

Component Exhibit 1

Capital Facilities and Technological Needs Face Sheet

**MENTAL HEALTH SERVICES ACT (MHSA)
CAPITAL FACILITIES and TECHNOLOGICAL NEEDS
2014-15 COMPONENT PROPOSAL UPDATE TO THE
THREE-YEAR PROGRAM AND EXPENDITURE PLAN**

County: Tri-City Mental Health Authority _____ Date: 2/12/2015

County Mental Health Director:

Antonette (Toni) Navarro, LMFT

Printed Name

Signature

Date: _____

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Component 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 Tri-City Mental Health Authority (TCMHA) and that the following are true and correct:

This Component Proposal is consistent with the Mental Health Services Act.

This Capital Facilities and Technological Needs 2014 - 15 Component Proposal Update is consistent with and supportive of the standards set forth in Title 9, California Code of Regulations (CCR) Section 3320.

The County certifies that if proposing technological needs project(s), the Technological Needs Assessment, including the Roadmap for moving toward an Integrated Information Systems Infrastructure, will be submitted with the first Technological Needs Project Proposal.

This Component Proposal has been developed with the participation of stakeholders, in accordance with Title 9, CCR Sections 3300, 3310, and 3315, and with the participation of the public and our contract service providers. The draft local Capital Facilities and Technological Needs Component Proposal was circulated for 30 days to stakeholders for review and comment and a public hearing was held by the local mental health board. All input has been considered, with adjustments made, as appropriate.

Mental Health Services Act funds are and will be used in compliance with Title 9, CCR Section 3410, Non-Supplant.

All documents in the attached Component Proposal for Capital Facilities and Technological Needs are true and correct.

Date: _____ **Signature** _____
Local Mental Health Director

Executed at:

Component Exhibit 2**COMPONENT PROPOSAL NARRATIVE****1. Framework and Goal Support**

Briefly describe: 1) how the County plans to use Capital Facilities and/or Technological Needs Component funds to support the programs, services and goals implemented through the MHSA, and 2) how you derived the proposed distribution of funds below.

Proposed distribution of funds:

Capital Facilities	\$ 825,000.00	or	100	%
Technological Needs	\$ _____	or	_____	%

- a. In order to effectively support programs approved in the Three-Year Integrated Plan, TCMHA has identified one Capital Facilities project. Specifically, to provide the most suitable additional space required for the approved MHSA programs, the goal is to purchase a facility located in close proximity to any one of Tri-City's current sites that is providing services
- b. In 2013, TCMHA completed its first CFTN Plan that included three Technology projects. These projects were planned and approved in order to address the needs of the growing TCMHA infrastructure as a result of the implementation of several new MHSA programs and to improve access to computing resources for consumers and their families. At this time, there has been no identification of further needs in regards to Technology. Therefore, the distribution of funds for this project was based on the estimated cost of purchasing an existing building, its surrounding parking area, and the estimated costs to conduct needed improvements on the building and surrounding space (i.e., parking lot, lighting, landscaping) and constitutes 100% of proposal.

Component Exhibit 2 (continued)**2. Stakeholder Involvement**

Provide a description of stakeholder involvement in identification of the County's Capital Facilities and/or Technological Needs Component priorities along with a short summary of the Community Program Planning Process and any substantive recommendations and/or changes as a result of the stakeholder process.

From 2008-2014, TCMHA performed extensive community planning processes for the CSS, PEI, INN, WET and initial CFTN Component plans, as well as the Three-Year Integrated Plan. These planning processes involved input from over 6,000 community stakeholders, TCMHA consumers and family members, TCMHA staff, TCMHA Governing Board, and TCMHA Mental Health Commissioners. The details of those processes are outlined in the initial Component Plans, as well as the Integrated Plan. This Capital Facilities project is consistent with the outcomes and recommendations of all of those planning processes.

In preparation for this Capital Facilities Plan Update, the MHSA Planning Coordinator worked with the CFTN Steering Committee, TCMHA Executive Team, Mental Health Commission, Department Managers, and community stakeholders to explore options for building and/or purchasing the space needed to house the approved MHSA programs and staff. The discussion and consensus was to purchase a building in close proximity to one of sites TCMHA already owns. The intent was to promote the integration of the services created under MHSA that now make up the TCMHA system of care. Further, the long-term financial impact was seen as positive in that TCMHA would not have the uncertainty that comes with leasing space.

The CF Update Plan will post for a 30-day comment period and be made available at each of the City Halls and libraries in Claremont, La Verne, and Pomona, as well as each of the TCMHA locations and its website. All written and verbal comments received during the open forums will be made available upon request

Component Exhibit 3

COMPONENT PROPOSAL: CAPITAL FACILITIES NEEDS LISTING

Please list Capital Facility needs (ex: types and numbers of facilities needed, possible County locations for needed facilities, MHSA programs and services to be provided, and target populations to be served, etc.)

Type of Facility	Number of Facilities Needed	County Location for Needed Facility	MHSA Programs & Services to be Provided	Target Populations to be Served
PEI and WET Offices	One	North Pomona	Training, Volunteer Development, Community Organizing	Children, TAY, Adults and Older Adults

Component Exhibit 4

COMPONENT PROPOSAL: TECHNOLOGICAL NEEDS

Please check-off one or more of the technological needs which meet your goals of modernization/transformation or client/family empowerment as your county moves toward an Integrated Information Systems Infrastructure. Examples are listed below and described in further detail in Enclosure 3. If no technological needs are identified, please write "None" in the box below and include the related rationale in Exhibit 1.

Y Electronic Health Record (EHR) System Projects (check all that apply)

- Infrastructure, Security, Privacy
- Practice Management
- Clinical Data Management
- Computerized Provider Order Entry
- Full EHR with Interoperability Components (for example, standard data exchanges with other counties, contract providers, labs, pharmacies)

Y Client and Family Empowerment Projects

- Client/Family Access to Computing Resources Projects
- Personal Health Record (PHR) System Projects
- Online Information Resource Projects (Expansion / Leveraging information sharing services)

Y Other Technology Projects That Support MHSA Operations

- Telemedicine and other rural/underserved service access methods
- Pilot projects to monitor new programs and service outcome improvement
- Data Warehousing Projects / Decision Support
- Imaging / Paper Conversion Projects
- Other (Briefly Describe)