not be allowed for expenditures that are incurred prior to receiving MHSOAC's approval.

IV. Fiscal Considerations

Counties should track their PEI Statewide Training, Technical Assistance and Capacity Building funds separately from other PEI expenditures. Counties will report the expenditure of these funds separately on the Annual MHSA Revenue and Expenditure Report. Counties should consult with their Auditor-Controller for guidance on when funds are considered expended.

V. Additional Information or Questions

The MHSOAC and DMH are pleased to be able to offer these additional resources to support training, technical assistance and capacity building programs and activities to help ensure the Counties and their partners will be better equipped to implement PEI programs that will make a difference.

If you have any questions about this Information Notice, please contact Bertha MacDonald at (916) 651-0693 or Bertha.MacDonald@dmh.ca.gov.

Sincerely,

Original signed by

STEPHEN W. MAYBERG, Ph.D.
Director

Enclosures

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

CALMHSA – GENERAL DISCUSSION
Agenda Item 11

SUBJECT: Report from CalMHSA Executive Director – John Chaquica

BACKGROUND AND STATUS:

CalMHSA Executive Director, John Chaquica, will provide general information and updates regarding the JPA.

At the Implementation Ad Hoc Committee's July 27th meeting, the current CalMHSA procurement policy was reviewed along with a sample of Monterey First 5's procurement policy. Mr. Chaquica has discussed the current policy with Mr. Alliston, legal counsel, regarding any changes that might be helpful as CalMHSA moves towards implementation.

RECOMMENDATIONS:

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

REFERENCE MATERIALS ATTACHED:

- CalMHSA Procurement Policy
- Monterey First 5 Procurement Policy

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

ARTICLE VII. PURCHASING AND PROCUREMENT POLICY

(Adopted 12/2/04; Amended 6/22/06, 2/27/07, 6/25/07, and 1/26/09)

SECTION 1: PURPOSE

The purpose of this purchasing policy is to provide a framework describing the different methodologies used to procure goods and services. The methodologies described below insure fairness and accountability in the selection process while affording the flexibility necessary to efficiently conduct the business affairs of *F5MC*.

SECTION 2: POLICY

Pursuant to Health and Safety Code sections 130100 et. seq., *F5MC* has the power to employ personnel, contract for personnel, and enter into contracts necessary or appropriate to carry out the provisions of the California Children and Families Act (“Act”). No individual may contract on behalf of *F5MC* unless he or she has been specifically delegated authority by this policy, state law, or other act of *F5MC*.

Grants and contracts must be consistent with the *F5MC* Strategic Plan. All grants will include this requirement and will be monitored to assure consistency with the Commission’s Strategic Plan.

F5MC is not required to award a contract for services to the proposal with the lowest cost. *F5MC* must select the service provider that best meets the needs of the Commission.

SECTION 3: PURCHASE OF GOODS

The Executive Director or his or her designee has the authority to purchase supplies, materials, equipment or other personal property (“goods”) in support of the Commission’s goals and objectives, if the total purchase order amount for the same or similar goods is provided for in the annual budget and the purchase price is equal to or less than \$25,000 from the same vendor in the same fiscal year.

The purchase of goods with the unit cost of \$1,000 and under for the same or similar goods from the same vendor in the same fiscal year require approval by the Executive Director or his or her designee, but do not require written documentation.

The purchase of goods with the unit cost of over \$1,000, but less than \$25,000 for the same or similar goods from the same vendor in the same fiscal year may be procured using an informal competitive selection process as described in Section 5.

The purchase of goods over \$25,000 for the same or similar goods from the same vendor in the same fiscal year requires an Invitation to Bid (ITB) as described in Section 10 or a similar process. Incremental contracting with the same vendor cannot be used to avoid the requirements of this policy.

Section 3.1: Preference For US Produce And Processed Foods

Pursuant to Public Contract Code section 3410, preference will be given to US grown produce and US processed foods where there is a choice and it is economically feasible to

do so. In determining economic feasibility, total cost, quantity and quality of the food will be considered.

Section 3.2: Preference For Recycled Products

1. Recycled products will be purchased whenever they are available at the same or lesser total cost than non-recycled items. A preference may be given to a vendor of recycled products in accordance with Public Contract Code sections 22150(b) and (c).
2. All vendors must certify in writing the minimum, if not exact, percentage of postconsumer materials in products offered or sold to the Commission.
3. Vendors must certify in writing if printer or duplication cartridges comply with Public Contract Code section 12156, which prohibits restrictions on recycling or remanufacturing of such cartridges unless the vendor has a recycling or remanufacture program.
4. The written certification requirement in 2, and 3, above may be waived if the percentage of post consumer materials in the goods can be verified in product written materials.
5. All printing contracts must provide that the paper used meets the recycled contract requirements of Public Contract Code section 12209, which requires recycled printing and writing paper to consist of at least 30%, by fiber weight, post-consumer fiber.

SECTION 4: PURCHASE OF SERVICES

The Executive Director or his or her designee has the authority to negotiate, execute and amend contracts in support of the Commission's goals and objectives if the total contract amount for the same or similar services is equal to or less than \$25,000 from the same vendor in the same fiscal year. The Executive Director will report to the Finance/Personnel Committee on a monthly basis outlining all contracts signed under this delegation.

The purchase of services of \$1,000 and under for the same or similar services from the same vendor in the same fiscal year require approval by the Executive Director or his or her designee, but do not require written documentation.

The purchase of services over \$1,000, but less than \$25,000 for the same or similar services from the same vendor in the same fiscal year may be procured by using an informal competitive selection process as described in Section 5.

The purchase of services over \$ 25,000 for the same or similar services from the same vendor in the same fiscal year requires ~~either one of the following:~~ Community Grantmaking (CGM) process, Request for Proposals (RFP), Request for Application (RFA) or Request for Qualifications (RFQ) as described in Sections 7, 8, and 9, unless the Selection Process Exceptions in Section 11 apply.

The Executive Director or his or her designee has the authority to extend a contract in order to enable the contractor/funded partner to complete the Scope of Work as long as there are no additional costs incurred. The Executive Director will report to the Finance/Personnel Committee when a contract requires such a no-cost extension.

Incremental contracting with the same vendor cannot be used to avoid the requirements of this policy.

SECTION 5: INFORMAL SELECTION PROCESS

An Informal Selection Process involves a price request over the phone, fax or email and must be documented from at least three vendors and selecting the vendor that best fits *F5MC*'s needs, considering quality and price. If it is not possible to obtain at least three offers, the reasons should be documented in writing. A written record must be created for phone solicitations. An Informal Selection Process may be used only if the goods or services are clearly defined and a potential vendor can give an accurate price quotation.

An Informal Selection Process can be used to procure the same or similar goods or services with a single vendor in the same fiscal year if the total purchase price does not exceed \$25,000.

Upon successful completion of the initial term, contracts for services procured through an informal selection process may be extended for up to an additional year if it is in *F5MC*'s best interest to do so.

SECTION 6: LETTER OF PRE-APPLICATION (LOPA)

A Letter of Application (LOPA) is a preliminary, streamlined process that may be used at *F5MC*'s discretion to identify applicants who can participate in a CGM (Section 7) or a RFP/RFA (Section 8) process. The LOPA is used to determine an applicant's capacity to provide the desired service and alignment with the goals and objectives of the respective CGM or RFP/RFA process.

Announcement of the LOPA process: When this preliminary step is used, it will either precede or be incorporated into the overall timeline of an CGM or RFP/RFA process as determined by *F5MC*. The specific requirements of the LOPA will be determined by *F5MC* on a case by case basis, and may include:

1. Requirements statement which may include, but is not limited to: a description of the strategy or service that the applicant is expected to accomplish; standards for quality and quantity; expected timelines; eligibility requirements; organizational requirements; financial requirements; and insurance requirements.
2. Submission criteria that may include a calendar of key dates and times, instructions where and to whom submissions are to be submitted and formatting requirements.
3. Review process description and review criteria. ~~There shall be a two-step process to evaluate submissions.~~ The review panel will determine which submissions are responsive to the identified needs and desired outcomes included in the requirements statements. The review panel will ~~then also~~ assess the financial and/or programmatic strength of the applicants to ensure that they have the capacity to provide said services and/or that the proposed activities are in alignment with the goals and objectives of the CGM or RFP/RFA process. An applicant oral interview may be part of the panel review process.

4. Terms and conditions of the LOPA process including, but not limited to, *F5MC's* right to: reject all submissions; amend or cancel the LOPA process at any time for any reason; waive any minor irregularities or informalities in any submission; and request clarification from any applicant. The LOPA may be amended by an Addendum to all applicants who received the original LOPA and advertised in a manner consistent with the original LOPA.
5. A contact person at *F5MC* who is available during the LOPA process.

Review Panel

The Executive Director or his or her designee appoints members of the review panel based on their qualifications and expertise. All review panel members must sign a conflict of interest form. Review panel deliberations are confidential. Commissioners and *F5MC* staff are not eligible to ~~sit~~ be scoring members on a LOPA review panel.

Review Panel recommendation to Commission for approval

The review panel evaluates the LOPA and recommends the applicants who may proceed with a full proposal/application in accordance with the ~~CGM or RFP~~ grantmaking process. A recommendation to proceed to the full proposal/application is based upon both the capacity of the organization and their technical ability to meet community needs and desired outcomes.

Appeal

Notice of the review panel's recommendation will be sent to all applicants who participated in the process prior to recommendations going forward to Commission for approval. The appeals process will outline the grounds for appeal, the time, place and person to whom an appeal must be filed.

SECTION 7: COMMUNITY GRANTMAKING (CGM)

Community Grantmaking is a collaborative funding allocation process that uses community input to provide services by fostering cooperation among qualified groups, organizations and individuals to join together to plan and implement programs, services and/or activities maximizing the impact and involvement in the community. During the procurement process staff provides technical assistance and assists potential vendors in clarifying a Commission need, sharing desired outcomes, areas of evaluation, and budget and program development up until the date of written submission. A review process by an independent review panel is used to evaluate the submission and recommend award levels. There may or may not be more than one submission. A CGM award is not based upon cost but upon technical ability to meet community needs and desired outcomes. The Commission approves all CGM awards unless otherwise specifically delegated to a Committee or the Executive Director. The initial term and provisions for allowable extensions will be specified in the CGM application.

The full possible contract term includes the initial term and any allowable extensions as specified in the CGM application. After the full possible contract term, the contract may be extended or a new contract may be executed with the same vendor for the same or similar services for one additional year without conducting a new selection process if the vendor is meeting the service delivery goals, and it is in *F5MC's* best interest to continue the contract.

After the additional year of the contract, **F5MC** will evaluate the service delivery and determine whether to conduct a new selection process or if it is in **F5MC's** best interest to continue the contract for one more year.

A new selection process must be conducted after the extensions provided above.

The CGM application must contain the following:

1. A clear and concise requirements statement describing the strategy or service and what the vendor is expected to accomplish. The requirements statement may include standards for quality and quantity, expected performance and time lines, eligibility requirements, staffing requirements, or financial requirements. The specifications contained in the requirements statement must be nonrestrictive to provide an equal basis for competition and participation for an optimum number of potential vendors.
2. The vendor's responsibility criteria that may include references, financial statements, licenses, bonding and insurance.
3. Submission criteria that may include a calendar of key dates and times, instructions where and to whom submissions are to be submitted, price limitations and formatting requirements.
4. A description of the review process and review criteria related to the specifications of the requirements statement. ~~There shall be a two step process to evaluate submissions.~~ The review panel will determine which submissions are responsive to the identified needs and desired outcomes included in the requirements statements. The review panel will ~~then also~~ assess the financial and programmatic strength of the vendors to ensure that they have the capacity to provide said services. If more than one submission is received, selection shall be based on the submission most advantageous to **F5MC** and the ~~communities community(ies)~~ based on this selection process. If one submission is received, the review panel will still provide a recommendation as to the soundness of the submission.
5. Terms and conditions of the CGM process include, but are not limited to **F5MC's** right to reject all submissions; amend or cancel the CGM process at any time for any reason before a contract is executed; accept all or a portion of any submission; waive any minor irregularities or informalities in any submission; and request clarification from any vendor.
6. A stated appeals process outlining the time, place and person to whom an appeal must be filed.
7. A contact person at **F5MC** who is available during the CGM process.

The Executive Director or his or her designee appoints members of the review panel based on their qualifications and expertise. All members of a review panel must sign a conflict of interest form. Review panel deliberations are confidential. Commissioners and **F5MC** staff are not eligible to ~~sit on~~ be scoring members on a CGM review panel. An applicant oral interview may be part of the panel review process.

The CGM application may be amended if the change is issued in writing in the form of an Addendum to all vendors who received the original CGM application and advertised in a manner consistent with the original CGM application.

SECTION 8: REQUEST FOR PROPOSALS (RFP)/REQUEST FOR APPLICATION (RFA)

A Request for Proposal (RFP) is used for solicitation purposes when *F5MC's* requirements are not well defined but *F5MC* needs to achieve specified outcomes. The solicitation requires the potential vendor to prepare a written proposal that explains in detail how the potential vendor plans to meet *F5MC's* requirements. Innovative ideas and techniques that may benefit *F5MC* may be included in the proposal.

A Request for Application (RFA) is used for solicitation purposes when *F5MC's* requirements are well defined, including service strategies to meet desired outcomes. The solicitation requires the vendor to describe how they will provide the described services in order to meet *F5MC's* desired outcomes.

An RFP/RFA award is not made based on the lowest price, but upon technical superiority of the proposal within a reasonable proximity to the other proposed prices. The initial term and provisions for allowable extensions will be specified in the RFP/RFA.

The full possible contract term includes the initial term and any allowable extensions as specified in the RFP/RFA. After the full possible contract term, the contract may be extended or a new contract may be executed with the same vendor for the same or similar services for one additional year without conducting a new selection process if the vendor is meeting the service delivery goals and it is in *F5MC's* best interest to continue the contract.

After the additional year of the contract, *F5MC* will evaluate the service delivery and determine whether to conduct a new selection process or if it is in *F5MC's* best interest to continue the contract for one more year.

A new selection process must be conducted after the extensions provided above.

An RFP/RFA must contain the following:

1. A clear and concise requirements statement describing the problem to be solved and what the vendor is expected to accomplish. The requirements statement may include standards for quality and quantity, expected performance and time lines, eligibility requirements, staffing requirements, or financial requirements. The specifications contained in the requirements statement shall be nonrestrictive to provide an equal basis for competition and participation and an optimum number of potential vendors.
2. The vendor's responsibility criteria that may include references, financial statements, licenses, bonding and insurance.
3. Submission criteria that may include a calendar of key dates and times, instructions where and to whom proposals are to be submitted, price limitations and formatting requirements.
4. The review process and review criteria related to the specifications of the requirements statement. The RFP/RFA shall set forth the criteria and may include the weight each is given. ~~There shall be a two-step process to evaluate proposals. The first step is to determine which proposals are responsive and from responsible vendors. The second step is to evaluate those responsive and responsible vendors~~

~~based on criteria related to the requirements statement.~~ An applicant oral interview may be included as part of the review process. Selection shall be based on the proposal most advantageous to *F5MC* based on the findings from the ~~two-step~~selection process.

5. Terms and conditions of the RFP/RFA process including, but not limited to *F5MC's* right to reject all proposals, amend, or cancel the RFP/RFA at any time for any reason before the contract is executed, to accept all or a portion of any proposal, and to waive any minor irregularities or informalities in any proposal and to request clarification from any vendor.
6. A stated appeals process outlining the time, place and person to whom an appeal must be filed.
7. A contact person at *F5MC* who is available during the RFP/RFA process.

Proposals must be received at the time and place specified in the RFPsolicitation. Late proposals cannot be accepted. Proposals remain confidential until a contract is executed.

Members of the review panel are selected based on their qualifications and expertise and are appointed by the Executive Director or his or her designee. At least one member of the review panel will not be an employee or contractor of *F5MC*. All members of a review panel must sign a conflict of interest form. Review panel deliberations are confidential.

A potential vendor may not be involved in drafting the RFP/RFA. While specifications can be obtained from potential vendors, *F5MC* is responsible for ensuring that those specifications are not unduly restrictive.

An RFP/RFA may be amended if the change is issued in writing in the form of an Addendum to all vendors who received the original solicitation and advertised in a manner consistent with the original RFP/RFA.

SECTION 9: REQUEST FOR QUALIFICATIONS (RFQ)

A Request for Qualifications (RFQ) is used for solicitation purposes when *F5MC* requires a consultant or specific service provision and the qualifications to provide the service requirements are well defined. The ~~RFP~~ process in Section 8 may be streamlined to eliminate using a review panel and the responses are not sealed. The Executive Director or his or her designee may evaluate the responses to the RFQ based on the paper submission and/or may conduct interviews as he or she deems appropriate. This evaluation may include an oral interview. An RFQ award is not made based on the lowest price, but upon the consultant who is best ~~fits~~ qualified to meet the service requirements within a reasonable proximity to the other proposed prices. The initial term and provisions for allowable extensions will be specified in the RFQ.

The full possible contract term includes the initial term and any allowable extensions as specified in the RFQ. After the full possible contract term, the contract may be extended or a new contract may be executed with the same vendor for the same or similar services for one additional year without conducting a new selection process if the vendor is

meeting the service delivery goals and it is in *F5MC's* best interest to continue the contract.

After the additional year of the contract, *F5MC* will evaluate the service delivery and determine whether to conduct a new selection process or if it is in *F5MC's* best interest to continue the contract for one more year.

A new selection process must be conducted after the extensions provided above.

SECTION 10: INVITATION TO BID (ITB)

An Invitation to Bid (ITB) is used to obtain clearly specified goods in excess of \$25,000 from the same vendor in the same fiscal year. The initial term and provisions for allowable extensions will be specified in the ITB. After the initial term, *F5MC* may extend or enter into a new contract with the same vendor for the same or similar goods without conducting a new selection process if the vendor is meeting the service delivery goals. After the second term of the contract, *F5MC* will review the contract and determine whether or not a new selection process is needed or if it is in *F5MC's* best interest to continue the contract.

All ITBs shall include the following:

1. A clear and concise specification that describes the goods sought, but it must not be too restrictive. For instance, if the specification requires "brand name or equal" the bidder offering, "equal" must submit complete specifications and/or samplers with their bids. Determination of equity is the sole discretion of *F5MC*.
2. The vendor's responsibility criteria that may include references, plan capacity, credit data, financial statements, licenses, bonding and insurance.
3. Submission criteria that may include a calendar of key dates and times, instructions where and to whom bids are to be submitted, the number of bids to be submitted, cost/pricing instructions, signature requirements and contact information.
4. Terms and conditions that will be incorporated into the purchase order or contract including, but not limited to, *F5MC's* right to reject all bids, amend, or cancel the ITB at any time for any reason before the contract is executed, to accept all or a portion of any bid, and to waive any minor irregularities or informalities in any bid and to request clarification from any bidder.

After the bids are opened, they are evaluated by a selection panel appointed by the Executive Director or his or her designee. Bids are evaluated based on the requirements set forth in the ITB, which may include criteria to determine acceptability such as inspection, testing, quality, workmanship, delivery, or suitability for a particular purpose. The evaluation shall be based on the face value of the bid and shall consider the following cost factors: the total bid price including discounts, the unit or extended price and the administrative costs, hour rates for specified personnel, *F5MC's* administrative costs, maintenance costs and warranty provisions, life cycle cost, repurchase value or residual value of Goods after a specified number of years in cases where the residual value can be objectively ascertained, the cost and rate of consumables, freight shipping and handling, assembly and start up.

The panel shall also consider the following responsibility and responsiveness factors: general reputation and experience of the bidder, the bidder's ability to service Commission, financial ability to meet the requirements, prior knowledge of and experience with the bidder based on past performance, nature and extent of company data furnished by bidder upon request, size and location of bidder's warehouse, bidder's ability to meet delivery and stocking requirements, bidder's experience with commodities or systems, length of time the commodities or systems have been on the market, adherence to the requirements and condition of the ITB, quality and quantity of merchandise offered, compatibility with existing commodities or systems, overall completeness of the commodity line offered and delivery or completion date. After the panel evaluates the bids, the award shall be made to the lowest responsible responsive bidder that meets the ITB requirements.

SECTION 11: SELECTION PROCESS EXCEPTIONS

All goods or services over \$1,000 shall be procured by a competitive selection process unless the Commission or Executive Director, or his/her designee, determines one of the circumstances below is satisfied. The selection process or the exception must be documented.

1. **Sole Source.** If the goods or services are a sole source a written justification is required. To determine whether or not the goods or services are a sole source, the following factors must be considered.
 - a. The uniqueness of a vendor's capabilities or goods offered to meet the needs of *F5MC* as compared to other contractors.
 - b. There is only one viable provider of the required service in the community.
 - c. The prior experience of the proposed vendor is vital to the goods or services.
 - d. The facilities, staff or equipment the proposed vendor has that are specialized and vital to the services required.
 - e. Whether or not the contractor has a substantial investment that would have to be duplicated at the expense of *F5MC* if another vendor provided services.
 - f. The contractor's ability to provide goods or services in the required time frame.
 - g. Retaining professional services, such as but not limited to, an attorney, auditor or insurance agent, to maintain expertise, continuity, consistency and knowledge of the Commission.
 - h. After a solicitation of a number of sources, competition is determined to be inadequate.
 - i. Patent rights or copyrights or secret processes the contractor possesses, compatibility with existing *F5MC* goods.
 - j. Existing equipment maintenance programs or contracts.
 - k. All local providers of a particular service will receive funding.
 - l. *F5MC* is contemplating an effort that has not previously been done in the community and is therefore unable to either develop an RFPa grantmaking process with sufficient specificity or to identify potential providers.

2. **Emergency.** When goods or services are necessary to further the purpose of the Act or for the protection of *F5MC* personnel or property and time is of the essence.
3. **State/~~or~~ County/Federal or Cooperative Vendor.** *F5MC* may use a vendor under contract with the State/~~or~~ County/Federal or Cooperative without a competitive selection process if the ~~State or County~~ contract was procured by a competitive selection and the vendor accepts the same terms of the contract.