Board of Directors Meeting

AGENDA

Thursday, October 13, 2016
3:15 p.m. – 5:00 p.m.

Call-In Information: 916-233-1968
Conference Code: 3043
(Listen in only)

Meeting Location:
Hilton Sacramento Arden West
2200 Harvard Street
Sacramento, CA 95815

San Bernardino County
303 E. Vanderbilt Way
San Bernardino, CA 92408

Glenn County Health and Human Services Agency
242 North Villa Ave.
Willows, CA 95988
A. BOARD OF DIRECTORS REGULAR MEETING

1. CALL TO ORDER

2. ROLL CALL AND INTRODUCTIONS

3. INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT

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. Items not on the agenda are reserved for the end of the meeting. Comments will be limited to three minutes per person and 20 minutes total.

For agenda items, public comment will be invited at the time those items are addressed. Each interested party is to complete the Public Comment Card and provide it to CalMHSA staff prior to start of item. 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. Comment cards will be retained as a matter of public record.
4. CONSENT CALENDAR

A. Routine Matters
   1. Minutes from the August 11, 2016 Board of Directors Meeting

B. Reports / Correspondence
   1. Program Payments
   2. Cash Balance as of September 30, 2016
   5. Contra Costa Loan Forgiveness Project
   7. 2017 Directing Change Project – Sole Source Contract
   8. State Hospitals Program Update

Recommendation: Approval of the Consent Calendar.

5. FINANCIAL MATTERS

A. Lester Consulting Group – Private Fund Development & Creation of a Leadership Council

   Recommendation: 1) Authorize staff to enter into a Sole Source Agreement with Lester Consulting Group (LCG) for the purpose of Fund Development for a three year term. 2) Approve a $500,000 annual budget item for each of the next three years, which will pay for LCG consulting services, fund development staff and all associated costs, via a special member fee. 3) Affirm CalMHSA’s commitment to sustain the CalMHSA Statewide PEI Project in order to meet the leverage amount of $10-15 million dollars per fiscal year, in an effort to secure private funding at an equal or greater level.

B. CalMHSA Annual Revenue and Expenditure Report – Budget June 30, 2017 – Proposed Revision


6. GENERAL DISCUSSION

A. Report from CalMHSA President – Terence M. Rooney

   • General

   Recommendation: Discussion and/or action as deemed appropriate.

B. Report from CalMHSA Executive Director – Wayne Clark

   • Update on Strategic Planning Session Report
   • CBHDA Action on Statewide Projects and Possible Staff Direction
   • Drug Medi-Cal Organized Delivery System Update
   • Housing Update
   • Payment Reform
   • Other
Recommendation: Discussion and/or action on items above, as deemed appropriate.

7. 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 three minutes per person and 20 minutes in total. The Board may also limit public comment time regarding agenda items, if necessary, in the case of a lengthy agenda.

8. NEW BUSINESS
   General discussion regarding any new business topics for future meetings.

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

10. ADJOURNMENT
CONSENT CALENDAR  
Agenda Item 4

SUBJECT: CONSENT CALENDAR

ACTION FOR CONSIDERATION:
Approval of the 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. Routine Matters:
   1. Minutes from the August 11, 2016 Board of Directors Meeting

B. Reports / Correspondence
   1. Letters of Acknowledgment Matrix
   2. Cash Balance as of September 30, 2016
   5. Contra Costa Loan Forgiveness Project
   7. 2017 Directing Change Project – Sole Source Contract
   8. State Hospital Program Update

FISCAL IMPACT:
See staff reports for fiscal impact.

RECOMMENDATION:
Approval of the Consent Calendar.

TYPE OF VOTE REQUIRED:
Majority vote.

REFERENCE MATERIAL(S) ATTACHED:
- August 11, 2016 Board of Directors Meeting Minutes
- Letters of Acknowledgment Matrix
• Cash Balance as of September 30, 2016
• Projected Cash Flow as of September 30, 2016
• Treasurer’s Report as of June 30, 2016
• Contra Costa Loan Forgiveness Project
• CalMHSA Financial Statement for Quarter Ending June 30, 2016
• 2017 Directing Change Project – Sole Source Contract
• State Hospitals Program Update
BOARD MEMBERS PRESENT
Alameda County – Manuel Jimenez
Butte County – Dorian Kittrell
Colusa County – Terence M. Rooney
Contra Costa – Warren Hayes (Alternate)
Fresno County – Dawan Utecht
Kern County – Bill Walker
Kings County – Ahmad Bahrami (Alternate)
Lake County – Kevin Thompson
Los Angeles County – William Arroyo (Alternate)
Marin County – Suzanne Tavano
Merced County – Yvonnaia Brown
Monterey County – Amie Miller
Napa County – Bill Carter
Orange County – Mary Hale
Placer County – Maureen Bauman
Plumas County – Louise Steenkamp
Riverside County – Steven Steinberg
Sacramento County – Jane Ann LeBlanc (Alternate)
San Bernardino County – CaSonya Thomas
San Diego County – Holly Salazar (Alternate)
San Mateo County – Paul Sorbo
Santa Clara County – Toni Tullys
San Luis Obispo County – Anne Robin (via phone)
Shasta County – Donnell Ewert
Sonoma County – Michael Kennedy
Stanislaus County – Cherie Dockery (Alternate)
Sutter/Yuba Counties – Tony Hobson
Trinity County – Noel O’Neill

BOARD MEMBERS ABSENT
Alpine County
Berkeley, City of
Del Norte County
El Dorado County
Glenn County
Humboldt County
Imperial County
Inyo County
Lassen County
Madera County
Mariposa County
Mendocino County
Modoc County
Mono County
Nevada County
San Benito County
San Francisco City/County
San Joaquin County
Santa Barbara County
Santa Cruz County
Siskiyou County
Solano County
Tri-City
Tulare County
Tuolumne County
Yolo County
Ventura County

MEMBERS OF THE PUBLIC
Rose Lester, LCG
Jennifer Alpert, LCG
Scott Rose, RSE
Estelle Saltzman, RSE
Andrea Porter, CBHDA

STAFF PRESENT
Wayne Clark, CalMHSA Executive Director
John Chaquica, CalMHSA Chief Operations Officer
Ann Collentine, CalMHSA Program Director
Kim Santin, CalMHSA Finance Director
Laura Li, CalMHSA JPA Administrative Manager
George E. Murphy, CalMHSA Legal Counsel
Armando Bastida, CalMHSA Executive Assistant

1. CALL TO ORDER

CalMHSA President Terence M. Rooney, Colusa County, called the Board of Directors meeting of the California Mental Health Services Authority (CalMHSA) to order at 2:33 P.M. on August 11, 2016, at the Doubletree by Hilton in Sacramento, California. Vice President Rooney welcomed those in attendance as well as those listening in on the phone, and asked all present to introduce themselves.

President Rooney asked CalMHSA JPA Administrative Manager Laura Li to call roll, in order to confirm a quorum of the Board.
2. **ROLL CALL AND INTRODUCTIONS**

Ms. Li called roll and informed President Rooney a quorum had been reached.

3. **INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT**

President Rooney reviewed the instructions for public comment, and noted items not on the agenda would be reserved for public comment at the end of the agenda. Public comment cards to be submitted to Laura Li and individuals on the phone were instructed to email Laura Li with their comments.

4. **CONSENT CALENDAR**

President Rooney acknowledged the consent calendar and asked for comment from Board members. Treasurer, Bill Walker, commented on the Letters of Acknowledgement consent calendar item, as the new Treasurer and maximum effort he will call county directors to follow up and provide any assistance that may help speed up the payment process. President Rooney entertained a motion for approval of the Consent Calendar.

*Action: Approval of the consent calendar.*

*Motion: Los Angeles County – William Arroyo*

*Second: Sacramento County – Jane Ann LeBlanc*

Motion passed unanimously.

Public comment was heard from the following individual(s):

*None*

5. **FINANCIAL MATTERS**

A. Lester Consulting Group (LCG) Feasibility Study for Private Funding

Vice President Rooney introduced Jennifer Alpert from Lester Consulting Group to provide a presentation based on finding from the Private Funding Feasibility Study. A few highlights from the presentation include 450 invitations to CEO’s and Senior Managers, 31 responded and were interviewed. CEO noted the importance of CalMHSA’s work, with 19 willing to gift CalMHSA.

LCG indicated there were concerns with going straight into a campaign, however there is support for a pre-campaign effort by establishing a “Leadership Council,” to help generate seed money for campaign efforts. LCG indicated some CEOs willingness to form part of the Leadership Council.

The formation of a Leadership Council and seeking seed money would be a two year venture requiring 1.5 FTE to support these efforts.
Action: The Board directed staff to access the feasibility of developing a “Leadership Council,” and costs associated with this two year pre-campaign effort.

Motion: Alameda County – Manuel J. Jimenez  
Second: Placer County – Maureen F. Bauman

Motion passed unanimously.

Public comment was heard from the following individual(s): None

6. PROGRAM MATTERS

A. Recommendation for Phase II Statewide PEI Project reductions

Dr. William Arroyo, Los Angeles County, provided the Board of Directors with a detailed presentation revealing insufficient funding to support Phase II contracts, therefore recommending program reductions. The proposed reductions/terminations have been made strategically vs. across the board. The recommendations have been adopted by the Sustainability Taskforce and Finance Committee has approved a total fund reduction of $1.2 million.

Action: The Executive Committee adopted the Sustainability Taskforce recommendations for contract reductions and/or contract terminations and Finance Committee recommendation for PEI Statewide reduction of $1.2 million, effective October 1, 2016.

Motion: Alameda County – Manuel J. Jimenez  
Second: Butte County – Dorian Kittrell

Motion passed unanimously.

Public comment was heard from the following individual(s): None.

7. GENERAL DISCUSSION

A. Report from CalMHSA President – Terence M. Rooney

President Rooney reported to the Board his intentions of being CalMHSA President.

B. Report from CalMHSA Executive Director

CalMHSA Executive Director, Wayne Clark provided a brief update on the following projects.
• Update on Strategic Planning Session Report – CalMHSA staff will prepare a staff report for the October Board of Directors meeting.
• Line of Credit Update – The bank has yet to reach out to CalMHSA regarding the line of credit.
• CBHDA Action on Statewide Projects and Possible Staff Direction – 1% distribution formula was discussed and whether we could proceed with pursuing the 1%.
• Other -

Action: The Executive Committee directed staff to pursue and explore legislative options for the 1% distribution formula as previously approved by the full board, however the Board could direct otherwise moving forward.

Public comment was heard from the following individual(s):
None.

8. PUBLIC COMMENTS

Vice President Rooney invited members of the public to make comments on non-agenda items.

Public comment was heard from the following individual(s):
None

9. NEW BUSINESS

General discussion regarding any new business topics for future meetings.

10. CLOSING COMMENTS

11. ADJOURNMENT

Hearing no further comments, the meeting was adjourned at 4:42 a.m.

Respectfully submitted,

_____________________________  ______________
Michael Kennedy, MFT   Date
Secretary, CalMHSA
## Program Payments

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<tr>
<th>County</th>
<th>FY 16-17 LOA Rcvd &amp; Funding Projected</th>
<th>PHASE II Funding Received FY 16-17</th>
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10/10/2016
CalMHSA
Cash Balance
As of September 30, 2016

Cash Balance, 6/30/2016 7,709,093.70
Cash Received 07/01 to 09/30/2016 5,618,760.71
Cash Payments 07/01 to 09/30/2016 (2,232,272.82)
Cash Balance, 9/30/2016 11,095,581.59

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<td>Month</td>
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<td>Cash Receipts:</td>
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<td>Orange County WET Program Expenditures</td>
<td>14,847</td>
</tr>
<tr>
<td>Research &amp; Development</td>
<td>19,971</td>
</tr>
<tr>
<td>Total Administrative Expenses</td>
<td>174,687</td>
</tr>
<tr>
<td>Total Cash Expenses</td>
<td>903,099</td>
</tr>
</tbody>
</table>
Treasurer’s Report
As of June 30, 2016

<table>
<thead>
<tr>
<th>Local Agency Investment Fund</th>
<th>Book Balance</th>
<th>Market Value</th>
<th>Effective Yield</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Agency Investment Fund</td>
<td>$7,649,748</td>
<td>$7,654,500</td>
<td>0.58%</td>
</tr>
<tr>
<td>Morgan Stanley – Money Trust</td>
<td>1,471</td>
<td>1,471</td>
<td>0.14%</td>
</tr>
<tr>
<td>Cash with California Bank &amp; Trust</td>
<td>57,875</td>
<td>57,875</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Cash and Investments</strong></td>
<td><strong>$7,709,094</strong></td>
<td><strong>$7,713,846</strong></td>
<td><strong>0.57%</strong></td>
</tr>
</tbody>
</table>

Attached are the Local Agency Investment Fund (LAIF) statements detailing all investment transactions.

The LAIF market value was derived by applying the June 2016 fair value factor of 1.000621222 to the book balance.

I certify that this report reflects all cash and investments and is in conformance with the Authority’s Investment Policy. The investment program herein shown provides sufficient cash flow liquidity to meet the Authority’s expenditures for the next six (6) months.

Respectfully submitted,  

Accepted,

Kim Santin, Finance Director  
William Walker, Treasurer
CALIFORNIA MENTAL HEALTH SERVICES
AUTHORITY
3043 GOLD CANAL DRIVE, SUITE 200
RANCHO CORDOVA, CA 95670

PMIA Average Monthly Yields

Account Number:

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Transaction Date</th>
<th>Tran Type</th>
<th>Confirm Number</th>
<th>Authorized Caller</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/15/2016</td>
<td>4/15/2016</td>
<td>RW</td>
<td>1499806</td>
<td>KIM SANTIN</td>
<td>-1,150,000.00</td>
</tr>
<tr>
<td>4/15/2016</td>
<td>4/14/2016</td>
<td>QRD</td>
<td>1499352</td>
<td>SYSTEM</td>
<td>14,055.61</td>
</tr>
</tbody>
</table>

Account Summary

| Total Deposit:                  | 14,055.61 | Beginning Balance: | 10,185,692.35 |
| Total Withdrawal:               | -1,150,000.00 | Ending Balance: | 9,049,747.96 |
## PMIA Average Monthly Yields

| Account Number: |

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Transaction Date</th>
<th>Tran Type</th>
<th>Confirm Number</th>
<th>Authorized Caller</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/18/2016</td>
<td>5/17/2016</td>
<td>RW</td>
<td>1502032</td>
<td>KIM SANTIN</td>
<td>-600,000.00</td>
</tr>
</tbody>
</table>

### Account Summary

- **Total Deposit:** 0.00  
- **Beginning Balance:** 9,049,747.96  
- **Total Withdrawal:** -600,000.00  
- **Ending Balance:** 8,449,747.96
PMIA Average Monthly Yields

| Account Number: |

Tran Type Definitions

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Transaction Date</th>
<th>Tran Type</th>
<th>Confirm Number</th>
<th>Authorized Caller</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/16/2016</td>
<td>6/16/2016</td>
<td>RW</td>
<td>1504064</td>
<td>KIM SANTIN</td>
<td>-800,000.00</td>
</tr>
</tbody>
</table>

Account Summary

| Total Deposit: | 0.00 | Beginning Balance: | 8,449,747.96 |
| Total Withdrawal: | -800,000.00 | Ending Balance: | 7,649,747.96 |
CONSENT CALENDAR
Agenda Item 4.B.5
SUBJECT: Contra Costa County Loan Forgiveness Program

ACTION FOR CONSIDERATION:

Authorize CalMHSA staff to negotiate and enter into an Agreement with Contra Costa County for fiscal and administrative services in the implementation of a Loan Forgiveness Program.

BACKGROUND:

On August 9, 2016 CalMHSA staff met with Warren Hayes, MHSA Coordinator, Contra Costa County, for the purpose of discerning CalMHSA’s interest in providing fiscal and administrative services for the implementation of a Loan Forgiveness Program within the county.

The objective of the program is to pay student loan debt incurred by current or prospective Participant County or contract employees who fill positions that the Participant has deemed to be, a) hard to fill or retain, or b) part of a mental health career pathway.

Contra Cost County will pay an amount not to exceed $1,000,000.00 to CalMHSA who will act as a fiscal intermediary in the implementation of the Program. CalMHSA will be compensated actual costs for administration, at an hourly rate of $96, with an annual assessment of cost, to determine if amendments need to take place.

STATUS:

Contra Costa County is currently working with their local stakeholders prior to obtaining Board of Supervisor approval, expected by early 2017. If approved by all governing bodies, this program is scheduled to commence on July 1, 2017, for three years.

FISCAL IMPACT:

None.

RECOMMENDATION:

Authorize CalMHSA staff to negotiate and enter into an Agreement with Contra Costa County for fiscal and administrative services in the implementation of a Loan Forgiveness Program.

TYPE OF VOTE REQUIRED:

Majority vote.

REFERENCE MATERIAL(S) ATTACHED:

- Draft Participation Agreement with Contra Costa County
1. **Contra Costa County** ("Participant") desires to participate in the Program identified below.

   Name of Program: Contra Costa Behavioral Health Services (CCBHS) Loan Forgiveness 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 this participation agreement. 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  Scope of Services
   - Exhibit C  General Terms and Conditions

3. The maximum amount payable under this Agreement is $1,000,000.00.

4. The term of the Program is July 1, 2017 through June 30, 2020.

5. Authorized Signatures:

   **CalMHSA**

   Signed: ____________________________ Name (Printed): ___Wayne Clark_____________
   
   Title: ___Executive Director_________ Date: __________________________

   **Participant: Contra Costa County**

   Signed: ____________________________ Name (Printed): Cynthia Belon
   
   Title: Contra Costa Behavioral Health Services Director Date: __________________________
PARTICIPATION AGREEMENT

Exhibit A – Program Description and Funding

I. Name of Program – CCBHS Loan Forgiveness Program

II. Term of Program – This is a three year contract, beginning July 1, 2017 and terminating on June 30, 2020, with the option for early termination or extension as deemed appropriate with prior written notice and the availability of funds.

Either party may extend the contract by written request, forty-five (45) days prior to expiration of current contract. Additionally, either party may withdraw from the Program upon six months written notice. Notice shall be deemed served on the date of mailing.

III. Program Objective and Overview-

Objective: To pay student loan debt incurred by current or prospective Participant County or contract employees who fill positions that the Participant has deemed to be, a) hard to fill or retain, or b) part of a mental health career pathway.

Overview: The Participant will identify to CalMHSA the names of current or prospective employees, their respective student lending institutions, student loan amounts owed, and the schedule and amount to be paid to the student lending institutions. Upon verification by Participant of an employee’s continued eligibility for loan forgiveness, CalMHSA will make payments directly to the employee’s identified student lending institution(s), and verify funds receipt by the student lending institution and the reduced balance owed by the employee.

IV. Funding – Contra Costa County will pay an amount not to exceed $1,000,000.00 to CalMHSA who will act as a fiscal intermediary in the implementation of the Program. CalMHSA shall invoice the Participant in three equal installments on July 1, 2017, July 1, 2018, and July 1, 2019.

Upon cancellation, termination or other conclusion of this contract, any funds remaining undisbursed after CalMHSA satisfies all obligations arising from the administration of the Program shall be distributed to Participant.

V. Compensation for Administration- CalMHSA will retain reimbursement for actual expenses incurred, calculated at our current blended hourly rate of $96.00, in the administration of the program, (e.g. such as costs of staffing, facilities, and executive functions to provide contract management and the specific services in the agreement). An annual assessment of costs to be performed, with an option to adjust the compensation via an Agreement Amendment, if deemed appropriate by both parties.

VI. CalMHSA Reporting - CalMHSA will report each month in arrears to the Participant the following information:

a) Names of employees the Participant has identified as eligible for the Program, and their respective student loan balances.

b) Amounts verified as paid by CalMHSA and received by student lending institutions in the previous month and total to date on behalf of employees that the Participant has directed to be paid.
d) c) A fund ledger indicating by date payments made by the Participant to CalMHSA, funds paid by CalMHSA to student lending institutions, funds paid to CalMHSA for administrative costs, and closing balance of funds available.

VII. Participant Reporting - As employees are deemed eligible, the Participant will identify to CalMHSA the names of these current or prospective employees, their respective student lending institutions, student loan amounts owed, and the schedule and amount to be paid to the student lending institutions. The Participant will update to CalMHSA employees’ continued eligibility for loan forgiveness, and any changes in schedule and/or amount to be paid.
PARTICIPATION AGREEMENT

Exhibit B – Scope of Services

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. Member – refers to a County (or JPA of two or more Counties) that has joined CalMHSA and executed the CalMHSA Joint Powers Agreement.

C. 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 and WET Programs.

D. Participant – County participating in the Program either as Member of CalMHSA or as Partner under a Memorandum of Understanding with CalMHSA.

E. Program – The program identified in the Cover Sheet.

II. Responsibilities

A. Responsibilities of CalMHSA:

1. Act as fiscal and administrative agent for Participant in the Program.

2. Management of funds received consistent with the requirements of any applicable laws, regulations, guidelines and/or contractual obligations.
   - Process W-9 and 1099 forms
   - Maintain and account for funds
   - Process and release checks to student lending institutions per instructions
   - Provide accounting and reporting for funds
   - Retain records including those necessary for audit
   - Maintain confidentiality of student records

3. Provide regular fiscal reports to Participants and/or other public agencies with a right to such reports.

4. Compliance with CalMHSA’s Joint Powers Agreement and Bylaws.

B. Responsibilities of Participant:

1. Transfer of funds from the Participant to CalMHSA that are assessed for the Program shall be made upon invoice by CalMHSA at the beginning of each fiscal year in three equal yearly installments.
2. Make all determinations regarding student eligibility for and award of program benefits in compliance with applicable laws.

3. Identify student recipients and provide check distribution instructions to CalMHSA.

4. Provide pertinent identification information for all student recipients.

5. Identification of a representative authorized to act for Participant and receive notices on behalf of Participant.

6. Cooperate by providing CalMHSA with requested information and assistance in order to fulfill the purpose of the Program.

7. Timely and complete submission in response to requests for information and items needed.

8. Compliance with applicable laws, regulations, guidelines, contractual agreements, joint powers agreements and bylaws.
I. Duration and Term
   A. The term of the Program is for three years.
   B. Either party may extend the contract by written request, forty-five (45) days prior to expiration of current contract.
   C. Either party may withdraw from the Program upon six months written notice. Notice shall be deemed served on the date of mailing.

II. Withdrawal, Cancellation and Termination
   A. The withdrawal of the Participant from the Program shall not automatically terminate its responsibility for its share of the expenses and liabilities of the Program.
   B. Upon cancellation, termination or other conclusion of the Program, any funds remaining undisbursed after CalMHSA satisfies all obligations arising from the administration of the Program shall be distributed to Participant.

III. Fiscal Provisions
   A. Funding required from the Participants will not exceed the amount stated in the Cover Sheet.
CONSENT CALENDAR  
Agenda Item 4.B.6

SUBJECT: CALMHSA FINANCIAL STATEMENT FOR THE QUARTER ENDING JUNE 30, 2016

ACTION FOR CONSIDERATION:

Approval of the CalMHSA Financial Statement for the Quarter ending June 30, 2016.

BACKGROUND AND STATUS:

The Board of Directors will review and discuss the financial statement for the quarter ending June 30, 2016.

Some key items are noted in the financial statement cover memo.

FISCAL IMPACT:

None.

RECOMMENDATION:

Approval of the CalMHSA Financial Statement for the Quarter ending June 30, 2016.

TYPE OF VOTE REQUIRED:

Majority vote.

REFERENCE MATERIALS ATTACHED:

- CalMHSA Financial Statement Quarter Ending June 30, 2016
SUMMARY OF SIGNIFICANT CHANGES IN FINANCIAL STATEMENTS
FOR THE NINE MONTHS ENDED JUNE 30, 2016

BALANCE SHEET:

Cash and Cash Equivalents – The total cash balance as of June 30, 2016 is $7.7 million. This is a decrease of $2.5 million compared to the $10.2 million in cash as of March 31, 2016. The decrease in cash relates to issuance of payments to program partners for Phase II/Sustainability.

Receivables – The balance in accounts receivable as of June 30, 2016, is $1.0 million. The categories with the most significant balances are as follows:

- Phase II Sustainability Funding $ 452,669
- State Hospital Beds Program 529,772
  $ 982,441

Accounts Payable – The balance in accounts payable as of June 30, 2016, is approximately $1.5 million. The payables are primarily for payments to program partners. The vendors with the most significant balances are as follows:

- Runyon, Saltzman & Einhorn, Inc. $ 273,174
- RAND 291,451
- University of California 595,813
  $ 1,160,438

Deferred Revenue – The balance of deferred revenue as of June 30, 2016, is $780,361. This represents monies received from member counties for 2016/2017 Phase II Sustainability funding and Suicide Prevention Hotline and will be recognized as revenue in 2016/2017.

STATEMENT OF REVENUE AND CHANGES IN NET ASSETS:

Operating Revenue – Total revenue for the fiscal year ended June 30, 2016 was $8.5 million consisting primarily of revenue for Phase II Sustainability, as well as other strategic programs such as Wellness Center, Suicide Prevention Hotline, the Community Response Plan and the State Hospital Beds Program.

Expenses – Overall expenses for the fiscal year ended June 30, 2016 were $12.5 million. The expenses consisted mainly of contract expenses for the Statewide Program (Phase I and Phase II.)
## ASSETS

### Current Assets:
- Cash & Cash Equivalents $7,713,846
- Investments - Current Portion $14,220,664
- Contractor Prepayments $60,000
- Receivables:
  - State Hospital Bed Funds $529,772
  - Fiscal Modernization $13,281
  - Phase I Sustainability $618,597
  - Phase II Sustainability $452,669
  - Application Fees $116,378
  - SDR Conference Registration Fees $31,348
  - Other $11,978
- Interest $9,519

Total Current Assets $8,812,894

### Noncurrent Assets:
- Investments $8,812,894

Total Assets $15,009,044

## LIABILITIES AND NET ASSETS

### Current Liabilities:
- Accounts Payable and Accrued Expenses $1,541,735
- Program Partner Holdbacks $116,339
- Deferred Revenue $780,361

Total Current Liabilities $2,322,096

### Net Assets:
- Operations $776,518
- Obligated Funds Under Contract:
  - International SDR Conference $(50,116)
  - Tech Asst/Capacity Building $203,272
  - WET Program Funding $148,470
  - Fiscal Modernization $169,915
  - SHB Program Funding $1,347,307
  - Wellness Center $620,938
  - Suicide Prevention Hotline $34,015
  - Community Response Plan $10,745
  - PNWE $7,576
  - Drug Medi-Cal $(4,797)
  - Orange County $2,862
  - Education Development Center, Inc. $2,968
  - Statewide PEI Project $3,221,124

Total Net Assets $6,490,798

Total Liabilities and Net Assets $15,009,044

Unaudited
## California Mental Health Services Authority

### Statement of Revenues, Expenses and Changes in Net Assets

For The Fiscal Year Ended June 30, 2016

### Operating Revenues:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Funding Contributions</td>
<td>$2,593,150</td>
<td>$5,959,792</td>
<td>$8,552,942</td>
<td>$7,055,077</td>
</tr>
<tr>
<td>Conference Registration</td>
<td>(20,421)</td>
<td>(20,421)</td>
<td>(40,842)</td>
<td>(1,762)</td>
</tr>
<tr>
<td>Donations</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Application Fee</td>
<td>$250</td>
<td>$250</td>
<td>$250</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Operating Revenue</strong></td>
<td></td>
<td></td>
<td>$8,532,771</td>
<td>$7,093,315</td>
</tr>
</tbody>
</table>

### Program Expenses:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>SDR Conference</td>
<td>3,117</td>
<td>3,117</td>
<td>3,117</td>
<td>393,241</td>
</tr>
<tr>
<td>Program Contract</td>
<td>869,481</td>
<td>8,929,354</td>
<td>9,798,835</td>
<td>24,321,839</td>
</tr>
<tr>
<td>Program Mgmt. &amp; Oversight</td>
<td>205,670</td>
<td>1,720,504</td>
<td>1,926,174</td>
<td>1,032,495</td>
</tr>
<tr>
<td>Other Contract Services</td>
<td>6,051</td>
<td>115,685</td>
<td>184,006</td>
<td>253,052</td>
</tr>
<tr>
<td>Legal</td>
<td>19,122</td>
<td>5,342</td>
<td>20,621</td>
<td>21,496</td>
</tr>
<tr>
<td>Marketing</td>
<td>1,396</td>
<td>1,396</td>
<td>80,544</td>
<td>-</td>
</tr>
<tr>
<td>Meeting and Other</td>
<td>36,995</td>
<td>32,941</td>
<td>78,994</td>
<td>96,161</td>
</tr>
<tr>
<td><strong>Total Program Expense</strong></td>
<td></td>
<td></td>
<td>12,013,143</td>
<td>12,497,303</td>
</tr>
</tbody>
</table>

### Indirect Expenses:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Management</td>
<td>322,407</td>
<td>322,407</td>
<td>1,040,424</td>
<td>-</td>
</tr>
<tr>
<td>Other Contract Services</td>
<td>4,459</td>
<td>23,927</td>
<td>28,386</td>
<td>28,891</td>
</tr>
<tr>
<td>Legal Services</td>
<td>17,610</td>
<td>5,342</td>
<td>22,952</td>
<td>53,762</td>
</tr>
<tr>
<td>Insurance</td>
<td>29,203</td>
<td>29,203</td>
<td>600</td>
<td>37,098</td>
</tr>
<tr>
<td>Investment Management Fees</td>
<td>439</td>
<td>-</td>
<td>439</td>
<td>31,431</td>
</tr>
<tr>
<td>Dissemination Materials</td>
<td>64,263</td>
<td>64,263</td>
<td>16,512</td>
<td>143,946</td>
</tr>
<tr>
<td>Meeting and Other</td>
<td>11,595</td>
<td>4,917</td>
<td>143,946</td>
<td>1,336,152</td>
</tr>
<tr>
<td><strong>Total General And Administrative</strong></td>
<td></td>
<td></td>
<td>484,161</td>
<td>1,336,152</td>
</tr>
</tbody>
</table>

### Total Expenses:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>97,665</td>
<td>1,204,510</td>
<td>11,195,128</td>
<td>12,497,303</td>
<td>27,534,980</td>
</tr>
</tbody>
</table>

### Income/(Loss) from Operations:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>(97,415)</td>
<td>1,368,219</td>
<td>(5,235,336)</td>
<td>(3,964,532)</td>
<td>(20,441,665)</td>
</tr>
</tbody>
</table>

### Nonoperating Income:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investment Income</td>
<td>51,073</td>
<td>51,073</td>
<td>261,113</td>
<td></td>
</tr>
<tr>
<td>Change in Investment Value</td>
<td>(500)</td>
<td>(500)</td>
<td>(169,640)</td>
<td></td>
</tr>
<tr>
<td><strong>Total Nonoperating Income</strong></td>
<td></td>
<td></td>
<td>50,573</td>
<td>91,473</td>
</tr>
</tbody>
</table>

### Change in Net Assets:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>(46,843)</td>
<td>1,368,219</td>
<td>(5,235,336)</td>
<td>(3,913,959)</td>
<td>(20,350,192)</td>
</tr>
</tbody>
</table>

### Beginning Net Assets:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>823,361</td>
<td>1,124,936</td>
<td>8,456,460</td>
<td>10,404,757</td>
<td>30,754,949</td>
</tr>
</tbody>
</table>

### Ending Net Assets:

<table>
<thead>
<tr>
<th>Operations Programs</th>
<th>Strategic Programs</th>
<th>Statewide PEI Program</th>
<th>June 2016 Total</th>
<th>June 2015 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$776,518</td>
<td>$2,493,155</td>
<td>$3,221,124</td>
<td>$6,490,798</td>
<td>$10,404,757</td>
</tr>
<tr>
<td>Strategic Programs</td>
<td>International Tech Asst/ Suicide Community</td>
<td>Total June 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------</td>
<td>------------------------------------------</td>
<td>----------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>SDR Capacity</td>
<td>Program Modernization</td>
<td>Fiscal Year</td>
<td>SHB Program</td>
</tr>
<tr>
<td>Conference</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Building</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Operating Revenue</td>
<td>(20,421)</td>
<td>-</td>
<td>905,508</td>
<td>1,000,000</td>
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<td>(20,421)</td>
<td>-</td>
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**OPERATING REVENUES:**

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**PROGRAM EXPENSES:**

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<td>1,499</td>
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**Change in Net Assets:**

|                      | (23,538) | (176) | (89,651) | 807,277 | 34,015 | 10,745 | 7,576 | (6,797) | 2,862 | 2,968 | 1,368,219 | 231,425 |

**Beginning Net Assets:**

|                      | (26,578) | 205,448 | 140,670 | 299,566 | 540,030 | 1,124,936 | 853,911 |

**Ending Net Assets:**

|                      | (50,116) | 202,272 | 140,670 | 169,018 | 1,147,367 | 620,938 | 34,015 | 10,745 | 7,576 | (6,797) | 2,862 | 2,968 | 2,490,130 | 1,084,950 |

**Unaudited**
CONSENT CALENDAR
Agenda Item 4.B.7

SUBJECT: 2017 Directing Change Project – Sole Source Contract

ACTION FOR CONSIDERATION:

Authorize CalMHSA staff to execute sole source contract for the Directing Change Program for fiscal year 2016/17 to the Dallas Pugh Foundation out of current obligated funds of $150,000 from the Runyon Saltzman Einhorn contract.

BACKGROUND:

Over the past 4 years CalMHSA has worked with Runyon Saltzman Einhorn (RSE), Your Social Marketer, and the Dallas Pugh Foundation to develop and implement the Directing Change Program and Student Film Contest. As part of the program, students throughout California are invited to “direct change” by submitting 60-second videos in three categories—suicide prevention, eliminating stigma about mental illness, and cultural perspectives of these two topics. Between 2012 and 2016, a total of 1,651 submissions were received, representing 4,000 students and 308 high schools from across the state. The purpose of the program is to engage young people to learn about suicide prevention and mental health, and to inspire them to become agents of change, standing up for and reaching out to others who are experiencing tough times in an innovative way: a film contest.

Key Outcomes:

- 87% of youth agree that as a result of the program they have a better understanding of the warning signs of suicide and what to do if they are concerned that a friend is thinking about suicide.
- 95% of young people pledged to support a friend experiencing mental health challenges.
- 88% of teachers agree that the contest stimulated discussion among students about mental health and suicide prevention.
- 479 judges have been trained, drawn from fields in which their level of understanding regarding appropriate messaging for suicide prevention and mental health has the greatest potential for impact.
- As the program has grown, last year submissions were accepted by youth and young adults with additional organization sponsors (beyond high schools): 22 youth/community organizations, 5 community colleges, and 8 universities/four-year colleges.
- In fiscal year 2015/16, Directing Change educational/information videos and contest films were viewed 36,611 times on the YouTube channel and 28,857 times on the Vimeo channel.
Key Testimonials from Students, Teachers and Parents:

- “Participating in the Directing Change contest was a fantastic way to express the messages that I think are important to teenagers today in a way that people my age will connect to. I hope that all the films in the Directing Change contest help teenagers accept themselves and seek help in the world around them rather than hiding how they feel.”

- “I have been teaching for 16 years and although it’s not uncommon to discuss the topic of suicide with students, I admit I’ve never discussed the topic of mental illness. I teach video production and my students make public service announcements every year, we always get several suicide prevention PSAs but have never touched the mental illness topic. I will assure you that from this point on, I will educate my students about the need to eliminate the stigma of mental illness. This is a direct result of being involved in your program and efforts.”

- “As part of my team, I felt it was important to make a film that was culturally relevant to my and other first-generation college students’ experiences with accessing mental health services. This is a topic that is of great importance and must be addressed, as first-generation college students represent a growing minority on college campuses. We wanted to give a voice to those who may feel that seeking help for mental illness isn’t an option. Part of our filmmaking served as a healing process, as both of us have dealt with mental illness on a personal level in the past.”

**STATUS:**

The response from the Directing Change Project has been positive. CalMHSA staff and other partners ranging from counties to advocates continue to explore a variety of impactful ways to use the PSAs in on-going education and advocacy at the state and local levels.

The 2016 Directing Change project was funded as a one-year program solely through Runyon Saltzman Einhorn’s contract with leveraged in-kind contributions from K-12 SMH partners, higher education partners including the Foundation for California Community Colleges, California State University, and University of California, NAMI-California and community-based mini-grantee organizations. Considering the effective impact of the program and the investment already made to develop infrastructure (Website, judging structure, materials/fact sheets, etc.), the program model and relationships, CalMHSA staff has explored the value of supporting the program again for FY 2016-2017 as well as the value of working to identify and engage potential organizations who can sustain the program in the future without CalMHSA funds. Moreover, the Directing Change program by design requires collaborative efforts from all PEI statewide program areas and provides significant opportunities to leverage existing resources.

A projected budget for conducting Directing Change for 2016/17 is $150,000. This amount will be redirected from the current program budget of Runyon Saltzman Einhorn’s contract to Dallas Pugh Foundation. Staff is seeking Board authorization to reduce Runyon Saltzman Einhorn’s contract and sole source these funds through a contract with Dallas Pugh Foundation to sponsor Directing Change 2016/2017. Runyon Saltzman Einhorn supports this proposal to reduce their
contract by $150,000 and redirect these funds to the Dallas Pugh Foundation for the 2017 Directing Change Project.

Request for Sole Source Approval of the 2017 Directing Change Project – Dallas Pugh Foundation

As a result of the past successful collaboration and implementation of the Directing Change project, the Dallas Pugh Foundation has become an integral partner with existing relationships with key subcontract Your Social Marketer. Rationale for sole source approval is provided below.

The CalMHSA Purchasing and Procurement Policy, Section 8: Competitive Selection Process Exceptions details several exceptions to the competitive selection process for services, of which the following apply to this particular project and provider:

a. The uniqueness of a vendor's capabilities or goods offered to meet the needs of CalMHSA as compared to other contractors.

The Dallas Pugh Foundation provides historical experience, existing relationships and administrative capabilities to implement the Directing Change project and work to identify and engage potential organizations who can sustain the program in the future without CalMHSA funds.

b. The prior experience of the proposed vendor is vital to the goods or services.

Since 2012, the Dallas Pugh Foundation has provided valuable administrative support to the operational implementation of the Directing Change project, including but not limited to managing subcontracts of subject matters expertise to develop and implement the project. If CalMHSA were required to RFP these services, the investment made to date to establish, build, and sustain this necessary infrastructure may have to begin anew. This would greatly stall and delay the successful and wide reach, engagement, and participation of the Directing Change program.

c. Whether the contractor has a substantial investment that would have to be duplicated at the expense of CalMHSA if another vendor provided services.

Directing Change has been implemented for the past four years and CalMHSA has invested substantial resources in this program within the RSE contract. To continue under RSE would require higher administrative costs and enter into a direct contract Dallas Pugh Foundation allows for significant cost saving without the necessity of recreating foundational costs.

d. The vendor's ability to provide goods or services in the required time frame.

Fiscal year 2016/17 represents a significantly shorten timeframe, one year of the two year Phase II plan, to achieve results. Dallas Pugh Foundation is uniquely qualified to complete this program in the tight timeframe.
**FISCAL IMPACT:**
None, as funds would come from currently approved Runyon Saltzman Einhorn contract.

**RECOMMENDATION:**
Authorize the CalMHSA to execute a sole source contract for the Directing Change Program for fiscal year 2016/17 to the Dallas Pugh Foundation out of current obligated funds of $150,000 from the Runyon Saltzman Einhorn contract.

**TYPE OF VOTE REQUIRED:**
Majority vote.

**REFERENCE MATERIAL(S) ATTACHED:**
- None
CONSENT CALENDAR
Agenda Item 4.B.8.

SUBJECT: State Hospital Bed Program Update

ACTION FOR CONSIDERATION:
None, information only.

BACKGROUND AND STATUS:
June 14, 2012 – Staff proceeded with direction provided at the April 23, 2012 Strategic Planning Session, where staff was to work with CMHDA in exploring the JPA acting on behalf of member counties in the negotiations of the annual procurement contract with the state for state hospital beds.

Memorandum of Understanding (MOU) Amendment:
For the past three fiscal years CalMHSA, in collaboration with counties, has negotiated the terms of the MOU for procurement of state hospital beds, which has attributed to significant benefits to all counties procuring beds.

Due to the FY 14/15 & FY 15/16 MOU being finalized late in this multi-year term, DSH has recommended an Amendment to the MOU be issued that extends the term for an additional two (2) years through June 30, 2018. This extension will only affect the term of the contract as all other terms remain in effect. This extension would allow all parties a reasonable amount of time to review and modify the MOU, as deemed appropriate, for the upcoming year(s). The Committee has reviewed the draft MOU Amendment and supports.

Alternative to State Hospital Beds:
On August 13, 2015 CalMHSA and the State Hospital Bed Committee received approval from this board to proceed in working with Correct Care Solutions (CCS) on alternatives to State Hospitals.

Southern California Efforts – Since then, CalMHSA staff and CCS have had the opportunity to meet with Los Angeles County and currently working Southern Counties to assess potential sites. In addition, staff is working with Los Angeles County and CDCR to schedule a site visit of a potential site in Southern California.

Northern California Efforts – CalMHSA and CCS have performed three site visits within Fresno County and continue to assess potential sites.

DSH Collaboration Efforts:
Staff has been in regular communication with DSH, primarily to discuss how best proceed with addressing the standing issues (MOU Amendment, Capacity and Third Party Pay) and coming up
with solutions. We agreed in the formation of a Committee consisting of counties, DSH and CalMHSA staff, which would meet on a scheduled basis. At the first Committee meeting of June 30, 2016, it was evident that in order to move swifter and be effective, it would be best to form workgroups that would focus on specific issues, and then report back to the Committee for updates, guidance, etc. As such, the following workgroups were formed:

1. Data Workgroup – Focus on working on reconciling patient wait times and placements by developing a gap analysis of current issues.
2. Standardization of Admissions & Discharge – Focus on assessment and development of standardization of admissions criteria and access to treatment, along with standardization of discharge and transfer processes.
3. Capacity Workgroup – Focus on brainstorming alternatives for capacity (eg. Procurement of land, buildings, etc.)
4. Third Party Pay Workgroup – Focus on assessment of issues and development of a simplistic and logical solution to third party payments.

The Workgroups met on August 10, 2016 and each have scheduled standard meetings/conference calls in an effort to commence addressing issues. A full Committee meeting is scheduled for November 3, 2016, where the Workgroups are expected to report out their efforts to date.

**FISCAL IMPACT:**
None for CalMHSA, however significant for Counties.

**RECOMMENDATION:**
None, information only.

**TYPE OF VOTE REQUIRED:**
Majority vote.

**REFERENCE MATERIAL(S) ATTACHED:**
- State Hospitals Program Overview
- State Hospitals Work Group Roster
Project Overview: State Hospital Alternative

Overview of Current DSH Operations

- Nearly 6,000 beds at five DSH-operated facilities (excludes ~1,000 beds at three CDCR facilities)
- ~90% of state-operated beds are utilized by justice-involved patients:
  - Incompetent to stand trial (IST)
  - Not guilty by reason of insanity (NGI)
  - Mentally disorganized offenders (MDO)
  - Referrals from California Department of Corrections and Rehabilitation (CDCR)
  - Sexually violent predators (SVP)
- 430 additional IST patients awaiting hospital bed (June 2016)
- Remaining 10% of state-operated beds serve LPS population at three locations:
  - Metropolitan State Hospital
  - Napa State Hospital
  - Patton State Hospital

Bed Utilization at DSH Facilities*

*Excludes ~1077 beds at CDCR-operated facilities (Salinas Valley, Stockton, Vacaville).
Project Overview: State Hospital Alternative

Overview of Project

- Benefits of County housed facility
  - Estimated $200-250 million development budget
  - Estimated $70 million annual operations budget
  - Estimated $25 million increased annual consumer consumption (housing, retail, staples, etc.)
  - Increased property tax revenue
  - ~350 construction/trades professionals working for ~18 months
  - ~500 healthcare professionals as part of ongoing operations
  - Opportunities for academic partnerships through internships, residency, and other training programs
  - Relationships to others in the community (e.g., university, dentistry, specialists)

- Benefits of using Correct Care
  - Greater responsivity to counties
  - Move from no control to total control
  - Alleviate census pressure on state-operated facilities
  - Anticipated bed rate reduction
  - Reduced length of stay – resulting in potential savings
  - Create an alternative to DSH for a competitive environment
  - Ability to manage third party pay billing and collections
  - Increase bed availability
  - Enhancements of Accountability
    - PAMM Tablet Technology
    - Performance Dashboards
    - Video Monitoring
    - Key Control System
    - Management by Walking Around
  - Increased Efficiencies
    - Kronos®
    - Remote Physician Assessments
    - Automated Policy Management
    - Learning Management System (LMS)
    - Online Credentialing Software
    - Electronic Medical Records
    - eCommerce Foodservice Procurement
Project Overview: State Hospital Alternative

- Improvements in Quality Care
  - Aftercare Team
  - Recovery Plan Coordinator
  - Employee Assistance Program

- Preferred Location
  - 40+ acre site
    - Modern space planning and design efficiencies
    - Single-story, radial design to ensure safe environment for patients and staff
    - Proximity to electricity, gas, water, and other utilities
  - CEQA compliant
  - Compatible adjacent land use
  - Existing properties (200,000+ sf) that can be renovated

- Addressing potential concerns
  - Licensed and accredited facility
  - Secure facility with CCTV monitoring, trained security staff, and fenced perimeter
  - Off-site medical appointments accompanied by security staff
  - MOUs established with local hospitals, fire department, law enforcement, etc.

- State response
  - Include in local security
  - Discharge in county – public safety
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10/10/2016
SUBJECT: LESTER CONSULTING GROUP – PRIVATE FUND DEVELOPMENT & CREATION OF A LEADERSHIP COUNCIL

ACTION FOR CONSIDERATION:

1. Authorize staff to enter into a Sole Source Agreement with Lester Consulting Group (LCG) for the purpose of Fund Development for a three year term.

2. Approve a $500,000 annual budget item for each of the next three years, which will pay for LCG consulting services, fund development staff and all associated costs, via an annual special member fee.

3. Affirm CalMHSA’s commitment to sustain the CalMHSA Statewide PEI Project in order to meet the leverage amount of $10-15 million dollars per fiscal year, in an effort to secure private funding at an equal or greater level.

BACKGROUND AND STATUS:

The CalMHSA Statewide PEI Project, Phase Two Plan, adopted by the Board in August 2014, proposed diversifying the funding base for statewide projects to include private support. Additionally, the Board directed staff to seek private funding. While Staff has worked diligently to seek private funding from foundations and donors, to date the effort has been unsuccessful. At the August 11, 2016 Board of Directors meeting general support was provided with request to provide a more detailed plan to move forward with contract

STEP 1: FEASIBILITY STUDY – FUND DEVELOPMENT

On December 10, 2015 the Board authorized staff to execute a contract amendment with Runyon Saltzman Einhorn (RSE), to increase their contract by $37,500 for the purpose of conducting a feasibility study for the purpose of ascertaining potential private interest and support of CalMHSA Statewide PEI Project via a subcontract with a known expert in fund raising, Lester Consulting Group (LCG).

Staff, led by Dr. Clark, LCG and RSE, executed the plan approved by the Board to test the interest level of private companies and individuals. Positive outcomes were derived from the feasibility study. As Jennifer Alpert, LCG, indicated at the August Board meeting, there is private interest in possibly funding the Statewide PEI Project, and expressed great interest in the development of a Leadership Council that would help guide efforts towards a fund-raising campaign.

In order to meet funding objectives by the Board we proceeded accordingly.
**STEP 2: FUND DEVELOPMENT – EXECUTION**

The next step in the LCG plan of action is the creation of a fund development office, which focuses on inviting, calling and securing additional study (cultivation) interviews; developing relationships and partnerships; approving CalMHSA fundraising messaging; and recruiting and supporting executives for the Leadership Council. These steps include dedication to development and implementation of fundraising systems, tracking information gathered, managing lists, supporting meetings, scheduling, managing calendars, generating reports, and editing documents. The work in this step will move CalMHSA toward Step Three, a Campaign to raise, at minimum, $15 million per year for the sustainability of CalMHSA Statewide PEI project, for the next five years, for a total of $75 million.

LCG has proposed an estimated annual budget of $500,000 for fund development in Step Two, as follows:

- **Term:** A three year fund development commitment, effective October 14, 2016
- **CalMHSA Staffing:** .5 FTE of Executive Director and 1 FTE Administrative staff
- **Annual Budget:** $500,000 per fiscal year, for the next three years

**Annual Budget Summary:**
- $226,000 = CalMHSA staff
- $180,000 = LCG Consulting Services ($15,000 p/month x 12 months)
- $86,000 = Cost projections for database, travel, meetings, materials and communication.

**SOLE SOURCE CONTRACT – FUND DEVELOPMENT**

In order to proceed with fund development, staff is recommending the Board approve a sole source contract with LCG. This recommendation builds on the initial investments made by CalMHSA members, and exhibits to potential private investors that counties are continuing to invest in statewide PEI. This sole source contract would include the $180,000 per year for consulting services, as indicated above.

CalMHSA’s Purchasing and Procurement Policy, Section 7: Competitive Selection Process Exceptions, includes various factors which justify a sole source contract, including “The prior experience of the proposed vendor is vital to the goods or services” and “Whether the contractor has a substantial investment that would have to be duplicated at the expense of CalMHSA if another vendor provided services.” Staff believes LCG meets the requirements for a sole source
contract. There has been a significant financial investment of $70,000 for the findings of the initial feasibility study, as well as an investment of time. LCG owns the study, which contains confidential information from LCG’s conversations with potential donors that LCG agreed to keep confidential. Staff believes going to another provider would require a repeated expenditure of funds and significant additional time to complete a second survey. In addition, a second consultant approaching the same set of potential donors on CalMHSA’s behalf could raise questions about CalMHSA’s competence and ability to execute. Such delay, additional expense and questions would tend to defeat the purpose of the contract, which is to timely and efficiently develop sources of additional funds.

CalMHSA Legal Counsel, Doug Alliston, has been consulted and confirms these factors comply with the requirements for a sole source contract.

**COUNTY COMMITMENT TO MINIMUM FUNDING**

Additionally, the feasibility study has made it clear that private parties intend to only support activities, not supplant the current funding, and will supplement commensurate with county funding. This requires that counties commit to maintain and build a level of funding in order to secure and leverage those additional private funds—estimated county support to eventually reach $15 million per year. Seed money raised during the fund development phase will go towards the launch of step three, which is the Campaign. The ultimate private funding goal is to obtain at minimum $15 million per year, for five years, for a total of $75 million, with similar leveraged amounts by county members. By doing so, staff expects that the relationships built during this effort will help maintain ongoing future funding. Staff has prepared a draft CalMHSA Statewide PEI Project Phase 3 implementation plan that addresses the program outcomes from public/private funding for your review and approval.

**SUSTAINED CALMHSA STATEWIDE PEI PROJECT**

Successful completion of the above steps will allow CalMHSA to implement CalMHSA Statewide PEI Project Phase 3: Forging California’s Culture of Mental Wellness.

The original CalMHSA Statewide PEI Project was implemented with a one-time set aside of MHSA PEI funds provided by counties, and has continued with CalMHSA member counties annual commitment of MHSA PEI funds. CalMHSA Statewide PEI was at a crossroad in 2014 when the original funding was spent and the CalMHSA Board determined that continuation of the Statewide PEI Project needed new vision.

The CalMHSA Statewide PEI Project Phase Two Plan built upon the initial statewide PEI investment by bringing the original three initiatives, Suicide Prevention, Stigma and
Discrimination Reduction and Student Mental Health together under one common theme – Each Mind Matters. The Plan adopted a public health approach with population-based strategies which enhance local activities while creating a consistent statewide vision of mental wellness through targeted efforts to reach Diverse Communities, Schools, Workplace and Healthcare. The plan encompassed six strategies to reach all Californians and anticipated funding from the private and public sectors. The annual funding goal of $20 million was ambitious. To date, the annual funding goal of $20 million has not been achieved and again CalMHSA is at a crossroads after two years of implementing the Phase Two Plan.

CalMHSA Statewide PEI Project Phase 3 (Phase 3 Plan) requires continued investment by counties but embarks on a targeted fund development campaign to diversify funding for a PEI Statewide Project and achieve more long-term outcomes across all sectors: schools, diverse populations, healthcare, and workplace. The Phase 3 Plan focuses on advancing and refreshing the Social Marketing campaigns to reduce stigma and prevent suicides. The funding from counties will be leveraged and new private funding will allow targeted expansion of the campaign to Workplaces and Healthcare settings while maintaining its current focus on diverse communities and schools.

Building on the momentum of the current Phase Two Plan, the Phase 3 Plan will extend key activities which have shown positive short-term outcomes while allowing CalMHSA the time necessary to again seek input from counties and other stakeholders (including from the new Leadership Council) to further refine a long-term Statewide PEI Plan to prevent mental illness from becoming severe and disabling.
CalMHSA Statewide PEI Project Phase 3: Forging California’s Culture of Mental Wellness

<table>
<thead>
<tr>
<th>Projected Statewide PEI Project Phase 3 Activities:</th>
<th>Short Term Outcomes Achieved:</th>
<th>Projected 10 Year Outcomes:</th>
<th>Projected 20 Year Outcomes:</th>
<th>Projected Societal Return on Investment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current funding:</td>
<td>1) Increased knowledge and skills for recognizing signs and facilitating help-seeking</td>
<td>• Increased intervention and provision of support by a community helper</td>
<td>• Reduced discrimination against persons with mental illnesses</td>
<td>Current funding will result in over $6 billion return to society*</td>
</tr>
<tr>
<td>County funding at $10-15 million:</td>
<td>2) Decreased stigma against persons with mental health challenges</td>
<td>• Increased proactive inclusion of individuals with mental health challenges</td>
<td>• Reduced social isolation and self-stigma</td>
<td>County funding at $10-15 million per year result in over $12 billion return to society*</td>
</tr>
<tr>
<td>County &amp; private funding at $25-30 million:</td>
<td></td>
<td>• Increased community encouragement and acceptance of seeking services early</td>
<td>• Improved functioning at school, work, home, and in the community</td>
<td>County and private funding at $25-30 million per year will result in over $31 billion return to society*</td>
</tr>
</tbody>
</table>

Independent evaluation shows:
- 81% of Californians are aware of brands created by Statewide PEI Projects
- After one year of SDR initiatives, nearly 1.5 million more Californians are socially inclusive with people with mental health challenges
- 15.4% more Californians exposed to Each Mind Matters turn to help for mental health challenges
- Adults exposed to the Know The Signs campaign report gains in confidence to intervene with those who might be at risk of suicide
- 13% of Californians have seen someone wearing a lime green ribbon and nearly half of those had a conversation about mental health because of it

Increased investment in programs will lead to commensurate increase in impact. Investment in ongoing and robust evaluation & surveillance efforts throughout Phase 3 will allow CalMHSA to capture and project expected impact.

* RAND analyses have demonstrated that for every $1 invested in Each Mind Matters, there is a corresponding $1,251 return to society through higher wages and lower social costs each year.
Baseline studies show that Californians are recognizing the Mental Health messages, Californians are wearing lime green ribbons and Californians are poised for more change. Counties acting jointly have spearheaded a public health campaign and indications show that the private sector is willing to join the effort. Independent research has projected that for every $1 spent on Each Mind Matters, the SDR campaign, there is a corresponding $1,259 return to society through higher wages and lower social costs each year. Long-term measurable societal benefit of over $31 billion could be realized with a $25 million annual program investment. The Fund Development Project has a goal of leveraging every county dollar with a private dollar for over a five year period.

**FISCAL IMPACT:**

$500,000.00 per fiscal year, for the next three years.

**RECOMMENDATION:**

1. Authorize staff to enter into a Sole Source Agreement with Lester Consulting Group (LCG) for the purpose of Fund Development for a three year term.

2. Approve a $500,000 annual budget item for each of the next three years, which will pay for LCG consulting services, fund development staff and all associated costs, via a special member fee.

3. Affirm CalMHSA’s commitment to sustain the CalMHSA Statewide PEI Project in order to meet the leverage amount of $10-15 million dollars per fiscal year, in an effort to secure private funding at an equal or greater level.

**TYPE OF VOTE REQUIRED:**

Majority vote.

**REFERENCE MATERIAL(S) ATTACHED:**

- Draft LCG Sole Source Contract
- LCG Cost Projections
- CalMHSA Statewide PEI Projects Phase 3: Forging California’s Culture of Mental Wellness
This agreement is made and entered into effective this _____ day of October, 2016 (the “Effective Date”) by and between Lester Consulting Group, Inc. (hereinafter known as LCG), whose principal address is 715 University Avenue, Sacramento, CA 95825, and California Mental Health Services Authority (hereinafter known as Client), whose principal address is 3043 Gold Canal Drive, Suite 200, Rancho Cordova, CA 95670, acting by and through its duly authorized officers. The parties agree as follows:

I. GENERAL

LCG will render professional counsel to advance the research, strategy, systems, and processes required to launch a $75 million campaign to advance mental health service throughout California. Client agrees that funds are to be used solely for the programs and purposes provided or supported by the California Mental Health Services Authority.

II. GENERAL SCOPE OF WORK

The general scope of work will be launched as a phased approach leading up to a refreshed feasibility study and statewide campaign. Following is a general outline of the scope of work.

NOTE: Client staff is responsible for all clerical tasks related to this contract.

Refine the Case Statement
LCG will revise the Case Statement based on previous and ongoing research and input from informed constituencies. The revised Case will be used to conduct additional and on-going confidential research designed to build the base of qualified prospects for Client.

Expand the Master Prospect List
LCG will expand the development of a Master Prospect List to include those interviewed during the feasibility study as well as other qualified prospects. Client staff is responsible for updating, maintaining, and producing the Master Prospect List, assignments, and updates on a regular basis.

Conduct Selected Confidential Interviews
Key community leaders will continue to be identified, evaluated, and interviewed or surveyed to determine the extent of their interest in this project, in order to expand the Master Prospect List. If travel is required to accomplish these key interviews, it will add to the expense of the contract. Please refer to the fees section for more detail. LCG will coordinate scheduling of the interviews with Client staff, conduct the interviews, evaluate the results, and use the data to inform long-term strategy.

Organize Fundraising Office
LCG will assist in the design and advise on the production of communication and
marketing materials including the case statement, pledge cards, fact sheets, prospect lists, budget and financial reports, the record management process, acknowledgement letters, and donor recognition records. **LCG** will also assist in organizing the development office systems, supplies, equipment, donor database and staff provided by **Client**.

**Create the Leadership Council Structure**

**LCG** will recommend the Leadership Council structure, purpose, goals, objectives, leadership options, and guide the strategy to define the public-private partnership. **LCG** will develop a prioritize action plan for recruiting the members of the Leadership Council and recommend a customized strategy for each prospective Leadership Council member.

**Recruit the Members for the Leadership Council**

**LCG** will provide the agenda, prospect profiles, meeting strategy, agendas, proposals, and follow-up for the recruitment of Leadership Council members. **LCG**s trainings in governance, fund development and philanthropy will be implemented as needed. **Client** leadership and support staff are responsible for managing this process in terms of long-term sustainability. Travel will be required of the Executive Director of **Client**.

**Identify Funding Strategies**

**LCG** will provide prioritized research on individuals, corporations, and foundations with potential interest in **Client**’s long-range vision. **LCG** will also recommend a customized strategy for approaching each of those prospects (six figures and higher.)

**LCG** will develop a major gift proposal and foundation grant template for **Client**’s on-going use and will assist with editing proposals and grants pursuing funding for the mission of **Client**.

**Client** is responsible for providing initial and follow up contact, managing proposal and grant deadlines, and providing data and materials requested of prospective funders.

**Refresh Feasibility Study**

**LCG** shall design and implement a refresh of the state-wide feasibility study interviews/surveys for employees, Board members, stakeholders, related groups, individuals, foundations, and corporate leaders. Such counsel will include but not be limited to: assistance with participant identification, evaluation, and selection; case statement revisions with **Client**; review and modification (if necessary) of the survey instrument; written and verbal reports in support of the study process, at least 40 study interviews/surveys (and up to 100 qualified interviews); and a report of the findings and a summary of recommendations.
Design Campaign Strategy
Campaign strategy is developed by LCG with input from the Campaign Steering Committee of the Client Board of Directors. (Note: LCG will recommend members of the Board to serve on the Campaign Steering Committee.) A campaign plan including a campaign calendar and budget will be developed by LCG.

Develop Chart of Gifts
LCG will identify the number and size of gifts needed to achieve the goal, which is used as a tool by volunteers in the solicitation of gifts.

Develop Campaign Calendar
LCG will create a calendar that will outline the deadlines developed within the campaign strategy.

Update the Case Statement
This professionally produced marketing tool explains the services and needs of Client as they pertain to the campaign and is used in the solicitation process with potential donors. With counsel from LCG, Client is responsible for coordinating design, approvals, and production of all revisions to the Case.

Direct Campaign Recruitment
It is the responsibility of Client, its staff, Board of Directors, and Leadership Council to identify and recruit experienced volunteers for campaign leadership and volunteers for campaign committees. This is accomplished with direction, training, and support from LCG throughout the identification and recruitment process.

Conduct Volunteer Training Program
LCG will conduct a thorough orientation on the organization, the need, the goal, the campaign schedule, and effective solicitation techniques at a training session for each committee of the campaign. LCG will also provide ongoing training to campaign committees and individual volunteers as needed.

Develop Briefing Strategies and Materials
LCG will create the system for prospect identification, evaluation, assignment, scheduling, profile, proposal and meeting notes.

Identify Named Gift Opportunities
LCG will identify named gift opportunities (and a donor recognition program) and policies on contributions of in-kind, real property, and deferred gifts.

Prospect Identification and Evaluation
LCG will direct the development of a comprehensive prospect list and guide each committee of the campaign as they complete an evaluation of prospects. LCG
will also direct the prospect assignment process through each campaign committee. **Client’s** staff is responsible for updating, maintaining, and producing all prospect and assignment lists for each campaign committee and volunteer.

**Volunteer Meetings and Updates**
*LCG* will organize and manage a schedule of volunteer meetings and updates to advise volunteers in their solicitations and to keep them on track.

**Support Campaign Public Relations Program**
Internal and external public relations is vital to a successful campaign. Campaign public relations may include press conferences, direct mail, open houses, closing celebration, etc. In general, community-wide external public relations efforts do not begin until 60-70% of the goal is achieved to position the organization for success and to ensure the achievement of the goal in a timely fashion (campaigns that publicly stall for a long period of time can have a negative affect on an organization’s image). **LCG** will advise and support **Client’s** efforts in this area.

**Foundation Research/Grant Writing**
Once the research of potential grants is completed and a template is created by **LCG**, **Client’s** development staff should manage the writing, tracking, and follow-up of the grant process. **LCG** will advise and support **Client’s** efforts in this area.

**Reports and Records**
This includes providing informational and financial reports to management, the Steering Committee, the Board of Directors and regular follow-up reports to all volunteers. Systems for donor tracking and acknowledgments will be designed by **LCG** with an ongoing financial reporting mechanism. **Client’s** staff will produce monthly gift and budget reports with **LCG** direction.

**Follow-up Report**
A final written report of campaign progress, outstanding solicitations, policy recommendations, gift reports, and a financial report of expenses will be submitted by **LCG** at the conclusion of the contract.

**III. CAMPAIGN EXPENSE AND REVENUE**
It is understood that the total expense, exclusive of **LCG’s** fee, shall not exceed the approved budget without specific authority from **Client** - the necessary part of this budget to be expended for cost of meetings, headquarters, equipment, postage, printing, supplies, telephone, travel and other similar items. It is further understood that approved expenditures are to be made by **LCG** on behalf of and only with full budget approval from **Client**. All bills are to be sent to **Client** and reviewed by **LCG**.
IV. CONTROL OF FUNDS
Furthermore, both parties agree that all funds shall be handled by, and pledges and contributions made payable to, Client or its legal representative. As professional counsel, LCG is prohibited from soliciting funds, assets, or property for charitable purposes, receiving or controlling funds, assets, or property solicited for charitable purposes, or employing, procuring, or engaging any compensated person to solicit, receive, or control funds, assets, or property for charitable purposes. Client shall exercise control and approval over the content and frequency of any solicitation.

V. RELIANCE
Client understands that it is solely responsible for providing accurate, reliable, timely, and complete information that LCG will depend upon in the performance of the organizational planning, study refresh, and campaign process. Failure to meet these criteria could result in delays and additional costs to Client. LCG will provide sufficient notice to Client, its Board and Campaign Steering Committee, of its failure to meet these expectations.

VI. OFFICE
Client agrees to arrange for an enclosed space allowing for private meetings and telephone contacts with interviewees as needed. Availability of a photocopy and FAX machine or scanner, stationery, clerical assistance and occasional use of a conference room will also be provided by Client.

VII. ACCESS TO RECORDS
Records and documents produced under this agreement are the property of Client with the exception of the confidential survey instruments/responses and LCG prospect lists and prospect profiles. Other such documents and files will be maintained at Client’s office. LCG reserves the right to retain copies of campaign documents and records as part of normal business practice. LCG will not share any confidential or proprietary information with outside organizations without permission from Client.

VIII. CONFLICT OF INTEREST
Client acknowledges that LCG may provide fund-development, management, or organizational planning services to other clients while in the performance of the duties herein noted.

IX. ACCOUNTABILITY
LCG will report to the Executive Director of Client and the Board Campaign Steering committee. This committee shall be appointed by the Board to be responsible for campaign management and oversight throughout the duration of the organizational planning, study refresh and campaign period. NOTE: LCG cannot manage or direct the staff of Client but will guide the assignment of objectives through the office of the Executive Director.
CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY
CONTRACT FOR FUNDRAISING COUNSEL & CAMPAIGN SERVICES

X. AUTHORITY
In the performance of the services hereunder, LCG shall be an independent contractor and not an employee of Client. LCG will have no authority to act as an agent on behalf of Client in any capacity whatsoever or to bind it to any obligation whatsoever.

XI. ASSIGNMENT
LCG’s obligations authorized under this agreement are not assignable or transferable to another consulting firm or independent consultant. LCG agrees not to subcontract any work without the prior written approval of Client.

XII. FEES, TERMS, AND CONDITIONS OF RETENTION
LCG ascribes to the codes of conduct and ethics of The Giving Institute, which exclusively recommends a "fee for service" consulting agreement.

Professional Counsel and Campaign Management (From November 1, 2016 to October 31, 2019): LCG’s fee for fundraising counsel and campaign management is $15,000 (fifteen thousand dollars) per month. As compensation for LCG’s campaign services, Client agrees to reimburse on invoices that are due in advance and payable on the first of every month beginning on November 1, 2016 and ending on October 1, 2019.

Expenses incurred by LCG are to be reimbursed separately from professional fees for fund raising counsel.

Expenses: Miscellaneous expenses may include things such as photocopying, printing of campaign documents, postage, out-of-town expenses, meals, parking, courier services, producing committee binders, and travel outside a 40-mile radius of Sacramento which will be billed at the current IRS mileage reimbursement rate. Expenses will appear on the invoice as separate items with receipts attached.

Term of Agreement: This Agreement shall commence on the Effective Date hereof and shall continue until October 31, 2019 unless terminated prior thereto in accordance with the terms of this Agreement.

Termination of Campaign Services: Client has the right to cancel this contract without cost, penalty, or liability for a period of 10 days following the date of execution by serving a written notice of cancellation to LCG. If mailed, service shall be by certified mail, return receipt requested, and cancellation shall be deemed effective upon the expiration of five calendar days from the date of mailing.

Following the initial 10-day cancellation period, either party may terminate the contract for professional counsel by giving 30 days’ written notice.
In the event of early termination by the Client, LCG shall be paid according to this contract from the date the written notice is received until the date it becomes effective, thirty (30) days thereafter. Contract services will terminate on receipt of notice.

In the event of early termination by LCG, Client shall not be liable for payment of LCG under this agreement for any hours accrued after the receipt of a written notice of termination. In the case of early termination by LCG, Client will be reimbursed for any pro-rated amount of fees paid in advance of the services rendered.

Executed this _____ of October 2016 in Sacramento, California.

By: ____________________________  By: ____________
Wayne Clark, PhD, Executive Director  Rose Lester, President
California Mental Health Services Authority  Lester Consulting Group, Inc.
## Lester Consulting Group Cost Projections for CalMHSA

### Leadership Council (years 1 and 2) and Campaign Launch (year 3)

<table>
<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Projected Cost</strong></td>
<td>Research prospects, Refine Messaging, Build systems, Engage partners</td>
<td>Engage Partners &amp; Secure Seed Money</td>
<td>Pre-Campaign &amp; Campaign</td>
</tr>
<tr>
<td>Personnel (0.5 FTE Executive Director, 1.0 FTE Admin year 1 &amp; 2; 0.5 FTE development staff added year 3)</td>
<td>$180,000</td>
<td>$180,000</td>
<td>$230,000</td>
</tr>
<tr>
<td>Personnel Benefits</td>
<td>$54,000</td>
<td>$54,000</td>
<td>$69,000</td>
</tr>
<tr>
<td>Fundraising Counsel</td>
<td>$180,000</td>
<td>$180,000</td>
<td>$180,000</td>
</tr>
<tr>
<td>Database (20,000 - 100,000 records)</td>
<td>$6,000</td>
<td>$6,000</td>
<td>$6,000</td>
</tr>
<tr>
<td>Travel</td>
<td>$25,200</td>
<td>$25,704</td>
<td>$26,218</td>
</tr>
<tr>
<td>Meetings</td>
<td>$16,000</td>
<td>$16,000</td>
<td>$12,000</td>
</tr>
<tr>
<td>Materials/Communication**</td>
<td>$5,800</td>
<td>$5,800</td>
<td>$5,800</td>
</tr>
<tr>
<td><strong>Total estimated</strong></td>
<td>$467,000</td>
<td>$517,504</td>
<td>$523,218</td>
</tr>
</tbody>
</table>

### COST PROJECTION ASSUMPTIONS:

**Database Projection:**

- Donor Perfect 25K records = $3,168/year
- Salsa CRM 25K records = $2,818/year
- eTapestry 20K records = $4,788/year
- Neon 25K records = $6,600/year

**Travel & Hotel Projection:**

- $600/trip x 3.5 trips/month = $2,100/month

**Meetings:**

- Meetings Food @ $25/person x 30 members x 12 months = $9,000
- Briefings Food @ $20/person x 50 briefings/year = $1,000
- Meeting location $500/month = $6,000/year

**Materials/Communication:**

- Meeting packets $5/person x 30 members x 12 months = $1,800
- Note cards & postage
- Folders with pockets
- Letterhead
- Video (year 2) = $50,000

*These projections do not include Each Mind Matters public awareness expenses, which are important to Leadership Council engagement in addition to being a vital element of PEI. Also assumes CalMHSA facilities are available to staff assigned to the Leadership Council.

** Materials/Communication in Year 2 includes a professionally produced fundraising video for campaign.
CalMHSA Statewide Prevention and Early Intervention (PEI) Project
Proposed Phase 3 Implementation Plan

Forging California’s Culture of Mental Wellness

Presented to the CalMHSA Board of Directors on October 13th, 2016
Rationale for Proposed Phase 3 CalMHSA Statewide PEI Project Plan

Through the implementation of the Phase 3 CalMHSA Statewide PEI Project Plan, CalMHSA and its member counties will embark on the 7th year of CalMHSA Statewide PEI Project activities. While the CalMHSA Statewide PEI Project has made significant accomplishments since its inception in 2011, there continues to be a critical need to continue the investment over the long term. Prevention and public-oriented efforts require long term investments and commitment to ensure the achievement of long term goals. The following outlines explicit rationales that support the continuation of CalMHSA Statewide PEI Project.

Rationale 1: The CalMHSA Statewide PEI Project is built upon the goals and strategies of the MHSA PEI Program

Phase 3 of the CalMHSA Statewide PEI Project is based on the strategies and activities of the Phase 2 Plan that was approved by the CalMHSA Board in August 2014. It is also projected to continue to fulfill the short term and long term outcomes also identified in the Phase 2 plan. The Phase 2 Plan aligns with the MHSA PEI Program goal to prevent mental illness from becoming severe and disabling. In addition, CalMHSA’s Phase 2 Plan activities achieve the majority of the identified MHSA PEI Plan components and outcomes, including: 1) outreach to recognize the early signs of potentially severe and disabling mental illnesses; 2) reduction in stigma associated with either being diagnosed with a mental illness or seeking mental health services; and 3) reduction in discrimination against people with mental illness.

Successful implementation and execution of Phase 2 Plan in Phase 3 will also significantly contribute to the achievement of the MHSA PEI Program’s key outcomes which include the reduction of the following negative outcomes that may result from untreated mental illness: 1) suicide; 2) incarceration; 3) school failure/dropout; 4) unemployment; 5) prolonged suffering; 6) homelessness; and 7) removal of children from their home. Coinciding implementation of the CalMHSA Statewide PEI Project and local PEI efforts will ensure the accomplishment of these MHSA PEI Program components and outcomes.

Rationale 2: The CalMHSA Statewide PEI Project is built on an asset-based approach

The CalMHSA Statewide PEI Project is designed with the perspective of a strengths-based and recovery-oriented approach. The Phase 3 Plan will continue to take this approach. The strengths-based approach focuses on each individual’s unique strengths and abilities as key to achieving recovery and wellness. This approach is in alignment with other national and international stigma reduction approaches.
Rationale 3: The social marketing campaigns developed under the CalMHSA Statewide PEI Project achieve significant economies of scale

These campaigns have the greatest statewide and local level impact, achieve the highest level of economies of scale, and can be customized and integrated for county-specific use. For example, implementing the Know the Signs Campaign on a statewide level allowed the campaign to leverage over $3 million in pro bono media. These campaigns can also be expanded to incorporate new materials and reach new populations, depending on funding availability. Thus far, the campaign materials have been translated and culturally adapted into over 10 different languages.

Rationale 4: The CalMHSA Statewide PEI Project has placed California as a leader in the field of population-based public health approaches towards achieving mental health and suicide prevention

California’s unique investment in mental health and wellness through the CalMHSA Statewide PEI Project has been recognized throughout the country. For example, the CalMHSA Statewide PEI Project was highlighted in a recent report by the National Academy of Sciences entitled *Ending the Discrimination Against People with Mental and Substance Use Disorders: The Evidence for Stigma Change* as a “notable-state-based initiative… to reduce mental health stigma and encourage treatment.”

Rationale 5: There has been significant exposure and local integration of the social marketing campaigns and programs that were developed under the CalMHSA Statewide PEI Project

Among the CalMHSA Statewide PEI Project campaigns and programs of Each Mind Matters, Know the Signs, Walk In Our Shoes and Directing Change, tens of thousands of pieces of materials have been disseminated reaching nearly all county behavioral health agencies, as well as hundreds of other local government agencies, statewide agencies and associations and local community-based organizations. In addition, an internal RAND memo demonstrated that 81% of community respondents had heard of CalMHSA and/or at least one of the five brands/activities (Each Mind Matters, Know the Signs, Walk In Our Shoes, Applied Suicide Intervention Skills Training, and Directing Change) that are associated with the CalMHSA Statewide PEI Project. More specifically, over 50% of respondents recognized the Each Mind Matters and Know the Signs campaigns. It is critical to keep these partner agencies and organizations engaged in the Statewide PEI Project networks and programs.

In addition, the internal RAND memo indicated that the CalMHSA Statewide PEI Project has been successful in reaching Advocacy/Council/Union and Homeless services/housing categories – 100% of respondents in these categories had heard of at least one of the programs associated with the Statewide PEI Projects. However, the internal RAND memo also showed that CalMHSA still has significant work to do in reaching individuals within the mental health/physical health field. Only 56% of those in the mental health/physical health field were familiar with any programs associated with the CalMHSA Statewide PEI Project.
Rationale 6: The social marketing campaigns have demonstrated significant achievement of short term outcomes and indicate promise for achieving measurable long term outcomes.

In a relatively short period of time, CalMHSA Statewide PEI Project social marketing campaigns have demonstrated the ability to change attitudes and awareness. It is imperative that CalMHSA continue to invest in long term, surveillance-level evaluation to determine whether these changes are sustained and ultimately lead to behavior change that will result in reducing the negative outcomes identified for the MHSA PEI Program. Without continued investment in evaluation and surveillance, the ultimate impact of the significant investment in the CalMHSA Statewide PEI Project will never be realized.

Proposed Phase 3 CalMHSA Statewide PEI Project
Forging California’s Culture of Mental Wellness

Background:

For the past decade, California has steadily grown a statewide movement toward prevention and early intervention. CalMHSA, a Joint Powers Authority, was created by the counties in 2010, to administer MHSA PEI projects on a statewide basis. Through the initial implementation and the first 2 phases (Phase 1: 2011-2015 and Phase 2: 2015-2017) of the CalMHSA Statewide PEI Project, CalMHSA developed and implemented population-based strategies aligned with the Welfare and Institutions Code Section 5840: MHSA PEI Programs designed to prevent mental illnesses from becoming severe and disabling through outreach to recognize the early signs of mental illness, reduce stigma associated with mental illness and service seeking, and reduce discrimination against people with mental health challenges.

Goal of Phase 3:

To continue the investment in PEI strategies, that will result in larger social impact (e.g., changing attitudes and increasing knowledge), implementing programs that can benefit counties statewide, procuring resources at lower cost (e.g., cost efficiencies), and ultimately making a significant impact on preventing mental illnesses from becoming severe in order to improve access to necessary treatment services as early in the onset of conditions as practicable, reduce the duration of untreated severe mental illnesses and assist people in quickly regaining productive lives.

Proposed Phase 3 Plan:

The Phase 3 Plan will build upon the strategies of the Phase 2 Plan, which was approved by the Board of Directors on August 14, 2014. Specifically, it will expand the reach and capacity of the social marketing programs that were originally developed in Phase 1.

Phase 3 Strategies:

Social Marketing and Informational Resources
- Utilize social change, social science and marketing concepts to change attitudes and behaviors regarding mental illness and services.
Disseminate an array of quality resource materials that are culturally responsive for California’s diverse communities in order to increase awareness and knowledge of mental health, wellness, and services. Resource materials include, but is not limited to, print, online, social media, and traditional media materials.

Outreach, engagement and technical assistance to counties, community-based organizations, and other key partners to refine, tailor and use materials and to achieve and ensure cultural relevance.

Research, Evaluation and Surveillance

Activities to improve understanding of suicide risk factors and population-level attitude change to verify stigma is being reduced and effective prevention and early intervention strategies across institutions and communities.

Develop metrics for and collect data to evaluation the performance and outcomes of Statewide PEI Projects.

Measure results including both process and outcomes of all contracted activities.

Phase 3 Activities:

Phase 3 activities will focus on the reach of statewide social marketing campaigns. Implementation of specific campaigns and breadth of reach within those campaigns will be commensurate with funding level. CalMHSA has developed the following proposals for CalMHSA Statewide PEI Project activities based on the following funding levels, and CalMHSA’s ability to raise funds through county and/or private contributions:

Funding at $10 million per year:

- **Each Mind Matters & Know the Signs campaigns**
  - Provision of technical assistance and subject matter expertise to support dissemination of resources associated with Each Mind Matters & Know the Signs campaigns
  - Expansion and maintenance of Each Mind Matters and Know the Signs Campaign websites to address additional diverse populations
  - Sustained Each Mind Matters statewide social media marketing presence

- **SanaMente and Reconozca Las Senales campaign**
  - Provision of technical assistance and subject matter expertise to support dissemination of resources associated with SanaMente & Reconozca Las Senales campaigns
  - Modest enhancements to the SanaMente and Reconozca Las Senales campaigns websites to address 1-2 specific needs for the Spanish-speaking community

- **Directing Change**
  - Maintenance of the Directing Change program website
  - Modest provision of technical assistance and subject matter expertise to support schools and counties in integration of Directing Change
• Minimal dissemination of existing resources associated with Directing Change

• \( \text{Walk In Our Shoes} \)
  o Maintenance of the \( \text{Walk In Our Shoes} \) program website
  o Implementation of one \( \text{Walk In Our Shoes} \) school performance tour, with the goal of reaching each region at least once

• Reaching diverse communities
  o Dissemination of existing culturally adapted resources to diverse communities

\textit{Funding at $25 million per year:}

• \( \text{Each Mind Matters} \ & \ \text{Know the Signs campaigns} \)
  o Provision of technical assistance and subject matter expertise to support dissemination, customization and integration of \( \text{Each Mind Matters} \ & \ \text{Know the Signs} \) campaigns into local efforts
  o Expansion and maintenance of \( \text{Each Mind Matters} \) and \( \text{Know the Signs} \) campaign websites to address additional diverse populations
  o Sustained \( \text{Each Mind Matters} \) and \( \text{Know the Signs} \) statewide media and social media marketing presence

• \( \text{SanaMente} \ & \ \text{Reconozca Las Senales campaigns} \)
  o Provision of technical assistance and subject matter expertise to support dissemination, customization and integration of \( \text{SanaMente} \ & \ \text{Reconozca Las Senales} \) campaigns into local efforts
  o Enhancements to the \( \text{SanaMente} \) and \( \text{Reconozca Las Senales} \) campaign websites to address 4-5 specific needs for the Spanish-speaking community

• \( \text{Directing Change} \)
  o Maintenance of the \( \text{Directing Change} \) program website
  o Provision of technical assistance and subject matter expertise to support schools and counties in integration of \( \text{Directing Change} \)
  o Dissemination of existing resources associated with \( \text{Directing Change} \)

• \( \text{Walk In Our Shoes} \)
  o Maintenance of the \( \text{Walk In Our Shoes} \) program website
  o Implementation of one \( \text{Walk In Our Shoes} \) school performance tour, with the goal of reaching each region at least 2-3 times

• Reaching diverse communities
  o Dissemination of existing culturally adapted resources to diverse communities
  o Creation of additional culturally adapted resources or identification of other existing culturally adapted resources that can be disseminated statewide

• Reaching workplace settings
  o Adaptation of existing statewide campaigns, resources, and programs to address the needs of mental health in the workplace settings
  o Creation of new resources to reach workplace settings
• Provision of technical assistance to support integration of workplace campaigns, resources, and programs into counties and organizations

- Reaching healthcare settings
  • Adaptation of existing statewide campaigns, resources, and programs to address the needs of mental health in healthcare settings
  • Creation of new resources to reach healthcare settings
  • Provision of technical assistance to support integration of healthcare campaigns, resources and programs into counties and organizations

Projected 10 year outcomes:

• Increased intervention and provision of support by a community helper
• Increased proactive inclusion of individuals with mental health challenges
• Increased community encouragement and acceptance of seeking services early
• Increased knowledge and skills for recognizing and facilitating help seeking

Projected 20 year outcomes:

• Reduced discrimination against persons with mental illnesses
• Reduced social isolation and self-stigma
• Improved functioning at school, work, home and in the community
• Reduced suicidal behavior
• Reduced societal costs related to untreated mental illness

Phase 3 Timeframe:
  July 1, 2017 - June 30, 2025
CalMHSA Statewide PEI Project Phase 3: Forging California’s Culture of Mental Wellness

<table>
<thead>
<tr>
<th>Projected Statewide PEI Project Phase 3 Activities:</th>
<th>Short Term Outcomes Achieved:</th>
<th>Projected 10 Year Outcomes:</th>
<th>Projected 20 Year Outcomes:</th>
<th>Projected Societal Return on Investment:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1) Increased knowledge and skills for recognizing signs and facilitating help-seeking 2) Decreased stigma against persons with mental health challenges</td>
<td>• Increased intervention and provision of support by a community helper • Increased proactive inclusion of individuals with mental health challenges • Increased community encouragement and acceptance of seeking services early • Increased knowledge and skills for recognizing signs and facilitating help seeking</td>
<td>• Reduced discrimination against persons with mental illnesses • Reduced social isolation and self-stigma • Improved functioning at school, work, home, and in the community • Reduced suicidal behavior</td>
<td>Current funding will result in over $6 billion return to society*</td>
</tr>
<tr>
<td></td>
<td>Independent evaluation shows: 81% of Californians are aware of brands created by Statewide PEI Projects</td>
<td></td>
<td></td>
<td>County funding at $10 million per year result in over $12 billion return to society*</td>
</tr>
<tr>
<td>Current funding: 20%</td>
<td>After one year of SDR initiatives, nearly 1.5 million more Californians are socially inclusive with people with mental health challenges 15.4% more Californians exposed to Each Mind Matters turn to help for mental health challenges</td>
<td></td>
<td></td>
<td>County and private funding at $25 million per year will result in over $31 billion return to society*</td>
</tr>
<tr>
<td>County funding at $10 million: 50%</td>
<td>Adults exposed to the Know The Signs campaign report gains in confidence to intervene with those who might be at risk of suicide 13% of Californians have seen someone wearing a lime green ribbon and nearly half of those had a conversation about mental health because of it</td>
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</tr>
<tr>
<td>County &amp; private funding at $25 million: 50%</td>
<td>Increased investment in programs will lead to commensurate increase in impact. Investment in ongoing and robust evaluation &amp; surveillance efforts throughout Phase 3 will allow CalMHSA to capture and project expected impact.</td>
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<tr>
<td>Workplace 20%</td>
<td>Healthcare 50%</td>
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</tbody>
</table>

* RAND analyses have demonstrated that for every $1 invested in Each Mind Matters, there is a corresponding $1,251 return to society through higher wages and lower social costs each year.
**FINANCIAL MATTERS**  
Agenda Item 5.B

**SUBJECT: CALMHSA ANNUAL REVENUE AND EXPENDITURE REPORT – BUDGET JUNE 30, 2017 – PROPOSED REVISION**

**ACTION FOR CONSIDERATION:**

Approve the Revised CalMHSA Annual Revenue and Expenditure Report – Budget, June 30, 2017.

**BACKGROUND AND STATUS:**

The CalMHSA Board of Directors adopted the CalMHSA 16/17 budget at their June 2016 meeting. However, since adopting the budget certain projections and other fiscal realities have come to light. These have been reviewed with the Finance Committee and Officers. Below is a high level view of the budget and changes requiring revisions for Board consideration.

**CalMHSA PROPOSED REVISED BUDGET**

For Fiscal Year 2016-17 - Revised October 13, 2016

<table>
<thead>
<tr>
<th></th>
<th>2015/16 Adopted Budget</th>
<th>Adopted Budget 2016/2017</th>
<th>August 2016 Budget Revision $1.2 million reduction to Program Contracts</th>
<th><strong>Revised Budget with Fund Development 10/13/2016</strong></th>
<th>Variance (4)-(2)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong> Total Revenue to CalMHSA 2016/17</td>
<td>6,259,417</td>
<td>13,316,192</td>
<td>13,316,192</td>
<td>6,923,162</td>
<td>(6,393,030)</td>
</tr>
<tr>
<td><strong>B</strong> Total Program Services Expenditures</td>
<td>9,493,686</td>
<td>13,987,887</td>
<td>12,787,887</td>
<td>10,346,920</td>
<td>(3,640,967)</td>
</tr>
<tr>
<td><strong>C</strong> Total General And Administrative Expenditures</td>
<td>522,907</td>
<td>380,510</td>
<td>380,510</td>
<td>631,574</td>
<td>251,064</td>
</tr>
<tr>
<td><strong>D</strong> Total Expenditures</td>
<td>10,016,593</td>
<td>14,368,397</td>
<td>13,168,397</td>
<td>10,978,494</td>
<td>(3,389,903)</td>
</tr>
<tr>
<td><strong>E</strong> Net Increase/(Decrease) Unexpended Funds</td>
<td>(3,757,176)</td>
<td>(1,052,205)</td>
<td>147,795</td>
<td>(4,055,332)</td>
<td>(3,003,127)</td>
</tr>
<tr>
<td><strong>F</strong> Total Reserves at Fiscal Year Ended June 30, 2016</td>
<td>6,478,561</td>
<td>2,735,470</td>
<td>2,735,470</td>
<td>6,491,784</td>
<td>3,756,314</td>
</tr>
<tr>
<td><strong>G</strong> Less Obligated Reserves</td>
<td>(985,470)</td>
<td>(985,470)</td>
<td>(2,343,350)</td>
<td>(1,357,880)</td>
<td></td>
</tr>
</tbody>
</table>
CalMHSA JPA
Board of Directors
October 13, 2016

<table>
<thead>
<tr>
<th></th>
<th>Total Available Reserves at Fiscal Year Ended June 30, 2016</th>
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</thead>
<tbody>
<tr>
<td>H</td>
<td>6,478,561</td>
<td>1,750,000</td>
<td>1,750,000</td>
<td>4,148,434</td>
<td>2,398,434</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Total Unobligated Reserves at the Fiscal Year Ended June 30, 2017</th>
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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>I</td>
<td>$2,721,385</td>
<td>$697,795</td>
<td>$1,897,795</td>
<td>$93,102</td>
<td>$(604,693)</td>
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<td>K</td>
<td>11.9</td>
<td>10.92</td>
<td>10.92</td>
<td>8.3</td>
<td>(2.62)</td>
</tr>
</tbody>
</table>

**Total Revenue ($6,923,162) + Total Available Reserves ($4,148,434) = $11,071,596
$11,071,596 - Total Expenditures ($10,978,494) = $93,102.00 Unobligated Reserves**

Reasons for Budget Revisions

Revenue
- Member Fee- Fundraising Consulting Project: $500,000
- Drug Medical Program Eliminated: (38,940)
- Suicide and Other Prevention Funding for LA County: (6,000,000) removed from budget
- LOA’s Reduced from $6 million to actual received to date of $5,145,910: (854,090)
- **Total Revenue Decrease**: (6,393,030)

Expenditures
- Suicide Prevention & PEI expenses reduced related to Funding removed: (3,295,548)
- Program Mgmt. & Oversight, General & Admin - staffing reductions: (523,161)
- Program Legal Increased: 18,452
- PEI Travel & Meeting Expense Increased for Fund Raising: 25,000
- Other Prog. Expenditures increased related to carryover of prior year unexpended: 94,354
- Fundraising Consulting Project Expenses (Staffing filled by current CalMHSA staff): 265,000
- General & Admin increases related to legal and other contracts: 26,000
- **Total Expenditure Decrease**: (3,389,903)

Revised Reserves at the Fiscal Year Ended June 30, 2016: 93,102
RECOMMENDATION:
Approve the Revised CalMHSA Annual Revenue and Expenditure Report – Budget, June 30, 2017.

TYPICAL OF VOTE REQUIRED:
Majority vote.

REFERENCE MATERIALS ATTACHED:
- CalMHSA Annual Revenue and Expenditure Report – Adopted Budget for June 30, 2017 can be found at: http://calmhsa.org/documents/finance/
- Proposed Revised CalMHSA Annual Revenue and Expenditure Report –FY 2016-17 (Revised presented October 13, 2016)
- Organizational Charts
## Revenue to CalMHSA 2016/2017

### County Contributions
- **Adopted Budget**: $13,277,252
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $6,423,162

### Private Funding
- **Adopted Budget**: $38,940
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $-

### Other Contracts
- **Adopted Budget**: $-
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $-

### Funds provided for PEI
- **Adopted Budget**: $500,000
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $-

**Total Revenue to CalMHSA 2016/17**
- **Adopted Budget**: $13,316,192
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $6,923,162

## Expenditures

### Program Services Expenditures

#### PEI Statewide Program Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Adopted Budget</th>
<th>Revised Budget with Member Fee for Public/Private Partnership Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Contracts</td>
<td>$11,365,500</td>
<td>$8,069,952</td>
</tr>
<tr>
<td>Program Management &amp; Oversight Staffing</td>
<td>$1,596,149</td>
<td>$1,112,924</td>
</tr>
<tr>
<td>Executive Director/Support</td>
<td>$278,846</td>
<td>$278,846</td>
</tr>
</tbody>
</table>

**Subtotal Program Services**
- **Adopted Budget**: $13,240,495
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $9,461,722

### Legal
- **Adopted Budget**: $10,500
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $28,952

### Evaluation
- **Adopted Budget**: $-
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $-

### Travel & Meetings
- **Adopted Budget**: $10,000
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $35,000

**Total Program Expenditure**
- **Adopted Budget**: $13,260,995
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $9,525,674

### Other Program Expenditures
- **Adopted Budget**: $726,892
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $821,246

**Total Program Services Expenditures**
- **Adopted Budget**: $13,987,887
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $10,346,920

### General And Administrative Expenses

<table>
<thead>
<tr>
<th>Expense</th>
<th>Adopted Budget</th>
<th>Revised Budget with Member Fee for Public/Private Partnership Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>General &amp; Administrative Staffing</td>
<td>$305,510</td>
<td>$265,574</td>
</tr>
<tr>
<td>Fund Raising Consulting Project</td>
<td>$200,000</td>
<td>$200,000</td>
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<tr>
<td>Legal</td>
<td>$10,000</td>
<td>$10,000</td>
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<tr>
<td>Travel &amp; Meetings</td>
<td>$20,000</td>
<td>$66,000</td>
</tr>
<tr>
<td>Other Contracts</td>
<td>$-</td>
<td>$45,000</td>
</tr>
<tr>
<td>Insurance</td>
<td>$30,000</td>
<td>$30,000</td>
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<tr>
<td>Financial Audit</td>
<td>$15,000</td>
<td>$15,000</td>
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</tbody>
</table>

**Total General And Administrative Expenditures**
- **Adopted Budget**: $380,510
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $631,574

**Total Expenditures**
- **Adopted Budget**: $14,368,397
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $10,978,494

### Net Increase/(Decrease) Unexpended Funds
- **Adopted Budget**: $(1,052,205)
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $(4,055,332)

### Total Reserves at Fiscal Year Ended June 30, 2016
- **Adopted Budget**: $2,735,470
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $6,491,784

### Less Obligated Reserves
- **Adopted Budget**: $(985,470)
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $(2,343,350)

### Total Available Reserves at Fiscal Year Ended June 30, 2016
- **Adopted Budget**: $1,750,000
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $4,148,434

### Total Unobligated Reserves at the Fiscal Year Ended June 30, 2017
- **Adopted Budget**: $697,795
- **Revised Budget with Member Fee for Public/Private Partnership Development**: $93,102
<table>
<thead>
<tr>
<th>Category</th>
<th>Operations</th>
<th>Research and Development</th>
<th>Public/Private Partnership Development</th>
<th>Tech-Asst/Capital Building</th>
<th>Vet Program Funding</th>
<th>Recal Modernization Project</th>
<th>State Hospital Bed Funding</th>
<th>Plumas Wildlife Order</th>
<th>Suicide Prevention Regional Program</th>
<th>PI Programs</th>
<th>Total</th>
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<tr>
<td>Revenue to CalMHSA 2016/2017</td>
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<td>County Contributions</td>
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<td>Private Funding</td>
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<td>Fund provided for PI</td>
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<tr>
<td>Member Fees - Auditing/Consulting Project</td>
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<td>Programs Services Expenditures</td>
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<td>Statewide Program Services</td>
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</tr>
<tr>
<td>PEI Programs Services</td>
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<td>17,372</td>
<td>189,696</td>
<td>31,590</td>
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<td>313,498</td>
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<tr>
<td>Internal Program Services</td>
<td>313,498</td>
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<td>189,696</td>
<td>31,590</td>
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<td>313,498</td>
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<tr>
<td>Other Services</td>
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<tr>
<td>Total Program Expenditures</td>
<td>313,498</td>
<td>17,372</td>
<td>189,696</td>
<td>31,590</td>
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<tr>
<td>General Admin Expenditures</td>
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<td>Total General and Administrative Expenditures</td>
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<td>146,470</td>
<td>89,312</td>
<td>652,252</td>
<td>789,668</td>
<td>2,262,988</td>
<td>10,796,494</td>
<td>14,495,297</td>
</tr>
<tr>
<td>Net Increase/(Decrease) Unexpended Funds</td>
<td>1,346,305</td>
<td>189,696</td>
<td>31,590</td>
<td>169,696</td>
<td>9,107</td>
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<td>1,575,902</td>
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<tr>
<td>Prior Year Reserves</td>
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<td>7,200,000</td>
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<td>7,272,000</td>
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<td>Projected Unobligated Reserve at the Fiscal Year Ended June 30, 2017</td>
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<td>Department/Position</td>
<td>Staffing 15-16 FTE</td>
<td>Recommended Staffing 16-17 FTE</td>
<td>Operations</td>
<td>Development</td>
<td>Public/Private Partnership Building</td>
<td>Research and Development</td>
<td>Public/Private Partnership Development</td>
<td>Building</td>
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- **Administrative & Program Services**: 1.0 FTE
- **Floor/Services**: 1.7 FTE
- **Subtotal Staff IT, Corp Admin, HR, AHR in Support**: 1.4 FTE

**Total Staff**: 3.1 FTE

**Annual Hours**: 2,080

**Annual Estimated Compensation**: $2,301,936

<table>
<thead>
<tr>
<th>Department/Position</th>
<th>Operations</th>
<th>Development</th>
<th>Public/Private Partnership Building</th>
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**Annual Hours**: 2,080

**Annual Estimated Compensation**: $2,301,936

**Annual/Percentages**

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**Total Staff**: 3.1 FTE

**Annual Hours**: 2,080

**Annual Estimated Compensation**: $2,301,936

**Allocation of Indirect to Programs**

- ** Allocation of Indirect to Programs**

**Total**

<table>
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<tr>
<th></th>
<th>59,821</th>
<th>33,149</th>
<th>36,197</th>
<th>6,096</th>
<th>8,383</th>
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## Adopted Budget

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<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td>Projected Reserves at the Fiscal Year ended June 30, 2017</td>
<td>1,683,265</td>
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<tr>
<td>Less Obligated Reserves Available at the Fiscal Year Ended June 30,2017</td>
<td>(985,470)</td>
</tr>
<tr>
<td><strong>Adopted Budget Reserves at June 30, 2017</strong></td>
<td>697,795</td>
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## Proposed Revisions

### Change in Projected Carry Over from Prior Year
Mostly related to Unexpended PEI & SHB from PY | 3,756,314

### Change in Obligated Reserves Available from Prior Year
Reserves Carried Over From Prior Year | 2,398,434

## Revenue Revisions

<table>
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<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Member Fees - Fundraising Consulting Project</td>
<td>500,000</td>
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<tr>
<td>Drug Medical Program Eliminated</td>
<td>(38,940)</td>
</tr>
<tr>
<td>Suicide and Other Prevention Funding for LA County Removed from Budget</td>
<td>(6,000,000)</td>
</tr>
<tr>
<td>LOA's Reduced from $6 million to Actual received to date of $5,145,910</td>
<td>(854,090)</td>
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</table>

**Proposed Revisions to Revenue** | (6,393,030)

## Expenditure Revisions

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<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Suicide Prevention &amp; PEI expenses reduced related to Funding removed</td>
<td>(3,295,548)</td>
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<tr>
<td>Program Mgmt &amp; Oversight and General &amp; Admin - Staffing Reductions</td>
<td>(523,161)</td>
</tr>
<tr>
<td>Program Legal Increased</td>
<td>18,452</td>
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<tr>
<td>PEI Travel &amp; Meeting Expense Increased for Fund Raising</td>
<td>25,000</td>
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<tr>
<td>Other Program Expenditures Increased related to Carryover of Prior Year Unexpended</td>
<td>94,354</td>
</tr>
<tr>
<td>Fundraising Consulting Project Expenses (Staffing filled by current CalMHSA Staff)</td>
<td>265,000</td>
</tr>
<tr>
<td>General &amp; Admin Increases related to legal and other contracts</td>
<td>26,000</td>
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</table>

**Proposed Revisions to Expenditures** | (3,389,903)

## Revised Reserves at the Fiscal Year Ended June 30, 2017

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<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td><strong>Revised Reserves at the Fiscal Year Ended June 30, 2017</strong></td>
<td>93,102</td>
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</tbody>
</table>
CalMHSA Board of Directors

Executive Committee
- John Chaquica, Executive Director (.60)
- COO (.20)
- Wayne Clark, Exec. Dir. (.25)

Advisory Committee
- Ann Collentine, Program Director (1.00)
- Laura Li, JPA Administrative Manager (1.00)
- Tami Cowgill, Exec Assistant (1.00)
- Armando Bastida, Admin Assistant (1.00)
- Lee Anne Xiong, Program Analyst (1.00)

Finance Committee
- Allan Rawland, Associate Administrator-Government Relations
- Contract IT Manager (.26)
- CMIT Solutions (.36)

Consultants
- Mike Geiss, Financial
- County Behavioral Health Directors Association (CBHDA)
- Kristee Haggins, Cultural Competency
- John Hutchinson, Software Development
- Dorthy Lebron, Data/Evaluation Liaison

GHC Contract Administrative Budget
- $2,161,666.00
- Total FTE 11.95

Wayne Clark, Exec. Dir. (.25)
Contract Specialist
- Rita Downs, Central Region (North)
- Olivia Celis, Los Angeles Region
- Benita Ramsey, Southern Region (East)
- Janice Melton, Central Region (South)
- Ken Crandall, Superior Region
- Wesley Schweikhard, Southern Region (West)

Customer Service Coordination
- Margaret Perez

Wayne Clark, Exec. Dir. (.25)
- Marketing Coordinator (.10)

Dacey Morales, Receptionist (.36)
- Dacey Morales, Receptionist (.36)
- Marketing Coordinator (.10)

Kim Santin, Finance & Administration Director (.80)
- Finance and Accounting Staff:
  - Dawn Wood (.50)
  - Carole Jones (.50)
  - Deborah Diller (.65)

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FY 15-16 – With Wayne

CalMHSA Board of Directors

Executive Committee
Wayne Clark
Executive Director (1.00)

Douglas Alliston
Legal Counsel
Murphy, Campbell, Guthrie & Alliston

Finance Committee
John Chaquica
Chief Operations Officer
(.60)

Kim Santin
Finance & Administration Director
(.80)

Finance and Accounting Staff:
Carole Jones (.40)
Dawn Wood (.40)
Deborah Diller (.65)

Marketing Coordinator
(.10)

Consultants
Mike Geiss
Financial

John Hutchinson
Software Development

Mike Roth
Communications

Sarah Brichler
Consultant (.10)

Allan Rawland
Assoc. Admin. – Gov. Relations

GHC Contract Administrative Budget
$2,247,184.00
Total FTE 11.9

Contract Specialists
Olivia Celis
Los Angeles Region

Ivan Jaramillo
Assistant Project Manager (1.00)

Armando Bastida
Executive Assistant (1.00)

Alex Wilson
Administrative Assistant (1.00)

Ann Collentine
Program Director (1.00)

Laura Li
JPA Administrative Manager (1.00)

Stephanie Welch
Senior Program Manager (.60) (partial)

Theresa Ly
Program Manager (.50) (leave)

Aubrey Lara
Asst. Program Manager (.50) (partial)

Aubrey Lara
Asst. Program Manager (.50) (partial)

Andrew Dunckel
Business Systems Manager (.26)

Entrust IT Solutions
(.36)

Dacey Morales
Receptionist (.36)

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Receptionist (.36)

Marketing Coordinator
(.10)

Finance Committee
Kim Santin
Finance & Administration Director
(.80)

Finance and Accounting Staff:
Carole Jones (.40)
Dawn Wood (.40)
Deborah Diller (.65)

Marketing Coordinator
(.10)

.setInput(438,438,448,448)

Finance Committee
Kim Santin
Finance & Administration Director
(.80)

Finance and Accounting Staff:
Carole Jones (.40)
Dawn Wood (.40)
Deborah Diller (.65)

Maya Maas
Corporate Analyst (.37)

Dacey Morales
Receptionist (.36)
GENERAL DISCUSSION
Agenda Item 6.A.

SUBJECT: Report from CalMHSA President – Terence M. Rooney

ACTION FOR CONSIDERATION:
Discussion and/or action as deemed appropriate.

BACKGROUND AND STATUS:
CalMHSA President, Terence Rooney, will provide general information and updates regarding the JPA.

- General

FISCAL IMPACT:
None.

RECOMMENDATION:
Discussion and/or action as deemed appropriate.

TYPE OF VOTE REQUIRED:
Majority vote.

REFERENCE MATERIAL(S) ATTACHED:
- None.
GENERAL DISCUSSION
Agenda Item 6.B.

SUBJECT: Report from CalMHSA Executive Director – Wayne Clark

ACTION FOR CONSIDERATION:
Discussion and/or action on items below, as deemed appropriate.

BACKGROUND AND STATUS:
CalMHSA Executive Director, Wayne Clark, will be presenting a State of the Authority and will be reporting on the following items.

- Update on Strategic Planning Session Report
- CBHDA Action on Statewide Projects and Possible Staff Direction
- Drug Medi-Cal Organized Delivery System Update
- Housing Update
- Payment Reform
- Other

FISCAL IMPACT:
None.

RECOMMENDATION:
Discussion and/or action on items above, as deemed appropriate.

TYPE OF VOTE REQUIRED:
Majority vote.

REFERENCE MATERIAL(S) ATTACHED:
- None.