



HEALTH AND HUMAN SERVICES AGENCY BEHAVIORAL HEALTH & RECOVERY SERVICES



POLICY AND PROCEDURE

Service Area: Mendocino County Behavioral Health and Recovery Services
Subject: Mental Health Services Act Capital Facilities and Technology Needs

Subject Matter
Expert:

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BHRS Director:

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Previous or
Referenced
Policy No.:

Created: 05/08

Reviewed: 7/18

Revised: 4/18

POLICY:

Mendocino County Health and Human Services Agency (HHS) Behavioral Health and Recovery Services (BHRS) will support programs funded through the Mental Health Services Act (MHSA), also known as Proposition 63, which will be conducted in accordance with the California Department of Health Care Services guidelines and regulations for Mental Health Services Act Programs, Mental Health Services Oversight and Accountability Commission (MHSOAC), as well as all State and County guidelines that pertain to MHSA programs. Capital Facilities and Technology Needs (CFTN) Programs will meet CFTN criteria and will be outlined in the Mendocino County MHSA Three-Year Program and Expenditure Plan (and Annual Plan Updates). CFTN programs are designed to develop technology uses and strategies and/or community based facilities which support integrated service experiences that are culturally and linguistically appropriate. CFTN funding for programs must be identified in the Three-Year Program and Expenditure Plan, and the plan must be developed with MHSA Stakeholder involvement.

Definitions

Community Program Planning (CPP) Process: The Community Program Planning Process is defined by California Codes of Regulations toward the development and review of MHSA programs. Community Planning Process utilizes community

collaboration through clients, client family members, agencies, organizations, and other community members who work together to share information and resources in order to fulfill a shared vision and goals. The process is utilized to identify community issues related to mental illness resulting from lack of community services and supports, to identify issues related to implementation of Mental Health Services Act programs, to analyze the mental health needs in the community, and to identify and re-evaluate priorities and strategies to meet mental health needs. MHSA providers are expected to participate in the MHSA Community Program Planning processes.

Stakeholder Definition: Stakeholders are defined by the Department of Health Care Services (DHCS) and the Mental Health Services Oversight and Accountability Commission (MHSOAC) as individuals or entities with an interest in mental health services in the State of California including but not limited to: individuals with serious mental illness, clients of MHSA programs, providers of mental health or related services, family members, educators, representatives of law enforcement, and other agencies or other community members that interact with individuals with mental illness (primary care providers, social service agencies, substance use treatment services, etc.), that have an interest in the mental health issues, consumers or their families, or an interest in Mental Health Services Act programs.

Client Definition: For the purposes of this Policy, the terms client, consumer, participant, beneficiary, person with serious mental illness, and person with lived experience can be used interchangeably. A client is an individual of any age who is or has received mental health services to represent the individual that is receiving services through an MHSA program.

Capital Facilities and Technological Needs: CFTN is one of the five components of MHSA. CFTN projects must support the goals of MHSA and should produce projects with long term impacts on the mental health system toward the goals of wellness, recovery, resiliency, cultural competence, and expansion of opportunities for accessible community based services for clients and their families which promote a reduction in disparities for underserved groups. These efforts include the development of technology uses and strategies and/or community based facilities which support integrated service experiences that are culturally and linguistically appropriate. They may also include consumer run or peer support facilities.

Capital Facility: Is a building secured to a foundation which is permanently affixed to the ground and used for the delivery of MHSA services to individuals with mental illness and their families or for administrative offices. Capital Facility funds may be used by the County to acquire, develop, or renovate such buildings or to purchase land in anticipation of acquiring/constructing a building. Capital Facility expenditures must result in a capital asset which increases the County's Department of Mental Health's

Infrastructure on a permanent basis and must result in an expansion of the capacity/access of existing services or the provision of new services. Funding cannot be used for renting building space, purchase of vacant land with no plan to build, acquisition of land when the owner of record is a non-government entity, facilities where the purpose of the building is to provide housing, acquisition of facilities not secured to a foundation, and operating costs for the building, furniture or fixtures not attached to the building.

Technological Needs: Development of technology uses and integrated information systems infrastructure for the mental health system to facilitate the highest quality, cost effective services and supports for clients and their families. This can include integrated information systems infrastructure, client information exchanges, databases, and communication tools through secure networks. The foundation of integrated information systems are Electronic Health Records that are secure, real time, point of care, client centric, and information resources.

PROCEDURE:

1. **CFTN Projects:** Programs, trainings, and activities shall be outlined in the Mental Health Services Act Three-Year Plan and Annual Plan Updates. Input from stakeholders regarding projects will be collected through the Community Planning Process.
 - a. CFTN activities shall be budgeted according with the Revenue and Expenditure Report.

2. **CFTN Housing Assistance:**
 - a. Housing projects that benefit more than the mental health system must include revenues from other funding sources so the net cost to MHSA is reflective of the benefit received by the mental health system.

3. **CFTN Information Technology Reporting Requirements:** CFTN Projects shall develop a report for submission to Department of Health Care Services that includes:
 - a. Project name
 - b. Report period
 - c. Project start and end dates
 - d. Project objectives
 - e. Project status
 - f. Budget information including funding sources budgeted costs and actual costs to date
 - g. Scheduled activities
 - h. Major accomplishments

REFERENCES:

CCR, Title 9, Sections 3320(a), 3410
Welfare and Institutions Code Section 5848, 5891, 5892
DMH Information Notice 08-09

ATTACHMENTS:

None.