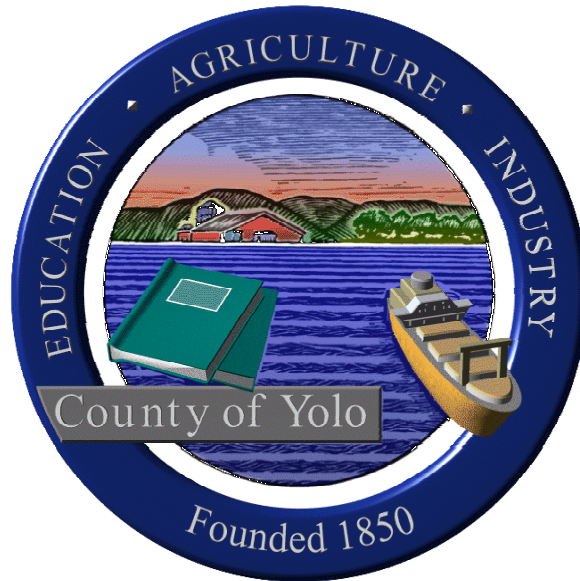


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## **YOLO COUNTY**

### **MENTAL HEALTH SERVICES ACT**

#### **Community Services and Supports Fiscal Year 2007 - 2008**

#### **Performance Contract Amendment Request**

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**PART I: INTRODUCTION AND OVERVIEW**

Effective May 31, 2006, the California Department of Mental Health (DMH) approved Yolo County's Three-Year Community Services and Supports (CSS) Program and Expenditure Plan. Subsequently, Yolo County Department of Alcohol, Drug and Mental Health Services (ADMH) was awarded approximately \$1.8 Million per year in Mental Health Services Act Community Services and Supports Funding for each of the three fiscal years, 2005-06, 2006-07, and 2007-08. In Fall of 2006, DMH notified counties that due to higher than anticipated tax revenues, additional CSS funding was available. This MHSA CSS Performance Contract Amendment Request details Yolo County's request for additional MHSA revenue.

Based upon the two community stakeholder processes undertaken in Yolo County in recent years (MHSA stakeholder process of 2005 and 2006, and the earlier Program Re-Structuring Committee stakeholder process that began in late 2003 and continued through mid-2005), as well as early observations relating to the implementation of MHSA CSS programs in accordance with Yolo County's approved plan, our priority need was clear: expansion of high-end services to Yolo County adult consumers.

With implementation of the existing MHSA CSS plan underway, ADMH had initiated four programs:

1. *Greater Capay Valley Children's Pilot Program*, serving rural children, aged up to 18, of living in western Yolo County.
2. *Pathways to Independence* for Transition-Age Youth with serious psychiatric disabilities;
3. *Wellness Alternatives for Adult Consumers*, for seriously mentally ill individuals aged 18 and over;
4. *Outreach and Assessment for Older Adult Consumers* to identify and provide assistance to individuals aged over 60 with mental health treatment needs. This program represented an expansion of a successful but understaffed and under-funded program already operating in Yolo County.

All four programs were designed to deliver blended services (i.e., Outreach and Engagement, System Development, and Full Service Partnership) in varying degree to our consumers.

The two largest programs, *Pathways to Independence* and *Wellness Alternatives for Adult Consumers*, secured, remodeled, equipped and opened two centers (TAY Center and Wellness Center) in Woodland, to serve as the hub for MHSA services to the corresponding populations. Both centers are currently open Monday through Friday, 10 a.m. to 5 p.m., and are accessible to all identified and prospective MHSA clients. Each program includes a team of staff members permanently located at these centers. Center programs include a range of mental health, life skills, and enrichment activities delivered to MHSA consumers

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in a welcoming atmosphere. Program staff also delivers outreach, engagement, and supportive case management services in the greater community.

As a small county, Yolo ADMH sought to provide a broader range of MHSA services to consumers and their families by developing in its CSS plan four programs conducive to the provision of all three service types. For the *Pathways to Independence* and *Wellness Alternatives for Adult Consumers* programs, ADMH predicted that 75% of its CSS funding would be dedicated to the provision of Full Service Partnerships by Fiscal Year 07-08 (see Attachment 1). In accordance with CSS Requirements to small counties, and repeated advice from DMH to think “smart and small,” Yolo County projected numbers of FSP clients in the adult Wellness Alternatives program at 20 for Fiscal Year 06-07, and 32 for Fiscal Year 07-08 (see Attachment 2a, 2b).

Implementation of these two programs has gone slower than anticipated. Hiring of qualified mental health professionals has been difficult and slow, due in part to Yolo’s proximity to large, higher-paying counties (e.g., Solano and Sacramento) who were also staffing their MHSA and core programs. Furthermore, the demand for mental health and related services in the Yolo community were affected by the closure of its Regional Resource Centers. Forced to dramatically reduce services due to budget cuts, a local provider-contractor could not keep open its three Regional Resource Centers. As a direct result, demand for daytime MHSA TAY and Wellness Center services has increased. In particular, the need for System Development services is greater than anticipated.

Since the opening of the four MHSA programs, particularly the openings of Pathways to Independence and Wellness Alternatives, demands for services have outstripped our ability to provide them. Although both programs have been delivering services to clients for less than a year, and neither as yet is operating at full capacity, it is increasingly apparent to ADMH Management that the numbers of high-acuity clients over age 18 who are un-served, underserved, or inappropriately served far exceed the numbers anticipated in the county’s CSS plan.

Moreover, Yolo County ADMH core programs have suffered drastic funding cuts, and the department has been only marginally successful in reducing numbers of clients placed outside county in Institutes for Mental Disease (IMD). And while IMD placements decreased for successive months in FY 2006-07, those numbers are again on the rise (see Attachment 3). This increase may be attributed to core staff shortages and the department’s limited ability to provide the comprehensive integrated care needed to maintain former IMD clients in the community. Sadly, some consumers may remain in IMDs longer than is absolutely necessary due to Yolo County’s lack of staffing and program to locally accommodate their complex service needs. Increasing IMD costs are crippling ADMH, further limiting the department’s options for adequately servicing these clients. A combination of stakeholder demand, provider closures, budgetary

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difficulties, and prolonged IMD placements clearly defined a need for a dramatic increase in FSP opportunities for the seriously mentally ill of Yolo County.

At MHSA Quarterly Stakeholder meetings held in Woodland, California on February 5, 2007 and May 24, 2007, and at monthly meetings of the Local Mental Health Board, plans to expand the existing MHSA Adult Wellness Alternatives Program were presented to stakeholders and open discussion encouraged by ADMH Interim Director, Richard DeLiberty. These plans included the creation of an Assertive Community Treatment Team to provide integrated Full Service Partnership Services to Yolo County clients identified by ADMH as un-served, underserved, or inappropriately served.

With meeting the needs of high-acuity clients specifically in mind, Yolo County ADMH developed and distributed a Request for Proposal to provide Assertive Community Treatment (ACT) team services to as many as 50 underserved or inappropriately served adult consumers, to be identified by ADMH Program Managers as FSP clients. After review and negotiation, ADMH named Telecare Corporation as its provider for these FSP services.

Yolo County ADMH respectfully requests that the MHSA CSS Performance Contract Amendment Request set forth in this document be granted, and that the CSS Revised Total Planning Estimate of \$2,709,900 for Fiscal Year 2007-08, as set forth in DMH Letter No. 06-09, be made available for the express purpose of an immediate expansion of FSP services.

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**PART II: STAKEHOLDER REVIEW AND COMMENT**

**[PLEASE NOTE: This section, in italics, is a DRAFT section of the anticipated report on public review of this document.]**

*In accordance with DMH Information Notice No. 06-15, any proposed amendment to the MHSA Performance Contract must be made available for stakeholder review and comment for 30 days (pursuant to Welfare and Institutions Code section 5845(a)) prior to submission to DMH. No public hearing is required.*

*On or before July 27, 2007, copies of the draft MHSA CSS Performance Contract Amendment Request were circulated to representatives of stakeholder interests, as follows:*

- *Posted on the Internet at [www.yolocounty.org](http://www.yolocounty.org) under “Hot Topics”;*
- *Posted on the Internet at [www.namiyolo.org](http://www.namiyolo.org);*
- *E-mailed or mailed via U.S. Postal Service to each member of the Local Mental Health Board;*
- *E-mailed to each member of the Yolo County Board of Supervisors;*
- *Sent via county courier or U.S. Postal Service to all public libraries in Yolo County, with the request that the document be made available for public viewing at the resource desk during regular hours of operation;*
- *Delivered to county mental health service centers in Woodland, Davis and West Sacramento, and to the Department of Social Services “One-Stop” center in Woodland;*
- *E-mailed to all stakeholder participants on the MHSA distribution list.*

*In addition, a copy of the draft amendment request was sent, via e-mail or U.S. Postal Service, to any interested party who requested it.*

*The stakeholder community was informed of how to access copies of this document by the posting of public notices in the following newspapers published throughout the county during the 30-day public review period:*

- *The Woodland Daily Democrat (daily)*
- *The Davis Enterprise (daily)*
- *The West Sacramento News-Ledger (weekly)*
- *The Winters Express (weekly)*

*Notice of the review and comment period was also posted on the Internet at [www.yolocounty.org](http://www.yolocounty.org) (under “Hot Topics”) and at [www.namiyolo.org](http://www.namiyolo.org); the notice included reference to the Yolo County website and a phone number for requesting a copy of the draft proposal. Opportunities for translation of this document for monolingual Spanish- and Russian-speaking individuals were outlined in the announcement. Sample announcements are included here in Attachments 4a and 4b.*

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*Following the close of the 30-day public review period, ADMH Interim Director Richard DeLiberty presented the MHSA CSS Performance Contract Amendment Request to the Yolo County Local Mental Health Board at their regularly scheduled public meeting on August 27, 2007, at 7:00 p.m., at the DESS Building, 25 N. Cottonwood, Woodland, California. This presentation addressed comments received during the 30-day examination period.*

*Written comments received during the 30-day review and comment period, along with responses by the ADMH Interim Director and Management Team, are summarized in Attachment 5 hereto. Copies of the written comments are available upon request from the Director.*

*The finalized MHSA CSS Performance Contract Amendment Request was submitted to the Yolo County Board of Supervisors for its approval; on Tuesday, September \_\_\_\_, 2007, the board \_\_\_\_\_ for forwarding to the California Department of Mental Health.*

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**PART III: MHSA CSS EXPANSION PROPOSAL**

***Provide a brief description of the proposed program expansion, expanded number of individuals to be served, a description of new services added as a result of this expansion, the amount of expanded funding being requested for this program, and the proposed effective date.***

Currently, *Wellness Alternatives for Adult Consumers* provides a mix of Outreach and Engagement, System Development, and Full Service Partnership services, and operates a Wellness Center for MHSA consumers. Although the program has been operational for less than one year, all three service types are being delivered, and the program uses the Wellness Center as the hub for consumer access to group support, peer support, life skills enhancement, personal enrichment, and socialization. Whereas ADMH believes that the program offers (as its name suggests) appropriate supports for wellness and recovery to those System Development and Full Service Partnership consumers who want to participate, we are keenly aware that there exists a large population of seriously mentally ill adults in our community who need high-end supportive services, but who either cannot, or chose not to, participate in Wellness Center services. In addition, those consumers who are currently in IMD placement and/or who are frequent users of intensive services such as psychiatric hospitalization or crisis stabilization may need more intensive FSP services than our present program structure can provide.

In order to provide for these underserved high-acuity clients, ADMH proposes the immediate expansion of the *Wellness Alternatives for Adult Consumers* program to include contract services for up to 50 Full Service Partnership clients to participate in Assertive Community Treatment (ACT) services in the community. These wellness and recovery-based FSP services will be provided by Telecare Corporation. Although a new provider to Yolo County, Telecare is an experienced provider of specialty mental health services in several counties in and outside of California. Although many of the services offered to CSS Full Service Partnership adult consumers are currently available through the existing *Wellness Alternatives* program, Telecare promises increased opportunities to deliver these services to those clients of highest need who will not participate in Wellness Center activities, and in particular, Telecare will focus on delivering services to clients re-entering the community from IMD placement or after extended or repeated psychiatric hospitalizations.

For the designated Full Service Partnership ACT clients, Telecare will provide services and supports in the following areas:

- Pre-vocational support
- Educational assistance and support for obtaining a GED, or enrolling in adult education or college programs
- Recovery plan development
- Symptom management

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- Medication education and support
- Assistance with shopping for food, clothing, or household necessities
- Counseling and education relating to abuse of alcohol or drugs
- Assistance in keeping appointments
- Assistance with money management, including bill paying
- Development of social relationships and support of family
- Life skills instruction (budgeting, grooming, cleaning, cooking, public transportation, etc.)
- Assistance with coping skills (managing crises, relationships, unhealthy thoughts)
- Assistance in finding and obtaining resources and referrals
- Support of transition to community or discharge planning
- Medication administration
- Counseling and psychotherapy
- Assistance with legal issues
- Assistance with benefits issues

Additionally, Telecare will provide for FSP client needs in coordinating with physical health care, accessing appropriate treatment for co-occurring substance abuse disorders, and locating and maintaining safe housing, and ensuring clients' rights and access to grievance procedures.

The above-referenced services are already being delivered in some measure by the existing Wellness Alternatives program, but Telecare will have adequate resources to provide these services to a larger FSP client population in the community, and especially to those who are, in relation to their mental health and possible co-occurring substance abuse disorders, less stable.

For Fiscal Year 2007-08, Telecare Corporation estimates its cost of providing Full Service Partnership Assertive Community Treatment services to 50 consumers at \$1,413,390. This includes start-up expenses of \$200,427. With projected Medi-Cal revenues for these clients for these clients (FFP only) of \$509,000, the total MHSA funding requirement for this program expansion is \$905,390.

Yolo County requests the maximum allowable additional CSS funding available, the sum of \$763,700, to pay for these FSP services. Insofar as we anticipate Telecare Corporation will meet the critical needs of 50 FSP clients over age 18, and thereby allow ADMH program staff to serve approximately 10 fewer high acuity clients, we have reduced portions of the existing program budget for *Wellness Alternatives for Adult Consumers* by the remainder needed to cover the cost of Telecare's services. Of the \$1.4 Million anticipated Telecare contract costs, \$200,427 is designated start-up expenses and hence, will not be included in future year budgets. Yolo County ADMH plans immediate implementation of this program expansion.



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The proposed expansion of the *Wellness Alternatives for Adult Consumers* program is reflected in the following fiscal overview for all five MHSA CSS FY 07-08 Program and Administration Budgets:

Program	FY 07-08 Budget per approved CSS Plan	Revised FY 07-08 Budget	Net Change	Comments:
Capay/Children's	286,208	289,625	3,417	Minor adjustments
Pathways/TAY	393,092	395,407	2,315	Minor adjustments
Wellness/Adult	723,321	1,501,172	777,851	Added 40 (net) FSP clients
Outreach/Older	251,621	247,837	(3,784)	Minor adjustments
Administration	291,925	275,859	(16,066)	Minor adj.; corrected error
Total Available	1,946,167*	2,709,900	763,733	Additional funds = \$763,700 Total rounded to \$2,709,900

Yolo County's original MHSA CSS plan estimated the net cost per client for FSP services in the *Wellness Alternatives* program at approximately \$17,000. The revised Exhibit 2 – Community Services and Supports Program Work Plan Listing FY 07-08 (Attachment 6 hereto) reflects (1) the additional CSS funds allocated to Full Service Partnerships as per this request and (2) an increase to approximately \$18,000 in net cost per FSP client. Further, of the CSS Total Planning Estimate of \$2,709,900 for Yolo County, as set forth in DMH Letter No. 06-09, \$1,734,322 (approximately 64%) is allocated to Full Service Partnerships.

See also the following attachments:

- Revised Fiscal Year 07-08 Budget (Exhibits 5a and 5b) for the *Wellness Alternatives for Adult Consumers* program and Narrative (Attachments 7a and 7b).
- Revised Exhibit 6 – Quarterly Progress Goals and Report for the *Wellness Alternatives for Adult Consumers* program (Attachment 8).

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IV. REQUEST FOR ONE-TIME FUNDING

In the original Yolo County MHSA CSS Three-Year Program and Expenditure Plan approved by DMH on May 31, 2006, \$286,000 was requested for the purchase of the following vehicles (see original plan, MHSA CSS One-Time Expenditures Worksheet found at page 171):

10 cars at \$20,000  
2 vans at \$28,000  
1 truck at \$30,000

Total: \$286,000

The One-Time Funds forwarded by DMH to ADMH at the time the MHSA CSS plan was approved were as follows:

6 cars at \$20,000  
1 van at \$28,000

Total: \$148,000

The funded vehicles were purchased by ADMH in 2<sup>nd</sup> quarter of FY 06-07. At the time of plan approval, DMH withheld \$138,000, representing the funding for 4 cars, 1 van and 1 truck. Now that the four CSS programs are operational, we are in need of more vehicles for staff and client transport and a truck to assist clients in moving. At this time, ADMH respectfully requests that the remaining \$138,000 in One-Time Funds be released by DMH for the purchase of these vehicles.

The above request is a reiteration of that contained in the original MHSA CSS Plan approved May 31, 2006, and does not represent a change of provisions dealing with one-time funding.

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V. REQUEST FOR PERMISSION TO USE UNEXPENDED CSS FY 06-07 FUNDS

In order to comply with the new requirements of MHSA and CSI, Yolo County ADMH must enhance and upgrade its Management Information System. ADMH currently uses some components of the Avatar System, including Practice Management and Clinician Workstation (Electronic Medical Record) modules. The department proposes the purchase of the Management Services Organization (MSO), Executive Reporting System (ERS) and Infoscriber modules, as well as the computer upgrades required to run this new software. The computer upgrades are an integral step to this system enhancement, as the upgrade of the software will cause the majority of the workstations owned by ADMH to become obsolete.

It would be detrimental for ADMH to further postpone funding of this system enhancement, as it will cripple our department's ability to track and report required outcome data. Unfortunately, the projected release of funding for the Capital Improvements and Information Technology component of MHSA is not yet known.

As of July 5, 2007, Yolo County ADMH has expended \$894,193.00 of its total CSS funds for FY 06-07 of \$1,821,600, leaving unexpended CSS funds in excess of \$900,000. This was primarily due to the fact that CSS programs took several months to become operational. MHSA staff did not begin outreach and engagement until November, 2006, and the TAY Center and Wellness Center did not open until April, 2007.

Yolo County ADMH requests that DMH permit the immediate expenditure of \$344,608 from these unexpended FY 06-07 CSS funds to purchase the first phase of the Mental Health Information Technology Project outlined in the proposed included here at Attachment 9. It is critical that this project be initiated without further delay.

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TABLE OF ATTACHMENTS

Attachment 1	Exhibit 2: CSS Program Work Plan Listing
Attachment 2a	Exhibit 6: Quarterly Progress Goals and Report FY 06-07
Attachment 2b	Exhibit 6: Quarterly Progress Goals and Report FY 07-08
Attachment 3	Graph: Yolo County IMD Placements FY 2006-07
Attachment 4a	Combined Notice of 30-day Comment Period and Public Hearing
Attachment 4b	Notice sample (pending)
Attachment 5	Summary and Analysis of Public Comment Received (pending)
Attachment 6	Revised Exhibit 2: CSS Program Work Plan Listing FY 07-08
Attachment 7a	Revised Exhibit 5a: Budget Worksheet/Wellness Alternatives and Revised Exhibit 5b: Staffing Detail/Wellness Alternatives
Attachment 7b	Revised Budget Narrative
Attachment 8	Revised Exhibit 6: Quarterly Progress Goals and Report FY 07-08 Wellness Alternatives
Attachment 9	MHSA CSS Funding Request for a Mental Health Information Technology Project



**EXHIBIT 6: THREE-YEAR PLAN – QUARTERLY PROGRESS GOALS AND REPORT**

**Estimated/Actual Population Served**

County: <b>YOLO</b>
Program Work Plan #: 3
Program Work Plan Name: Adult Wellness Alternatives
Fiscal Year: 06/07 <i>(please complete one per fiscal year)</i>

<b>Full Service Partnerships</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Age Group</b>	<b>Description of Initial Populations</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
Child/Youth											
Transition Age Youth											
Adults	SMI adults, un-served, homeless, court-involved, w/substance abuse issues, or underserved ethnicities	5		5		5		5		20	
Older Adults											
<b>System Development</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Total Number to be served</b>	<b>Services/Strategies</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
12	Wellness Center; MH services to homeless; integrated subst. abuse services	25		25		25		25		100	
<b>Outreach and Engagement</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Total Number to be served</b>	<b>Services/Strategies</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
8	Wellness Center; help court-involved and homeless SMI	38		38		38		38		152	

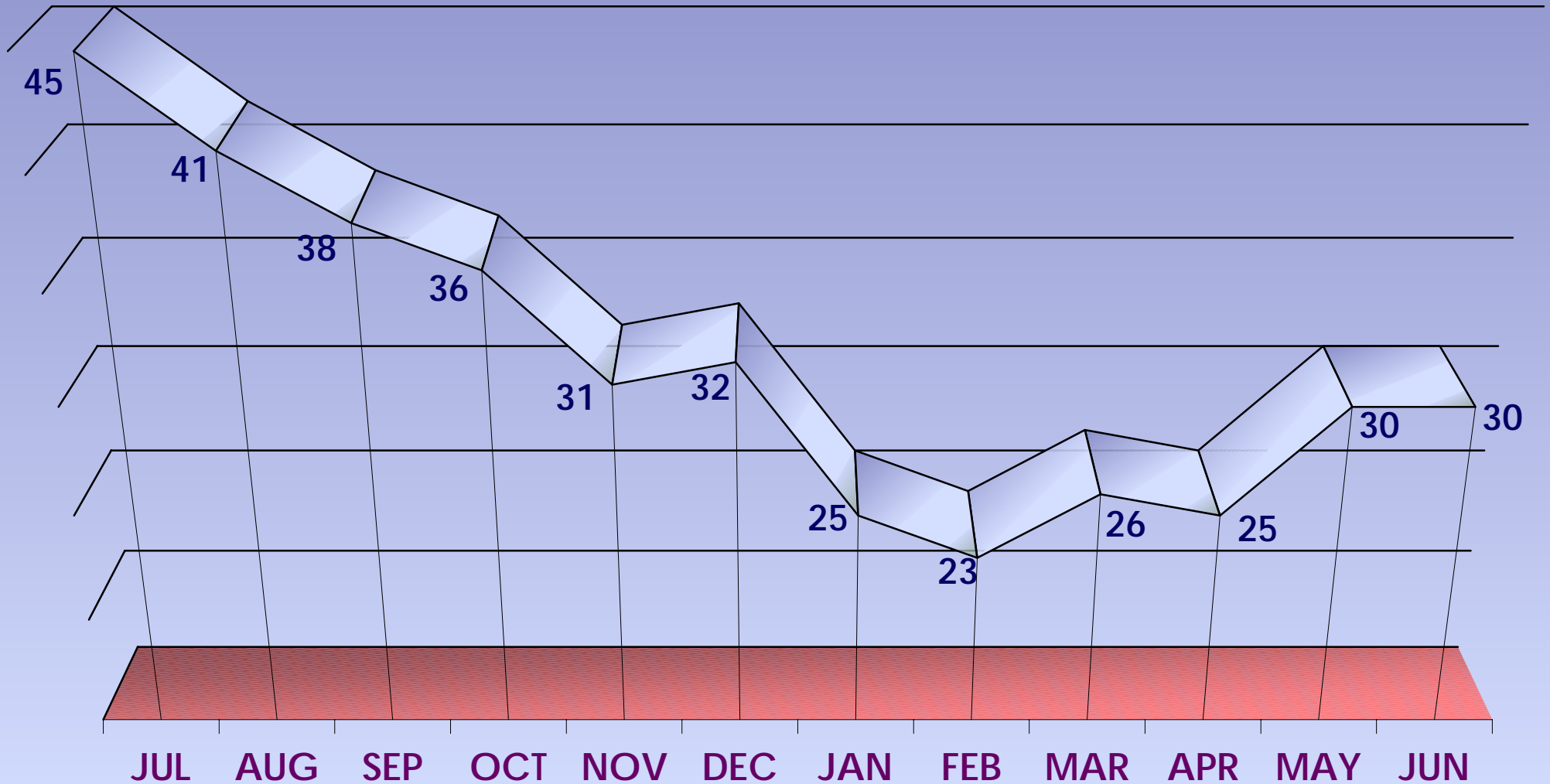
**EXHIBIT 6: THREE-YEAR PLAN – QUARTERLY PROGRESS GOALS AND REPORT**

**Estimated/Actual Population Served**

County: <b>YOLO</b>
Program Work Plan #: 3
Program Work Plan Name: Adult Wellness Alternatives
Fiscal Year: 07/08 <i>(please complete one per fiscal year)</i>

<b>Full Service Partnerships</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Age Group</b>	<b>Description of Initial Populations</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
Child/Youth											
Transition Age Youth											
Adults	SMI adults, un-served, homeless, court-involved, w/substance abuse issues, or underserved ethnicities	8		8		8		8		32	
Older Adults											
<b>System Development</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Total Number to be served</b>	<b>Services/Strategies</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
20	Wellness Center; MH services to homeless; integrated subst. abuse services	31		31		31		31		124	
<b>Outreach and Engagement</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Total Number to be served</b>	<b>Services/Strategies</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
12	Wellness Center; help court-involved and homeless SMI	45		45		45		45		180	

# Yolo County Alcohol, Drug & Mental Health Services



## IMD Placements—FY 2006/07





## ALCOHOL, DRUG AND MENTAL HEALTH DEPARTMENT

Richard DeLiberty, Interim Director

### MENTAL HEALTH SERVICES ACT

137 N. Cottonwood Street, Suite 1530

Woodland, CA 95695

Office – 530-666-8547

Fax – 530-661-6762

## COMBINED NOTICE OF 30-DAY COMMENT PERIOD AND PUBLIC HEARING

PERFORMANCE CONTRACT AMENDMENT REQUEST and  
IMPLEMENTATION PROGRESS REPORT (INITIAL) MAY-DECEMBER 2006  
FOR THE THREE-YEAR MHSA COMMUNITY SERVICES AND SUPPORTS PLAN

**To all citizens, residents and interested stakeholders,** Yolo County Department of Alcohol, Drug and Mental Health Services, in accordance with the Mental Health Services Act, is publishing this notice for a 30-day comment period and will conduct a public hearing regarding these documents:

- 1.) Performance Contract Amendment Request
- 2.) Implementation Progress Report (Initial)

The public hearing will be held at the regularly scheduled meeting of the Yolo County Local Mental Health Board, on Monday, August 27<sup>th</sup>, 2007, in the Walker Room of the Herbert Bauer M.D. Health, and Alcohol, Drug and Mental Health Building located at 137 N. Cottonwood Street, Woodland, California at 7:00 p.m. Interested stakeholders/parties are invited to attend. The Bauer Building is accessible to the disabled.

The public comment period will begin on Saturday, July 28, 2007 and end on Monday, August 27, 2007. Any persons or organizations desiring to be heard on this topic will be afforded an opportunity to speak at the public hearing. Interested persons may also provide written comments during the public comment period. **Written comments and/or questions should be addressed to: Richard DeLiberty, Interim Director or Joan Beesley, MHSA Program Manager, 137 N. Cottonwood Street, Suite 1530, Woodland, CA 95695.** For questions call 530-666-8547.

If you would like to review the Performance Contract Amendment Request or the Implementation Progress Report, these documents are available on the Internet at [www.yolocounty.org](http://www.yolocounty.org) under “Hot Topics” and at [www.namiyolo.org](http://www.namiyolo.org). The documents are also available by request at the reference desk of all public libraries in Yolo County and in the waiting areas of these Mental Health offices:

137 N. Cottonwood St. Suite 1500  
Woodland, CA 95695  
Monday – Friday  
8:00 a.m. to 5:00 p.m.

600 A Street  
Davis, CA 95616  
Monday – Friday  
8:00 a.m. to 5:00 p.m.

500-B Jefferson Blvd.  
West Sacramento, CA 95605  
Monday – Friday  
8:00 a.m. to 5:00 p.m.

To request reasonable accommodation or translation of either of these documents into other languages or formats, contact **Violet Menendez** at 530-666-8547, no later than 5:00 p.m. on Wednesday, August 22, 2007.

**Par asistencia en Español llame a Carmela Luna al (530) 666-8632 or 916-375-6350**  
**За помощью с переводом на русский язык звоните Татьяне Солимене**  
**по телефону (530) 757-5534 или (916) 375-6350**



**REVISED EXHIBIT 5 Attachment - Budget Narrative**

County(ies):	YOLO
Program Workplan #	3
Program Workplan Name	Adult Wellness Alternatives - <b>Expanded</b>
New Program/Svs or Expansion	Expansion
Fiscal Year	2007-08
Date	7/28/2007
Months of Operation	12
Prepared by/Phone #	Joan Beesley - (530)-666-8630

**Blended Program: FSP = 86%; SD = 7%; OE = 7%**

A. Expenditures	Narrative	Totals
<b>1. Client, Family Member and Caregiver Support Expenditures</b>		
a. Clothing, Food and Hygiene	Clothing, food, and hygiene items for the purpose of engaging the attention and participation of potential FSP adult clients who are homeless or at risk for homelessness, or involved in the justice system for non-violence offenses;\$4,000 for ADMHS and \$4,000 under subcontract; 100% OE; estimated budget based on expected need for incentives to encourage engagement and trust, estimating an average of \$333 per month for the county and \$333 per month for the subcontractor.	\$8,000
b. Travel and Transportation	Client travel and transportation costs including client transport, purchasing of bicycles, bus passes, and travel reimbursements associated with program participation; \$3,000 for ADMHS and \$1,000 under subcontract.	\$4,000
c. Housing		
i. Master Leases	Housing master leases will be offered by a subcontractor; \$20,000; estimated budget based on expected need for housing for FSP clients served by ADMH, estimating an average of \$1,667 per month.	\$20,000
ii. Subsidies	Housing subsidies will be offered in the full continuum of available housing options according to need, focusing on homeless outreach and identification of FSP clients; \$12,000 under subcontract for housing for FSP clients served by ADMH, estimated average of \$1,000 per month.	\$12,000
iii. Vouchers	Housing vouchers will be used for short-term housing options according to need, focusing on homeless outreach and identification of FSP clients; \$5,000 under subcontract; estimated budget based on expected need for housing for FSP clients served by ADMH, estimating an average of \$417 per month.	\$5,000
iv. Other Housing	Other available housing options as needed, focusing on homeless outreach and identification of FSP clients; \$70,000 under subcontract with two providers; estimated budget based on expected need for housing for clients, estimating an average of \$5,833 per month.	\$70,000
d. Employment and Education Supports	Costs related to education, vocational, and employment support; \$3,000 for ADMHS and \$10,000 under subcontract; estimated budget based on expected need for school based and school related activities, estimating an average of \$250 per month for the county and \$833 per month for the subcontractor..	\$13,000
e. Other Support Expenditures	Other costs such as outreach materials, incentives, and program supplies, and homeless center supplies used to promote outreach, engagement, and retention of adult FSP clients; \$3,000 for ADMHS and \$10,000 under subcontract; 86% FSP and approximately equal amounts to SD and OE; estimated budget based on expected need for program supplies and supports, estimating an average of \$250 per month for ADMHS and \$833 per month for the for the subcontractor.	\$13,000
<b>f. Total Support Expenditures</b>	<b><i>This program will focus on serving adult clients homeless or at risk for homelessness and/or involved in the justice system for non-violence offenses. A Wellness Center in Woodland will provide services to FSP, SD and O &amp; E clients; in addition, subcontractor Telecare, Inc. will provide FSP services and housing for up to 50 consumers. Subcontractor Turning Point will provide housing for FSP clients served by ADMH. ADMH Staff and subcontractors will be available to clients throughout the county for specific services. Wellness Center services will center around education, vocational support, employment, and stable housing as a road to recovery.</i></b>	<b>\$145,000</b>
<b>2. Personnel Expenditures</b>		
a. Supervising Clinician	1 FTE at \$31.77/hr. for Program Oversight, Clinical Services	\$66,047
b. Clinician I/II	1 FTE at \$26.27/hr. Personal Service Coordinator	\$54,627
c. ADMHS Specialist II	2 FTE at \$18.33/hr. for Forensic Support, Homeless Support	\$76,230
d. ADMHS Specialist I	.50 FTE at \$16.30/hr., Family Partner	\$16,953
e. ADMHS Specialist I	1 FTE at \$16.30/hr. for Peer Partner	\$33,905
f. Job Intern Trainees	.75 FTE at \$11.00/hr., 2 Consumers, 1 Family Member (.25 each)	\$17,160
g. Administrative Clerk II	1 FTE at \$15.46/hr. for Administrative/Support Staff	\$32,142
h. ADMHS Specialist II	.25 FTE at \$18.33/hr., Benefits Specialist	\$9,529
i. ADMHS Program Coordinator	.25 FTE at \$28.74/hr., Client and Family Partnership Program Coordinator	\$14,942
j. ADMHS Specialist II	.15 FTE at \$18.33/hr. for Client and Family Partnership Specialist	\$5,717
k. Psychiatrist	.15 FTE at \$70.17/hr., Psychiatric Services, Medication Support	\$21,891
l. Provider MH Specialist	1 FTE at \$18.33/hr., Housing; Co-Occurring Disorders	\$38,115
m. Provider FSP/ACT	1 FTE at \$43.77/hr., Program Administrator	\$91,036
n. Provider FSP/ACT	.10 FTE at \$52.41/hr., Regional Administrator	\$10,900
o. Provider FSP/ACT	4 FTE at \$21.88/hr., PSC IIS/Rehabilitation Specialist	\$182,036
p. Provider FSP/ACT	1 FTE at \$26.22/hr., Licensed Clinician	\$54,530
q. Provider FSP/ACT	.80 FTE at \$40.80/hr., RN	\$67,890
r. Provider FSP/ACT	1 FTE at \$12.31/hr., PSC I	\$25,596
s. Provider FSP/ACT	1 FTE at \$21.95/hr., Business Office Manager	\$45,654
t. Provider FSP/ACT	.50 FTE at \$16.56/hr., Medical Records AA	\$17,214
l. Employee Benefits	Benefits average 34% due to part-time positions and benefit levels varying with subcontractor	\$296,868

<b>Total Personnel Expenditures</b>		<b>\$1,178,982</b>
<b>3. Operating Expenditures</b>		
a. Professional Services	Coordination of speakers presenting multicultural perspectives on recovery for clients and staff, and other communication tools; \$3,000 for ADMHS; estimated budget based on expected need for translation of program materials and interpretation for non-English speaking clients, estimating an average of \$250 per month for the county and for the subcontractor. Also includes \$112,320 to Telecare Inc. to subcontract for ACT/FSP Psychiatrist services.	\$115,320
b. Translation and Interpreter Services	Translation and interpreter services; \$500 for ADMHS; estimated budget based on expected need for translation of program materials and interpretation for non-English speaking clients, estimating an average of \$42 per month for the county.	\$500
c. Travel and Transportation	Travel and transportation costs associated with staff travel; \$11,000 for ADMHS and \$34,754 for the subcontractor; budget based on an estimated 1,890 miles per month at \$.485/mile for county and 5,972 miles per month for the subcontractor. Staff will provide additional client transportation to services throughout the county.	\$45,754
d. General Office Expenditures	Office supplies, phones, and other general offices expenses; \$8,000 for ADMHS and \$66,411 for the subcontractors; estimated budget based on \$667 per month for the county and \$5,534 per month for the subcontractors.	\$74,411
e. Rent, Utilities and Equipment	Rent, utilities, and equipment leases & maintenance expense for staff; \$9,000 for ADMHS and \$253,254 subcontracted; estimated budget based on office space rental for the county of \$750 per month, and \$21,105 per month for the subcontractor.	\$262,254
f. Medication and Medical Supports	Chiefly to buy medications for clients without benefits or awaiting pending benefits; \$4,800 for ADMHS and \$343 for the subcontractor; estimated budget based on approximate need for \$400 per month by the county and \$29 by the subcontractor.	\$5,143
g. Other Operating Expenses (provide description in budget narrative)	Other operating expenses include goods and purchases to develop and disseminate Consumer newsletters, flyers and fact sheets, miscellaneous equipment and furnishings for the homeless center to make it inviting for the seriously mentally ill; also printing, copying, cell phones, and maintenance; \$5,429 for ADMHS and \$228,124 under subcontract; estimated budget based on \$452 per month for the county and \$19,010 per month for the subcontractor.	\$233,553
<b>h. Total Operating Expenditures</b>		<b>\$736,935</b>
<b>4. Program Management</b>		<b>\$0</b>
a. Existing Program Management		\$0
b. New Program Management		\$0
<b>c. Total Program Management</b>		<b>\$0</b>
<b>5. Estimated Total Expenditures when service provider is not known</b>		<b>\$0</b>
<b>6. Total Proposed Program Budget</b>		<b>\$2,060,917</b>
<b>B. Revenues</b>		
<b>1. Existing Revenues</b>		
a. Medi-Cal (FFP only)		\$0
b. Medicare/Patient Fees/Patient		\$0
c. Realignment		\$0
d. State General Funds		\$0
e. County Funds		\$0
f. Grants		\$0
g. Other Revenue		\$0
<b>h. Total Existing Revenues</b>		<b>\$0</b>
<b>2. New Revenues</b>		
a. Medi-Cal (FFP only)	Medi-Cal revenue based on billings generated at approximately 15% of staff time (Utilization Rate), difficult to predict the % of eligible clients; \$50,745 for the county and \$509,000 for the subcontractor; revenue estimated at approximately \$4,229 per month for the county and \$42,417 for the subcontractor.	\$559,745
b. Medicare/Patient Fees/Patient		\$0
c. State General Funds		\$0
d. Other Revenue		\$0
<b>e. Total New Revenue</b>		<b>\$559,745</b>
<b>3. Total Revenues</b>		<b>\$559,745</b>
<b>C. One-Time CSS Funding Expenditures</b>		<b>\$0</b>
<b>D. Total Funding Requirements</b>		<b>\$1,501,172</b>
<b>E. Percent of Total Funding Requirements for Full Service Partnerships</b>		<b>86.0%</b>

**EXHIBIT 5a--Mental Health Services Act Community Services and Supports Budget Worksheet**

County(ies): YOLO

Fiscal Year: 2007-08

Program Workplan # 3

**REVISED**

Date: 7/19/07

Program Workplan Name Adult Wellness Alternatives -- EXPANDED

Page      of     

Type of Funding 1. Full Service Partnership

Months of Operation 12

Proposed Total Client Capacity of Program/Service: 72 New Program/Service or Expansion New

Existing Client Capacity of Program/Service: 20 Prepared by: Joan Beesley

Client Capacity of Program/Service Expanded through MHSA: 52 Telephone Number: 530-666-8536

Blended Program: FSP = 86%; SD = 7%; OE = 7%	County Mental Health Department	Other Governmental Agencies	Community Mental Health Contract Providers	Total
<b>A. Expenditures</b>				
<b>1. Client, Family Member and Caregiver Support Expenditures</b>				
a. Clothing, Food and Hygiene	\$4,000		\$4,000	\$8,000
b. Travel and Transportation	\$3,000		\$1,000	\$4,000
c. Housing				
i. Master Leases	\$0		\$20,000	\$20,000
ii. Subsidies	\$0		\$12,000	\$12,000
iii. Vouchers	\$0		\$5,000	\$5,000
iv. Other Housing	\$0		\$70,000	\$70,000
d. Employment and Education Supports	\$3,000		\$10,000	\$13,000
e. Other Support Expenditures (provide description in budget narrative)	\$3,000		\$10,000	\$13,000
f. Total Support Expenditures	\$13,000	\$0	\$132,000	\$145,000
<b>2. Personnel Expenditures</b>				
a. Current Existing Personnel Expenditures (from Staffing Detail)	\$0			\$0
b. New Additional Personnel Expenditures (from Staffing Detail)	\$349,143		\$532,971	\$882,114
c. Employee Benefits	\$122,200		\$174,668	\$296,868
d. Total Personnel Expenditures	\$471,343	\$0	\$707,639	\$1,178,982
<b>3. Operating Expenditures</b>				
a. Professional Services	\$3,000		\$112,320	\$115,320
b. Translation and Interpreter Services	\$500		\$0	\$500
c. Travel and Transportation	\$11,000		\$34,754	\$45,754
d. General Office Expenditures	\$8,000		\$66,411	\$74,411
e. Rent, Utilities and Equipment	\$9,000		\$253,254	\$262,254
f. Medication and Medical Supports	\$4,800		\$343	\$5,143
g. Other Operating Expenses (provide description in budget narrative)	\$5,429		\$228,124	\$233,553
h. Total Operating Expenditures	\$41,729	\$0	\$695,206	\$736,935
<b>4. Program Management</b>				
a. Existing Program Management				\$0
b. New Program Management				\$0
c. Total Program Management		\$0	\$0	\$0
<b>5. Estimated Total Expenditures when service provider is not known</b>				\$0
<b>6. Total Proposed Program Budget</b>	\$526,072	\$0	\$1,534,845	\$2,060,917
<b>B. Revenues</b>				
<b>1. Existing Revenues</b>				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. Realignment				\$0
d. State General Funds				\$0
e. County Funds	\$0			\$0
f. Grants				
g. Other Revenue				\$0
h. Total Existing Revenues	\$0	\$0	\$0	\$0
<b>2. New Revenues</b>				
a. Medi-Cal (FFP only)	\$50,745		\$509,000	\$559,745
b. Medicare/Patient Fees/Patient Insurance				\$0
c. State General Funds				\$0
d. Other Revenue				\$0
e. Total New Revenue	\$50,745	\$0	\$509,000	\$559,745
<b>3. Total Revenues</b>	\$50,745	\$0	\$509,000	\$559,745
<b>C. One-Time CSS Funding Expenditures</b>				\$0
<b>D. Total Funding Requirements</b>	\$475,327	\$0	\$1,025,845	\$1,501,172
<b>E. Percent of Total Funding Requirements for Full Service Partnerships</b>				



**EXHIBIT 6: THREE-YEAR PLAN – QUARTERLY PROGRESS GOALS AND REPORT**

**Estimated/Actual Population Served**

County:	<b>YOLO</b>
Program Work Plan #:	<b>3</b>
Program Work Plan Name:	<b>Wellness Alternatives for Adult Consumers</b>
Fiscal Year:	<b>FY 07-08 REVISED</b>

<b>Full Service Partnerships</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Age Group</b>	<b>Description of Initial Populations</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
Child/Youth											
Transition Age Youth											
Adults	SMI adults, un-served, homeless, court-involved, w/substance abuse issues, underserved ethnicities, inappropriately served	18		18		18		18		72	
Older Adults											
<b>System Development</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Total Number to be served</b>	<b>Services/Strategies</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
36	Wellness Center; MH services to homeless; integrated subst. abuse services	31		31		31		31		124	
<b>Outreach and Engagement</b>		<b>Qtr 1</b>		<b>Qtr 2</b>		<b>Qtr 3</b>		<b>Qtr 4</b>		<b>Total</b>	
<b>Total Number to be served</b>	<b>Services/Strategies</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>	<b>Target</b>	<b>Actual</b>
36	Wellness Center; help court-involved and homeless SMI	45		45		45		45		180	



**MHSA CSS ~~Other One-Time~~ Funding Request  
For A Mental Health Information Technology Project**

Date: June 27, 2007

County: Yolo

IT Project Title: Management Information System Enhancement  
*If more than one IT project, please complete one funding request for each project.*

*Please check one or more boxes that describe this IT project.*

- New system
- Extend the number of users of an existing system
- Extend the functionality of an existing system

*Please check one or more boxes that describe overall IT project objective(s).*

- Supports the Client and Services Information (CSI) System
- Supports the MHSA Full Service Partner Data Collection and Reporting (DCR) System
- Improves IT system functionality used to collect and report client information

**1) Overview of Solution or Product**

*Please provide a clear description of the solution that this funding will support.*

Yolo County ADMH currently uses some components of the Avatar System, including the Practice Management and Clinician Workstation (Electronic Medical Record) modules. ADMH proposes to purchase the Management Services Organization (MSO), Executive Reporting System (ERS) and the InfoScriber modules and upgrade computers to run the new software. The Avatar Upgrade is composed of three components:

1. The purchase of new workstations and servers capable of running the updated version(s) of the Avatar suite of products. This step is integral as the upgrade of the software will cause the majority of the workstations owned by Yolo County Alcohol, Drug and Mental Health Department (ADMH) to be become obsolete. New servers will allow a secondary system in case the primary system goes down and a new test environment to test patches and upgrades before being put into production. The lack of a secondary system results in a major lost of productivity when the primary system goes down or when a patch goes bad and the backup tapes have to be used.
2. The installation of the updated version(s) of the Avatar products used by the department. Step 2 is also integral to the overall enhancement, as it is necessary to the department's ability to comply with the new requirements of MHSA and CSI.



3. The purchase and implementation of three additional Avatar products designed to enhance the department's ability to electronically track managed care contracts, services, and authorizations.

The total cost for this project will be \$963,405.

## **2) Relationship to MHSA CSS Plan: How Does this Solution Benefit Mental Health Consumers and Families?**

*Describe how this solution supports your county's MHSA plans. Site specific plan sections.*

The Avatar Enhancement will allow the department to fully meet the data and reporting requirements of both the MHSA and CSI data collection systems. Additionally, it will allow the timely and necessary tracking of services authorized and provided to mental health consumer and families, particularly MHSA consumers. Finally, it will allow for the expansion of the department's electronic medical record, which will provide for more completeness and continuity in the medical records of mental health consumers.

## **3) Relationship to County IT Strategic Plan**

*Describe how this solution is incorporated in your county's IT Strategic Plan.*

The Avatar Enhancement will be a joint effort between the department and Yolo County Information Technology Department (ITD). The project plan for the Avatar Enhancement will be generated in concert with the Yolo County IT Department.

## **4) Interfaces to Other Systems**

*Describe how this solution will interface with other systems, including systems in other county agencies, if applicable.*

The department's Avatar Project (MIS) is a financial system, billing system, and electronic medical record (EMR). With the upgrade it will also be a complete managed care system and the EMR will be enhanced in the area of physician interface to include electronic prescribing. The department's MIS has and will have the capability to create and submit the necessary data reports to various state agencies and produce management level reports necessary to the department.

## **5) Hardware and Software**

*List the hardware and software that this solution or product will use.*

Hardware: Workstations (120)  
Hardware: Servers (3)  
Hardware: Firewall  
Hardware: Backup Equipment  
Software: RADplus software upgrade  
Software: Practice Management (PM) software upgrade  
Software: Clinician Workstation (CWS) software upgrade  
Software: Management Services Organization (MSO)  
Software: Executive Reporting System (ERS)  
Software: InfoScriber

## **6) Security Management**

*Explain the security management that this solution or product will use. Note HIPAA compliance.*

The department's Avatar is a HIPAA compliant program which resides on a secure network. Avatar is password protected. Under the direction of the Deputy Director – Operations, access is approved by the department's QI staff and then by the MIS Analyst, who directs the System Administrator to create the necessary account. System usage is monitored by both the department and ITD.

**7) One-Time and On-Going Costs**

List the one-time and on-going costs associated with this solution. List the totals for hardware, software, consultants, staffing to be paid for by this request and any matching totals paid by non-MHSA sources.

	MHSA Unexpended CSS funds, FY 06/07	MHSA FY 07/08	Other FY 07/08 (non-MHSA)	Totals
1) Hardware:				
a) Servers	21,251			21,251
b) Firewall	7,315			7,315
c) Workstations	78,980	9,200	50,800	138,980
d) Backup Equipment		2,200	19,800	22,000
				<b>189,546</b>
2) Upgrade:				
a) Upgrade/installation/licensing/ testing	184,562			184,562
b) Training	37,500			37,500
c) Modeling/Report Writing	15,000			15,000
				<b>237,062</b>
3) Software Implementation:				
a) MSO		100,000		100,000
b) ERS		28,400		28,400
c) InfoScriber FY 07/08		25,000		25,000
d) Other implementation costs		44,200		44,200
				<b>197,600</b>
4) Maintenance:				
a) 2007-2008 Support:			107,596	107,596
b) 2008-2009 Support:			112,976	112,976
c) 2009-2010 Support:			118,625	118,625
				<b>339,197</b>
5) Totals	344,608	209,000	409,797	<b>963,405</b>

**8) Specific Objectives to be Accomplished with this Funding Request**

List the specific objectives that this funding will accomplish for this solution.

1. Meet new DMH imposed requirements for CSI and MHSA.
2. Create a redundant MIS to improve productivity and continuity of services to consumers.
3. Provide for tracking of services to all consumers, including MHSA clients.
4. Provide the means by the department can upgrade and enhance its current MIS to adequately serve clients in the spirit of the MHSA.
5. Increase the use of data from the system to enhance management decisions.

**9) Schedule of Activities** Provide the schedule of activities for this solution.

1. Purchase of Workstations – 1<sup>st</sup> quarter FY 07-08.
2. Version Upgrade for Avatar Project – 1<sup>st</sup> quarter FY 07-08.
3. Contract initiated for MSO – 1<sup>st</sup> quarter FY 07-08.
4. Contract initiated for InfoScriber – 1<sup>st</sup> quarter FY 07-08.
5. MSO implementation – 2<sup>nd</sup> quarter FY 07-08.
6. ERS implementation – 2<sup>nd</sup> quarter FY 07-08.
7. InfoScriber implementation – 2<sup>nd</sup> quarter FY 07-08.

**County Approvals for a Mental Health IT Project Using MHSA Funding**

<hr/>		Submitter
Signature	Date	
Michael P. Tucker, Deputy Director - Fiscal		
Printed Name	Title	MH Chief Information Officer (or in small counties, the person designated as responsible for Mental Health IT issues)
<hr/>		
Signature	Date	
Mark Bryan, Deputy Director - Operations		
Printed Name	Title	
<hr/>		MH HIPAA Security Officer
Signature	Date	
<hr/>		
Printed Name	Title	
<hr/>		MH Director
Signature	Date	
Richard N. DeLiberty, Interim Director		
Printed Name	Title	