



C A L I F O R N I A D E P A R T M E N T O F
Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-2309

May 29, 2007

DMH INFORMATION NOTICE NO.: 07-11

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

SUBJECT: MODIFICATIONS TO THE PROCEDURES SPECIFIC TO VERY
SMALL COUNTIES PERTINENT TO THE COMMUNITY
SERVICES AND SUPPORTS (CSS) THREE-YEAR PROGRAM
AND EXPENDITURE PLAN

REFERENCE: IMPLEMENTATION OF THE MENTAL HEALTH SERVICES ACT
(MHSA), CALIFORNIA CODE OF REGULATIONS, SECTION
3650(a)(1) AND 3650(a)(6)

The purpose of this DMH Information Notice is to address the CSS Three-Year Program and Expenditure Plan (Plan) for very small counties. A “very small county” is a county in California with a total population of less than 100,000 according to the annual projections published by the California Department of Finance. Section 3650(a)(1) of the Mental Health Services Act (MHSA) regulations specifies that the CSS component of the Plan shall include an Assessment of Mental Health Needs and Section 3650(a)(6) specifies Work Plans are needed for the CSS Programs/Services. These requirements remain unchanged. However, two modifications have been made to better assist the very small counties in meeting these regulatory requirements and in implementing MHSA.

1. For those very small counties who have not submitted the CSS Plan as of the date of this DMH Information Notice, the following modifications have been made:

Section II: Analyzing Mental Health Needs in the Community

Response Area: Question #2 (this modification is applicable to very small counties only):

Chart A, Service Utilization by Race/Ethnicity, is not required. A narrative description must be provided that includes the number of clients fully served and those

underserved/inappropriately served. The description should provide information on age groups, race/ethnicity and gender. Also, provide information on the total county population and the county poverty population by age group and race/ethnicity.

2. Very small counties can consolidate their programs within CSS following the procedures described below:

Section VI: Developing Work Plans with Timeframes and Budgets/Staffing

Response Area II: Programs to be Developed or Expanded (this modification is applicable to very small counties only):

Very small counties may combine their proposed CSS services into a single program with a single budget that clearly delineates the anticipated expenditures for each of the following service categories: Full Service Partnership, General System Development, and Outreach and Engagement.

Depending on the approval status of its CSS Plan and/or MHP Performance Contract, a very small county will follow one of the three options:

A. Very small counties that have not submitted a CSS Plan

Very small counties that have not submitted the CSS Plan as of the date of this DMH Information Notice may propose a single program as part of their initial submission. Please note that all of the same information requested (items 1–15) under Response Area II are required in describing this single program.

B. Very small counties that have an approved CSS Plan or have a CSS Plan under review, and still in the process of completing the MHP Performance Contract

Very small counties with either an approved CSS Plan or a CSS Plan under review, and still in the process of completing the MHP Performance Contract, have the option of modifying their CSS Plan to propose a single program prior to their MHP Performance Contract being finalized. Below is the process to be followed:

- 1) The County must submit a letter to DMH signed by the County Mental Health Director requesting consolidation of their CSS programs prior to finalizing the MHP Performance Contract. The letter shall acknowledge that this additional step will delay the processing of the MHP Performance Contract by at least 45 days in order to allow sufficient time for the public comment period.
- 2) At the end of the public comment period, the County Mental Health Director will submit a letter to DMH that clearly identifies the programs to be

consolidated and states the name of the newly consolidated program(s). Pursuant to Welfare and Institution Code Section 5848(a), this letter should also include the dates of the 30-day public comment period.

- 3) To appropriately reflect the consolidated program(s) in the MHSA Performance Contract, the County must submit a revised Exhibit 4 (CSS Work Plan Summary form) and a revised Exhibit 6 (Three-Year Plan – Quarterly Progress Goals and Report). If the program consolidation affects the funding amounts to any of the service categories (e.g., Full Service Partnerships, System Development, and Outreach and Engagement), it will also be necessary to submit a revised Exhibit 2 (CSS - Program Work Plan Listings).
- 4) Two sets (each with a hard copy and electronic copy [on a CD]) of these items should be sent to the following address:

County Operations
Attention: County Liaison
California Department of Mental Health
1600 9th Street, Room 100
Sacramento, CA 95814

A listing of the County Operations staff can be found on the DMH website at www.dmh.ca.gov/CountyOps/contact.asp.

C. Very small counties with fully executed MHSA Performance Contracts

Very small counties with an approved and fully executed MHSA Performance Contract may request a contract amendment to consolidate their CSS programs. Below is the process to be followed:

- 1) The County must submit a letter to DMH signed by the County Mental Health Director requesting a contract amendment to consolidate its CSS programs. The letter should clearly identify the programs to be consolidated and the name of the newly consolidated program(s). The letter should include the dates of the 30-day public comment period pursuant to Welfare and Institutions Code Section 5848(a).
- 2) To appropriately reflect the consolidated program(s) in the MHSA Performance Contract, the County must submit a revised Exhibit 4 (CSS Work Plan Summary form) and a revised Exhibit 6 (Three-Year Plan – Quarterly Progress Goals and Report). If the program consolidation affects the funding amounts to any of the categories (e.g., Full Service Partnerships, System Development, and Outreach and Engagement), it will

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also be necessary to submit a revised Exhibit 2 (CSS - Program Work Plan Listings).

- 3) Two sets (each with a hard copy and electronic copy [on a CD]) of these items should be sent to the following address:

County Operations
Attention: Contract Processing
California Department of Mental Health
1600 9th Street, Room 100
Sacramento, CA 95814

Please be advised that DMH has contracted with the California Institute for Mental Health (CIMH) to assist small counties and very small counties in the implementation of MHSA. You may contact Vicki Smith at CIMH at (916) 556-3480, Extension 123 or at vsmith@cimh.org for assistance.

If you have any questions or need additional information regarding these instructions, please contact the County Operations staff assigned to your county.

Sincerely,

Original signed by:

STEPHEN W. MAYBERG, Ph.D.
Director