

EXHIBIT G
(Optional)

Innovation Component
Request for Funding for Community Program Planning

Date: 2/9/09

County: County of Orange

Total Amount Requested: \$2,893,800

Funding Purposes

Please briefly describe the purpose and amount for which the requested funding will be used.

The requested amount represents 25% of of the combined FY 2008/2009 and 2009/2010 Innovation Planning Estimates. These funds will be used to undertake a community program planning process as set forth in CCR, Title 9, section 3300. Planning sessions at locations that are convenient to our community will be held to gather input from underserved and inappropriately served individuals of diverse backgrounds to develop the INN component of the County's three-year plan. We will engage the representatives and leadership of the local community that have a vested interest in proposed INN projects. Local stakeholders will be contacted and a fair and inclusive process to facilitate community input will take place. Taking a strength based approach we will incorporate the community strengths in solutions and addressing challenges as the planning process unfolds. A team will be hired to design the projects that emerge from these stakeholder meetings so that they maximize learning, allow measurement of success and insure that findings will be disseminated in a meaningful way to both local and statewide stakeholders.

Certification

I HEREBY CERTIFY under penalty of perjury that I am the official responsible for the administration of Community Mental Health Services in and for said County and the following statements are true. I have not violated any of the provisions of Section 5891 of the Welfare and Institution Code in that all identified funding requirements listed above represent costs related to the expansion of mental health services since passage of the MHSA and do not represent supplanting of expenditures. The proposed activities are consistent with the Mental Health Services Act, the Department's regulations governing the MHSA, and draft proposed guidelines for the Innovation component of the Three-Year Program and Expenditure Plan; and to the best of my knowledge and belief this request in all respects is true, correct, and in accordance with the law.


Signature (Director/Designee, County Mental Health Department)