

# MHSA FY 2018/2019 Annual Update FISCAL ACCOUNTABILITY CERTIFICATION<sup>1</sup>

County: Modoc

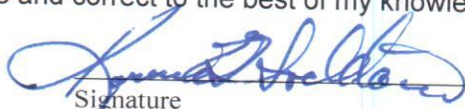
√ Capital Facilities and Technology Plan

<p style="text-align: center;">Local Mental Health Director</p> <p>Name: Karen Stockton, RN, PhD</p> <p>Telephone Number: 530 233-6312</p> <p>E-mail: karenstockton@co.modoc.ca.us</p>	<p style="text-align: center;">County Auditor-Controller</p> <p>Name: Stephanie Wellemeyer</p> <p>Telephone Number: 530 233-6204</p> <p>E-mail: stephaniewellemeyer@co.modoc.ca.us</p>
<p>Local Mental Health Department Mailing Address: Modoc County Mental Health Services 441 N. Main Street Alturas, CA 96101-3457</p>	

I hereby certify that the Annual Update is true and correct and that the County has complied with all fiscal accountability requirements as required by law or as directed by the State Department of Health Care Services and the Mental Health Services Oversight and Accountability Commission, and that all expenditures are consistent with the requirements of the Mental Health Services Act (MHSA), including Welfare and Institutions Code (WIC) sections 5813.5, 5830, 5840, 5847, 5891, and 5892; and Title 9 of the California Code of Regulations sections 3400 and 3410. I further certify that all expenditures are consistent with an approved plan or update and that MHSA funds will only be used for programs specified in the Mental Health Services Act. Other than funds placed in a reserve in accordance with an approved plan, any funds allocated to a county which are not spent for their authorized purpose within the time period specified in WIC section 5892(h), shall revert to the state to be deposited into the fund and available for counties in future years.

I declare under penalty of perjury under the laws of this state that the foregoing and the attached update/revenue and expenditure report is true and correct to the best of my knowledge.

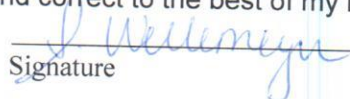
Karen E. Stockton  
Mental Health Director (PRINT)

  
Signature 5/16/18  
Date

I hereby certify that for the fiscal year ended 2017, the County/City has maintained an interest-bearing local Mental Health Services (MHS) Fund (WIC 5892(f)); and that the County's/City's financial statements are audited annually by an independent auditor and the most recent audit report is dated for the fiscal year ended 13/14. I further certify that for the fiscal year ended 17/18, the State MHSA distributions were recorded as revenues in the local MHS Fund; that County/City MHSA expenditures and transfers out were appropriated by the Board of Supervisors and recorded in compliance with such appropriations; and that the County/City has complied with WIC section 5891(a), in that local MHS funds may not be loaned to a county general fund or any other county fund.

I declare under penalty of perjury under the laws of this state that the foregoing, and if there is a revenue and expenditure report attached, is true and correct to the best of my knowledge.

Stephanie Wellemeyer  
County Auditor-Controller (PRINT)

  
Signature 5/17/18  
Date

<sup>1</sup>Welfare and Institutions Code Sections 5847(b)(9) and 5899(a)  
Three-Year Program and Expenditure Plan, Annual Update, and RER Certification (07/22/2013)



204 S. Court St Alturas, CA, 96101 (530) 233-6201

Modoc County Board of Supervisors  
**MINUTE ORDER**

The following action was taken by the Modoc County Board of Supervisors on May 8, 2018:

5.b. Consideration/Action: Requesting approval of the Mental Health Services Act (MHSA) Capital Facilities Proposal for the purchase of and repairs to, 441 N. Main Street, Alturas CA Mental Health Services facility, with a projected expenditure of \$853,564. (Health Services)

**Motion by Supervisor Byrne, seconded by Supervisor Rhoads to approve of the Mental Health Services Act (MHSA) Capital Facilities Proposal for the purchase of and repairs to, 441 N. Main Street, Alturas CA Mental Health Services facility, with a projected expenditure of \$853,564. (Health Services)**

Motion Approved:

**RESULT: APPROVED [UNANIMOUS]**

**MOVER:** Geri Byrne, Supervisor District V

**SECONDER:** Kathie Rhoads, Supervisor District III

**AYES:** Patricia Cullins, Supervisor District II, Kathie Rhoads, Supervisor District III, Geri Byrne, Supervisor District V

**ABSENT:** David Allan, Supervisor District I, Elizabeth Cavasso, Supervisor District IV

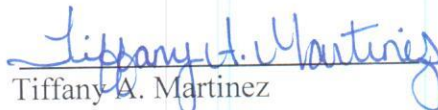
STATE OF CALIFORNIA

COUNTY OF MODOC

I, Tiffany Martinez, Deputy Clerk to the Board of Supervisors in and for the County of Modoc, State of California, do hereby certify that the above and foregoing is a full, true and correct copy of an ORDER as appears on the Minutes of said Board of Supervisors dated May 8, 2018 on file in my office.

WITNESS my hand and the seal of the Board of Supervisors this 9th day of May 2018.



  
Tiffany A. Martinez  
Deputy Clerk of the Board



# MODOC COUNTY BEHAVIORAL HEALTH



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

**THREE-YEAR PROGRAM and EXPENDITURE PLAN**

### *CAPITAL FACILITIES PROJECT PROPOSAL*

## **POSTED FOR PUBLIC COMMENT**

**March 27, 2018 through April 30, 2018**

The MHSA Capital Facility Project Proposal was available for public review and comment from March 27, 2018 through April 30, 2018. The Proposal was available online at <http://modohealthservices.org/index.php/MHSA> or in hardcopy upon request at the address and phone numbers listed below. Translation in Spanish was available upon request. We welcomed feedback via phone, in person, or in writing. Comments were also invited during a Public Hearing held on Monday April 30, 2018.

#### **Public Hearing Information:**

Monday, April 30, 2018 at 3:30 pm  
Modoc County Health Services  
Large Conference Room  
441 N. Main Street, Alturas, CA 96101

#### **Comments or Questions? Please contact:**

Michael Traverso or Rhonda Bandy  
MHSA Capital Facilities Project Proposal  
Modoc County Behavioral Health  
441 North Main Street, Alturas, CA 96101  
Phone: (530) 233-6312; Fax: (530) 233-6339  
[michaeltraverso@co.modoc.ca.us](mailto:michaeltraverso@co.modoc.ca.us)  
[rhondabandy@co.modoc.ca.us](mailto:rhondabandy@co.modoc.ca.us)

*Thank you!*

**Exhibit 1**

***CAPITAL FACILITIES PROJECT PROPOSAL FACE SHEET***

**MENTAL HEALTH SERVICES ACT (MHSA)  
THREE-YEAR PROGRAM and EXPENDITURE PLAN  
CAPITAL FACILITIES PROJECT PROPOSAL**

County: **Modoc**

Date: March 26, 2018

**Modoc County Behavioral Health Branch Director:**

Printed Name: Michael Traverso

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Mailing Address: 441 N. Main Street, Alturas, CA 96101

Phone Number: 530-233-6312

E-mail: michaeltraverso@co.modoc.ca.us

Contact Person: Rhonda Bandy

Phone: 530 233-6312

E-mail: rhondabandy@co.modoc.ca.us

**Exhibit 1 continued****County Certification**

I hereby certify that I am the official responsible for the administration of Community Mental Health Services in and for Modoc County and that the following are true and correct:

- 1) The County has applied for Mental Health Services Act (MHSA) Capital Facilities Funds to purchase a portion of the building at 441 N. Main Street, Alturas, CA 96101
- 2) The intended use of this building is to integrated health services for Modoc County.
- 3) All necessary outside sources of funding have been secured and the MHSA Capital Facilities Funds requested in this Project Proposal will only be used to purchase, and/or renovate those portions of the property that will be used for the provision of MHSA services.
- 4) The building will be used to provide MHSA funded services and will expand the County's ability to provide mental health services.
- 5) For acquisition/construction the County will be the owner of record.
- 6) For any proposed renovations to privately owned buildings, the building is dedicated and used to provide MHSA services and the costs of renovation are reasonable and consistent with what a prudent buyer would incur.
- 7) This building will be dedicated to the provision of MHSA services for a minimum of 20 years.
- 8) Compliance with the procurement procedures pursuant to the California Government and Public Contract Code were followed when Capital Facilities funds were used to renovate buildings owned by private entities.
- 9) The County will comply with federal, state, and local procedures for procuring property, obtaining consulting services, and awarding contracts for any acquisition, construction, or renovation project using Capital Facilities funds.
- 10) The building will comply with all relevant federal, state, and local laws and regulations, including, but not limited to zoning, building codes and requirements, fire safety requirements, environmental reports and requirements, hazardous materials requirements, the Americans with Disabilities Act requirements, California Government Code Section 11135 and other applicable requirements.
- 11) County agrees to maintain and update the building as necessary for a minimum of twenty years without requesting additional State General Fund funds to do so.
- 12) Mental Health Services Act funds were used in compliance with Title 9 California Code of Regulations (CCR) Section 3410, Non-Supplant.

**Exhibit 1** continued

- 13) The County certifies it has adequate resources to complete its Roadmap for moving toward an Integrated Information Systems Infrastructure through an EHR, as described in the Technological Needs portion of this Component.
- 14) This Project was developed with the participation of stakeholders, in accordance with CCR Sections 3300,3310,3315 (b), the public and our contract service providers.
- 15) All documents in the attached Project Proposal for Capital Facilities funding for the project to purchase, renovate, and/or construct a building at 441 N. Main Street, in Alturas, California are true and correct.

**Date:** \_\_\_\_\_

**Signature** \_\_\_\_\_  
**Local (BH) Mental Health Director**

**Date:** \_\_\_\_\_

**Signature** \_\_\_\_\_  
**Auditor and Controller**

**Executed at: Modoc County, CA 96101**

**Exhibit 2****PROJECT PROPOSAL NARRATIVE**

- 1) *Briefly describe stakeholder involvement in identification and development of the proposed Capital Facilities Project and how the requirements of Title 9, CCR Sections 3300 and 3315(b) were met. Submit documentation of the local review process including any substantive recommendations and/or revisions to the proposed Project.*

The stakeholder involvement process has been ongoing beginning prior to the 9/2011 approval of Modoc's Capital Facilities and Technological Needs Component Proposal. Since then, stakeholder involvement and reaffirmation of support for the Capital Facilities project has been subject to public review a comment. The original plan has maintained support throughout the process as annual updates and new MHSA 3-year plans were developed.

At this point in the process, the county has expended the necessary resources to complete its Roadmap for moving toward an Integrated Information Systems Infrastructure through an EHR, as described in the Technological Needs portion of this Component. An integrated EHR has been implemented and is fully operational. No further funding resources are needed to implement the EHR, as allocated in the Component Plan, therefore through the Annual Update and this Project Plan Proposal, all remaining CF and IT Component funds will be utilized for this project.

The proposed project was discussed through the 18-19 Plan Update process with various stakeholder meetings in January 2018 and at the MCBH Advisory Board on 3/5/18. The project was presented to over 117 stakeholders (a little more than 1% of the county population) in communities throughout Modoc County during presentations in January of 2018. Stakeholders were 15% Hispanic, 81% White and 4% Native American (as compared to the overall county demographics of 15% Hispanic, 80% White and 5% Native American, with other races represented being too few to show up statistically).

Stakeholder feedback in 2016 and 2017 consistently supported this project. The Project Proposal was posted for Public Comment March 27, 2018 – April 30<sup>th</sup>, 2018 and the MCBH Advisory Board held a public hearing on Monday, April 30, 2018 at 3:30pm. No substantive stakeholder input was received during the posting of the proposal or the public hearing, before subsequent submission of this document to the Modoc County Board of Supervisors for approval.

- 2) *Explain how the proposed Capital Facilities Project supports the goals of the MHSA and the provision of programs/services contained in the County's Three-Year Plan including consistency with the County's approved Capital Facilities segment of the Capital Facilities and Technological Needs Component.*

As new treatment methods have been adopted, and as outreach and engagement have reached new individuals and communities, the challenges of current space in Alturas have become more problematic. Moreover, our use of intra-agency and interagency treatment teams for children, youth, transition age youth, adults and older adults require larger, more appropriate, and safer space for services, a more welcoming and efficient administrative and treatment space, and improved data and record keeping capacity. Our current challenge is to continue to move our entire system, and those of our partners, to a collaborative, integrated, culturally competent, wellness- and recovery-focused service delivery system. Integrated expansion of our central administrative and service facility will assist our effort to

meet the core concepts of the MHSA: Community Collaboration; Cultural Competence; Consumer and Family Driven Services; Wellness, Recovery and Resiliency Focus; and Integrated Service Experiences. Improved central space will enhance our collaborative and multiagency services, will provide a more welcoming and treatment-appropriate space. The facilities will also provide space for the central activities of our Innovation plan, Prevention and Early Intervention plan, and our Workforce Education and Training plan. These components are fully integrated into the overall CSS plan that Modoc County is implementing.



## Exhibit 3

### PROJECT DETAILS

Answer the following questions as appropriate to the Project Proposal.

Project Title: Health Services Facilities and Parking Purchase: BH Branch  
Project Address: 441 N. Main Street, Alturas, CA 9610

- 1) *Describe the type of building(s) and whether the building is being acquired with/without renovation or whether the Project is new construction.*
- *If the proposed building is being acquired and renovated, describe the prior use and ownership.*

Modoc County currently leases the facility and adjacent parking lots to house the administration and services of Modoc County Health Services from the owners - the Heard Family trust(s). Plans include some repairs and improvements to the building and parking area upon purchase. There are plans to expand offices and service areas in space in the building that is currently not in use as funds are available.

- *If the proposed project involves renovation of an existing facility, indicate whether it is County owned or owned by a private entity.*

The currently leased space was renovated before the original lease was executed. Any improvement/renovations made in the future will be made to a County owned building.

- *Describe the scope of the renovation and the method used to ensure that the costs of the renovation are reasonable and consistent with what a prudent buyer would incur.*

All improvements/renovations to the facility will be aligned with professional architectural and engineering plans as overseen by the Modoc County Public Works Department. They will be consistent with the State of California Department of Industrial Relations – Division of Labor Standards Enforcement Public Works Manual.

- *When the renovation is for treatment facilities, describe how the renovation will result in an expansion of the capacity/access to existing services or the provision of new services.*

Will provide additional offices and meeting space for services and increase capacity to house providers.

- *When the renovation is for administrative services, describe how the administrative offices augment/support the County's ability to provide programs/services, as set forth in the County's Three-Year Plan.*

Will free up space currently utilized for administrative services for clinical office space and/or group space.

**Exhibit 3** continued

- 2) *Describe the intended purpose, including programs/services to be provided and the projected number of clients/individuals and families and the age groups to be served, if applicable. Complete all that apply.*

The intended purpose is to provide a full array of MHSA, Specialty Mental Health, and Substance Abuse Disorder Services as an integrated Behavioral Health system. The Public Health portion of this space will be utilized to provide public health services, many of which are integrated with BH services. Administrative support offices will also be co-located.

- 3) *Provide a description of the Project location. If providing services to clients, describe the proximity to public transportation and the type of structures and property uses in the surrounding area.*
- 4) *Describe whether the building(s) will be used exclusively to provide MHSA programs/services and supports or whether it will also be used for other purposes*
- o *MHSA only*
  - o *MHSA and other services*
- *If the building will be used for other purposes, the description should indicate the percentages of space that will be designated for mental health programs/services and supports and for other uses.*

Sixty percent (60%) of this building is designated for mental health programs/services and supports. Forty percent is designated for public health programs/services and supports. This designation was based on BH and PH Full-time Equivalents (FTE) of personnel and designated square footage of work space allocated to staff in each branch. Both calculated measures supported the 60/40 percentage designation.

- *Explain the relationship between the mental health programs/services and supports and the other uses, i.e., co-located services.  
(Note: Use of MHSA funds for facilities providing integrated services for alcohol and drug programs and mental health is allowed as long as the services are demonstrated to be integrated.)*

Modoc County Health Services has an agency motto “Promoting whole health and wellness through team work” that guides our value for integration of whole person health and wellness throughout the agency. All co-located services are delivered by an integrated agency. Mental Health Services and Substance Use Disorder Services are offered in a fully integrated system and treatment team, utilizing electronic health records. Dually diagnosed persons have treatment plans coordinated by the Behavioral Health (BH) treatment team. Public Health (PH) staff work with the BH team to offer the services they oversee as appropriate. Many staff are working directly with both the BH and PH teams based on Full-time Equivalent (FTE) allocation.

- 5) *Describe the steps the County will take to ensure the property/facility is maintained and will be used to provide MHSA programs/services and/or supports, for a minimum of twenty years.*

The County Board of Supervisors will enact a Resolution to ensure the property/facility is maintained and will be used to provide MHSA programs/services and/or supports for a minimum of twenty years. An Asset Card will further ensure that the facility (60%) is reserved as assigned to the Behavioral Health Branch of Health Services. The facility will be maintained by the ongoing BH and PH operating budgets.

**Exhibit 3** continued

Additional Information:

**1. Leasing (Rent) to Own Building**

*Provide justification why "leasing (rent) to own" the property is needed in lieu of purchase. Include a detailed description of length and terms of lease prior to transfer of ownership to the County.*

**N/A**

**2. Purchase of Land with No MHSA Funds Budgeted for Building/Construction**

*For purchase of land with no MHSA funds budgeted for construction/building, explain this choice and provide a timeline with expected sources of income for construction or purchasing of building upon this land and how this serves to increase the County's infrastructure.*

**N/A**

**3. Restrictive Settings**

Submit specific facts and justifications that demonstrate the need for a building with a restrictive setting, as described on page 4. (Must be in accordance with WIC Section 5847 (a) (5))

**N/A**

## Exhibit 4

### **CAPITAL FACILITIES PROJECT PROPOSAL FACT SHEET**

#### **Project Location**

Name of Project: Health Services Facilities and Parking Purchase – MH Branch  
Site Address: 441 N. Main Street, Alturas, CA 96101

#### **Project Information**

- New Construction
- Acquisition of an existing structure
- Acquisition and rehabilitation/renovation of portions of an existing structure
- Renovation of a County owned structure
- Renovation of a privately owned structure
- Purchase of Land
- Lease(rent) to own

#### **Intended Use:**

- Mental Health (includes facilities for integrated mental health substance abuse treatment)
- Mental Health (includes facilities for integrated mental health and substance abuse treatment) and Public Health services.

**Amount of Capital Facilities funds requested in this Project Proposal:**  
**CSS Capital Facilities funds requested in this Project Proposal:**  
**Total:**

#### **Priority Population (please check all that apply)**

- Children
- Transition Age Youth
- Adults
- Older Adults
- N/A (Office Space)

*If applicable, projected number of mental health clients, including their families, to be served monthly:*

- Provide new services
- Expanded services

*Please provide a brief description below:*

The priority population for the BH/MHSA portion of this building (service areas and administrative office space) serves all age groups.<sup>3</sup> The primary target populations are Medical beneficiaries and indigent individuals that qualify for MHSA, Specialty Mental Health, and Substance Abuse Disorder Services. The Public Health portion of this space will be utilized to provide public health services, many of which are integrated with BH services.



We plan to purchase the facility that we have been leasing and expand to provide additional service areas and offices as necessary as funds are available. We plan to continue to offer a full array of MHSA and Specialty Mental Health Services, but additional offices and group/meeting space is needed. Staff are currently sharing office space, and booking meeting and group rooms is tight at times. We have been limited in the improvements that can be made as the County has not owned the space. Additionally, we would like to install better building security measures and improve the safety and handicap accessibility in the entrance and parking area.

**Exhibit 5**

**BUDGET SUMMARY**

The project budget allows Counties to summarize proposed expenditures for each Project by type of expenditure for each fiscal year. Based upon the Project a County may wish to submit a modified budget summary that more closely reflects the County Capital Facilities Project Proposal.

Expenditures and request for funds. Expenditures for the proposed Project should be easily identified and related to the project description. Total estimated Project expenditures are offset by any estimated other funding sources to compute the net MHSA funding requirements. Complete a separate Project budget for each proposed project. The sum of all Project budgets should not exceed the total Capital Facilities and Technological Needs Planning Estimate identified for the County. MHSA funds dedicated to the Capital Facilities and Technological Needs Component must be used within ten years or they will revert back to the State MHS Fund for redistribution to all Counties.

**EXHIBIT 5 - BUDGET SUMMARY  
For Each Capital Facilities Project Proposal**

County: **Modoc**

Project Title: **Health Services Facilities and Parking Purchase: BH Branch**  
Project Address: **441 N. Main Street, Alturas, CA 96101**

Budget Line	Category	Total
	<b>A) Project Expenditures</b>	
	<b>Acquisition of Land and Structure</b>	
7850	Acquisition of Land (including deposits)	150,000
7860	Acquisition of Existing Structures	600,000
7180	Appraisal	5,000
7180	Preliminary Title Report, Title, Closing, and Recording	800
	<b>Subtotal</b>	<b>755,800</b>
	<b>Rehabilitation/Improvements &amp; Maintenance of Existing Structures</b>	
7189	Architectural & Engineering (A&E) Expenditures	40,000
7861	Other Expenses (describe) Materials, supplies, etc.	57,764
	<b>Subtotal</b>	<b>97,764</b>
	<b>Project Expenditures Total</b>	<b>853,564</b>
	<b>B. Other Funding Sources (please list)</b>	
	Public Health Realignment	341,426
	<b>Total Other Funding Sources</b>	<b>341,426</b>
Budget Line	Category	Total

	<b>Total Costs (A)</b>	<b>\$853,564</b>
	Total Offsetting Revenues (B)	\$341,426
	<b>MHSA Funding Requirements (A-B)</b>	<b>\$512,138</b>

**Budget Narrative:**

Adjustment of budget lines will likely be necessary as plans are finalized and costs set, however, the total cost of this proposed project is not to exceed the \$853,564 indicated. Should additional rehabilitation of the facility be necessary, additional funds would need to be identified and approved by the Board of supervisors.

- Provide information regarding ability to maintain and update the property/facility for the required time period. (Include proposed funding sources, capitalized reserves, etc.)

The facility will be maintained by the ongoing BH and PH operating budgets. Savings from the cost of the prior lease on the building should provide resources to maintain and update the facility.

The team is also in the process of applying for grants to leverage the current resources proposed in this project.

- Describe what structure is in place to manage the Project and track usage, costs, maintenance, etc., over time (e.g. agreement with County Department of General Services, contractor consultant, etc.):

The County Administrative Officer has agreed that he will assign the Public Works Department to work closely with the Health Services Team to plan, coordinate, and oversee maintenance and improvements consistent with current county policy and practice.