



**YOLO COUNTY**

**Mental Health Services Act**

**Three-Year Program and Expenditure Plan**

**Annual Update – Fiscal Year 2009-10**

**Mental Health Services Act Annual Three Year Program and Expenditure Plan  
Annual Update FY 09/10**

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**COUNTY CERTIFICATION  
MHSA FY 2009/10 ANNUAL UPDATE**

County Name: **Yolo**

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I hereby certify that I am the official responsible for the administration of public community mental health services in and for said County and that the County has complied with all pertinent regulations, laws and statutes for this Annual Update. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code Section 5891 and California Code of Regulations (CCR), Title 9, Section 3410, Non-Supplant.

This Annual Update has been developed with the participation of stakeholders, in accordance with CCR, Title 9, Sections 3300, 3310(d) and 3315(a). The draft FY 09/10 Annual Update was circulated for 30 days to stakeholders for review and comment and a public hearing was held by the local mental health board or commission. All input has been considered with adjustments made, as appropriate.

All documents in the attached FY 2009/10 Annual Update are true and correct.

\_\_\_\_\_  
Kim Suderman, Director  
Yolo Co. Dept. of Alcohol, Drug and Mental Health

\_\_\_\_\_  
Date

**Description of Community Program Planning and Local Review Processes  
MHSA FY 2009/10 ANNUAL UPDATE**

County Name: **Yolo**

**Instructions:** Utilizing the following format please provide a brief description of the Community Program Planning and Local Review Processes that were conducted as part of this Annual Update.

**1. Briefly describe the Community Program Planning Process for development of the FY 2009/10 Annual Update. It shall include the methods for obtaining stakeholder input. (suggested length – one-half page)**

Since MHSA CSS implementation began, Yolo County ADMH has continued community planning processes for various components of the MHSA plan, holding stakeholder meetings every few months and providing frequent e-mail communication to stakeholders. Stakeholder meetings have been held on an *as needed* basis. Three meetings were held to discuss status of programs, future planning and to gain input from the community. In addition, communication with stakeholders continues through monthly updates during the Yolo County Local Mental Health Board meetings.

The four programs that comprised the initial CSS plan continue to this date, after having been expanded or reduced in accordance with community need and in keeping with priorities identified by community stakeholders. Implementation of the five programs of the MHSA Prevention and Early Intervention Component is underway. In the FY 2009-10 Annual Update, no existing CSS or PEI programs are eliminated; no new CSS or PEI programs are added.

Program enhancements and implementation progress to the MHSA Program and Expenditure Plan made by Yolo County ADMHS were presented to the Yolo County Mental Health Board and the Yolo County Community Stakeholders in widely advertised public meetings. The Annual Update for 2009-10 was made available to stakeholders, with opportunities to provide feedback in public meetings, via e-mail or regular mail, and by telephone.

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

Stakeholder entities notified of MHSA meetings, announcements and activities:

- Yolo County Local Mental Health Board
- Consumers and Family Members (those requesting notification)
- NAMI Yolo County
- First 5 Yolo (Children and Families Commission)
- Yolo County Public Guardian
- Yolo County Probation Department
- Yolo County Department of Employment and Social Services

Yolo County Health Department  
Yolo County Board of Supervisors  
Yolo County Office of Education  
Yolo County Superior Court  
Yolo County Sheriffs  
Yolo County Children's Alliance  
City of West Sacramento  
Woodland Joint Unified School District  
Washington Unified School District  
Davis Joint Unified School District  
Winters Joint Unified School District  
Esparto Unified School District  
Alta Regional Services  
Area 4 on Aging  
Suicide Prevention of Yolo County (provider agency)  
Turning Point Community Programs and Pine Tree Gardens (providers)  
Yolo Community Care Continuum (provider agency)  
CommuniCare Health Centers (provider agency)  
Rural Innovations in Social Economics, Inc. (R.I.S.E.) (provider agency)  
Telecare, Inc. (provider agency)  
Yolo Family Resource Center (provider agency)  
Yolo Family Service Agency (provider agency)  
EMQ-FamiliesFirst (provider agency)  
Wayfarer Christian Mission  
Broderick Christian Mission  
Davis Community Meals  
Yolo County Housing  
Community Housing Opportunities Corporation (C.H.O.C.)  
Capay Valley Vision  
E. Musser, Attorney  
B. Grigg, R.N., Educator  
MetaHousing Corporation  
California Institute for Mental Health (C.I.M.H.)  
ADMH Staff and Management  
Yolo County Board of Supervisors

**3. Describe how the information provided by DMH and any additional information provided by the County regarding the implementation of the Community Services and Supports (CSS) component was shared with stakeholders.**

Information sharing with stakeholders continues to be accomplished via e-mail and/or U.S. Postal Service to all on our lists, to ADMH staff, and via posting at ADMH clinic offices, TAY, Wellness and Drop-In Centers. Newspaper "community calendar" notices are used to advertise meetings and events. Legal notices have been posted in all local newspapers when required, but are not routinely used, as they are expensive and do not appear to be effective.

**4. Attach substantive comments received about the CSS implementation information and responses to those comments. Indicate if none received.**

*[Insert substantive comments, either by reference or as attached.]*

**5. List the dates of the 30-day stakeholder review and public hearing. Attach substantive comments received during the stakeholder review and public hearing and responses to those comments. Indicate if none received.**

*[Proposed]*

The 30-day stakeholder review of the Yolo County MHSA Program and Expenditure Plan Annual Update for FY 2009-10 commenced on Friday, May 14, 2010, and ended at 5:00 p.m. on Monday, June 14, 2010.

The public hearing was held at 5:00 p.m. on Monday, June 14, 2010, in the Thomson Room of the Bauer Health and Mental Health Building, 137 N. Cottonwood Street, Woodland.

*[Insert substantive comments, either by reference or as attached.]*

Immediately thereafter, the MHSA Annual Update for FY 09-10 was submitted to the California Department of Mental Health pursuant to Yolo County Board of Supervisors Delegation of Authority, a copy of which is included here as Attachment 1.

- Documents in support of the 30-day stakeholder review and public hearing:
- Attachment 2 Notice of Public Comment Period and Notice of Public Hearing
  - Attachment 3 Sample Newspaper Notice *[Pending]*
  - Attachment 4 Public Comment Form

**Report on FY 2007/08<sup>1</sup> Community Services and Supports Activities  
MHSA FY 2009/10 ANNUAL UPDATE**

County Name: **Yolo**

**Provide a brief narrative description of progress in providing services through the MHSA Community Services and Supports (CSS) component to unserved and underserved populations, with emphasis on reducing racial/ethnic service disparities. (suggested length – one-half page)**

Yolo County's original MHSA CSS plan, approved in May 2006, included four programs, which continue to date. All four programs blend of Full Service Partnership, System Development, and Outreach and Engagement Services.

**CSS Work Plan #1:** In FY 07/08, the **MHSA CSS Greater Capay Valley Children's Pilot Program** provided mental health services and resiliency-building activities directly to the children living in rural Capay Valley (western Yolo County), western area of Yolo County, where the residents are predominately Latino and Spanish-speaking. ADMH clinical staff partnered with staff of RISE, Inc. (Rural Innovations in Social Economics, Inc.), with RISE providing children, youth and families with resiliency-building activities and opportunities for community involvement. Mental health services were made more accessible to children and families through outreach and through expanded availability. Community supports for children and youth diagnosed with serious emotional disorders increased. By the end of FY 07/08, numbers of children receiving System Development (SD) and Outreach and Engagement (O/E) services exceeded expectations (see Exhibit 6 form on file), but Full Service Partnership (FSP) numbers were lower than anticipated, in part due to the difficulty for mental health program staff to become recognized and accepted members of this rural community. In this rural region, the Latino population reaches upwards of 65%, and in many instances, cultural beliefs constrain families from understanding or accepting mental health services. Challenges include maintaining bi-lingual, bi-cultural clinical staff in this rural area.

Per Yolo County's FY 08-09 Plan Update, this children's program was expanded and divided at the end of the fiscal year. The CSS program was expanded to include the entire western region of Yolo (and renamed the **MHSA CSS Rural Children's Program**); the resiliency-building facet

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<sup>1</sup> Per DMH Information Notice No. 08-28, "On Exhibit C provide a brief narrative description of progress in providing service through CSS to unserved and underserved populations, with emphasis on reducing racial/ethnic disparities. Since the CSS Implementation Progress Report was submitted under separate cover for calendar year 2007 and there was not sufficient activity in any other components in FY 07/08 to warrant a report, this section of the FY 2009/2010 Annual Update is Abbreviated."

of the program was separated and appropriately included in Yolo County's Prevention and Early Intervention Plan (named the **MHSA PEI Rural Children's Resiliency Program**).

**CSS Work Plan #2:** In FY 07-08, **Pathways to Independence for Transition Age Youth** (also a blended program) enjoyed its first full year of operation of the Transition Age Youth Center in Woodland, with clinical staff providing intensive community services both in the center and in the community. The TAY Center promotes recovery and wellness while providing an atmosphere where youth can grow in maturity and independence. TAY consumers are offered opportunities to effectively use leisure time, develop socialization skills with peers as well as give and receive support, increase ability to access information and services, increase healthy activities such as physical exercise, learn independent living skills such as budgeting, meal preparation techniques, and the development of housing options. The program served youth, such as those emancipating from Foster Care, youth classified as "Emotionally Disturbed" for Special Education purposes, as well as those with Juvenile Justice and Criminal Court issues and mental health treatment needs. Consumers were provided assistance with GED and higher education, benefits, as well as job readiness and employment training. Actual numbers of Outreach and Engagement consumers were in line with annual estimates (see Exhibit 6 forms on file); however, SD and FSP were lower than anticipated. Highlights include: Use of individualized WRAP (*Wellness Recovery Action Plans*) and adapting them to their youthful needs; development of computer skills to apply for housing, jobs, and classes, as well as the publishing the center newsletter, *The TAY Quarterly*; formation of a TAY Council emphasizing self-determinism, with members planning center activities and services; and development by youth consumers of the "TAY Community."

**CSS Work Plan #3:** The **Wellness Alternatives for Adult Consumers** Program, Yolo County's largest blended CSS program, also benefited from a complete year of center operation in FY 07-08. The spacious Wellness Center in Woodland provided a welcoming atmosphere to consumers and offered service and supports, both at the center and in the community, to at-risk and homeless consumers, while a community-based organization (*Turning Point Community Programs*) partnered to provide independent housing opportunities. Wellness Center services and supports included independent living skills to increase healthy use of leisure time and effective use of supplemental clothing and household items; housing and benefit assistance; socialization opportunities; computer skills development; cooking and menu assistance; exercises, outings, special events, and opportunities for artistic expression.

In mid-FY 07-08, ADMH instituted plans to identify consumers previously served by the AB 2034 "Homeless Mentally Ill" program in West Sacramento and where appropriate, refer them to the MHSA Adult Wellness Program (after AB 2034 funding had been discontinued). In addition, ADMH had numbers of high-acuity consumers whose length of stay in locked facilities exceeded the statewide average reasonable length of stay. Yolo stakeholders had long requested that Assertive Community Treatment (ACT) services be made available for consumers who could safely maintain themselves in the community, if offered appropriate supports. To this end, CSS Adult Wellness Program services were expanded in West Sacramento, plus an additional fifty (50) Full Service Partnership opportunities for ACT team supports (by provider Telecare, Inc.) were added to the program. Six consumer job interns were employed in the Adult Wellness Program; these individuals assisted with events, groups and outings, as well as working with WRAP wellness plans to cope with holiday stress and/or times of crisis. Consumers diagnosed



with co-occurring substance abuse disorders were provided individual support, group support, and opportunities for short-term stays at the ADMH detoxification facility. Although the MHSA Adult Wellness program embraces the harm reduction model, every attempt is made to keep our consumer housing free of substance abuse. Offering adequate integrated dual diagnosis services remains a challenge.

**CSS Work Plan 4: Outreach and Assessment for Older Adults:** This blended program (FSP, SD and OE services) represents an expansion of the previously existing ADMH Older Adult program, offering assessment services and linkage to resources to older adults experiencing mental health problems that interfere with their ability to live independently in the community. This expansion directed more clinical staff and resources to assist older adults in the community, and included the addition of bilingual/bicultural Russian and Latino Mental Health Specialists to reach out to unserved and underserved ethnic groups. This program also supports an accomplished group of trained Senior Peer Counselor volunteers who assist with monitoring consumers in the community. In FY 07-08 this volunteer group tripled in size, to nearly thirty (30) trained participants. The Older Adult staff served a small number of FSP consumers in FY 07-08 (understandably, fewer older adults with severe mental illness are able to live independently). The numbers of System Development consumers were slightly higher than anticipated. Numbers of Outreach and Engagement consumers were far in excess of target estimates, possibly indicating a larger than anticipated need for assessments and referrals for older adults in the community.

Draft

**Mental Health Services Act—Work Plan Description (EXHIBIT D)**

County Name

**Yolo County**

Work Plan Title

**CSS Rural Children’s Mental Health Program**

Population to Be Served

The CSS Rural Children’s Mental Health Program (original CSS Work Plan #1) serves children and youth ages 0 to 17 and their families living in the western rural area of Yolo County, including the geographic area of the Winters Unified School District, the Esparto Unified School District, the towns of Winters and Esparto, and numerous small towns in the region. Some areas have Spanish-speaking Latino residents who comprise over 65% of the local population and are an underserved ethnic group. Mental Health services are not readily available to the children, youth and families of this region.

Work Plan Description

On July 1, 2009, as per the approved Yolo County Prevention and Early Intervention Component Plan approved in May 2009, the CSS program formerly known as the Greater Capay Valley Children’s Pilot Program was divided into the CSS Rural Children’s Mental Health Program and the PEI Rural Children’s Resiliency Program. In addition, the geographic area served by the program was expanded from the Capay Valley and Esparto Unified School District to include the entire western region of Yolo County—adding the town Winters and the Winters Joint Unified School District. The program will continue to collaborate with the PEI Rural Children’s Resiliency Program as it expands into the Winters region.

The CSS Rural Children’s Mental Health Program offers a blend of Full Service Partnership (FSP), System Development (SD) and Outreach and Engagement (OE) services to children and youth, and their families, who reside in the western rural area of the county. Children and youth who have psychiatric disabilities and unmet or under-met mental health treatment needs are the priority population. Many of the children residing in this area are Latino, with family members who most often speak Spanish.

Services include assessment, individual and group therapy, family therapy, crisis counseling and case management services. A bi-lingual/bi-cultural Spanish-speaking clinician assists in delivery of culturally competent services and provides family support, educational support, and linkage to other community agencies.

Yolo County serves up to four (4) Full Service Partnership clients through this MHSA “blended” program. Demand for FSP services has not been high, and homelessness is not common in the rural region. Demand for System Development services has continued to increase as the program and staff become more familiar to and trusted by local families. Outreach and Engagement contacts and referrals will be made more frequently by the PEI Rural Resiliency Program and hence, OE numbers will likely decrease for this CSS program.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

224 Total (N.B.: this is a blended program)

Number of Clients By Funding Category

4 Full Service Partnerships

120 System Development

100 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

         Total

Number of Clients By Type of Prevention

         Early Intervention

         Indicated/Selected

         Universal

**Mental Health Services Act-Work Plan Description (EXHIBIT D)**

County Name

**Yolo County**

Work Plan Title

**Pathways to Independence for Transition-Age Youth**

Population to Be Served

The CSS Pathways to Independence Program for Transition-Age Youth (original CSS Work Plan #2) serves youth and young adults aged 16-25 who have serious emotional disturbances or serious mental illnesses. These individuals may be emancipating from Foster Care or Juvenile Hall, or they may be homeless or at-risk of homelessness. With no specific program in place to assist emotionally disturbed and mentally ill youth with the transition from the children's public mental health system to the adult mental health system, these youth are identified as an underserved age group. This program was designed to provide services uniquely suited to their needs, while promoting recovery and independence.

Work Plan Description

The Pathways to Independence Program for Transition-Age Youth (TAY) is a blended program, offering Full Service Partnership (FSP), System Development (SD) and Outreach and Engagement services to youth aged 16-24. The program operates a TAY Center, with services and activities specifically designed to promote wellness and independence among TAY, including assistance with independent living skills, symptom management, housing supports, employment readiness, and benefits assistance. Opportunities for socialization and physical activity are critical for this age group, and the TAY program promotes social and emotional wellness with indoor and outdoor exercises, music, cooking, outings, self-help groups, board game tournaments and computers. Intensive case management services and housing assistance are offered to FSP clients. TAY are at very high risk of homelessness, chronic substance abuse, suicide and criminal behavior—especially high risk are those youth emancipating from Foster Care or Juvenile Hall. Services to FSP, SD and OE transition-age youth focus on wellness, recovery and resilience, while promoting independence and responsible living.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served  
 \_\_\_338\_\_\_ Total (N.B.: This is a blended program.)

Number of Clients By Funding Category  
 \_\_\_18\_\_\_ Full Service Partnerships  
 \_\_\_160\_\_\_ System Development  
 \_\_\_160\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served  
 \_\_\_\_\_ Total

Number of Clients By Type of Prevention  
 \_\_\_\_\_ Early Intervention  
 \_\_\_\_\_ Indicated/Selected  
 \_\_\_\_\_ Universal

**Mental Health Services Act-Work Plan Description (EXHIBIT D)**

County Name

Yolo County

Work Plan Title

CSS Adult Wellness Program

Population to Be Served

The CSS Adult Wellness Program (original CSS Work Plan # 3) serves adults aged 18 to 59 years experiencing serious and persistent mental illnesses, who are also homeless or at-risk of homelessness; un-served or underserved relative to their mental health treatment needs; or members of ethnic populations in the community identified as underserved.

Work Plan Description

The Wellness Alternatives Program for Adult Consumers is the largest of Yolo County's four CSS programs. This program offers a blend of Full Service Partnership (FSP), System Development (SD) and Outreach and Engagement (OE) services to Yolo County adults aged 18 and over, who are experiencing serious and persistent mental illnesses. The program operates a Wellness Center in Woodland and a Drop-In Center in West Sacramento for adult consumers. This age group continues to have the greatest growth in demand and need for expansion of services, especially for the System Development client population.

Yolo County ADMH serves up to 107 Full Service Partnership Clients through this MHSa program. Fifty-seven (57) FSP clients are served directly by Yolo County ADMH staff, with the majority of those clients living in West Sacramento and Woodland. As per the program expansion initiated in FY 07-08, up to fifty (50) additional clients with very high acuity receive Full Service Partnership and Assertive Community Treatment services via contract with Telecare Corporation, with priority given to clients re-entering the community from locked mental health facilities.

Client need and stakeholder response prompted greater attention to System Development clients over the past fiscal year. Triage and Urgent Care program components were introduced to assess need, expedite access to services, and accelerate determination of eligibility. Clients were referred to the Benefits Specialist at the earliest opportunity.

Outreach and Engagement continue in the community, most often at homeless shelters, community meal locations, on the banks of the Sacramento River, or as walk-ins to the Wellness Center and Drop-In Center.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

827 Total (N.B.: this is a blended program)

Number of Clients By Funding Category

107 Full Service Partnerships

600 System Development

120 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

         Total

Number of Clients By Type of Prevention

         Early Intervention

         Indicated/Selected

         Universal

**Mental Health Services Act–Work Plan Description (EXHIBIT D)**

County Name

Yolo County

Work Plan Title

CSS Older Adult Outreach and Assessment

Population to Be Served

The CSS Older Adult Outreach and Assessment Program (original CSS Work Plan #4) serves adults aged 60 and over experiencing serious mental illnesses, and who are isolated; homeless or at-risk of homelessness; un-served or underserved relative to their mental health treatment needs; or members of ethnic populations in the community identified as underserved.

Work Plan Description

The CSS Older Adult Outreach and Assessment Program is an expansion of an existing Older Adult program serving clients aged 60 and over, providing clinical and case management support, mental health assessments and in-home visitation for isolated older adults experiencing mental illnesses and being at risk of losing their independence. Many older adults are homebound; several have special cultural or linguistic needs, and most have co-occurring physical health problems. Through this program, the unique needs of the older adult population are acknowledged. The Older Adult Program is a blended program, offering Full Service Partnership (FSP), System Development (SD) and Outreach and Engagement services to adults aged 60 and over, with serious mental illnesses. Demand for FSP services has not increased, primarily because those who meet FSP criteria are often not well enough to maintain independence in the community. Program staff partner with other local agencies such as Adult Protective Services, Conservator’s Office, Public Health, In-Home Supportive Services and Adult Day Health to address the mental health and coordinated care needs of these senior citizens, while keeping them safe, stable and living independently as long as possible. The Older Adult Program operates with the assistance of a large team of Senior Peer Counselors, healthy seniors who voluntarily give support and assistance to those older adults whose mental wellbeing is in decline.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served  
427 Total (N.B.: this is a blended program)  
 Number of Clients By Funding Category  
7 Full Service Partnerships  
180 System Development  
240 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served  
 \_\_\_\_\_ Total  
 Number of Clients By Type of Prevention  
 \_\_\_\_\_ Early Intervention  
 \_\_\_\_\_ Indicated/Selected  
 \_\_\_\_\_ Universal

Draft

**Mental Health Services Act-Work Plan Description (EXHIBIT D)**

County Name

**Yolo County**

Work Plan Title

**PEI Yolo Wellness Project: Urban Children's Resiliency (Proj. 1, Program 1 of 3)**

Population to Be Served

The PEI Urban Children's Resiliency Program will provide wellness and resiliency-building services to underserved children ages 0 to 18 and their families living in the urban areas of Yolo County, including the City of Woodland and the area included in Woodland Joint Unified School District; the City of Davis and the area included in Davis Joint Unified School District; the City of West Sacramento and the area included in Washington Unified School District.

Work Plan Description

The Urban Children's Resiliency Program is one of three programs included in the MHSA PEI Wellness Project, the primary focus of which is to increase resiliency and protective factors to prevent individuals and families from developing the symptoms of mental illness and negative life outcomes associated with mental illness. The overall project is designed to promote wellness and generally increase wellness skills among community members.

Specifically, the Urban Children's Resiliency Program targets underserved children and families within the urban areas of Yolo County, which include the cities and school district areas of Davis, Woodland and West Sacramento. The program will focus on the priority populations of children, transition aged youth and families experiencing stress, children and transition aged youth at risk for school failure and juvenile justice involvement and/or who have experienced trauma. The program will use evidence-based practice or promising practice program curricula as the framework for serving the priority populations.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_480\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_480\_\_\_ Universal

**Mental Health Services Act-Work Plan Description (EXHIBIT D)**

County Name

**Yolo County**

Work Plan Title

**PEI Yolo Wellness Project: Rural Children's Resiliency (Proj. 1, Program 2 of 3)**

Population to Be Served

The PEI Rural Children's Resiliency Program will provide wellness and resiliency-building services to underserved children ages 0 to 18 and their families living in the large western rural area of Yolo County, including the City of Winters and the area included in Winters Joint Unified School District, as well as the towns of Esparto, Madison and other communities in Capay Valley, and the area included Esparto Unified School District.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_180\_\_ Total

Number of Clients By Type of Prevention

\_\_ 60\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_120\_\_ Universal

Work Plan Description

The Rural Children's Resiliency Program is one of three programs included in the Mental Health Services Act Prevention and Early Intervention (MHSA PEI) Wellness Project, the primary focus of which is to increase resiliency and protective factors to prevent individuals and families from developing the symptoms of mental illness and negative life outcomes associated with mental illness. The overall project is designed to promote wellness and generally increase wellness skills among community members.

Specifically, the Rural Children's Resiliency Program targets underserved children and families within the rural areas of western Yolo County, which includes Winters, Esparto, several small towns in predominately agricultural regions, and the geographic areas of Winters Joint Unified and Esparto Unified School Districts. In parts of these rural areas, more than two-thirds of the residents are Latinos whose primary language is Spanish. The program focuses on the priority populations of children, transition aged youth and families experiencing stress, children and transition aged youth at risk for school failure and juvenile justice involvement and/or who have experienced trauma.

Implementation of this program began in FY 06-07 in the Esparto area only, as a pilot program of Yolo County's MHSA Community Services and Supports (CSS) Plan, with mental health services provided by ADMH and resiliency-building mental wellness activities provided by a community-based provider, Rural Innovations in Social Economics, Inc. (R.I.S.E.). On July 1, 2009, the resiliency building and early intervention services included in the pilot program were separated from the mental health services component within CSS. A new program was formed under Yolo County's PEI program, which was expanded to include Winters and its surrounding geography.



**Mental Health Services Act-Work Plan Description (EXHIBIT D)**

County Name

**Yolo County**

Work Plan Title

**PEI Yolo Wellness Project: Senior Peer Counselor Volunteers (Proj. 1, Program 3 of 3)**

Population to Be Served

The PEI Senior Peer Counselor Volunteers serve older adults (aged 60 and over) in Yolo County who are experiencing isolation, mental health problems, mental deterioration and depression, and who may be on the threshold of losing their independence. This program is designed to support the PEI Senior Peer Counselors, who in turn will serve older adults in the community.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_90\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_20\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_70\_\_\_ Universal

Work Plan Description

The Senior Peer Counselors Community Volunteer Program is one of three programs included in the MHSA PEI Wellness Project, the primary focus of which is to increase resiliency and protective factors to prevent individuals and families from developing the symptoms of mental illness and negative life outcomes associated with mental illness. The overall project is designed to promote wellness and generally increase wellness skills among community members.

This program offers coordination, training and assistance to the group of Senior Peer Counselors who voluntarily provide supportive services to “at-risk” older adults in the Yolo County community. These volunteers keep a watchful eye over older adults in the community who are experiencing symptoms of mental illness, stigmatizing and discriminatory treatment, or difficulty accessing services, as well as loss of independence. The SPC volunteers are also mindful of the very high risk of suicide among isolated seniors.

For several years, our community has had the benefit of a small group of volunteer seniors (primarily, retired professionals) who act in a voluntary capacity as peer counselors to isolated older adults in the Yolo County community. These volunteers are provided training and support by ADMH staff. In recent years, the Senior Peer Counselors expanded in number from eight (8) to nearly thirty (30). Using MHSA PEI funds, ADMH supports the expanded program and offers limited training, coordination and resource support to this elite group of volunteers.



**Mental Health Services Act—Work Plan Description (EXHIBIT D)**

County Name

**Yolo County**

Work Plan Title

**PEI Early Signs Project: Early Signs Training and Assistance (Project. 2, Program 1 of 2)**

Population to Be Served

The PEI Early Signs Training and Assistance Program will serve key community agents in Yolo County, such as teachers, school nurses, probation officers, senior center staff, faith leaders, etc., as well as general community members interested in increasing their mental health literacy and reducing stigma and discrimination against the mentally ill.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_200\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_160\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_40\_\_\_ Universal

Work Plan Description

The Early Signs Training and Assistance Program is one of two programs included in the Mental Health Services Act Prevention and Early Intervention (MHSA PEI) Early Signs Project, designed to develop community capacity to recognize and address the signs of mental illness. The project will also develop among community members an awareness of existing resources, as well as to promote and increase early intervention for individuals experiencing first onset of psychosis.

The Early Signs Training and Assistance Program offers mental health education and training for key community agents (teachers, school nurses, probation officers, senior center staff, faith leaders, etc.) as well as general community members. Staff will train members of our community in identification of early signs of mental illness, what to do when signs are identified, and what resources are available within the community. For example, one component of the program is Mental Health First Aid (MHFA), an internationally known public education program recognized as an evidence-based practice. Certified instructors on staff will deliver the MHFA curriculum, which is designed to help the public identify, understand and respond to signs of mental illnesses. Mental Health First Aid is offered in the form of a 12-hour certification course that presents an overview of mental illness and introduces participants to warning signs of mental health problems, builds understanding of the impact of these illnesses, and overviews common treatments.

Primary goals of the Early Signs Training and Assistance Program are to increase mental health literacy countywide; decrease stigma and discrimination; increase the number of individuals seeking help early in the onset of illness; and assist residents in accessing local and nearby resources such as the UC Davis “First Break” program, titled Early Diagnosis and Preventative Treatment (EDAPT).

**Mental Health Services Act—Work Plan Description (EXHIBIT D)**

County Name

**Yolo County**

Work Plan Title

**PEI Early Signs Project: Crisis Intervention Training (Project. 2, Program 2 of 2)**

Population to Be Served

The PEI Crisis Intervention Team (CIT) Training Program serves law enforcement officers from six local agencies: Yolo County Sheriffs Departments, Police Departments of the Cities of Davis, Winters, Woodland and West Sacramento, and U.C. Davis Police, as well as other first responder agencies such as Emergency Medical, Fire Department, Yolo County Probation, etc., to enhance their skills in identifying and assisting individuals experiencing mental health crises.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

\_\_\_\_\_ Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

\_\_\_\_\_ System Development

\_\_\_\_\_ Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_200\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_160\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_40\_\_\_ Universal

Work Plan Description

The Crisis Intervention Team Training Program is one of two programs included in the Mental Health Services Act Prevention and Early Intervention (MHSA PEI) Early Signs Project, designed to develop community capacity to recognize and address the signs of mental illness. The project will also develop among community members an awareness of existing resources, as well as to promote and increase early intervention for individuals experiencing first onset of psychosis.

The Crisis Intervention Team (CIT) Training Program utilizes a nationally recognized program (known as *The Memphis Model*) which focuses on training law enforcement personnel and other first responders to recognize the signs of mental illness when responding to a crisis. The training provides information in how to respond appropriately and compassionately and to assist individuals and families in crisis that are experiencing mental illness to find appropriate care. The training is specifically aimed at decreasing stigma and discrimination, promoting early identification for screening, and providing law enforcement personnel with increased intervention tools to prevent suicides and reduce violent altercations with police.

Since crisis involving law enforcement may occur at the time an individual's "first break" this program will support the training of first responders to better recognize signs and symptoms of mental illness onset and help them to connect the affected individuals and/or their families with early intervention services. Additionally, those individuals with persistent mental illness will be more likely to be referred to treatment and recovery and less likely to be incarcerated. The program supports on-going trainings and will have the consultative support and training involvement of the *Early Signs Training and Assistance* program.

**FY 2009/10 Mental Health Services Act  
Summary Funding Request**

County: Yolo

Date: 5/13/2010

	MHSA Component				
	CSS	CFTN	WET	PEI	Inn
<b>A. FY 2009/10 Planning Estimates</b>					
1. Published Planning Estimate <sup>al</sup>	\$4,975,000	\$0	\$0	\$1,668,700	\$386,700
2. Transfers <sup>bl</sup>					
3. Adjusted Planning Estimates	\$4,975,000	\$0	\$0	\$1,668,700	\$386,700
<b>B. FY 2009/10 Funding Request</b>					
1. Required Funding in FY 2009/10 <sup>cl</sup>	\$4,975,000	\$0	\$0	\$1,331,857	\$0
2. Net Available Unspent Funds					
a. Unspent FY 2007/08 Funds <sup>dl</sup>	\$860,529			\$0	
b. Adjustment for FY 2008/09 <sup>el</sup>	\$860,529			\$0	
c. Total Net Available Unspent Funds	\$0	\$0	\$0	\$0	\$0
3. Total FY 2009/10 Funding Request	\$4,975,000	\$0	\$0	\$1,331,857	\$0
<b>C. Funding</b>					
1. Unapproved FY 06/07 Planning Estimates			\$0		
2. Unapproved FY 07/08 Planning Estimates	\$0	\$0	\$0	\$0	
3. Unapproved FY 08/09 Planning Estimates	\$0	\$0	\$0	\$180,000	\$0
4. Unapproved FY 09/10 Planning Estimates	\$4,975,000			\$1,151,857	\$0
5. Total Funding <sup>fl</sup>	\$4,975,000	\$0	\$0	\$1,331,857	\$0

**EXHIBIT E1-CSS Funding Request**

**FY 2009/10 Mental Health Services Act  
Community Services and Supports Funding Request**

County: Yolo

Date: 5/13/2010

CSS Work Plans				FY 09/10 Required MHA Funding	Estimated MHA Funds by Service Category				Estimated MHA Funds by Age Group			
No.	Name	New (N)/ Approved Existing (E)			Full Service Partnerships (FSP)	System Development	Outreach and Engagement	MHA Housing Program	Children, Youth, and Their Families	Transition Age Youth	Adult	Older Adult
1.	1 Rural Children's Mental Health Prg.	E	\$277,098	\$27,710	\$180,114	\$69,275	\$0	277,098				
2.	2 Pathways to Independence TAY	E	\$536,692	\$322,015	\$134,173	\$80,504	\$0		536,692			
3.	3 Adult Wellness Program	E	\$3,464,953	\$2,494,766	\$796,939	\$173,248	\$0			3,464,953		
4.	4 Older Adult Outreach & Assessment	E	\$280,379	\$112,152	\$126,171	\$42,057	\$0				280,379	
26.	Subtotal: Work Plans <sup>a/</sup>		\$4,559,122	\$2,956,643	\$1,237,396	\$365,083	\$0	\$277,098	\$536,692	\$3,464,953	\$280,379	
27.	Plus County Administration		\$415,878									
28.	Plus Optional 10% Operating Reserve		\$0									
29.	Plus CSS Prudent Reserve <sup>b/</sup>											
30.	Total MHA Funds Required for CSS		\$4,975,000									

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

64.85%

b/Transfers to Capital Facilities and Technological Needs, Workforce Education and Training, and Prudent Reserve are subject to limitations of WIC 5892b.

**FY 2009/10 Mental Health Services Act  
Prevention and Early Intervention Funding Request**

County: Yolo

Date: 5/13/2010

PEI Work Plans			FY 09/10 Required MHSA Funding	Estimated MHSA Funds by Type of Intervention			Estimated MHSA Funds by Age Group			
No.	Name	Universal Prevention		Selected/ Indicated Prevention	Early Intervention	Children, Youth, and Their Families	Transition Age Youth	Adult	Older Adult	
1.	1.1	Wellness: Urban Children's Resiliency	\$518,000	\$518,000		\$0	\$518,000			
2.	1.2	Wellness: Rural Children's Resiliency	\$230,000	\$184,000		\$46,000	\$230,000			
3.	1.3	Wellness: Senior Peer Counselor Volunteers	\$72,000	\$50,400		\$21,600			\$72,000	
4.	2.1	Early Signs: Early Signs Training & Assistance	\$225,228	\$45,046		\$180,182	\$56,307	\$56,307	\$56,307	
5.	2.2	Early Signs: Crisis Intervention Training	\$60,000	\$12,000		\$48,000	\$15,000	\$15,000	\$15,000	
6.										
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22.										
23.										
24.										
25.										
26.	<b>Subtotal: Work Plans<sup>a/</sup></b>		<b>\$1,105,228</b>	<b>\$809,446</b>	<b>\$0</b>	<b>\$295,782</b>	<b>\$819,307</b>	<b>\$71,307</b>	<b>\$71,307</b>	<b>\$143,307</b>
27.	<b>Plus County Administration</b>		<b>\$226,629</b>							
28.	<b>Plus Optional 10% Operating Reserve</b>		<b>\$0</b>							
31.	<b>Total MHSA Funds Required for PEI</b>		<b>\$1,331,857</b>							

a/ Majority of funds must be directed towards individuals under age 25—children, youth and their families and transition age youth . Percent of Funds directed towards those under 25 years=

80.58%

EXHIBIT G

Community Services and Supports Prudent Reserve Plan  
FY 2009/10 ANNUAL UPDATE MENTAL HEALTH SERVICES ACT

County Yolo

Date 5/13/10

**Instructions:** Utilizing the following format please provide a plan for achieving and maintaining a prudent reserve.

<b>1. Requested FY 2009/10 CSS Services Funding</b>	<b>\$4,559,122</b>
Enter the total funds requested from Exhibit E1 – CSS line 26.	
<b>2. Less: Non-Recurring Expenditures</b>	<b>- -0-</b>
Subtract any identified CSS non-recurring expenditures included in #1 above.	
<b>3. Plus: CSS Administration</b>	<b>+ \$415,878</b>
Enter the total administration funds requested for CSS from Exhibit E1 – CSS line 27.	
<b>4. Sub-total</b>	<b><u>\$4,975,000</u></b>
<b>5. Maximum Prudent Reserve (50%)</b>	<b><u>\$2,487,500</u></b>
Enter 50%, or one-half, of the line item 4 sub-total. This is the estimated amount the County must achieve and maintain as a prudent reserve by July 1, 2010. If the funding level for CSS services and county administration changes for FY 10/11, the amount of the prudent reserve would also change.	
<b>6. Prudent Reserve Balance from Prior Approvals</b>	<b>\$ 34,052</b>
Enter the total amounts previously approved through Plan Updates for the local prudent reserve.	
Notice 09-16 pending approval of CSS & PEI Prudent Reserve funding request	<b>\$480,017</b>
<b>7. Plus: Amount requested to dedicate to Prudent Reserve through this Plan Update</b>	<b>+ -0-</b>
Enter the amount of funding requested through this Plan update for the local prudent reserve from Exhibit E1 – CSS line 29.	
<b>8. Prudent Reserve Balance</b>	<b>\$514,069</b>
Add lines 6 and 7.	
<b>9. Prudent Reserve Shortfall to Achieving 50%</b>	<b><u>\$1,973,431</u></b>
Subtract line 8 from line 5. A positive amount indicates that the County has not dedicated sufficient funding to the local prudent reserve. Please describe below how the County intends to reach the 50% requirement by July 1, 2010; for example indicate future increases in CSS planning estimates that will be dedicated to the prudent reserve before funding any program expansion. County will deposit any unspent CSS funds from FY0910, as well as consider redirecting up to 20% of the CSS planning estimates for future fiscal years. If required, County will dedicate future increases in planning estimates before funding program expansions.	

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**Note:** If subtracting line 8 from line 5 results in a negative amount – this indicates that the County is dedicating too much funding to the local prudent reserve, and the prudent reserve funding request will be reduced by DMH to reflect the maximum.

**DELEGATION OF AUTHORITY**

BOARD OF SUPERVISORS  
Yolo County, California

To: CAO  
Co. Counsel  
ADMH ✓  
PPW  
Parks & Resources

CONSENT CALENDAR

Excerpt of Minute Order No. 10-74 Item No. 2.09, of the Board of Supervisors' meeting of April 13, 2010.

MOTION: Rexroad. SECOND: Provenza. AYES: Rexroad, Provenza, Chamberlain, McGowan, Thomson.

2.09

Approve request to delegate authority to the Director of Yolo County Alcohol, Drug and Mental Health to act as fiscal and programmatic administrative agent for the purpose of providing ongoing administration of the Mental Health Services Act. (No general fund impact; revenue agreement) (Suderman)

Recommended Action 2.09

Approved recommended action on Consent.





DEPARTMENT OF ALCOHOL, DRUG AND MENTAL HEALTH

Kim Suderman, LCSW, Director

**ADMINISTRATION**  
137 N. Cottonwood Street, Suite 2500  
Woodland CA 95695  
Office – 530-666-8516  
Fax – 530-666-8294

Mark Bryan, Deputy Director  
Christina Hill-Coillot, Deputy Director  
Arturo Villamor, Medical Director

To: Supervisor Helen Thomson, Chairwoman  
And Members of the Board of Supervisors

From: Kim Suderman, Director  
Department of Alcohol, Drug and Mental Health

Agenda Item No. 2.09

Date: April 13, 2010

Subject: Approve request to delegate authority to the Director of Yolo County Alcohol, Drug and Mental Health to act as fiscal and programmatic administrative agent for the purpose of providing ongoing administration of the Mental Health Services Act. (No general fund impact; Revenue agreement)

RECOMMENDED ACTION

Approve and authorize the Chairwoman to delegate authority to the Director of Yolo County Alcohol, Drug and Mental Health (ADMH) to act as fiscal and programmatic administrative agent for the purpose of providing ongoing administration of the Mental Health Services Act (Proposition 63).

STRATEGIC PLAN GOALS

This action supports the strategic plan goal of promoting a safe and healthy community by serving those who in the past have been unserved and underserved in Yolo County while intensifying efforts to reduce out-of-home and institutional care.

FISCAL IMPACT

No county general funds are required by this action.

Funds to be approved by the Director under this Delegation of Authority represent revenue approved under the Mental Health Services Act (MHSA) and available for distribution during fiscal year (FY) 2009-10 and FY 2010-11, in the presence of MHSA Plans and Plan Updates approved by the CA Department of Mental Health, in categories and amounts up to those indicated below:

Reviewed by: ASalinas Phone #: 815.3

<b>MHSA Annual Funding</b>	<b>FY 09-10</b>	<b>FY 10-11</b>	<b>Comments</b>	
Community Services and Supports	\$ 4,975,000	\$ 4,331,600	Annual update required; funding must be used within three years.	
Prevention and Early Intervention	\$ 1,668,700	\$ 1,093,300	Annual update required; funding must be used within three years.	
<b>MHSA Limited Term Funding</b> (Funding restricted to specific MHSA components, accessible 3-8 years, non-renewable)			<b>Amount of Funding Available with State-Approved Plan for Component</b>	<b>Specific Period Funding is Available</b>
Innovation			\$ 773,400	07/01/09 thru 06/30/12
Capital Facilities and Information Technology			\$ 2,274,600	07/01/08 thru 06/30/18
Workforce Education and Training			\$ 1,042,500	07/01/08 thru 06/30/18 Plan approved FY 08-09
MHSA Housing Development			\$ 3,014,300	07/01/08 thru 06/30/11

**REASON FOR RECOMMENDED ACTION**

On December 4, 2007, the Yolo County Board of Supervisors designated the Director/Interim Director of the Department of Alcohol, Drug and Mental Health to act as fiscal and programmatic administrative agent for the purposes of that agreement (Minute Order No. 07-347, Item No. 2.09) which expired on June 30, 2008.

Counties are permitted to designate an individual to act as fiscal and programmatic administrative agent. Prior to December 4, 2007 the county board of supervisors had to approve every change to Mental Health Services Act (MHSA) funding, greatly slowing the process and creating a burden to the board of supervisors' administrative staff.

Re-approval will enable ADMH to continue expansion of mental health services to the unserved and underserved populations of Yolo County while intensifying efforts to reduce out-of-home and institutional care.

BACKGROUND

California voters approved Proposition 36, the Mental Health Services Act during the November 2004 General Election. MHSA became effective in January 2005. Through imposition of a 1% tax on personal income in excess of \$1 million, Proposition 63 enables the State Department of Mental Health to provide funding, personnel and other resources to support new and expand county mental health programs and monitor progress toward statewide goals for children/youth, adults, older adults and families.

OTHER AGENCY INVOLVEMENT

None

ATTACHMENTS

None



DEPARTMENT OF ALCOHOL, DRUG AND MENTAL HEALTH

Kim Suderman, Director

**ADMINISTRATION**  
137 N. Cottonwood Street, Suite 2500  
Woodland CA 95695  
Office – 530-666-8516  
Fax – 530-666-8294

**MENTAL HEALTH SERVICES ACT (MHSA):**

**NOTICE OF 30-DAY PUBLIC COMMENT PERIOD (3 DOCUMENTS)**

1. MHSA Three-Year Program and Expenditure Plan—Annual Update FY 2009-10 (see below regarding the June 14, 2010 public hearing on this document);
2. MHSA Community Services and Supports (CSS) and Prevention and Early Intervention (PEI) FY 2009-10 Prudent Reserve Funding Request;
3. Supplemental MHSA PEI Statewide Programs Assignment Agreement

To all citizens, residents and interested stakeholders, Yolo County Department of Alcohol, Drug and Mental Health, in accordance with the Mental Health Services Act, is publishing this Notice of 30-Day Public Comment Period regarding the above-entitled documents. (See attached comment form.)

The public comment period will begin Friday, May 14, 2010 and end at 5:00pm, Monday, June 14, 2010. Interested persons may provide written comments during the public comment period. Written comments and/or questions should be addressed to **Kim Suderman, Director**, or **Joan Beesley, MHSA Coordinator**, 137 N. Cottonwood Street, Suite 2500, Woodland, CA 95695.

**NOTICE OF PUBLIC HEARING (Annual Update Document Only)**

To all citizens, residents and interested stakeholders: A public hearing on the *MHSA Three-Year Program and Expenditure Plan—Annual Update FY 2009-10* will be held by members of the Yolo County Mental Health Board at **5:00 p.m. on Monday, June 14, 2010** in the Thomson Room of the Bauer Building, 137 N. Cottonwood Street, Woodland, California. All interested stakeholders are encouraged to attend.

If you would like to review any of the above-referenced MHSA documents on the Internet, follow this link at the Yolo County website: <http://www.yolocounty.org/Index.aspx?page=993>. A link to these documents is also posted at [www.namiyolo.org](http://www.namiyolo.org). Printed copies of these documents are available to read at the reference desk of all public libraries in Yolo County and in the public waiting areas of these Yolo County offices, during the regular business hours of each location:

- Mental Health Offices, 137 N. Cottonwood Street, Woodland.
- Mental Health Offices, 600 A Street, Davis (Wed. and Fri. only).
- Mental Health Offices, 800-B Jefferson Blvd., West Sacramento (Mon., Wed., and Thurs. only).
- Yolo County Administration Building, 625 Court Street, Woodland.
- Yolo Co. Dept. of Social Services "One-Stop" Center, 25 N. Cottonwood Street, Woodland.

To obtain a copies by mail, or to request an accommodation or translation of the documents into other languages or formats, call Violet Menendez at (530) 666-8547 before 5:00 p.m. Thurs., June 3, 2010.

Par asistencia en Español llame a Elena Jaime al (530) 666-8346 o (916) 375-6350.

За помощью с переводом на русский язык звоните Светлана Шраменко по телефону (530) 666-8634 или (916) 375-6350.

**ATTACHMENT 2**

**NEWSPAPER PUBLICATION**  
**[ *pending* ]**

**Mental Health Services Act (MHSA) 30-Day Public Comment Form**

Public Comment Period—May 14, 2010 through June 14, 2010

**Documents Posted for Public Review and Comment:**

- MHSA Three-Year Program and Expenditure Plan—Annual Update FY 2009-10**
- MHSA Community Services and Supports (CSS) and Prevention and Early Intervention (PEI) FY 2009-10 Prudent Reserve Funding Request**
- Supplemental MHSA PEI Statewide Programs Assignment Agreement**

(Check only one box above and comment on only one document per form. You may submit multiple forms.)

**PERSONAL INFORMATION (optional)**

Name: \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

***What is your role in the Mental Health Community?***

\_\_\_\_ Client/Consumer

\_\_\_\_ Family Member

\_\_\_\_ Educator

\_\_\_\_ Social Services Provider

\_\_\_\_ Mental Health Service Provider

\_\_\_\_ Law Enforcement/Criminal Justice Officer

\_\_\_\_ Probation Officer

\_\_\_\_ Other (specify) \_\_\_\_\_

***Please write your comments below:***

If you need more space for your response, please feel free to submit additional pages.

After you complete this comment form, please return it to ADMH/MHSA before June 14, 2010 in one of three ways:

- Fax this form to (530) 661-6762, Attn: MHSA Coordinator
- Mail this form to ADMH/MHSA, Attn: MHSA Coordinator, 137 N. Cottonwood St., Suite 1530, Woodland, CA 95695
- Hand deliver this form to ADMH/MHSA, Attn: MHSA Coordinator, 137 N. Cottonwood St., Suite 1530, Woodland, CA 95695

**ATTACHMENT 4**