GRANT APPLICATION AUTHORIZATION FORM

Requesting Agency/Department:	Health Care Agency
Grant Name:	FY 2009/10 Annual Update to the Three-Year MHSA Program and Expenditure Plan
Grant Background Information:	Provide background information on the grant application, including date the Agency/Department received the grant application materials, date the grant application is due, date of the anticipated grant award notification, and amount of grant funding being requested.

This grant application will update the Community Services and Supports (CSS) component of the Mental Health Services Act (MHSA). For FY 2009/10, the CSS allocation for Orange County is \$72,573,400. Of that amount, \$20,360,700 is FY 2009/10 "Growth Funds." The FY2009/10 allocation of CSS funding will be used to support existing Mental Health and Supportive Services programs, as well as to add six new programs to the continuum of care: Parent Phone Mentoring, Parent-Child Interactive Therapy, Dual Diagnosis Residential Treatment for Children and Youth, Medi-Cal Match for Children's Mental Health Clinical Services, a Transitional Age Youth Discovery Center, and a Community-Based Senior Support Team. The State Department of Mental Health is expected to take approximately 60 days to review and approve this Request for Funding.

Purpose of Grant Funds:

Provide a brief summary of the services that will be provided through this grant.

The purpose of the grant is to fund activities that are culturally competent, client-centered, wellness and recovery-focused, integrated, and include community collaboration. The activities funded in the plan for the FY 2009/10 CSS component were developed through an open, participatory community stakeholder process followed with approval by the MHSA Steering Committee (composed of 64 community representatives), a public comment period of 30 days, and approval of the Orange County Mental Health Board.

Impact on County:

Provide information regarding the impact of the grant on the County. Specific information should include:

Operations:

Briefly describe how the department will provide the grant funded services. Include how many new positions will be necessary, if any.

The grant-funded services will be provided by a combination of HCA staff and community-based organizations. Existing HCA positions will be assigned to MHSA to provide these services. No new positions are requested.

Costs

Identify the amount of any County match that will be required under the grant. If there is a required County match, indicate if this amount is already included in the Agency/Department budget.

There is no county match required for this grant.

Collaboration:

Identify if the grant funded services involve collaboration with other County Agency/Departments. If yes, describe the potential impact on the other Agency/Departments, and indicate if this grant application has been coordinated with the impacted Agency/Departments.

A number of County Agencies/Departments are represented on the MHSA Steering Committee, including the Social Services Agency, Probation, the Children and Families Commission, the Orange County Sheriff's Department, the Department of Education, Public Health Services, the District Attorney's Office, and Orange County Community

Services.	
Special Instructions	Include requirement for a Board Resolution or authorization to accept the grant award without further Board action.
None	
Contact:	List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.
Mary Hale, 834-7024 or David Thiessen, 834-7652	