





# COUNTY OF HUMBOLDT

For the meeting of: July 1, 2014

Date:

June 2, 2014

To:

Board of Supervisors

From:

Phillip R. Crandall, Director

Department of Health and Human Services-Children and Family Services

Subject:

Supplemental Budget for DHHS-Mental Health to fund System of Care Expansion

Implementation for Children & Families.

# RECOMMENDATION(S):

That the Board of Supervisors:

1. Adopts the supplemental budget as attached in Exhibit A for fiscal year 2014-15 for Department of Health and Human Services – Mental Health budget units 1170-424 and 1170-497.

## SOURCE OF FUNDING:

Mental Health Fund

## **DISCUSSION:**

In December of 2012 your Board accepted the award in the amount of \$4,000,000 over four (4) years granted by the Substance Abuse and Mental Health Services Administration (SAMHSA) for Children's System of Care (C-SOC) Expansion Implementation. This award enables DHHS Children and Family Services (C&FS) to partner with the community to expand the capacity to meet children's behavioral health needs countywide, using a System of Care approach.

The SAMHSA C-SOC Expansion Implementation project start up began concurrently with the completion

Prepared by Letitia Bailey, Administrative Analys	t II	CAO Approval Tony Oben
REVIEW: County Counsel	Personnel	Risk ManagerOther
TYPE OF ITEM:           Consent           Departmental           Public Hearing           Other		HOARD OF SUPERVISORS, COUNTY OF HUMBOLDT Upon motion of Supervisor Child Coconded by Supervisor  Ayes Suncherg, Couloce, Bohn, Fennell, Bass Nays Abstain
PREVIOUS ACTION/REFERRAL:		Absent
Board Order No. C-8, C-14		and carried by those members present, the Board hereby approves the recommended action contained in this Board report.
Meeting of: 3/13/2012, 12/18/2012		Dated: Joy 2014  By: Maley James Clerk of the Board

of Children's System of Care Planning grant also administered through SAMHSA. DHHS Children & Family Services was unable to fully expend first year grant funding in Federal Fiscal Year 2012-13 while still utilizing the SAMHSA C-SOC Planning grant and experiencing implementation delays. DHHS Children & Family Services has applied for and been granted permission to Carryover the Unobligated Balance of first year C-SOC Expansion Implementation funding.

The SAMSHA C-SOC Expansion Implementation Grant carryover of \$678,780 from Federal Fiscal Year 2012-13 to Federal Fiscal Year 2013-14 will allow DHHS-C&FS the ability to expand and partner in the implementation of an effective plan with community stakeholders, youth and families.

# FINANCIAL IMPACT:

Supplemental budget in the amount of \$678,780 for FY 2014-15 will adjust revenue for Mental Health Administration budget unit 1170-424 and expenditure appropriations for Mental Health Administration and Children Youth and Families budget units 1170-424 and 1170-497. Requested Salary and Benefits appropriation will offset some of the differential adjustment for vacant positions calculated in approved FY 2014-15 Mental Health budget. Funding in the amount of \$94,500 is proposed for fixed assets; additional detail can be found in Exhibit A attachment.

There is no impact to County General fund.

This action supports the Board's Strategic Framework by creating opportunities for improved safety and health, and facilitates public/private partnerships to help solve problems.

# OTHER AGENCY INVOLVEMENT:

Some of the organizations committed to work with DHHS include LatinoNet, the county of Humboldt, the Humboldt County Transition Age Youth Collaboration, the Humboldt County Office of Education, Changing Tides Family Services, the Probation Department, Redwood Community Action Agency, Willow Creek Community Resource Center, Northcoast Children's Services, Humboldt County Mental Health Board, the North Coast Clinics Network and Open Door Community Health Centers.

# **ALTERNATIVES TO STAFF RECOMMENDATIONS:**

This grant will provide for System of Care Expansion implementation; no known alternatives can be suggested.

# ATTACHMENTS:

Exhibit A – Supplemental Budget Exhibit B – Grant award letter

# HUMBOLDT COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES Mental Health fund

# Supplemental Budget

Fiscal Year:

2014-15

riscal fear.	2014-15				
Mental Health Administration	Budget Unit	Line item		<u>Amount</u>	
Revenues					
Fed Grant-SAMHSA C-SOC	1170-424	511-016	\$		687,780
Expenditures					
Salaries and Benefits					
Salaries & Wages	1170-424	1100	\$		146,659
Unemployment Insurance	1170-424	1450	\$		956
Health Insurance	1170-424	1470	\$		16,748
Life & Air Travel Insurance	1170-424	1471	\$		75
Dental Insurance	1170-424	1472	\$		2,000
Retirement	1170-424	1500	\$		27,510
FICA	1170-424	1600	\$		9,756
Expense Transfers					
CYFS	1170-424	2765	\$		484,076
Mental Health Children & Families	Budget Unit	Line item		Amount	
Expenditures	<u>Duaget Offit</u>	Line item		Amount	
Services and Supplies					
Professional & Special Service	1170-497	2118	\$		1,860
Special Departmental Expense	1170-497	2123	\$		20,400
Computer Software	1170-497	2148	\$		7,500
Transportation - Out of Co.	1170-497	2225	\$		64,060
Local Implementation Contracts	1170-497	2590	\$		295,756
Fixed Assets (see below)					
Computer Equipment	1170-497	8066	\$		21,000
Vehicles	1170-497	8777	\$		28,000
Furniture & Fixtures	1170-497	8990	\$		45,500
Expense Transfers					
Cost Applied	1170-497	9138	\$		(484,076)
For each fixed asset item, complete:					
Item	Line	Unit			
Description	Item	Cost			
			Comp	uter equipment for	electronic
			health	record compatibilit	ty.
Computer Equipment	8066		capab	nditures may include oility, WIFI, PCs, no	tebooks
Vehicles	8777		decen	n-passenger Van to tralized services.	
Furniture & Fixtures	8990			ce / Upgrade DHHS	
T difficult of Fixtures	0330		Corner	Choc room furnitur	<b>C</b> .

Notice of Award



SOC Expansion Implementation Grants Issue Date: 04/09/2014
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Grant Number: 5U79SM061245-02 REVISED

Program Director: Shelley Nilsen

Project Title: Humboldt Cty System of Care Expansion Implementation Project

Grantee Address
HUMBOLDT CNTY DEPT OF HLTH/HUMAN SVC
Philip Crandall
Director
507 F St
Eureka, CA 95501

Business Address
Phillip R. Crandall
Director
Humboldt County Health and Human Services
507 F St
Eureka, CA 95501

**Budget Period**: 09/30/2013 – 09/29/2014 **Project Period**: 09/30/2012 – 09/29/2016

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby revises this award (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to HUMBOLDT CNTY DEPT OF HLTH/HUMAN SVC in support of the above referenced project. This award is pursuant to the authority of Sections 561 thru 565 of the PHS Act As amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at <a href="www.samhsa.gov">www.samhsa.gov</a> (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,

Gwendolyn Simpson Grants Management Officer Division of Grants Management

See additional information below

#### SECTION I - AWARD DATA - 5U79SM061245-02 REVISED

Award Calculation (U.S. Dollars)	
Salaries and Wages \$52	9,651
Fringe Benefits \$26	0,379
Personnel Costs (Subtotal) \$79	0,030
Equipment \$2	8,000
Supplies \$8	2,382
Consortium/Contractual Cost \$59	5,812
Travel Costs \$13	1,011
Other \$6	0,545
Direct Cost \$1,68	7,780
Approved Budget \$2,25	7,733
	7.780
	9,953
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# AMOUNT OF THIS ACTION (FEDERAL SHARE)

\$0

SUMMARY TOTALS FOR ALL YEARS				
YR	AMOUNT			
2	\$1,000,000	4.7		
3	\$1,000,000			
4	\$1,000,000			

<sup>\*</sup>Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

**Fiscal Information:** 

 CFDA Number:
 93.243

 EIN:
 1946000513A2

 Document Number:
 12SM61245A

 Fiscal Year:
 2013

IC CAN Amount SM C96C133 \$1,000,000

IC	CAN	2013	2014	2015
SM	C96C133	\$1,000,000	\$1,000,000	\$1,000,000

# SM Administrative Data:

PCC: CMHI / OC: 4145

#### SECTION II - PAYMENT/HOTLINE INFORMATION - 5U79SM061245-02 REVISED

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning

fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

#### SECTION III - TERMS AND CONDITIONS - 5U79SM061245-02 REVISED

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

#### **Treatment of Program Income:**

**Additional Costs** 

## SECTION IV - SM Special Terms and Conditions - 5U79SM061245-02 REVISED

#### REMARKS:

This award is revised to approve the carryover of \$687,780 unobligated balance from Year 1 to use in Year 2, as requested in the grantee's letter.

## ALL PREVIOUS TERMS AND CONDITIONS REMAIN IN EFFECT

Andy Hunt, Program Official

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Gwendolyn Simpson, Grants Specialist

Phone: 240-276-1408 Email: gwendolyn.simpson@samhsa.hhs.gov Fax: 240-276-1430