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of Pomona,
Claremont and La
Verne.

TRI-CITY MENTAL HEALTH AUTHORITY

AGENDA

GOVERNING BOARD REGULAR MEETING

WEDNESDAY, MARCH 19, 2025 AT 5:00 P.M.
MHSA ADMINISTRATION BUILDING
2001 NORTH GAREY AVENUE, POMONA, CA 91767

GOVERNING BOARD

Jed Leano, Chair
(Claremont)
Lorraine Canales, Member
(Pomona)
Carolyn Cockrell, Member
(La Verne)
Sandra Grajeda, Member
(Claremont)
Paula Lantz, Member
(Pomona)
Wendy Lau, Member
(La Verne)
Elizabeth Ontiveros-Cole,
Member (Pomona)

To join the meeting on-line click on the following link:

<https://tricitymhs-org.zoom.us/j/88426218278?pwd=pPSrsYXk5oM2xZtBU1Mb1PKAaJNmWa.1>

Passcode: awFL+Wy4

Administrative Office

1717 North Indian Hill
Boulevard, Suite B
Claremont, CA 91711
Phone (909) 623-6131
Fax (909) 623-4073

Clinical Office / Adult

2008 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 865-9281

Clinical Office / Child & Fam

1900 Royalty Drive, Suite 180
Pomona, CA 91767
Phone (909) 766-7340
Fax (909) 865-0730

MHSA Administrative Office

2001 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 326-4690

Wellness Center

1403 North Garey Avenue
Pomona, CA 91767
Phone (909) 242-7600
Fax (909) 242-7691

Public Participation. Section 54954.3 of the Brown Act provides an opportunity for members of the public to address the Governing Board on any item of interest to the public, before or during the consideration of the item, that is within the subject matter jurisdiction of the Governing Board. Therefore, members of the public are invited to speak on any matter on or off the agenda. If the matter is an agenda item, you will be given the opportunity to address the legislative body when the matter is considered. If you wish to speak on a matter which is not on the agenda, you will be given the opportunity to do so at the Public Comment section. **No action shall be taken on any item not appearing on the Agenda. The Chair reserves the right to place limits on duration of comments.**

In-person participation: raise your hand when the Governing Board Chair invites the public to speak.

Online participation: you may provide audio public comment by connecting to the meeting online through the zoom link provided; and use the Raise Hand feature to request to speak.

Please note that virtual attendance is a courtesy offering and that technical difficulties shall not require that a meeting be postponed.

Written participation: you may also submit a comment by writing an email to molmos@tricitymhs.org. All email messages received by 3:00 p.m. will be shared with the Governing Board before the meeting.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by Tri-City Mental Health Authority to all or a majority of the Governing Board less than 72 hours prior to this meeting, are available for public inspection at 1717 N. Indian Hill Blvd., Suite B, in Claremont during normal business hours.

In compliance with the American Disabilities Act, any person with a disability who requires an accommodation in order to participate in a meeting should contact JPA Administrator/Clerk Mica Olmos at (909) 451-6421 at least 24 hours prior to the meeting.

GOVERNING BOARD CALL TO ORDER

Chair Leano calls the meeting to Order.

ROLL CALL

Board Members Lorraine Canales, Carolyn Cockrell, Sandra Grajeda, Paula Lantz, Wendy Lau, and Elizabeth Ontiveros-Cole; and Chair Jed Leano.

POSTING OF AGENDA

The Agenda is posted 72 hours prior to each meeting at the following Tri-City locations: Clinical Facility, 2008 N. Garey Avenue in Pomona; Wellness Center, 1403 N. Garey Avenue in Pomona; Royalty Offices, 1900 Royalty Drive #180/280 in Pomona; MHSA Office, 2001 N. Garey Avenue in Pomona; and on the TCMHA's website: <http://www.tricitymhs.org>

PRESENTATION

AN AWARD OF RECOGNITION WILL BE PRESENTED TO OUTGOING GOVERNING BOARD MEMBER RONALD T. VERA, FOR HIS LEADERSHIP AND DEDICATED SERVICE TO TRI-CITY MENTAL HEALTH AUTHORITY FROM FEBRUARY 2017 – JANUARY 2025

CONSENT CALENDAR**1. APPROVAL OF MINUTES OF THE FEBRUARY 19, 2025 GOVERNING BOARD REGULAR MEETING**

Recommendation: “A motion to approve the Minutes of the Governing Board Regular Meeting of January 15, 2025.”

2. ONTSON PLACIDE, EXECUTIVE DIRECTOR MONTHLY REPORT

Recommendation: “A motion to receive and file.”

3. DIANA ACOSTA, CHIEF FINANCIAL OFFICER MONTHLY REPORT

Recommendation: “A motion to receive and file.”

4. LIZ RENTERIA, CHIEF CLINICAL OFFICER MONTHLY REPORT

Recommendation: “A motion to receive and file.”

5. SEEYAM TEIMOORI, MEDICAL DIRECTOR MONTHLY REPORT

Recommendation: “A motion to receive and file.”

6. DANA BARFORD, DIRECTOR OF MHSA AND ETHNIC SERVICES MONTHLY REPORT

Recommendation: “A motion to receive and file.”

7. NATALIE MAJORS-STEWART, CHIEF COMPLIANCE OFFICER MONTHLY REPORT

Recommendation: “A motion to receive and file.”

8. CONSIDERATION OF RESOLUTION NO. 772 APPROVING THE PURCHASE OF 15 LAPTOPS IN THE AMOUNT OF \$30,351.69 FROM INTELLI-TECH; AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE ANY RELATED PURCHASE DOCUMENTS

Recommendation: “A motion to adopt Resolution No. 772 authorizing the purchase of 15 laptops from Intelli-Tech in the amount of \$30,351.69; and authorizing the Executive Director to execute any related purchase documents.”

9. CONSIDERATION OF RESOLUTION NO. 773 APPROVING THE SECOND AMENDMENT TO THE AGREEMENT WITH CAPSTONE SOLUTIONS CONSULTING GROUP, LLC FOR COMPLETION OF THE DRUG MEDICAL CERTIFICATION FROM THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS), AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT

Recommendation: “A motion to adopt Resolution No. 773 approving the Second Amendment to the Agreement with Capstone Solutions Consulting Group, LLC; and authorizing the Executive Director to execute the Amendment.”

NEW BUSINESS**10. CONSIDERATION OF RESOLUTION NO. 774 APPROVING AN AGREEMENT WITH YOUTH CREATING CHANGE IN THE AMOUNT OF \$43,140.00 TO CONDUCT PROGRAMS AND ACTIVITIES THAT SUPPORT TCMHA'S PROGRAMMING CORE ACTIVITIES FOR YOUTH SUICIDE PREVENTION AND INTERVENTION EFFORTS**

Recommendation: “A motion to adopt Resolution No. 774 approving an Agreement with Youth Creating Change in the amount of \$43,140.00; and authorizing the Executive Director to execute the Agreement.”

GOVERNING BOARD COMMENTS

Members of the Governing Board may make brief comments or request information about mental health needs, services, facilities, or special problems that may need to be placed on a future Governing Board Agenda.

PUBLIC COMMENT

The Public may at this time speak regarding any Tri-City Mental Health Authority related issue, provided that no action shall be taken on any item not appearing on the Agenda. The Chair reserves the right to place limits on duration of comments.

ADJOURNMENT

The next Regular Meeting of the Governing Board will be held on **Wednesday, April 16, 2025 at 5:00 p.m.**, in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.

MICAELA P. OLMOS
JPA ADMINISTRATOR/CLERK



MINUTES

GOVERNING BOARD REGULAR MEETING FEBRUARY 19, 2025 – 5:00 P.M.

The Governing Board Regular Meeting was held on Wednesday, February 19, 2025, at 5:03 p.m. in the MHSA Administrative Office located at 2001 North Garey Avenue, Pomona, California.

CALL TO ORDER General Counsel Flower called the meeting to order at 5:03 p.m.

ROLL CALL Roll call was taken by JPA Administrator/Clerk Olmos.

GOVERNING BOARD

PRESENT: Lorraine Canales, City of Pomona, Board Member
Sandra Grajeda, City of Claremont, Board Member
Paula Lantz, City of Pomona, Board Member
Wendy Lau, City of La Verne, Board Member
Elizabeth Ontiveros-Cole, City of Pomona, Board Member
Jaime Earl, City of Claremont, Alternate Board Member

ABSENT: Carolyn Cockrell, City of La Verne, Board Member
Jed Leano, City of Claremont, Chair

STAFF:

PRESENT: Ontson Placide, Executive Director
Steven Flower, General Counsel
Diana Acosta, Chief Financial Officer
Elizabeth Renteria, Chief Clinical Officer
Seeyam Teimoori, Medical Director
Dana Barford, Director of MHSA & Ethnic Services
Natalie Majors-Stewart, Chief Compliance Officer
Micaela Olmos, JPA Administrator/Clerk

There was unanimous consensus by the Governing Board that Board Member Lau preside over the meeting during the absence of the Governing Board Chair, since a Vice-Chair had not been nominated yet.

CONSENT CALENDAR

Board Member Lau opened the meeting for public comment; and there was no public comment.

There being no comment, Board Member Lantz moved, and Alternate Board Member Earl seconded to approve the Consent Calendar. The motion was carried by the following vote: Alternate Board Member Earl; Board Members Canales, Grajeda, Lantz, Lau, and Ontiveros-Cole. NOES: None. ABSTAIN: None. ABSENT: Board Member Cockrell and Chair Leano.

1. APPROVAL OF MINUTES FROM THE JANUARY 15, 2025, GOVERNING BOARD AND MENTAL HEALTH COMMISSION SPECIAL JOINT MEETING

Recommendation: “A motion to approve the Minutes of the Governing Board and Mental Health commission Regular Joint Meeting of December 18, 2024.”

2. ONTSON PLACIDE, EXECUTIVE DIRECTOR MONTHLY REPORT

Recommendation: “A motion to receive and file.”

3. DIANA ACOSTA, CHIEF FINANCIAL OFFICER MONTHLY REPORT

Recommendation: “A motion to receive and file.”

4. LIZ RENTERIA, CHIEF CLINICAL OFFICER MONTHLY REPORT

Recommendation: “A motion to receive and file.”

5. SEEYAM TEIMOORI, MEDICAL DIRECTOR MONTHLY REPORT

Recommendation: “A motion to receive and file.”

6. DANA BARFORD, DIRECTOR OF MHSA AND ETHNIC SERVICES MONTHLY REPORT

Recommendation: “A motion to receive and file.”

7. NATALIE MAJORS-STEWART, CHIEF COMPLIANCE OFFICER MONTHLY REPORT

Recommendation: “A motion to receive and file.”

8. RECEIVE AND FILE THE SUBORDINATION AND INTERCREDITOR AGREEMENT AND THE CONSTRUCTION MONITORING AND DISBURSEMENT AGREEMENT FOR THE CLAREMONT GARDENS SENIOR HOUSING PROJECT AT 956 W BASELINE ROAD IN CLAREMONT, CALIFORNIA

Recommendation: “A motion to receive and file.”

9. CONSIDERATION OF RESOLUTION NO. 769 APPROVING THE FIRST AMENDMENT TO THE AGREEMENT WITH ALL AMERICAN SECURITY FOR SECURITY GUARD SERVICES AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT

Recommendation: “A motion to adopt Resolution No. 769 approving and authorizing the Executive Director to enter into and execute the First Amendment to the Agreement with All American Security for Security Guard Services.

10. CONSIDERATION OF RESOLUTION NO. 770 APPROVING AN AFFILIATION AGREEMENT FOR INTERNSHIP PROGRAM WITH TOURO UNIVERSITY WORLDWIDE AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT AND ANY AMENDMENTS THEREAFTER

Recommendation: “A motion to adopt Resolution No. 770 approving an Affiliation Agreement with Touro University Worldwide; and authorizing the Executive Director to execute the agreement and any amendments thereafter.”

11. CONSIDERATION OF RESOLUTION NO. 771 APPROVING THE SUBCONTRACTOR AGREEMENT FOR THE HUD CONTINUUM OF CARE PROGRAM WITH THE LOS ANGELES COUNTY DEVELOPMENT AUTHORITY (LACDA); AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AGREEMENT AND ANY AMENDMENTS THEREAFTER

Recommendation: “A motion to adopt Resolution No. 771 Authorizing the Executive Director to execute the Subcontractor Agreement with LACDA for the HUD Continuum of Care Program, and any amendments thereafter.”

CONTINUED BUSINESS

12. FOLLOW-UP TO MHSA TO BHSA REVERSION STUDY SESSION

Executive Director Placide provided a brief review of the \$5.2 million to \$8 million received that needs to be spent by June 3, 2027 to avoid reversion. He stated the three categories the funds need to be spent in are Housing, Full-Service Partnership, and Behavioral Health Services and Supports. He then talked about the priority process, detailing the highest priority being Housing and FSP service development and growth, high value, and quick turnaround projects. He stated the second highest priorities are high value, extended timeline projects for housing and FSP and projects that be started now or after July 1, 2026. He concluded the list of priorities by stating the third priority would be reimaging/shifting current programs and services that will not fall into the BHSS category or elsewhere in the agency by July 1, 2026. He then discussed the 2024 Homeless Count Data for Service Planning Area 3 (San Gabriel Valley) and introduced Housing Manager Mary Monzon to explain the statistics.

Housing Manager Monzon reported that the homeless count in Pomona was 545 individuals, in La Verne was 18 individuals, and in Claremont was 22 individuals, noting that the 2025 data would not be available until summertime; however, she pointed out that there was a decrease in Pomona’s count and an increase in La Verne and Claremont’s counts. She then explained the Referral Reported Incomes, stating that since July 2024, the Housing Department had received 334 referrals from the Clinical Team, and 204 (or 61%) of those referrals were unhoused individuals; that only 22 (or 115) of the referrals might have enough income (\$3,000+) to qualify for their own apartment at market rates.

Executive Director Placide stated that TCMHA's Housing program is not currently fulfilling the 204 unhoused referrals, noting that housing is one of the highest needs. He then talked about the six priority project ideas previously endorsed by the Governing Board, and indicated that the six items below are listed in the order of highest priority from the Stakeholder meeting.

1. Purchase existing building to create Homeless Bridge Housing (OC Model) – 40%
2. Developing an Internship, Residency, and Training Department at Tri-City Mental Health Authority – 24%
3. Scattered Site Housing – 16%
4. Purchase existing building to create a Drop-In Center and PSH for 25 adults (Riverside Model) – 12%
5. Purchase existing building - Combine with an Enhanced Emergency Shelter Program (LA Model) – 8%
6. Expand FSP - Tri-City Mental Health Authority's Homeless Outreach Multi-Disciplinary Team (HOT-MDT) – will be integrated into all ideas.

Executive Director Placide also stated that there were also three additional ideas brought forth: 1) Client Portal: Electronic record that clients can access; 2) Focus on staffing and training; 3) Treating pregnant women Neonatal Abstinence Syndrome, Fentanyl testing tracing, Naloxone leave-behind, Hospital counseling/bridge clinic, Incarcerated and pre-trial treatment. He stated that he has had discussions with each city and that the potential projects that were suggested included: FSP treatment teams; rehab abandoned motels; increase services for Hope4Home; crisis and homeless outreach team; resource center and/or interim housing for teen mothers and TAY; scattered site housing; and supportive services for a coordinated mental health and homeless response project.

Alternate Board Member Johnson stated she met with Executive Director Placide and the Pomona City Manager to discuss the greatest needs, and offered to answer any questions regarding the City of Pomona's priority projects.

Board Member Canales asked if the abandoned hotels were like the Sunset Hotel project. Alternate Board Member Johnson stated it would be different, and that they looked at one option but needed to decide if it would be interim housing or affordable housing with services and which population. Board Member Lantz asked if Sunset Hotel is a shelter as opposed to permanent supportive housing. Alternate Board Member Johnson responded in the affirmative and stated the proposal is different than Sunset Hotel. Executive Director Placide stated there are multiple options available.

Board Member Ontiveros-Cole asked for clarification on the evening and weekend teams and where they would be stationed. Executive Director Placide stated the police departments have excellent homeless outreach services, but TCMHA will strive to fill in the gaps. Chief Clinical Officer Renteria stated after meeting with the various departments, they have daytime support but struggle to cover evenings and weekends, and that TCMHA wants to provide that support and is actively recruiting for those positions. Executive Director Placide added that there are good models, specifically San Francisco offering the same services day and night, noting that positions are difficult to recruit. Board Member Ontiveros-Cole inquired if the team responds specifically to housing situations or if they will respond to calls in the street. Executive Director Placide stated the calls are typically from the street as emergencies are called in to the police departments.

Board Member Canales expressed concern for veterans, wanting to find out if TCMHA can offer services to veterans, not knowing if this fit into the discussion. Executive Director Placide stated TCMHA works with mental health, regardless of veteran status; however, that it will be taking into consideration if the client prefers or is eligible for services from the VA (Veterans Affairs). Board Member Canales stated her concern is that veterans must travel to Los Angeles or San Bernardino for services and have no means of transport, and inquired if TCMHA can provide those services. Executive Director Placide stated that he would into as it would require collaboration with the VA.

Board Member Lantz stated there is Veterans housing that probably provides services as well. Board Member Canales stated she is concerned about the unhoused veterans that are not receiving services or assistance. Executive Director Placide stated there is case management required and asked staff if TCMHA is navigating that currently. Chief Clinical Officer Renteria stated currently they are connecting them with the VA but is interested in collaborating with the VA on how to provide services closer.

Board Member Lau stated that the La Verne Veterans Hall has a Veterans Resource Center from 8:30 a.m. to 4:30 p.m. every Monday, and that a Veterans Service Officer is on site and appointments are not required.

Housing Manager Monzon stated that any individual that is homeless can connect to services through LA-HOP, noting that they also have assigned staff to assist veterans. Chief Clinical Officer Renteria stated the Community Navigators or the Access to Care phone line will also assist in connecting to services. Executive Director Placide stated it is worth looking into what more services TCMHA can offer to Veterans.

Executive Director Placide stated TCMHA had conversations with the City of Claremont about Crisis Outreach and Homeless with the Claremont Police Department and stated he wanted to have more conversations about collaborating; and that he discussed with the La Verne's Coordinated Mental Health and Homeless Response Project how TCMHA can provide Therapeutic Support Services.

Board Member Ontiveros-Cole inquired about the qualifications for volunteers. Executive Director Placide clarified that the staff employed for evenings and weekends are not volunteers. Board Member Canales asked what are the qualifications for staff. Chief Clinical Officer Renteria summarized the requirements for the Peer Support Specialists, Clinical Therapists, Behavioral Health Specialists, and stated that TCMHA is currently recruiting for Licensed Psychiatric Technicians. Executive Director Placide added TCMHA is also recruiting for Psychiatrists and the job applications are on TCMHA website.

Board Member Canales asked how to connect Dr. Peter to TCMHA as he had expressed interest in community outreach. Board Member Lantz stated he had previously been introduced to Medical Director Teimoori and that he has already toured TCMHA facilities. Board Member Canales further inquired if he was approved to work with TCMHA. Board Member Lantz stated he was not looking for collaboration and instead he wanted to know what programs and services were offered by TCMHA. Executive Director Placide stated there was a difference between general medical and psychiatric but was not opposed to collaborating. Medical Director Teimoori stated when he met with Dr. Peter, he was not interested in a collaboration.

Executive Director Placide continue with the discussion of the project ideas and explained the next steps, stating that any additional input needed to be submitted by February 28, 2025, since the MHSA Plan can be posted for the 30-day review process. He added that following the 30-day review process, there would be a Public Hearing of the MHSA Plan and address any comment received; then it will be presented to the Governing Board approval, and finally submitted to state. He stated if deadlines are met, funds will be available July 1, 2025.

Board Member Lau inquired if there was a survey form available for suggestions. Executive Director Placide stated his preference would be meeting with personnel as soon as possible. General Counsel Flower asked if this was approval for priority projects or all projects. Executive Director Placide clarified this approval is for priority projects only and more ideas can be submitted later.

Alternate Board Member Earl inquired if TCMHA staff met with Claremont City Manager or Recreation staff. Executive Director Placide stated TCMHA wants general ideas and to see if they can fit into the plan. Board Member Lantz asked who needs to be at the meeting. Executive Director Placide stated City Managers and Police Chiefs and anyone in homeless or unhoused services. Chief Clinical Officer Renteria stated she had previous conversations with staff about Crisis Work but wanted to offer another chance for them to discuss the MHSA conversation.

Board Member Lau stated it is better to add ideas and take away, when necessary, instead of not having an idea on the list and not being able to add it; and then inquired if there was an order of when the priorities would be achieved. Executive Director Placide stated the order can be rearranged depending on efficiency or according to what can be achieved faster, and that staff will provide the Board with updates on progress. Board Member Lantz commented that she assumed all these items would eventually come to fruition. Director of MHSA & Ethnic Services Barford stated it is dependent on funding, pointing out that even though these items are ranked by Stakeholder's votes, only TCMHA knows the parameters to execute the plans; and then said that when TCMHA identifies a property for purchase, it would be presented to the Governing Board for approval. Executive Director Placide added that after the 30-day review, TCMHA would review each idea in more detail.

Board Member Lau stated education is important, so everyone understands the constraints connected to the funding. Executive Director Placide stated the parameters are very complicated and unclear; thus, all counties still require clarification, but information will be relayed to the Board and the community when it is received. Director of MHSA & Ethnic Services Barford stated there are many variables involved, but the goal is to act before June 2026 to have enough time to spend the funding.

Board Member Canales asked if there will be opportunities for individuals without degrees to work with the unhoused, specifically as part of the Mobile Crisis Care team.

Discussion ensued regarding the Peer Support Specialists, who do not require a degree but according to state standards, they do require to have lived experienced and a Certification; that lived experience is a broad definition; and that it is a difficult recruitment; that TCMHA covers the costs of the Certification and candidates must go through the Certification process through CalMHSA.

Board Member Canales inquired how she can refer individuals. Chief Clinical Officer Renteria stated they can apply on the CalOpps website. Executive Director Placide stated individuals can also call our offices and staff can walk them through the process.

Board Member Ontiveros-Cole asked if experience is required. Executive Director Placide stated for Peer Support Specialists, lived experience is required, and that Licensed Psychiatric Technicians have state requirements they must meet. Chief Clinical Officer Renteria stated all requirements are listed on the website.

Executive Director Placide announced that he will return with an update for the Board.

NEW BUSINESS

13. ELECTION OF VICE CHAIRPERSON AFTER A VACANCY EXISTS

Alternate Board Member Earl stated Chair Leano nominated Board Member Lau for Vice Chair.

JPA Administrator/Clerk stated Board Member Cockrell nominated Board Member Lantz for Vice Chair.

Board Member Lantz stated she was unaware of her nomination and withdrew her name since Chair Leano had nominated Board Member Lau.

There was unanimous consensus by the Governing Board to appoint Board Member Wendy Lau as the Governing Board Vice-Chair.

GOVERNING BOARD COMMENTS

Vice Chair Lau expressed her gratitude to staff and community for coming together to present the information and to take full advantage of the opportunity in excess funding. She stated she looked forward to collaborating with Pomona, La Verne, and Claremont.

Board Member Lantz recommended having Public Comment earlier in the meeting so the public does not have to sit through the entire meeting if there is something they want the Board to be aware of. General Counsel Flower stated he will consult with the Board Chair.

PUBLIC COMMENT

There was no public comment.

ADJOURNMENT

At 6:02 p.m., on consensus of the Governing Board its Regular Meeting of February 19, 2025, was adjourned. The next Regular Meeting of the Governing Board will be held on Wednesday, March 19, 2025, at 5:00 p.m., in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.



**Tri-City Mental Health Authority
MONTHLY STAFF REPORT**

DATE: March 19, 2024
TO: Governing Board of Tri-City Mental Health Authority
FROM: Ontson Placide, Executive Director
SUBJECT: Executive Director's Monthly Report

UPDATE ON THE MHSA to BHSA REVERSION AND TRANSFORMATION PLANNING

The Executive team continues to plan/develop in preparation for the BHSA transformation. The Current MHSA Amendment Plan which considers the Reversion efforts worked with the Governing Board, MH Commission, and Stakeholders has been posted for public comment. Next steps include presentation of the MHSA Plan during a Public Hearing in April and then ultimately presenting the MHSA Plan to the governing Board in April. Tri-City will utilize various consultant groups as well as the Executive Team will construct an organizational structure that looks to future service delivery.

INFRASTRUCTURE/SYSTEMS IMPROVEMENT

The Executive Team has continued to create a work plan to improve internal structure and systems to support MHSA to BHSA transformation as well as overall growth, increased internal communication & technology system efficiencies, & personnel recruitment and retention. Re-organization planning in process.

HUMAN RESOURCES

Staffing – Month Ending February 2025

- Total Staff is 210 full-time and 3 part-time plus 46 full-time vacancies 7 part-time vacancies for a total of 261 full-time equivalent positions.
- There were 5 new hires in February 2025
- There were 3 separations in February 2025

Workforce Demographics in February 2025

American Indian or Alaska Native =	0.47%
Asian =	7.98%
Black or African American =	7.98%
Hispanic or Latino =	62.91%
Native Hawaiian or Other Pacific Islander =	0.47%
Other =	1.88%
Two or more races =	1.41%
White or Caucasian =	16.90%

New Posted Positions in February 2025

- Psychiatric Technician – M CCP (3 FTEs)
- Office Assistant – Medical Records (1 FTE)
- Office Specialist – Medical Records/Front Desk (1 FTE)
- Clinical Therapist I – MHSSA (1 FTE)
- Clinical Supervisor I – Access to Care (1 FTE)

COVID-19 Update

Tri-City updated its COVID-19 protocols on February 25, 2025, to align with CDPH and LACDPH guidelines. As of February 26, 2025, the mandatory vaccination policy has ended, and masking is no longer required for staff regardless of vaccination status, except for those returning after testing positive for COVID-19. Quarantine for exposed staff has been eliminated, and the isolation period for positive cases has been reduced to three days. Human Resources will continue monitoring exposures and positive COVID-19 cases in the workplace and notifying staff as needed.

AB 2561

As mentioned in the November 2024 Board Report, as required by AB 2561, Public agencies must now present an annual report on their vacancies, recruitment, and retention efforts during a public hearing before their governing body. This presentation, which must occur before the adoption of the fiscal year's final budget, should also include changes to policies or recruitment activities that hinder vacancy reduction.

As a public employer, AB 2561 does apply to TCMHA and the Human Resources Department is actively preparing a presentation to be presented in an upcoming Governing Board meeting prior to Annual Budget Adoption. Preliminary plans involve a collaborative effort between Human Resources and the Finance Department to report on vacancies and recruitment efforts in conjunction with or before the adoption of the fiscal budget each July. Further details and updates will be provided as the implementation process develops. Further details and updates will be provided in future reports.

STATEWIDE UPDATES IN BEHAVIORAL HEALTH

Federal Funding/Medicaid

California Republican lawmakers raise questions about \$3.4B loan to bail out Medi-Cal- California lawmakers will meet Monday to discuss a controversial \$3.44 billion loan to the state's health care department this week. The state's Department of Finance sent a letter to legislators involved in the budget process Thursday to notify them it had approved the loan to allow the Department of Health Care Services to "complete critical payments" for Medi-Cal, California's health insurance program for very low-income people. [Sacramento Bee](#)

Mental Health

California is Spending Billions on Mental Health Housing. Will it Reach Those Most in Need? - Gov. Gavin Newsom wants to see tangible results from the \$6.4 billion mental health bond voters approved last year. Moving fast carries a risk of neglecting under-resourced communities. [CalMatters](#)

With 10 Deaths in 2025, LA Jails Continue Deadly Trend; 85 people have died in LA County jails since the start of 2023.- Just three months into 2025, 10 people have already died in Los Angeles County jails. That brings the jail death tally to 85 since the start of 2023. These tragedies underscore the urgency with which the Los Angeles County Board of Supervisors must honor its now four-year-old commitment to close Men's Central Jail and stop this cycle of death. The deadly start to the year comes as Proposition 36 goes into effect statewide. Prop 36, which passed last fall after a misinformation campaign, is expected to balloon county jail populations by mandating increased prison sentences for some low-level crimes while simultaneously removing funding for vital resources like drug and mental health treatment, homelessness prevention, and victim services centers. A growing jail population has raised concerns that the death toll may climb even higher this year. [Vera Institute](#)

Study: Many Homeless People Seeking Drug Treatment Are Turned Away - Illegal drug use is deeply intertwined with homelessness, both increasing the risk of losing housing and arising or worsening when people find themselves on the streets, a new study has found. But it also found that a large majority of people living on the streets are not drug users. The study, published in the medical journal JAMA by the Benioff Homeless and Housing Initiative at UC San Francisco, gives a complex statistical picture of a topic that has been fraught by conflicting narratives. Against a public perception that drug use is endemic to homeless camps, service providers and advocates see an exaggerated reaction to open drug use on the street that stigmatizes the majority of homeless people who do not use drugs. [Los Angeles Times](#)

City of San Diego Urging CARE Court Reforms- San Diego Mayor Todd Gloria is co-sponsoring state legislation that could lead to more conservatorships for people with serious psychotic illnesses who languish in the CARE Court process. A few years ago, Gloria was among the CARE Court proponents who envisioned that people who struggled in the program could end up in involuntary treatment. "While CARE Court is not conservatorship, it could eventually lead to conservatorship," Gloria said at a May 2022 press conference announcing the legislation championed by Gov. Gavin Newsom. [Voice of San Diego](#)



**Tri-City Mental Health Authority
MONTHLY STAFF REPORT**

DATE: March 19, 2025

TO: Governing Board of Tri-City Mental Health Authority
Ontson Placide, LMFT, Executive Director

FROM: Diana Acosta, CPA, Chief Financial Officer

SUBJECT: Monthly Finance and Facilities Report

**UNAUDITED FINANCIAL STATEMENTS FOR THE SEVEN MONTHS ENDED
JANUARY 31, 2025 (2025 FISCAL YEAR-TO-DATE):**

The financials presented herein are the PRELIMINARY and unaudited financial statements for the seven months ended January 31, 2025. These financial statements include the activities from the clinical outpatient operations as well as activities from the implemented MHSA programs under the CSS, PEI, INN, WET and CFTN plans.

The increase in net position (income) is approximately \$11.2 million. MHSA operations accounted for approximately \$9.7 million of the increase, which is primarily the result of recognizing MHSA revenues on hand at the beginning of the fiscal year. MHSA non-operating revenues are reflected when MHSA funds have been received and are eligible to be spent.

During fiscal 2024, Tri-City received MHSA funding of approximately \$20.7 million, of which \$13.2 million were for approved programs for fiscal 2024-25 MHSA operations and was reflected as MHSA Revenue Restricted for Future Period on the Statement of Net Position (balance sheet) at June 30, 2024. These restricted MHSA revenues have now been recorded as non-operating revenues in fiscal 2024-25. In addition, during this current fiscal year 2024-25 approximately \$15.8 million in MHSA funding has been received of which \$3.5 million was identified and approved for use in the current fiscal year 2024-25 and recorded as non-operating revenues, bringing the total MHSA non-operating revenues recognized to date up to approximately \$16.7 million. Unlike the requirement to reflect all available and **approved** MHSA funding when received as non-operating revenues, MHSA operating costs are reflected when incurred. Therefore, the matching of revenue to expense is not consistent as the timing of expenditures will lag behind the timing of revenue recognition.

The increase in net position of approximately \$1.4 million is from Clinic outpatient operations, which is the result of operations for the seven months ended January 31, 2025 which includes one-time payments made at the beginning of the year.

The total cash balance at January 31, 2025 was approximately \$61.4 million, which represents an increase of approximately \$13.6 million from the June 30, 2024 balance of approximately \$47.8 million. Outpatient Clinic operations, after excluding any intercompany receipts or costs resulting from MHSA operations, had an increase in cash of approximately \$3.6 million primarily as a result timing of cash receipts from LADMH. MHSA operations reflected an increase in cash of approximately \$10.0 million, after excluding intercompany receipts or costs resulting from clinic operations. Total increase in MHSA cash reflects the receipt of approximately \$15.8 million in MHSA funds offset by the use of cash for MHSA operating activities.

Approximately \$13.0 million in Medi-Cal cash receipts have been collected for both Outpatient Clinic Operations and MHSA Operations within the seven months ended January 31, 2025. As of the date of the report, approximately \$4.3 million of additional receipts received are related to outstanding receivables.

UPCOMING, CURRENT EVENTS & UPDATES

Overall Financial Update

We continue to closely monitor for any new developments, changes to legislation and updated revenue projections from CBHDA, specifically with regard to MHSA as these revenues continually fluctuate and as evidenced in the past and as noted below, significantly differ from original projections as well as revised projections. As such, planning appropriately to ensure we meet the needs of our community, and having the ability to make changes as we go will be necessary in the upcoming years, especially if projections wind up being significantly different than currently projected.

Upcoming reporting deadlines

Now that the annual financial statement audit is behind us and has been issued, the finance department will now move onto the following reportable items and deadlines:

External

- State Controllers Financial Transactions Report due 01/31/2025, submitted 01/23/2025
- MHSA Annual Revenue and Expenditure Report due 01/31/2025, submitted 01/31/2025
 - DHCS has excepted the ARER and identified \$0 subject to reversion as of 06/30/2024
- State Compensation Report due 04/30/2025

Internal

- MHSA Annual update due 04/30/2025
- Agency-wide Budget due 06/30/2025

MHSA Funding Updates

Estimated Current Cash Position – The following table represents a brief summary of the estimated (unaudited) current MHSA cash position as of the seven months ended January 31, 2025.

	MHSA
Cash at June 30, 2024	\$ 36,745,684
Receivables net of Reserve for Cost Report Settlements	2,131,072
Prudent Reserves	(2,200,000) *
Estimated Remaining Expenses for Operations FY 2024-25	(5,171,052) **
Reserved for future CFTN Projects	(6,417,848)
Total Estimated Adjustments to Cash	<u>(11,657,828)</u>
Estimated Available at June 30, 2025	<u>\$ 25,087,856</u>

Estimated remaining MHSA funds to be received in FY 2023-24 \$ 1,609,571

* Per SB 192, Prudent Reserves are required to be maintained at an amount that does not exceed 33% of the average Community Services and Support (CSS) revenue received for the fund, in the preceding 5 years.

** Estimated based on to-date actuals projected through year-end June 30, 2025, net of estimated Medi-Cal revenue, including actual and estimated amounts to year end 06/30/2025.

MHSA Expenditures and MHSA Revenue Receipts –

MHSA Reversion Update

Each remittance of MHSA funds received by Tri-City is required to be allocated among three of the five MHSA Plans, CSS, PEI and INN. The first 5% of each remittance is required to be allocated to INN and the remaining amount is split 80% to CSS and 20% to PEI. While the WET and the CapTech plans have longer time frames in which to spend funds (made up of one-time transfers into these two plans), the CSS, PEI and INN plans have three years.

Amounts received within the CSS and PEI programs must be expended within three years of receipt. INN amounts must be programmed in a plan that is approved by the Mental Health Services Oversight and Accountability Commission (MHSOAC) within three years of receipt, and spent within the life of the approved program. Upon approval by the MHSOAC, INN amounts have to be expended within the life of said program. For

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example, a program approved for a five-year period will have the full five years associated with the program to expend the funds.

The following tables are **excerpts** from DHCS's annual reversion report received by Tri-City on February 11, 2025 based on the fiscal year 2023-24 Annual Revenue and Expense Report (ARER).

CSS reversion waterfall analysis

CSS amounts received							
	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24*	Total
	8,797,914	9,293,482	11,824,329	13,252,035	9,139,346	16,870,739	77,854,693
Expended in:							
2017-18							-
2018-19							939,014
2019-20	1,290,269	-					9,028,103
2020-21	7,507,645	3,546,924	-				11,054,569
2021-22		5,746,558	3,676,533	-			9,423,091
2022-23			8,147,796	5,723,324	-		13,871,120
2023-24				7,528,711	4,245,936	-	11,774,647
2024-25 **					4,893,410	13,731,208	18,624,618
2025-26							-
Total Expended	8,797,914	9,293,482	11,824,329	13,252,035	9,139,346	13,731,208	74,715,162
Unspent Balance	-	-	-	-	-	3,139,531	3,139,531

*=Based on latest revenue projections

**=Planned Expenditures based on approved MHSA Plan

PEI reversion waterfall analysis

PEI amounts received								
	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24*	Total
	2,145,788	2,119,324	2,173,110	2,948,240	3,311,501	2,260,797	4,175,846	19,134,606
Expended in:								
2017-18	726,119							726,119
2018-19	1,419,669	387,017						1,806,686
2019-20		1,644,825	-					1,644,825
2020-21		87,482	1,746,984	-				1,834,466
2021-22			426,126	1,309,696	-			1,735,822
2022-23				1,638,544	1,718,632	-		3,357,176
2023-24					1,592,869	1,840,888	-	3,433,757
2024-25 **						419,909	3,586,503	4,006,412
2025-26 **								-
Total Expended	2,145,788	2,119,324	2,173,110	2,948,240	3,311,501	2,260,797	3,586,503	18,545,263
Unspent Balance	-	-	-	-	-	-	589,343	589,343

*=Based on latest revenue projections

**=Planned Expenditures based on approved MHSA Plan

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The following table was copied directly from latest information provided from DHCS

INN reversion waterfall analysis

INN	Reallocated AB 114	FY 17-18	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24	
Encumbered Unspent Funds	799,187	302,889	580,471	550,879	784,114	874,536	620,101	926,070	
Unencumbered Unspent Funds	-	-	-	-	-	-	-	251,396	
Unspent Balance	799,187	302,889	580,471	550,879	784,114	874,536	620,101	1,177,466	
Encumbered Funds Starting Balance →	799,187	302,889	580,471	550,879	784,114	874,536	620,101	926,070	
Applied Expenditure ↓									Applied Expenditure ↓
FY 15-16									-
FY 16-17									-
FY 17-18	304,376	-							304,376
FY 18-19	131,206	-	-						131,206
FY 19-20	355,393	-	-	-					355,393
FY 20-21	8,212	-		-	-				8,212
FY 21-22	-	302,889	25,035	-	-	-			327,924
FY 22-23	-	-	555,436	179,342	-	-	-	-	734,778
FY 23-24	-	-	-	371,537	182,851	-	-	-	554,388
FY 24-25									
Encumbered Unspent Balance →	-	-	-	-	601,263	874,536	620,101	926,070	

Note that in fiscal year 2024, the INN *Community Planning Process for Innovation Project(s)* program was approved by the MHSAOAC in the amount of \$675 thousand. Additionally, in fiscal year 2025, the INN PADs Phase II program was approved by the MHSAOAC in the amount of \$1.5 million.

Overall Facilities Update

The leases at the 1900 Royalty location are due to expire at the end of the current fiscal year, June 30, 2025. Additionally, the lease at 1717 North Indian Hill Blvd is set to expire at the end of September 2025. Management is actively considering all options to accommodate staff and client space needs.

Attachments

Attachment 3-A: January 31, 2025 Unaudited Monthly Financial Statements

**TRI-CITY MENTAL HEALTH AUTHORITY
CONSOLIDATING STATEMENTS OF NET POSITION**

	AT JANUARY 31, 2025			AT JUNE 30, 2024		
	TCMH	MHSA	Consolidated	TCMH	MHSA	Consolidated
	Unaudited	Unaudited	Unaudited	Audited	Audited	Audited
Current Assets						
Cash	\$ 15,784,604	\$ 45,638,386	\$ 61,422,990	\$ 11,061,930	\$ 36,745,684	\$ 47,807,614
Accounts receivable, net of reserve for uncollectible accounts \$849,540 at January 31, 2025 and \$1,028,867 at June 30, 2024	5,408,866	5,660,058	11,068,925	6,958,443	6,511,598	13,470,040
	<u>21,193,470</u>	<u>51,298,444</u>	<u>72,491,914</u>	<u>18,020,372</u>	<u>43,257,282</u>	<u>61,277,654</u>
Property and Equipment						
Land, building, furniture and equipment	4,138,920	10,944,818	15,083,738	4,100,520	10,766,682	14,867,203
Accumulated depreciation	(2,929,586)	(5,237,484)	(8,167,070)	(2,864,375)	(4,972,020)	(7,836,395)
Rights of use assets-building lease	1,753,343	-	1,753,343	1,753,343	-	1,753,343
Accumulated amortization-building lease	(1,604,182)	-	(1,604,182)	(1,395,366)	-	(1,395,366)
Rights of use assets-SBITA	1,298,467	-	1,298,467	1,298,467	-	1,298,467
Accumulated amortization-SBITA	(588,073)	-	(588,073)	(588,073)	-	(588,073)
Total Property and Equipment	<u>2,068,888</u>	<u>5,707,335</u>	<u>7,776,223</u>	<u>2,304,516</u>	<u>5,794,663</u>	<u>8,099,179</u>
Other Assets						
Deposits and prepaid assets	369,525	63,245	432,770	93,757	63,245	157,002
Note receivable-Housing Development Project	-	2,800,000	2,800,000	-	2,800,000	2,800,000
Total Noncurrent Assets	<u>2,438,413</u>	<u>8,570,580</u>	<u>11,008,993</u>	<u>2,398,273</u>	<u>8,657,908</u>	<u>11,056,181</u>
Total Assests	<u>23,631,883</u>	<u>59,869,024</u>	<u>83,500,907</u>	<u>20,418,645</u>	<u>51,915,190</u>	<u>72,333,835</u>
Deferred Outflows of Resources						
Deferred outflows related to the net pension liability	6,257,996	-	6,257,996	6,257,996	-	6,257,996
Total Deferred Outflows of Resources	<u>6,257,996</u>	<u>-</u>	<u>6,257,996</u>	<u>6,257,996</u>	<u>-</u>	<u>6,257,996</u>
Total Assets and Deferred Outflows of Resources	<u>\$ 29,889,879</u>	<u>\$ 59,869,024</u>	<u>\$ 89,758,903</u>	<u>\$ 26,676,641</u>	<u>\$ 51,915,190</u>	<u>\$ 78,591,831</u>
LIABILITIES						
Current Liabilities						
Accounts payable	494,446	54,627	549,073	608,213	452,165	1,060,378
Accrued payroll liabilities	215,964	588,108	804,073	93,247	262,608	355,855
Accrued vacation and sick leave	601,014	1,247,098	1,848,111	636,668	1,264,537	1,901,206
Deferred revenue	1,229,494	-	1,229,494	496,724	-	496,724
Reserve for Medi-Cal settlements	3,868,986	3,528,986	7,397,972	3,673,280	3,201,942	6,875,222
Current portion of lease liability	149,161	-	149,161	357,977	-	357,977
Current portion of SBITA liability	308,979	-	308,979	308,979	-	308,979
Total Current Liabilities	<u>6,868,044</u>	<u>5,418,819</u>	<u>12,286,863</u>	<u>6,175,088</u>	<u>5,181,252</u>	<u>11,356,340</u>
Intercompany Acct-MHSA & TCMH	1,283,463	(1,283,463)	-	177,414	(177,414)	-
Long-Term Liabilities						
Lease liability	-	-	-	-	-	-
SBITA liability	401,415	-	401,415	401,415	-	401,415
Net pension liability	9,745,737	-	9,745,737	9,745,737	-	9,745,737
Unearned MHSA revenue	-	13,651,340	13,651,340	-	1,383,814	1,383,814
Total Long-Term Liabilities	<u>10,147,152</u>	<u>13,651,340</u>	<u>23,798,492</u>	<u>10,147,152</u>	<u>1,383,814</u>	<u>11,530,966</u>
Total Liabilities	<u>18,298,659</u>	<u>17,786,696</u>	<u>36,085,355</u>	<u>16,499,654</u>	<u>6,387,651</u>	<u>22,887,305</u>
Deferred Inflow of Resources						
MHSA revenues restricted for future period	-	-	-	-	13,188,357	13,188,357
Deferred inflows related to the net pension liability	156,688	-	156,688	156,688	-	156,688
Total Deferred Inflow of Resources	<u>156,688</u>	<u>-</u>	<u>156,688</u>	<u>156,688</u>	<u>13,188,357</u>	<u>13,345,045</u>
NET POSITION						
Invested in capital assets net of related debt	1,209,333	5,707,335	6,916,668	1,236,145	5,794,663	7,030,808
Restricted for MHSA programs	-	36,374,993	36,374,993	-	26,544,519	26,544,519
Unrestricted	10,225,199	-	10,225,198	8,784,153	-	8,784,153
Total Net Position	<u>11,434,532</u>	<u>42,082,328</u>	<u>53,516,860</u>	<u>10,020,298</u>	<u>32,339,182</u>	<u>42,359,480</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 29,889,879</u>	<u>\$ 59,869,024</u>	<u>\$ 89,758,903</u>	<u>\$ 26,676,641</u>	<u>\$ 51,915,190</u>	<u>\$ 78,591,831</u>

Definitions:

TCMH=Tri-City's Outpatient Clinic

MHSA=Mental Health Services Act (Proposition 63)

TRI-CITY MENTAL HEALTH AUTHORITY
CONSOLIDATING STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
SEVEN MONTHS ENDED JANUARY 31, 2025 AND 2024

	PERIOD ENDED 1/31/25			PERIOD ENDED 1/31/24		
	TCMH Unaudited	MHSA Unaudited	Consolidated Unaudited	TCMH Audited	MHSA Audited	Consolidated Audited
OPERATING REVENUES						
Medi-Cal FFP	\$ 2,535,055	\$ 3,534,102	\$ 6,069,156	\$ 2,560,048	\$ 3,043,050	\$ 5,603,098
Medi-Cal FFP FYE Prior Year	1,076,815	1,188,733	2,265,548	67,297	3,039	70,336
Medi-Cal SGF-EPSDT	643,500	1,142,015	1,785,514	516,009	592,778	1,108,787
Medi-Cal SGF-EPSDT Prior Year	174,562	174,613	349,175	3,379	25,813	29,192
Medicare	6,296	5,074	11,370	4,422	3,013	7,435
Contracts	-	18,871	18,871	7,500	18,088	25,588
Patient fees and insurance	-	-	-	409	180	588
Rent income - TCMH & MHSA Housing	7,546	51,765	59,312	6,468	43,509	49,977
Other income	412	522	934	436	358	793
Net Operating Revenues	4,444,186	6,115,694	10,559,880	3,165,968	3,729,827	6,895,795
OPERATING EXPENSES						
Salaries, wages and benefits	4,775,402	11,045,864	15,821,266	4,774,031	9,927,538	14,701,568
Facility and equipment operating cost	361,931	974,570	1,336,501	332,379	713,278	1,045,657
Client lodging, transportation, and supply expense	17,297	451,152	468,448	109,046	451,019	560,065
Depreciation & amortization	174,848	364,644	539,492	171,358	354,200	525,558
Other operating expenses	568,325	1,472,648	2,040,973	477,102	1,294,876	1,771,978
Total Operating Expenses	5,897,803	14,308,877	20,206,680	5,863,916	12,740,910	18,604,826
OPERATING (LOSS) (Note 1)	(1,453,617)	(8,193,183)	(9,646,800)	(2,697,948)	(9,011,083)	(11,709,031)
Non-Operating Revenues (Expenses)						
Realignment	2,132,288	-	2,132,288	2,161,144	-	2,161,144
MHSA funds	-	16,693,035	16,693,035	-	15,539,345	15,539,345
Grants and Contracts	473,146	-	473,146	433,378	-	433,378
Interest Income net with FMV	262,417	1,243,294	1,505,711	169,684	1,014,849	1,184,533
Total Non-Operating Revenues (Expense)	2,867,850	17,936,329	20,804,180	2,764,206	16,554,194	19,318,400
INCOME (LOSS)	1,414,233	9,743,146	11,157,379	66,258	7,543,111	7,609,369
INCREASE (DECREASE) IN NET POSITION	1,414,233	9,743,146	11,157,379	66,258	7,543,111	7,609,369
NET POSITION, BEGINNING OF YEAR	10,020,298	32,339,182	42,359,480	8,639,329	28,506,858	37,146,187
NET POSITION, END OF MONTH	\$ 11,434,532	\$ 42,082,328	\$ 53,516,860	\$ 8,705,587	\$ 36,049,969	\$ 44,755,556

(Note 1) "Operating Loss" reflects loss before realignment funding and MHSA funding which is included in non-operating revenues.

Definitions:

Medi-Cal FFP= Federal Financial Participation Reimbursement

Medi-Cal SGF-EPSDT=State General Funds reimbursement for Medi-Cal services provided to children under the "Early and Periodic Screening, Diagnosis and Treatment" regulations.

TCMH=Tri-City's Outpatient Clinic

MHSA=Mental Health Services Act (Proposition 63)

**TRI-CITY MENTAL HEALTH AUTHORITY
CONSOLIDATING STATEMENTS OF CASH FLOWS
SEVEN MONTHS ENDED JANUARY 31, 2025 AND 2024**

	PERIOD ENDED 1/31/25			PERIOD ENDED 1/31/24		
	TCMH Unaudited	MHSA Unaudited	Consolidated Unaudited	TCMH Audited	MHSA Audited	Consolidated Audited
Cash Flows from Operating Activities						
Cash received from and on behalf of patients	\$ 5,979,462	\$ 7,069,404	\$ 13,048,866	\$ 2,207,483	\$ 2,443,573	\$ 4,651,057
Cash payments to suppliers and contractors	(1,446,724)	(3,395,087)	(4,841,811)	(1,356,957)	(2,677,084)	(4,034,041)
Payments to employees	(4,688,339)	(10,737,803)	(15,426,142)	(4,671,925)	(9,574,615)	(14,246,539)
	<u>(155,601)</u>	<u>(7,063,486)</u>	<u>(7,219,087)</u>	<u>(3,821,398)</u>	<u>(9,808,125)</u>	<u>(13,629,524)</u>
Cash Flows from Noncapital Financing Activities						
MHSA Funding	-	15,771,672	15,771,672	-	15,631,560	15,631,560
CalHFA-State Administered Projects	-	532	532	-	30,266	30,266
Realignment	2,132,288	-	2,132,288	3,485,055	-	3,485,055
Grants and Contracts	1,380,437	-	1,380,437	946,356	-	946,356
	<u>3,512,724</u>	<u>15,772,204</u>	<u>19,284,928</u>	<u>4,431,411</u>	<u>15,661,826</u>	<u>20,093,237</u>
Cash Flows from Capital and Related Financing Activities						
Purchase of capital assets	(38,400)	(178,136)	(216,536)	(64,161)	(230,216)	(294,377)
Intercompany-MHSA & TCMH	1,106,048	(1,106,048)	-	(520,323)	520,323	-
	<u>1,067,649</u>	<u>(1,284,184)</u>	<u>(216,536)</u>	<u>(584,484)</u>	<u>290,107</u>	<u>(294,377)</u>
Cash Flows from Investing Activities						
Interest received	277,823	1,356,976	1,634,799	150,168	894,097	1,044,265
	<u>277,823</u>	<u>1,356,976</u>	<u>1,634,799</u>	<u>150,168</u>	<u>894,097</u>	<u>1,044,265</u>
Cash Flows from Reorganization Items						
Receipt of SB90 claims previously reserved and accrued	-	-	-	241,378	-	241,378
	<u>-</u>	<u>-</u>	<u>-</u>	<u>241,378</u>	<u>-</u>	<u>241,378</u>
Net Increase (Decrease) in Cash and Cash Equivalents	4,702,595	8,781,509	13,484,104	417,075	7,037,904	7,454,979
Cash Equivalents at Beginning of Year	11,061,930	36,745,684	47,807,614	8,976,643	30,118,745	39,095,388
Cash Equivalents at End of Month	<u>\$ 15,764,525</u>	<u>\$ 45,527,194</u>	<u>\$ 61,291,718</u>	<u>\$ 9,393,717</u>	<u>\$ 37,156,650</u>	<u>\$ 46,550,367</u>
Cash from the Balance Sheet	<u>15,784,604</u>	<u>45,638,386</u>	<u>61,422,990</u>	<u>9,433,196</u>	<u>37,399,849</u>	<u>46,833,045</u>
YTD Gain/(Loss) from GASB 31 Fair Market Value	<u>\$ 20,079</u>	<u>\$ 111,192</u>	<u>\$ 131,271</u>	<u>\$ 39,479</u>	<u>\$ 243,199</u>	<u>\$ 282,678</u>

Definitions:

TCMH=Tri-City's Outpatient Clinic

MHSA=Mental Health Services Act (Proposition 63)

TRI-CITY MENTAL HEALTH AUTHORITY
CONSOLIDATING STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
ACTUAL TO BUDGET COMPARISON
SEVEN MONTHS ENDING JANUARY 31, 2025
(UNAUDITED)

	TRI-CITY MENTAL HEALTH OUTPATIENT CLINIC (TCMH)			TRI-CITY MENTAL HEALTH SERVICES ACT (MHSA)			TRI-CITY MENTAL HEALTH AUTHORITY CONSOLIDATED		
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
OPERATING REVENUES									
Medi-Cal FFP	\$ 2,745,230	\$ 3,443,948	\$ (698,718)	\$ 3,833,497	\$ 6,438,272	\$ (2,604,775)	\$ 6,578,727	\$ 9,882,220	\$ (3,303,493)
Medi-Cal FFP Prior Year	929,855	-	929,855	1,097,687	-	1,097,687	2,027,542	-	2,027,542
Medi-Cal SGF-EPSDT	721,023	1,067,947	(346,924)	1,265,866	1,232,345	33,522	1,986,889	2,300,292	(313,403)
Medi-Cal SGF-EPSDT Prior Year	106,497	-	106,497	113,162	-	113,162	219,659	-	219,659
Medicare	6,296	2,917	3,380	5,074	1,517	3,557	11,370	4,433	6,937
Patient fees and insurance	-	583	(583)	-	292	(292)	-	875	(875)
Contracts	-	-	-	18,871	16,333	2,538	18,871	16,333	2,538
Rent income - TCMH & MHSA Housing	7,546	6,468	1,078	51,765	35,000	16,765	59,312	41,468	17,844
Other income	412	350	62	522	117	405	934	467	467
Provision for contractual disallowances	(287,699)	(451,190)	163,491	(423,247)	(767,059)	343,812	(710,946)	(1,218,249)	507,302
Provision for contractual disallowances prior year	215,025	-	215,025	152,497	-	152,497	367,522	-	367,522
Net Operating Revenues	4,444,186	4,071,024	373,162	6,115,694	6,956,816	(841,123)	10,559,880	11,027,840	(467,961)
OPERATING EXPENSES									
Salaries, wages and benefits	4,775,402	6,083,323	(1,307,921)	11,045,864	13,366,812	(2,320,947)	15,821,266	19,450,134	(3,628,868)
Facility and equipment operating cost	361,935	327,607	34,328	976,452	810,804	165,648	1,338,387	1,138,411	199,976
Client program costs	17,297	6,610	10,686	451,152	351,768	99,384	468,448	358,378	110,070
Grants	84,479	796,657	(712,178)	82,317	216,779	(134,462)	166,796	1,013,436	(846,640)
MHSA training/learning costs	-	-	-	77,161	41,838	35,323	77,161	41,838	35,323
Depreciation & amortization	174,848	115,196	59,652	364,644	364,182	462	539,492	479,378	60,114
Other operating expenses	483,842	303,198	180,644	1,311,288	1,610,678	(299,391)	1,795,130	1,913,876	(118,747)
Total Operating Expenses	5,897,803	7,632,591	(1,734,788)	14,308,877	16,762,861	(2,453,984)	20,206,680	24,395,452	(4,188,772)
OPERATING INCOME (LOSS)	(1,453,617)	(3,561,567)	2,107,950	(8,193,183)	(9,806,045)	1,612,861	(9,646,800)	(13,367,611)	3,720,811
Non-Operating Revenues (Expenses)									
Realignment	2,132,288	2,566,667	(434,379)	-	-	-	2,132,288	2,566,667	(434,379)
MHSA Funding	-	-	-	16,693,035	16,693,035	-	16,693,035	16,693,035	-
Grants and contracts	473,146	1,867,391	(1,394,245)	-	-	-	473,146	1,867,391	(1,394,245)
Interest (expense) income, net	262,417	113,703	148,713	1,243,294	799,168	444,127	1,505,711	912,871	592,840
Total Non-Operating Revenues (Expense)	2,867,850	4,547,761	(1,679,910)	17,936,329	17,492,203	444,127	20,804,180	22,039,963	(1,235,784)
INCREASE(DECREASE) IN NET POSITION	\$ 1,414,233	\$ 986,194	\$ 428,040	\$ 9,743,146	\$ 7,686,158	\$ 2,056,988	\$ 11,157,379	\$ 8,672,352	\$ 2,485,027

Definitions:

Medi-Cal FFP= Federal Financial Participation Reimbursement

Medi-Cal SGF-EPSDT=State General Funds reimbursement for Medi-Cal services provided to children under the

"Early and Periodic Screening, Diagnosis and Treatment" regulations.

TCMH=Tri-City's Outpatient Clinic

MHSA=Mental Health Services Act (Proposition 63)

**TRI-CITY MENTAL HEALTH AUTHORITY
ACTUAL TO BUDGET VARIANCE EXPLANATIONS
SEVEN MONTHS ENDING JANUARY 31, 2025**

COMMENT: PLEASE NOTE, THE DISCUSSION BELOW MAY USE THE FOLLOWING ABBREVIATIONS:

TCMH==TRI-CITY MENTAL HEALTH (OUTPATIENT CLINIC OPERATIONS)

MHSA==MENTAL HEALTH SERVICES ACT (ACTIVITIES INCLUDE CSS, PEI, INN, WET AND CFTN PROGRAMS)

Net Operating Revenues

Net operating revenues are lower than the budget by \$468 thousand for the following reasons:

- 1 **Medi-Cal FFP revenues for FY 2024-25** were approximately \$3.3 million lower than the budget. Medi-Cal FFP revenues were \$699 thousand lower for TCMH and approximately \$2.6 million lower for MHSA. At TCMH, the adult program revenues were lower than budget by \$585 thousand and the children program revenues were lower by \$114 thousand. For MHSA, the adult and older adult FSP programs were lower than budget by \$2.2 million and the Children and TAY FSP programs were lower by \$355 thousand. Additionally, as a result of higher than expected billing rates approved by the LACDMH for the fiscal year 2023-24, a total of \$2 million from prior year Medi-Cal FFP revenues were recorded to the current year operations.
- 2 **Medi-Cal SGF-EPSDT revenues for fiscal year 2024-25** were lower than budget by \$313 thousand of which \$347 thousand lower were from TCMH and \$34 thousand higher were from MHSA. As was mentioned above, additional \$219 thousand in prior year Medi-Cal SGF-EPSDT revenues were recorded in the current year operations. SGF-EPSDT relates to State General Funds (SGF) provided to the for provision of qualifying Medi-Cal services for Early Prevention Screening and Diagnostic Testing (EPSDT) to children and youth under 21 years. These funds are in addition to the FFP reimbursed by the federal government.
- 3 **Medicare revenues** are \$7 thousand higher than the budget. Tri-City records revenue when the services are provided and the claims are incurred and submitted.
- 4 **Contract revenues** are approximately \$3 thousand higher than the budget.
- 5 **Rent Incomes** are higher than the budget by \$18 thousand. The rental income represents the payments collected from Genoa pharmacy for space leasing at the 2008 N. Garey Avenue and from the tenants staying at the MHSA house on Park Avenue.
- 6 **Provision for contractual disallowances** for fiscal year 2024-25 was lower than budget by \$507 thousand. Furthermore, due to the State's completion of FY15-16 cost report audit, the overall reserves were reduced by another \$554 thousand. This prior year's reserves write off essentially helps increase the current year's net operating revenues.

Operating Expenses

Operating expenses were lower than budget by \$4.2 million for the following reasons:

- 1 **Salaries and benefits** are \$3.6 million lower than budget and of that amount, salaries and benefits are \$1.3 million lower for TCMH operations and are approximately \$2.3 million lower for MHSA operations. These variances are due to the following:

TCMH salaries are lower than budget by \$777 thousand due to vacant positions and benefits are lower than budget by \$531 thousand. Benefits are budgeted as a percentage of the salaries. Therefore, when salaries are lower, benefits will also be lower.

MHSA salaries are lower than budget by \$1.4 million. The direct program salary costs are lower by \$879 thousand due to vacant positions and the administrative salary costs are lower than budget by \$491 thousand. Benefits are lower than the budget by another \$951 thousand. Of that, health insurance was lower than budget by \$395 thousand, retirement insurance \$399 thousand, state unemployment insurance \$62 thousand, workers compensation \$31 thousand, medicare tax \$25 thousand. Group term life insurance and other employee benefits are also lower by \$39 thousand.
- 2 **Facility and equipment operating costs** were higher than the budget by \$200 thousand of which \$34 thousand higher was from TCMH and \$166 thousand higher was from MHSA. Overall, building and facility costs were higher than the budget by \$132 thousand due to repairs and maintenance costs at the 2008 N. Garey building and the Community Therapeutic Garden. The equipment costs were higher by another \$68 thousand due to the replacement of agency wide laptop docking stations, some of the aging printer scanners, projectors and the upgrading of the Wellness Center's computer lab all of which are funded by the CFTN plan.
- 3 **Client program costs** are higher than the budget by \$110 thousand partly due to a payment of \$396 thousand to the City of Pomona's Hope for Home Year-Round Emergency Shelter early in the year while the budget is evenly spread out over a fiscal year.
- 4 **Grants for fiscal year 2024-25** are \$847 thousand lower than the budget. These are the sub-grants awarded under the TCMH Mental Health Student Services Act program, the community grants under the MHSA PEI Community Wellbeing project and the Student Loan Forgiveness program under the MHSA WET plan.
- 5 **MHSA learning and training costs** are approximately \$35 thousand higher than the budget.

**TRI-CITY MENTAL HEALTH AUTHORITY
ACTUAL TO BUDGET VARIANCE EXPLANATIONS
SEVEN MONTHS ENDING JANUARY 31, 2025**

COMMENT: PLEASE NOTE, THE DISCUSSION BELOW MAY USE THE FOLLOWING ABBREVIATIONS:

TCMH==TRI-CITY MENTAL HEALTH (OUTPATIENT CLINIC OPERATIONS)

MHSA==MENTAL HEALTH SERVICES ACT (ACTIVITIES INCLUDE CSS, PEI, INN, WET AND CFTN PROGRAMS)

- 6 Depreciation and amortization** are \$60 thousand higher than the budget.
- 7 Other operating expenses** were lower than the budget by \$119 thousand of which \$181 thousand higher were from TCMH offset by \$299 thousand lower from MHSA. Overall, the higher costs were due to higher personnel recruiting fees, attorney fees, dues and subscriptions, and liability insurance costs. These higher costs are offset with lower professional fees.

Non-Operating Revenues (Expenses)

Non-operating revenues, net, are lower than budget by \$1.2 million as follows:

- 1 TCMH non-operating revenues** are approximately \$1.7 million lower than the budget. Of that, realignment fund was lower than the budget by \$434 thousand, grants and contracts were lower by \$1.4 million. Interest income net with fair market value was higher by \$149 thousand.
- 2 MHSA non-operating revenue** is in line with the budget.
In accordance with Government Accounting Standards Board, MHSA funds received and available to be spent must be recorded as non-operating revenue as soon as the funds are received. Funds are available to be spent when an MHSA plan and related programs have been approved and the proposed expenditures for those programs have been approved through an MHSA plan, MHSA update, or State Oversight and Accountability Commission.

The differences in actual to budget are broken out as follows:

	Actual	Budget	Variance
CSS funds received and available to be spent	\$ 12,056,637	\$ 12,056,637	\$ -
PEI funds received and available to be spent	4,006,412	4,006,412	-
WET funds received and available to be spent	-	-	-
CFTN funds received and available to be spent	-	-	-
INN funds received and available to be spent	629,986	629,986	-
Non-operating revenues recorded	\$ 16,693,035	\$ 16,693,035	\$ -

CSS, PEI and INN recorded revenues are all in line with the budget.

Interest income net with Fair Market Value for MHSA is higher than budget by approximately \$444 thousand.

TRI-CITY MENTAL HEALTH AUTHORITY
CONSOLIDATING STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
SEVEN MONTHS ENDED JANUARY 31, 2025 AND 2024

	PERIOD ENDED 1/31/25			PERIOD ENDED 1/31/24		
	TCMH Unaudited	MHSA Unaudited	Consolidated Unaudited	TCMH Audited	MHSA Audited	Consolidated Audited
REVENUES						
Medi-Cal FFP, net of reserves	\$ 2,535,055	\$ 3,534,102	\$ 6,069,156	\$ 2,560,048	\$ 3,043,050	\$ 5,603,098
Medi-Cal FFP FYE Prior Year	1,076,815	1,188,733	2,265,548	67,297	3,039	70,336
Medi-Cal SGF-EPSDT	643,500	1,142,015	1,785,514	516,009	592,778	1,108,787
Medi-Cal SGF-EPSDT Prior Year	174,562	174,613	349,175	3,379	25,813	29,192
Medicare	6,296	5,074	11,370	4,422	3,013	7,435
Realignment	2,132,288	-	2,132,288	2,161,144	-	2,161,144
MHSA funds	-	16,693,035	16,693,035	-	15,539,345	15,539,345
Grants and contracts	473,146	18,871	492,017	440,878	18,088	458,966
Patient fees and insurance	-	-	-	409	180	588
Rent income - TCMH & MHSA Housing	7,546	51,765	59,312	6,468	43,509	49,977
Other income	412	522	934	436	358	793
Interest Income	262,417	1,243,294	1,505,711	169,684	1,014,849	1,184,533
Total Revenues	7,312,036	24,052,023	31,364,059	5,930,174	20,284,021	26,214,195
EXPENSES						
Salaries, wages and benefits	4,775,402	11,045,864	15,821,266	4,774,031	9,927,538	14,701,568
Facility and equipment operating cost	361,931	974,570	1,336,501	332,379	713,278	1,045,657
Client lodging, transportation, and supply expense	17,297	451,152	468,448	109,046	451,019	560,065
Depreciation & amortization	174,848	364,644	539,492	171,358	354,200	525,558
Other operating expenses	568,325	1,472,648	2,040,973	477,102	1,294,876	1,771,978
Total Expenses	5,897,803	14,308,877	20,206,680	5,863,916	12,740,910	18,604,826
INCREASE (DECREASE) IN NET POSITION	1,414,233	9,743,146	11,157,379	66,258	7,543,111	7,609,369
NET POSITION, BEGINNING OF YEAR	10,020,298	32,339,182	42,359,480	8,639,329	28,506,858	37,146,187
NET POSITION, END OF MONTH	\$ 11,434,532	\$ 42,082,328	\$ 53,516,860	\$ 8,705,587	\$ 36,049,969	\$ 44,755,556

NOTE: This presentation of the Change in Net Assets is NOT in accordance with GASB, but is presented only for a simple review of Tri-City's revenue sources and expenses.

Definitions:

Medi-Cal FFP= Federal Financial Participation Reimbursement

Medi-Cal SGF-EPSDT=State General Funds reimbursement for Medi-Cal services provided to children under the "Early and Periodic Screening, Diagnosis and Treatment" regulations.

TCMH=Tri-City's Outpatient Clinic

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Tri-City Mental Health Authority
MONTHLY STAFF REPORT

DATE: March 11 , 2025

TO: Governing Board of Tri-City Mental Health Authority (TCMHA)
Ontson Placide, LMFT, Executive Director

FROM: Elizabeth Renteria, LCSW, Chief Clinical Officer

SUBJECT: Monthly Clinical Services Report

CLINICAL SERVICES DATA UPDATE

Clinical intake data for the months of February and March will be presented in April board report.

MENTAL HEALTH STUDENT SERVICES ACT SUB GRANT

MHSSA Grant Opportunity - Round 3

The Tri-City Mental Health Authority's MHSSA grant program has enabled us to significantly expand our mental health services. Through this grant, we have been able to extend support to children, youth, and young adults and their families in our catchment area. The program additionally provides funding opportunities to community partners to enhance mental health services and wellness activities for children and youth ages 0-25 in La Verne, Claremont, and Pomona. We have been able to offer two rounds of sub-grants to further support mental health and wellness services for children and youth in our community and we are excited to announce the opening of Round 3 of our Sub-Grant Process.

Round 3 of grant opportunities. The following entities are eligible to apply:

- MHSSA plan-approved school partners
- Community agencies working with youth under TCMHA's MHSSA project
- Priority will be given to local school districts, schools, and non-profit agencies within TCMHA's service area
- Applicants and sub-grantees must provide services to youth in the TCMHA service area

Grant Details:

- Total funding available for Round 3 (through June 30, 2026): \$210,000
- Estimated sub-grant award amount: \$30,000 (subject to available funds)
- Grant period: Sub-grant funds should be used within one year from the award date

Governing Board of Tri-City Mental Health Authority
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Monthly Staff Report of Elizabeth Renteria, LCSW Chief Clinical Officer
March 11, 2025
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We encourage interested organizations to submit applications that reflect feasible and impactful use of funds within the specified timeframe.

Former and current grant recipients include Gente Organizada, Pomona Unified School District, Claremont Unified School District, School of Arts and Enterprise, Pomona Pride Center, Cal Poly Pomona and Just Us 4Youth. Funded projects have included activities such as additional training for teachers and staff, supportive activities for youth, mental health outreach and fairs, additional treatment services, mentoring , counseling and implementation of pro-social programming for children youth and their families.

Key Dates

Action	Date & Time
Request for Application (RFA) Release	February 3, 2025
Bidders' Conference	February 27, 2025
Application Deadline	March 31, 2025
Notice of Intent to Award Sub-grant	June 2, 2025 (Tentative)
Award of Contract*	June 19, 2025 (Tentative)
Last day of Sub-grantee project activities	June 30, 2026**
Last day of Tri-City Mental Health Authority MHSSA grant project	December 31, 2026

* TCMHA reserves the right to make no award of contract.

** Last day of sub-grantee project activities may occur earlier depending on approved project scope.



**Tri-City Mental Health Authority
MONTHLY STAFF REPORT**

DATE: March 19, 2025

TO: Governing Board of Tri-City Mental Health Authority
Ontson Placide, LMFT, Executive Director

FROM: Seeyam Teimoori, M.D., Medical Director

SUBJECT: Medical Director's Monthly Report

**SERVICES PROVIDED BY TCMHA PSYCHIATRISTS AND NURSING TEAM IN THE
MONTH OF FEBRUARY 2025**

The team of psychiatrists provides initial psychiatric evaluations and psychiatric follow ups to our clients. The initial psychiatric evaluations are scheduled based on the clients' severity of symptoms, recent hospital admissions and being currently on psychiatric medications, to ensure timely access to these services, based on the urgency of cases.

The nursing team provides medication monitoring services in our in-house medication room for our outpatient clients. In the field medication monitoring services are provided for our clients in full-service partnership program. This includes providing oral medications and administering long acting injectables, which are proven to improve treatment outcomes.

These services which are supervised by our psychiatrists, improve medication compliances, facilitate treatments by monitoring the efficacies of medications and early reporting of side effects and other concerns, which will be addressed by treating psychiatrists.

Here are some of the services provided in the month of February:

- Total number of initial psychiatric evaluations: 51
- Total number of appointments with our psychiatrists: 324
- Total number of medication monitoring services: 484
- Total number of long-acting injections: 60



Tri-City Mental Health Authority Monthly Staff Report

DATE: March 19, 2025

TO: Governing Board of Tri-City Mental Health Authority
Ontson Placide, LMFT, Executive Director

FROM: Dana Barford, Director of MHSA and Ethnic Services

SUBJECT: Monthly MHSA and Ethnic Services Report

DIVERSITY, EQUITY, AND INCLUSION (DEI)

On Friday, February 28th, the TCMHA RAINBOW Collaborative hosted *Finding Strength Together*, a healing space for individuals navigating uncertain times. In partnership with Pomona Valley Pride, Diamond Bar United Church of Christ, and Tri-City Mental Health, the event welcomed ten community members, ages 18 to 70. The conversation centered on the power of community, the importance of coping strategies, and the sharing of local resources to foster reassurance that support and connection are available, even during challenging times.

The RAINBOW Collaborative is grateful for the active participation of all attendees and extends heartfelt thanks to our community partners for the opportunity to collaborate in creating safe spaces for healing. We look forward to continuing these important community conversations and to fostering future opportunities for connection, support, and growth.



Upcoming Events

The ADELANTE chair and DEI Coordinator will attend the Latino & Latina Roundtable's 21st Annual Cesar Chavez Breakfast on Friday, March 28th, at the Sheraton Fairplex.



COMMUNITY PLANNING PROCESS (CPP)

Mini Community Forums: Pomona Unified School District

On February 5th MHSA Projects Manager, Sara Rodriguez, attended the Pomona Unified School District (PUSD) Parent Leads meeting. Attendees included school district employees, teachers, parents and community partners. Several connections were made with specific school sites that wanted to partner further with Tri-City. Some new connections were made with Harrison Elementary School, Westmont Elementary School and Community Schools at Park West. Each school representative was also referred to the appropriate Tri-City program based on their needs, such as Community Mental Health Trainers, Therapeutic Community Garden, and Mental Health Student Services Act.

League of Women Voters

MHSA Projects Manager invited Mary Monzon, Housing Manager, to partner on a presentation requested by the local chapter of the League of Women Voters. Rachel Forester, Director of the Mt. Baldy area chapter (including the communities of Pomona, Claremont and La Verne), communicated that the group was specifically interested in learning more about Proposition 1 and the Behavioral health Services Act, as well as Tri-City's housing program. The group expressed gratitude for the information and some individuals requested to be added to the email lists for community forums and public hearing announcements. These new connections increase the opportunities for collaborations with community partners, as well as expanding the pool of stakeholders.

PREVENTION AND EARLY INTERVENTION (PEI)

This year, **Green Ribbon Week** will occur on **March 17-21, 2025**, with the theme of Thrive in Mind. Down below are the different events and activities that will take place to help reduce stigma and promote mental health awareness in the 3 cities that Tri-City serves.

Thursday, March 20, 2025

Creative Minds Paint & Sip

5:00 PM–6:30 PM

Almond Haus (909 W Foothill Blvd, Claremont, CA 91711)

Sip some boba and join us in a relaxing, loosely guided painting and writing activity to express yourself and explore your wellness. Hang out, make new friends, and check in with your overall well-being. Materials and supplies provided.

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Thursday, March 20, 2025

Find Your Calm

4:00 PM–5:30 PM

Tri-City Therapeutic Community Garden (2008 N Garey Ave, Pomona, CA 91767)

In celebration of Green Ribbon Week, join Tri-City Mental Health's Mental Health Student Services Act (MHSSA) program for our Let's Talk: Student Wellness series. Participate in a fun, family-friendly workshop in our Therapeutic Community Garden to learn about mental health basics such as anxiety, wellness and self-care. Connect with yourself, your family and nature in a guided mindfulness activity, and explore easy ways to find calm in the midst of everyday stress.

Food and refreshments will be provided. This event will be conducted in English and Spanish. Open to ages 13+ and families.

Friday, March 21, 2025

Amplify: Voices of Mental Health & Recovery

5:30 PM–6:45 PM

Magic Tea (1207 Foothill Blvd, La Verne, CA 91750)

Listen to impactful and empowering stories from members of [Courageous Minds](#) about their mental health experience and journey, with a focus on strength, hope, resilience and recovery.

COMMUNITY NAVIGATORS (CN)

Outreach efforts for the Community Navigator Program continues throughout the community. The CNs have recently been awarded housing assistance funds through the Homeless Solutions Funds. The funds are dedicated to aiding individuals in need of rental and move-in assistance. The Navigators receive numerous calls from individuals and families in the area who are experiencing homelessness or are at risk due to their limited income.

Success Story

A single father who was granted full custody of his small children had been staying with different family members while trying to secure permanent housing. Overall, he was doing well and has remained sober for the past 8 years. He was approved for low-income housing, but he was struggling to come up with the security deposit and the first month's rent. He was connected to a Community Navigator who was able to assist him with the funding needed through the Homeless Solutions Funds. The Community Navigator also assisted him with other resources needed. As a result, the father and children were able to successfully move into their apartment unit and secure permanent housing. The father was extremely grateful for the assistance provided for his family.

WELLNESS CENTER (WC)

The Wellness Center continues to implement programming that is responsive to the specific needs or requests from the community. In partnership with LA County Public Health, a Grief and Loss group was implemented on Wednesdays at 5:00 pm at the Pomona Wellness Community. As the community also wrestles with the changing immigration landscape, the Center has implemented a support group on Monday nights at 6:30 pm to offer support and a place to share their concerns. Lastly, working collaboratively with Volunteers of America, the Center will be providing various support activities at Hope 4 Home shelter in the coming months.



**Tri-City Mental Health Authority
MONTHLY STAFF REPORT**

DATE: March 19, 2025

TO: Governing Board of Tri-City Mental Health Center
Ontson Placide, LMFT, Executive Director

FROM: Natalie Majors-Stewart, LCSW, Chief Compliance Officer

SUBJECT: Monthly Best Practices Report

SITE CERTIFICATION

The Los Angeles County Department of Mental Health will be performing two Re-Certification reviews for TCMHA in 2025. The first review will occur during April – July 2025 for site 7731A: located at 2008 N. Garey Avenue. The second review will occur during July - October 2025 for site 7798: located at 1900 Royalty Drive. Re-Certification typically occurs every three years and is required for legal entities (agencies) to be able to provide and be reimbursed for Specialty Mental Health Services. Re-Certifications include both: desk review and on-site ‘walk-through’ review components.

DATA COLLECTION, ANALYSIS, AND REPORTING

The quality improvement/data team prepared MHSSA (Mental Health Student Support Services) grant report data for submission to the State’s Commission for Behavioral Health. The report included data on service activities provided under the MHSSA grant (i.e.: de-identified demographics, services, and outreach/event information, etc.). The data team also prepared an expanded report for the MHSSA leadership team with more detail performance outcome data.

QUALITY ASSURANCE AND IMPROVEMENT MONITORING

The Best Practice Division has continued to perform ongoing quality monitoring of agency services. Quality monitoring includes, but is not limited to, chart reviews, compliance audits, and data monitoring, etc. Feedback from quality monitoring activities is provided to relevant departmental leadership and staff and corrective action is required for any findings that need improvement.

TRAININGS AND IN-SERVICES

Documentation and electronic health record training continue to occur ongoing for new workforce members who provide clinical services and for those who have clinic support duties. Additionally, an overview/refresher training was provided on how to create caseload lists in the Electronic Health Record. Caseload lists help providers monitor their active caseload and recent activity.

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Members of the Best Practices division attended the annual statewide CALQIC Conference. The purpose of this conference is to learn the latest and most critical updates regarding Quality Improvement/Assurance.



**Tri-City Mental Health Authority
AGENDA REPORT**

DATE: March 19, 2025

TO: Governing Board of Tri-City Mental Health Authority

FROM: Ontson Placide, LMFT, Executive Director

BY: Brian Cesario, Systems Administrator

SUBJECT: Consideration of Resolution No. 772 Approving the Purchase of 15 Laptops in the Amount of \$30,351.69 from Intelli-Tech; and Authorizing the Executive Director to Execute any Related Purchase Documents

Summary:

To support the modernization of our agency's IT infrastructure, we are procuring 15 new laptops for the Crisis Care Mobile Unit (CCMU) Team, as part of our first mobile computing fleet. This purchase includes a technical support to configure our Microsoft 365 (M365) environment for Intune and Autopilot, enabling more efficient device provisioning and management. These enhancements will streamline deployment, improve security, and reduce long-term IT overhead.

Background:

Until now, our agency has relied on a manual, hands-on approach using Windows Deployment Services (WDS) to configure new computers. This process is time-consuming, requiring IT staff to set up each device individually before it's ready for use. That was manageable when our workforce was office-based, but with a new mobile team, we need a more flexible, scalable solution that supports remote work without adding to IT's workload.

By implementing Microsoft Intune and Autopilot, we're shifting to a modern, automated provisioning system that allows laptops to be set up quickly and securely—no matter where the user is. Instead of IT staff spending hours manually configuring devices, employees will receive laptops that are ready to go right out of the box, with security policies, applications, and settings applied automatically. This means our new mobile team can start working immediately without waiting for IT, and ongoing management becomes much more efficient. Beyond just benefiting this team, this investment sets the foundation for a smarter, more streamlined IT approach across the entire agency, making it easier to scale as our technology needs evolve.

Governing Board of Tri-City Mental Health Authority
Consideration of Resolution No. 772 Approving the Purchase of 15 Laptops in the
Amount of \$30,351.69 from Intelli-Tech; and Authorizing the Executive Director to
Execute any Related Purchase Documents
March 19, 2025
Page 2 of 2

Summary of Competing Vendor Proposals:

Vendor	Cost
CDW-G	\$42,476.78
Intelli-Tech	\$30,351.69
Insight Direct	\$28,854.89

Fiscal Impact:

The cost to purchase 15 laptops, along with technical support, for the M365 initial configuration from the selected vendor, Intelli-Tech, is \$30,351.69 and will be funded through the Crisis Care Mobile Unit (CCMU) Grant as allowed through the grant. While Insight's quote is slightly lower, the scope of work proposed by Intelli-tech offers more configuration and support options.

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 772 authorizing the purchase of 15 laptops, along with the technical support for the M365 initial configuration, from Intelli-Tech for a total cost of \$30,351.69; and authorizing the Executive Director to execute any related purchase documents.

Attachments:

Attachment 8-A: Quote Form

Attachment 8-B: Resolution No. 772 - Draft



REQUEST FOR QUOTE FORM
 (Exhibit A to Purchasing Policy & Procedure No. IX.1)

Requirements:

- For bids over \$3,000 and under \$25,000 – minimum of 3 quotes
- If vendor has conducted business with agency this fiscal year, and this quote will extend them over \$25K total annual revenue, then a formal bid must be conducted
- If quotes are over \$25k, then a formal bid shall be conducted
- Please attached written quotations to this form:

Amount Quoted	\$42,476.78	\$30,351.69	\$28,854.89
Name of Company	CDW-G	Intelli-Tech	Insight Direct
Company Address	200 N. Milwaukee Ave Vernon Hills, IL 60061	1652 Yeager Avenue La Verne, CA 91750	2701 E Insight Way Chandler AZ 85286-1930
Contact Name	Thomas Hartman	Kevin Praeger	Sierra Thompson
Contact Phone	(312) 705-0972	(909) 394-5188 x4515	(480) 333-3177
Contact Email	thomas.hartman@cdwg.com	Kevin.praeger@intelli-tech.com	Sierra.Thompson@insight.com
Estimate Date	N/A	N/A	N/A



Chosen Company is: Intelli-Tech

Approvals: _____

Date: _____

Date: _____

Notes: Intelli-Tech provides the best AutoPilot/Intune consulting services of the 3 vendors. Their consulting services are more in depth than Insight's service, for not too much more expense. CDW's consulting service is the most expensive and included consulting on services that are not needed at this time.

RESOLUTION NO. 772

A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY APPROVING THE PURCHASE OF 15 LAPTOPS IN THE AMOUNT OF \$30,351.69 FROM INTELLI-TECH; AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE ANY RELATED PURCHASE DOCUMENTS

The Governing Board of the Tri-City Mental Health Authority does resolve as follows:

1. Findings. The Governing Board hereby finds and declares the following:

A. Tri-City Mental Health Authority (“TCMHA” or “Authority”) was awarded a grant in the amount of \$1,948,147.00 by the California Department of Health Care Services, through the Advocates for Human Potential, Inc, for the implementation of Behavioral Health Mobile Crisis Services Project No. 21-10349.

B. TCMHA desires to purchase 15 laptops for the Crisis Care Mobile Unit team. TCMHA’s IT Division obtained three (3) quotes, and the Quote submitted by Intelli-Tech was selected in the amount of \$30,351.69.

C. Funds are allocated in the current Fiscal Year 2024-25 Operating Budget under the CCMU Grant.

2. Action

A. The Governing Board approves the purchase of 15 laptops from Intelli-Tech in the amount of \$30,351.69; and authorizes the Executive Director to execute any related purchase documents.

3. Adoption

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on March 19, 2025 by the following vote:

AYES:
NOES:
ABSTAIN:
ABSENT:

JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

STEVEN L. FLOWER, GENERAL COUNSEL

MICAELA P. OLMOS, RECORDING SECRETARY

ATTACHMENT 8-B



**Tri-City Mental Health Authority
AGENDA REPORT**

DATE: March 19, 2025

TO: Governing Board of Tri-City Mental Health Authority

FROM: Ontson Placide, LMFT, Executive Director

BY: Liz Renteria, LCSW, Chief Clinical Officer

SUBJECT: Consideration of Resolution No. 773 Approving the Second Amendment to the Agreement with Capstone Solutions Consulting Group, LLC for Completion of the Drug Medi-Cal Certification from the California Department of Health Care Services (DHCS), And Authorizing the Executive Director to Execute the Amendment

Summary:

Staff is seeking approval from the Governing Board to authorize the executive director of Tri-City Mental Health Authority (TCMHA) to amend the agreement with Capstone Solutions Consulting Group, LLC, for consulting services related to Drug Medi-Cal Certification from the California Department of Health Care Services. Additionally, the consultant will assist TCMHA negotiate and address the terms for intergovernmental agreement with the Los Angeles County Substance Abuse Provider Control to become a provider of substance use treatment services. The proposed amount for this amendment is \$45,000 bringing the overall total for this agreement to an amount not to exceed \$95,000.

Background:

TCMHA is working towards obtaining Drug Medi-Cal certification to provide comprehensive co-occurring mental health and substance use treatment for the clients in their care. This certification will allow TCMHA to better serve the community and meet a critical service need. Additionally, becoming a certified Drug Medi-Cal site will enable TCMHA to seek reimbursement for the substance use treatment services provided.

The certification process is a new initiative for TCMHA, and the organization has been collaborating with a consultant to complete it. However, more time is required to finish the process due to several factors, including significant changes to the application requirements released by the Department of Health Care Services on February 3, 2025, as well as the resignation and leave of the program manager who was previously overseeing the project.

Fiscal Impact:

The funding source will be realignment dollars.

Governing Board of Tri-City Mental Health Authority
Consideration of Resolution No. 773 Approving the Second Amendment to the Agreement with Capstone Solutions Consulting Group, LLC for Completion of the Drug Medi-Cal Certification from the California Department of Health Care Services (DHCS), And Authorizing the Executive Director to Execute the Amendment
March 19, 2025
Page 2 of 2

Recommendation:

Staff recommends that the Governing Board adopt Resolution No 773 approving the Second Amendment to the Agreement with Capstone Solutions Consulting Group, LLC, for consulting services related to Drug Medi-Cal Certification from the California Department of Health Care Services; and authorize the Executive Director to execute the Amendment.

Attachments

Attachment 9-A: Resolution No. 773 - Draft

Attachment 9-B: Second Amendment to Agreement with Capstone Solutions Consulting Group, LLC

RESOLUTION NO. 773

A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY APPROVING THE SECOND AMENDMENT TO THE AGREEMENT WITH CAPSTONE SOLUTIONS CONSULTING GROUP, LLC FOR COMPLETION OF THE DRUG MEDI-CAL CERTIFICATION FROM THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS), AND AUTHORIZING THE EXECUTIVE DIRECTOR TO EXECUTE THE AMENDMENT

The Governing Board of the Tri-City Mental Health Authority does resolve as follows:

1. Findings. The Governing Board hereby finds and declares the following:

A. Tri-City Mental Health Authority (“Authority” or “TCMHA”) on September 1, 2023, through its Executive Director, entered into an agreement with Capstone Solutions Consulting Group LLC (Capstone) in an amount not to exceed \$25,000.00, for consulting services to complete TCMHA’S Drug Medi-Cal Certification from the California Department of Health Care Services (DHSC) to become a provider of substance use treatment services.

B. On June 12, 2024, the Authority adopted Resolution No. 746 approving the First Amendment to the Agreement with Capstone to extend it for one additional year, ending on June 30, 2025; 2) increase Capstone’s hourly rate to \$275.00 effective January 1, 2024; 3) increase the compensation in a total amount not to exceed \$50,000.00 for the entire project; and 4) modify the Scope of Services.

C. The Authority desires to amend again the Agreement and execute the Second Amendment to increase Capstone’s compensation in a total amount not to exceed \$95,000.00 for the entire project.

D. The Authority affirms that Capstone Consulting Group LLC’s is an independent contractor and not an employee, agent, joint venture or partner of TCMHA. The Agreement does not create or establish the relationship of employee and employer between Capstone and TCMHA.

2. Action

The Authority’s Executive Director is authorized to enter into, and execute, the Second Amendment to the Agreement with Capstone Consulting Group LLC, in substantially the same form as presented at its meeting on March 19, 2025, to increase Capstone’s compensation in an amount not to exceed \$95,000.00 for the entire project.

3. Adoption

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on March 19, 2025, by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

STEVEN L. FLOWER, GENERAL COUNSEL

MICAELA P. OLMOS, RECORDING SECRETARY



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SECOND AMENDMENT

TO

INDEPENDENT CONTRACTOR AGREEMENT

BETWEEN

TRI-CITY MENTAL HEALTH AUTHORITY

AND

CAPSTONE SOLUTIONS CONSULTING GROUP, LLC

DATED

MARCH 19, 2025

Administrative Office

1717 North Indian Hill
Boulevard, Suite B
Claremont, CA 91711
Phone (909) 623-6131
Fax (909) 623-4073

Clinical Office / Adult

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Phone (909) 623-6131
Fax (909) 865-9281

Clinical Office / Child & Family

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Phone (909) 766-7340
Fax (909) 865-0730

MHSA Administrative Office

2001 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 326-4690

Wellness Center

1403 North Garey Avenue
Pomona, CA 91767
Phone (909) 242-7600
Fax (909) 242-7691

ATTACHMENT 9-B

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SECOND AMENDMENT

INDEPENDENT CONTRACTOR AGREEMENT BY AND BETWEEN TRI-CITY MENTAL HEALTH AUTHORITY AND CAPSTONE SOLUTIONS CONSULTING GROUP, LLP

1. PARTIES AND DATE

This Second Amendment to Independent Contractor Agreement (“Second Amendment”) is made and entered into as of March 19, 2025 (“Second Amendment Date”), by and between TRI-CITY MENTAL HEALTH AUTHORITY, a California joint powers authority (“TCMHA” or “Authority”) and CAPSTONE SOLUTIONS CONSULTING GROUP, LLP, incorporated under the laws of the State of California (“CONTRACTOR”). TCMHA and CONTRACTOR are sometimes individually referred to as a “Party” and collectively as “Parties.”

2. RECITALS

2.1. TCMHA and CONTRACTOR entered into that certain Independent Contractor Agreement effective September 1, 2023, (“Agreement”) for consultant services for Drug Medical Certification from the California Department of Health Care Services.

2.2. On July 1, 2024, the Parties executed the First Amendment to that certain Agreement to: 1) extend it for one additional year, ending on June 30, 2025; 2) increase the CONTRACTOR’s hourly rate to Two Hundred Seventy-Five (\$275.00) dollars effective January 1, 2024; 3) increase the compensation in a total amount not to exceed \$50,000.00 for the entire project; and 4) modify the Scope of Services.

2.3. TCMHA and CONTRACTOR desire to amend again the Agreement and execute the Second Amendment to increase the compensation in a total amount not to exceed \$95,000.00 for the entire project.

2.4. In consideration of these Recitals and the performance by the Parties of the promises, covenants, and conditions herein contained, the Parties agree as provided in this Second Amendment.

3. AMENDMENT

Section 9 (Compensation) is amended to read as follows:

“9. COMPENSATION. For the full performance of this Agreement:

a. TCMHA shall pay CONTRACTOR an hourly rate of Two Hundred Seventy-Five (\$275) dollars as indicated under ‘Exhibit A’ effective January 1, 2024; and the total compensation will be an amount not to exceed Ninety-Five Thousand (\$95,000.00) dollars for the entire project. CONTRACTOR acknowledges and agrees that it will not be compensated for any work in excess of this amount unless an amendment to the Agreement authorizing payment for such work has been first approved by the Authority’s Governing Board.

b. CONTRACTOR shall submit a monthly invoice describing the amount of services provided since the initial commencement date, or since the start of the subsequent billing periods, as appropriate, through the date of the invoice. TCMHA shall pay CONTRACTOR within thirty (30) days following receipt of invoice and completion/delivery of services/goods as detailed in Sections 3 of this Agreement and only upon satisfactory delivery/completion of goods/services in a manner consistent with professional/industry standards for the area in which Contractor operates.

c. TCMHA is not responsible for paying for any work done by CONTRACTOR or any subcontractor, which was not authorized by TCMHA.

d. CONTRACTOR is responsible for monitoring its own forces/employees/agents/ subcontractors to ensure delivery of goods/services within the terms of this Agreement. TCMHA will not accept or compensate CONTRACTOR for incomplete goods/services.

e. CONTRACTOR acknowledges and agrees that, as an independent contractor, the CONTRACTOR will be responsible for paying all required state and federal income taxes, social security contributions, and other mandatory taxes and contributions. TCMHA shall neither withhold any amounts from the Compensation for such taxes, nor pay such taxes on CONTRACTOR's behalf, nor reimburse for any of CONTRACTOR's costs or expenses to deliver any services/goods including, without limitation, all fees, fines, licenses, bonds, or taxes required of or imposed upon CONTRACTOR. TCMHA shall not be responsible for any interest or late charges on any payments from TCMHA to CONTRACTOR.”

4. REAFFIRMATION OF OTHER TERMS

Except as modified or changed herein, all of the terms and provisions of the Agreement, as amended by this Second Amendment, shall remain in full force and effect.

[SIGNATURES FOLLOW ON THE NEXT PAGE]

5. EXECUTION

The Parties have executed this Agreement as of the Second Amendment Date.

Tri-City Mental Health Authority

Capstone Solutions Consulting Group, LLP

By: _____
Ontson Placide, Executive Director

By: _____
Cassandra Fatouros, Managing Director

Attest:

By: _____
Micaela P. Olmos, JPA Administrator/Clerk

Approved as to Form:
RICHARDS WATSON & GERSHON

By: _____
Steven L. Flower, General Counsel



**Tri-City Mental Health Authority
AGENDA REPORT**

DATE: March 19, 2025

TO: Governing Board of Tri-City Mental Health Authority

FROM: Ontson Placide, Executive Director

BY: Dana Barford, Director of MHSAs, and Ethnic Services

SUBJECT: Consideration of Resolution No. 774 Approving an Agreement with Youth Creating Change in the Amount of \$43,140.00 to Conduct Programs and Activities that Support TCMHA's Programming Core Activities for Youth Suicide Prevention and Intervention Efforts

Summary:

Tri-City Mental Health Authority requests authorization to execute an Agreement with Youth Creating Change (YCC) to implement programming and activities that will support Tri-City's youth suicide prevention and intervention efforts.

Background:

Youth Creating Change (YCC) is a non-profit organization (501 c3) dedicated to placing young people's voices and creativity at the center of suicide prevention and mental health programming. Their mission is to educate young people about mental health, suicide prevention and other critical health and social justice issues through the creation of art and film projects; to facilitate healing and belonging through creative expression, and to support schools and communities through curriculums, trainings, and awareness activities in creating safe spaces where young people feel seen, heard, and supported in reaching out for help.

The organization's signature program, The Directing Change Film Contest, delivers mental health and suicide prevention curriculums through creative expression. Youth created films are used to elevate and place youth voices at the center of mental health programming, as well as to raise awareness and start conversations about these topics in schools and communities. Schools are supported with educational resources, training, and support.

Scheduled activities include virtual informational webinars, workshops, and technical assistance office hours to youth and educators and community partners in Tri-City; production of 25 event kits; hosting, maintaining and updating the content on Tri-City's local landing page; and promoting the program with Tri-City youth, schools and organizations. In addition, the budget allows for youth suicide prevention training (virtual) and in-person postvention training.

AGENDA ITEM NO. 10

Governing Board of Tri-City Mental Health Authority
Consideration of Resolution No. 774 Approving an Agreement with Youth Creating Change in the Amount of \$43,140.00 to Conduct Programs and Activities that Support TCMHA's Programming Core Activities for Youth Suicide Prevention and Intervention Efforts
March 19, 2025
Page 2 of 2

Fiscal Impact:

The Agency has funds available under the MHSA Prevention and Early Intervention Plan component to support the cost of this one-year Agreement (July 1, 2025 to June 30, 2026).

Recommendation:

Staff recommends that the Governing Board adopt Resolution No. 774 approving the Agreement with Youth Creating Change in the amount of \$43,140.00; and authorizing the Executive Director to execute the Agreement.

Attachments:

Attachment 10-A: Resolution No. 774 - Draft

Attachment 10-B: Agreement with YCC for Youth Suicide Prevention & Intervention

RESOLUTION NO. 774

A RESOLUTION OF THE GOVERNING BOARD OF THE TRI-CITY MENTAL HEALTH AUTHORITY APPROVING AN AGREEMENT WITH YOUTH CREATING CHANGE IN THE AMOUNT OF \$43,140.00 TO CONDUCT PROGRAMS AND ACTIVITIES THAT SUPPORT TCMHA'S PROGRAMMING CORE ACTIVITIES FOR YOUTH SUICIDE PREVENTION AND INTERVENTION EFFORTS

The Governing Board of the Tri-City Mental Health Authority ("Authority") does resolve as follows:

1. Findings. The Governing Board hereby finds and declares the following:

A. Tri-City Mental Health Authority ("Authority" or "TCMHA") desires to enter into an Agreement with Youth Creating Change to conduct a variety of programs and initiatives to supplement the integration of TCMHA's programs core activities for youth suicide prevention and intervention efforts.

B. The Authority affirms that Youth Creating Change is an independent contractor and not an employee, agent, joint venture or partner of the Authority. The Agreement does not create or establish the relationship of employee and employer between Youth Creating Change and TCMHA.

2. Action

The Governing Board approves the Agreement, in substantially the same form as presented at its meeting on March 19, 2025, with Youth Creating Change in the amount of \$43,140.00; and authorizing the Executive Director to execute the Agreement.

3. Adoption

PASSED AND ADOPTED at a Regular Meeting of the Governing Board held on March 19, 2025 by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

JED LEANO, CHAIR

APPROVED AS TO FORM:

ATTEST:

STEVEN L. FLOWER, GENERAL COUNSEL

MICAELA P. OLMOS, RECORDING SECRETARY

ATTACHMENT 10-A



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INDEPENDENT CONTRACTOR AGREEMENT

BETWEEN THE

TRI-CITY MENTAL HEALTH AUTHORITY

AND

YOUTH CREATING CHANGE

DATED

MARCH 19, 2025

Administrative Office

1717 North Indian Hill
Boulevard, Suite B
Claremont, CA 91711
Phone (909) 623-6131
Fax (909) 623-4073

Clinical Office / Adult

2008 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 865-9281

Clinical Office / Child & Family

1900 Royalty Drive, Suite 180
Pomona, CA 91767
Phone (909) 766-7340
Fax (909) 865-0730

MHSA Administrative Office

2001 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 326-4690

Wellness Center

1403 North Garey Avenue
Pomona, CA 91767
Phone (909) 242-7600
Fax (909) 242-7691

ATTACHMENT 10-B

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AGREEMENT

1. PARTIES AND DATE

THIS AGREEMENT (hereinafter “Contract” or “Agreement”) is made and entered into as of March 19, 2025 (“Agreement Date”) by and between the TRI-CITY MENTAL HEALTH AUTHORITY, a joint powers authority organized under the laws of the State of California with its administrative office at 1717 N. Indian Hill Boulevard, Suite B, Claremont, California 91711 (hereinafter “TCMHA” or “Authority”) and YOUTH CREATING CHANGE, a nonprofit corporation organized under the laws of the State of California, with its business address at 3202 Elliott Street, San Diego, CA 92106 (hereinafter “CONTRACTOR”). TCMHA and CONTRACTOR are sometimes individually referred to as a “Party” and collectively as “Parties.”

2. INDEPENDENT CONTRACTOR

The express intention of the Parties is that CONTRACTOR is an independent contractor and not an employee, agent, joint venture or partner of TCMHA. Nothing in this Agreement shall be interpreted or construed as creating or establishing the relationship of employee and employer between CONTRACTOR and TCMHA or any employee or agent of CONTRACTOR. At all times CONTRACTOR shall be an independent contractor and CONTRACTOR shall have no power to incur any debt, obligation, or liability on behalf of TCMHA without the express written consent of TCMHA. Neither TCMHA nor any of his agents shall have control over the conduct of CONTRACTOR or any of CONTRACTOR’s employees, except as set forth in this Agreement. In executing this Agreement, CONTRACTOR certifies that no one who has or will have any financial interest under this Agreement is an officer or employee of TCMHA.

3. SCOPE OF SERVICES

CONTRACTOR shall provide the specified variety of programs and initiatives to support the integration of TCMHA’s programs core activities for youth suicide prevention and intervention efforts and/or materials (“Services”) as set forth in ‘Exhibit A’, incorporated into and made a part of this Agreement. CONTRACTOR affirms that it has the appropriate experience, expertise, and resources to undertake the Services and has agreed to undertake the Services pursuant to this Agreement, and to the best of its ability.

4. PERFORMANCE OF SERVICES

CONTRACTOR reserves the sole right to control or direct the manner in which services are to be performed. CONTRACTOR shall retain the right to perform services for other entities during the term of this Agreement, so long as they are not competitive with the services to be performed under this Agreement. CONTRACTOR shall neither solicit remuneration nor accept any fees or commissions from any third party in connection with the Services provided to TCMHA under this Agreement without the expressed written permission of TCMHA. CONTRACTOR warrants that it is not a party to any other existing agreement which would prevent CONTRACTOR from entering into this Agreement or which would adversely affect CONTRACTOR’s ability to fully and faithfully, without any conflict of interest, perform the Services under this Agreement.

5. SUBCONTRACTORS

Neither Party hereto may assign this Agreement, nor will CONTRACTOR subcontract any service requested hereunder to contractor(s) unless consented to in writing by the Executive Director of TCMHA. After approval from TCMHA, any work or services subcontracted hereunder shall be specified by written contract or agreement and shall be subject to each provision of this Agreement.

6. TIME AND LOCATION OF WORK

CONTRACTOR shall perform the services required by this Agreement at any place or location and at any time as CONTRACTOR deems necessary and appropriate, so long as the services are provided within the manner and time frame pursuant to this Agreement.

7. TERM

The Term of this Agreement shall be from July 1, 2025 to June 30, 2026, unless earlier terminated in accordance with the provisions of Section 8 below; or renewed subject to an amendment to this Agreement.

8. TERMINATION. This Agreement may be terminated only as follows:

a. Written Election. TCMHA may terminate this Agreement at any time, without cause, upon ten (10) calendar days' prior written notice to the other Party. CONTRACTOR agrees to cooperate fully in any such transition, including the transfer of records and/or work performed.

b. Effect of Termination. No termination of this Agreement shall affect or impair CONTRACTOR's right to receive compensation earned for work satisfactorily completed through the effective date of termination. In the event of termination, CONTRACTOR shall immediately deliver all written work product, if any, to TCMHA, and a final invoice which shall be consistent with all work performed up to the date of termination.

9. COMPENSATION. For the full performance of this Agreement:

a. TCMHA shall pay CONTRACTOR and amount not to exceed \$43,140.00 as stated in the CONTRACTOR Partnership Proposal and Scope of Work, incorporated into and made a part of this Agreement as 'Exhibit A', within fifteen (15) days following receipt of invoice and completion/delivery of services/goods as detailed in Sections 3 of this Agreement and only upon satisfactory delivery/completion of goods/services in a manner consistent with professional/industry standards for the area in which CONTRACTOR operates. CONTRACTOR acknowledges and agrees that it will not be compensated for any work in excess of this amounts unless an amendment to the Agreement authorizing payment for such work has been first approved by the Authority's Executive Director.

b. TCMHA is not responsible for paying for any work done by CONTRACTOR or any subcontractor, which was not authorized by TCMHA.

c. CONTRACTOR is responsible for monitoring its own forces/employees/agents/subcontractors to ensure delivery of goods/services within the terms of this Agreement. TCMHA will not accept or compensate CONTRACTOR for incomplete goods/services.

d. CONTRACTOR acknowledges and agrees that, as an independent contractor, the CONTRACTOR will be responsible for paying all required state and federal income taxes, social security contributions, and other mandatory taxes and contributions. TCMHA shall neither withhold any amounts from the compensation for such taxes, nor pay such taxes on CONTRACTOR's behalf, nor reimburse for any of CONTRACTOR's costs or expenses to deliver any services/goods including, without limitation, all fees, fines, licenses, bonds, or taxes required of or imposed upon CONTRACTOR. TCMHA shall not be responsible for any interest or late charges on any payments from TCMHA to CONTRACTOR.

10. LICENSES

CONTRACTOR declares that CONTRACTOR has complied with all federal, state, and local business permits and licensing requirements necessary to conduct business.

11. PROPRIETARY INFORMATION

The CONTRACTOR agrees that all information, whether or not in writing, of a private, secret or confidential nature concerning TCMHA's business, business relationships or financial affairs (collectively, "Proprietary Information") is and shall be the exclusive property of TCMHA. The CONTRACTOR will not disclose any Proprietary Information to any person or entity, other than persons who have a need to know about such information in order for CONTRACTOR to render services to TCMHA and employees of TCMHA, without written approval by Executive Director of TCMHA, either during or after its engagement with TCMHA, unless and until such Proprietary Information has become public knowledge without fault by the CONTRACTOR.

12. AUDITS

CONTRACTOR shall maintain accounts and records, including all working papers, personnel, property, and financial records, adequate to identify and account for all costs pertaining to the Contract and such other records as may be deemed necessary by TCMHA to assure proper accounting for all project funds, both Federal and non-Federal shares. These records must be made available for audit purposes to TCMHA or any authorized representative, and must be retained, at the CONTRACTOR's expense, for a minimum of seven (7) years after the Agreement expires, unless the firm is notified in writing by TCMHA of the need to extend the retention period.

13. CONFLICT OF INTEREST

CONTRACTOR hereby certify that to the best of their knowledge or belief, no elected/appointed official or employee of TCMHA is financially interested, directly or indirectly, in the provision of goods/services specified in this Agreement. Furthermore, CONTRACTOR represents and warrants to TCMHA that it has not employed or retained any person or company employed by TCMHA to solicit or secure the award of this Agreement and that it has not offered to pay, paid, or agreed to pay any person any fee, commission, percentage, brokerage fee, or gift of any kind contingent upon or in connection with, the award of the Agreement.

14. GENERAL TERMS AND CONDITIONS.

a. Indemnity.

i. CONTRACTOR shall, at its sole cost and expense, indemnify, defend and hold harmless TCMHA, its elective and appointive officers, officials, agents, employees, volunteers, and contractors who serve as TCMHA officers, officials or staff (collectively "TCMHA Indemnitees" in this Subsection (a) of Section 14), from any and all demands, claims, costs or liability of personal injury, bodily injury (including death) and property damage of any nature (collectively "Claims"), in law or in equity, whether actual, alleged or threatened, caused by or arising out of, in whole or in part, the acts or omissions of CONTRACTOR, its officers, trustees, directors, agents, employees, contractors, subcontractors, or their officers, trustees, directors, agents or employees (or any entity or individual that CONTRACTOR shall bear the legal liability thereof), (collectively "CONTRACTOR Indemnitors" in this Subsection (a) of Section 15), including the CONTRACTOR Indemnitors' active or passive negligence, recklessness or willful misconduct in the performance of this Agreement, except as for Claims arising from the sole negligence or willful misconduct of TCMHA Indemnitees. All duties of CONTRACTOR under this Section shall survive this Agreement.

ii. With regard to CONTRACTOR's work product and Services, CONTRACTOR and TCMHA each agree to indemnify, defend and hold harmless the other from any and all demands, claims or liability of any nature to the extent caused by its own negligent performance under this Agreement, to the fullest extent permitted by law against all damages, liabilities, and costs, including reasonable attorneys' fees and other legal expenses arising directly or indirectly from any act or failure of the indemnifying party in performance of this Agreement. All duties of the parties under this paragraph shall survive this Agreement.

b. Insurance. CONTRACTOR shall obtain and file with TCMHA, at CONTRACTOR's expense, certificates of insurance providing the following insurance before commencing any services under this Agreement as follows:

i. **Workers Compensation Insurance:** Minimum statutory limits.

ii. **Automobile Insurance:** \$1,000,000.00 per occurrence.

iii. **Errors And Omissions Insurance:** \$1,000,000 per occurrence and \$2,000,000 annual aggregate.

iv. **Commercial General Liability And Property Damage Insurance:** General Liability and Property Damage Combined. \$2,000,000.00 per occurrence including comprehensive form, personal injury, broad form personal damage, contractual and premises/operation, all on an occurrence basis. If an aggregate limit exists, it shall apply separately or be no less than two (2) times the occurrence limit.

v. **Notice Of Cancellation:** TCMHA requires, and CONTRACTOR shall provide TCMHA with, 10-day written notice of cancellation.

vi. **Certificate Of Insurance:** Prior to commencement of services, evidence of insurance coverage must be shown by a properly executed certificate of insurance by an insurer licensed to do business in California, satisfactory to TCMHA, and it shall name " *Tri-City Mental*

Health Authority, its elective and appointed officers, employees, volunteers, and contractors who serve as TCMHA officers, officials, or staff" as additional insureds.

vii. To prevent delay and ensure compliance with this Agreement, the insurance certificates and endorsements must be submitted to:

Tri-City Mental Health Authority
Attn: JPA Administrator/Clerk
1717 N. Indian Hill Boulevard, #B
Claremont, CA 91711-2788

c. Non-Discrimination and Equal Employment Opportunity. In the performance of this Agreement, CONTRACTOR shall not discriminate against any employee, subcontractor, or applicant for employment because of race, color, creed, religion, sex, marital status, national origin, ancestry, age, physical or mental disability, medical condition, sexual orientation or gender identity. CONTRACTOR will take affirmative action to ensure that subcontractors and applicants are employed, and that employees are treated during employment, without regard to their race, color, creed, religion, sex, marital status, national origin, ancestry, age, physical or mental handicap, medical condition, sexual orientation or gender identity.

d. Prohibition on Assignment. This Agreement shall not be assigned or transferred without advance written consent of TCMHA.

e. Changes to the Agreement. No changes or variations of any kind are authorized without the written consent of the Executive Director. This Agreement may only be amended by a written instrument signed by both Parties. The CONTRACTOR agrees that any written change or changes in compensation after the signing of this Agreement shall not affect the validity or scope of this Agreement and shall be deemed to be a supplement to this Agreement and shall specify any changes in the Scope of Services.

f. Records. All reports, data, maps, models, charts, studies, surveys, calculations, photographs, memoranda, plans, studies, specifications, records, files, or any other documents or materials, in electronic or any other form, that are prepared or obtained pursuant to this Agreement and that relate to the matters covered hereunder shall be and remain the property of TCMHA. CONTRACTOR will be responsible for and maintain such records during the term of this Agreement. CONTRACTOR hereby agrees to deliver those documents to TCMHA at any time upon demand of TCMHA. It is understood and agreed that the documents and other materials, including but not limited to those described above, prepared pursuant to this Agreement are prepared specifically for TCMHA and are not necessarily suitable for any future or other use. Failure by CONTRACTOR to deliver these documents to TCMHA within a reasonable time period or as specified by TCMHA shall be a material breach of this Agreement. TCMHA and CONTRACTOR agree that until final approval by TCMHA, all data, reports and other documents are preliminary drafts not kept by TCMHA in the ordinary course of business and will not be disclosed to third parties without prior written consent of both Parties. All work products submitted to TCMHA pursuant to this Agreement shall be deemed a "work for hire." Upon submission of any work for hire pursuant to this Agreement, and acceptance by TCMHA as complete, non-exclusive title to copyright of said work for hire shall transfer to TCMHA. The compensation recited in Section 9 shall be deemed sufficient consideration for said transfer of copyright.

CONTRACTOR retains the right to use any project records, documents and materials for marketing of their professional services.

g. CONTRACTOR Attestation. Also in accordance with TCMHA's policies and procedures, TCMHA will not enter into contracts with individuals, or entities, or owners, officers, partners, directors, or other principals of entities, who have been convicted recently of a criminal offense related to health care or who are debarred, excluded or otherwise precluded from providing goods or services under Federal health care programs, or who are debarred, suspended, ineligible, or voluntarily suspended from securing Federally funded contracts. TCMHA requires that CONTRACTOR certifies that no staff member, officer, director, partner, or principal, or sub-contractor is excluded from any Federal health care program, or federally funded contract and will sign attached *Contractor's Attestation That Neither It Nor Any Of Its Staff Members Are Restricted, Excluded Or Suspended From Providing Goods Or Services Under Any Federal Or State Health Care Program*, incorporated into and made a part of this Agreement as 'Exhibit B'.

h. Non-Use of Names. Except as required by applicable law, neither Party shall use the name of the other Party, of the other Party's officials, employees, volunteers, or independent contractors acting as that Party's official, in any publicity without the prior written permission of the Party whose name is to be used.

i. Governing Law, Jurisdiction and Venue. This Agreement shall be governed by, and construed in accordance with, the laws of the State of California. Except that any rule of construction to the effect that ambiguities are to be resolved against the drafting Party shall not be applied in interpreting this Agreement. The Parties agree that venue of any action that arises under or relates to this Agreement (whether contract, tort, or both) shall be resolved exclusively in a superior court or federal court in the County of Los Angeles, California.

15. REPRESENTATIVE AND NOTICE

a. TCMHA's Representative. TCMHA hereby designates its Executive Director to act as its representative for the performance of this Agreement ("TCMHA's Representative"). TCMHA's Representative shall have the power to act on behalf of TCMHA for all purposes under this Agreement.

b. CONTRACTOR's Representative. CONTRACTOR warrants that the individual who has signed the Agreement has the legal power, right, and authority to make this Agreement and to act on behalf of CONTRACTOR for all purposes under this Agreement.

c. Delivery of Notices. All notices permitted or required under this Agreement shall be given to the respective Parties at the following address, or at such other address as the respective Parties may provide in writing for this purpose:

If to TCMHA:

Tri-City Mental Health Authority
1717 N. Indian Hill Boulevard, #B
Claremont, CA 91711-2788
Attn: Executive Director

If to CONTRACTOR:

Youth Creating Change
3202 Elliott Street,
San Diego, CA 92106
Attn: Jana Sczersputowski, Executive Director

Any notices required by this Agreement shall be deemed received on (a) the day of delivery if delivered by hand during receiving Party's regular business hours or by facsimile before or during receiving Party's regular business hours; or (b) on the third business day following deposit in the United States mail, postage prepaid, to the addresses set forth below, or to such other addresses as the Parties may, from time to time, designate in writing pursuant to the provision of this Section. Actual notice shall be deemed adequate notice on the date actual notice occurred, regardless of the method of service.

16. NO INTENT TO CREATE A THIRD PARTY BENEFICIARY CONTRACT

Notwithstanding any other provision of this Agreement, the Parties do not in any way intend that any person shall acquire any rights as a third party beneficiary of this Agreement; and no third Party shall have the right to enforce any right or enjoy any benefit created or established under this Agreement.

17. EXHIBITS. The following attached exhibits are hereby incorporated into and made a part of this Agreement:

- a.** Exhibit A: Partnership Proposal and Scope of Work
- b.** Exhibit B: *Contractor's Attestation That Neither It Nor Any Of Its Staff Members Are Restricted, Excluded Or Suspended From Providing Goods Or Services Under Any Federal Or State Health Care Program*

18. EFFECTIVE DATE

This Agreement shall become effective upon (a) its approval and execution by CONTRACTOR; and (b) its approval and execution by TCMHA.

19. ENTIRE AGREEMENT

This Agreement and any other documents incorporated herein by specific reference, represents the entire and integrated agreement between the Parties. Any ambiguities or disputed terms between this Agreement and any attached Exhibits shall be interpreted according to the language in this Agreement and not the Exhibits. This Agreement supersedes all prior agreements, written or oral, between the CONTRACTOR and TCMHA relating to the subject matter of this Agreement. This Agreement may not be modified, changed or discharged in whole or in part, except by an agreement in writing signed by the CONTRACTOR and TCMHA.

20. SEVERABILITY

The validity or unenforceability of any provision of this Agreement declared by a valid judgment or decree of a court of competent jurisdiction, shall not affect the validity or enforceability of any other provision of this Agreement.

21. WAIVER

No delay or omission by TCMHA in exercising any right under this Agreement will operate as a waiver of that or any other right. A waiver or consent given by TCMHA on any one occasion is effective only in that instance and will not be construed as a bar to or waiver of any right on any other occasion or a waiver of any other condition of performance under this Agreement.

22. EXECUTION

a. Each person executing this Agreement on behalf of CONTRACTOR warrants that he or she is duly authorized to execute this Agreement on behalf of CONTRACTOR and that by his or her execution, CONTRACTOR is formally bound to the provisions of this Agreement.

b. CONTRACTOR certifies it is aware of the requirements of Sections 313 of the California Corporations Code. If CONTRACTOR is a corporate entity, it shall either: (i) provide City written proof that each person executing this Agreement on CONTRACTOR's behalf is duly authorized to bind CONTRACTOR; or (ii) provide two signatories to this Agreement, of whom the first must be CONTRACTOR's chairman of the board, president, or a vice president and the second must be CONTRACTOR's secretary, an assistant secretary, its chief financial officer, or an assistant treasurer.

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the Agreement Date.

TRI-CITY MENTAL HEALTH AUTHORITY

YOUTH CREATING CHANGE

By: _____
Ontson Placide, Executive Director

By: _____
Jana Sczersputowski, Executive Director

Attest:

By: _____
Micaela P. Olmos, JPA Administrator/Clerk

Approved as to Form:
RICHARDS WATSON & GERSHON LAW

By: _____
Steven L. Flower, General Counsel

EXHIBIT A



1.8.2025

Partnership Proposal

Youth Creating Change is a non-profit organization (501 c3) dedicated to placing young people's voices and creativity at the center of suicide prevention and mental health programming. Our mission is to educate young people about mental health, suicide prevention and other critical health and social justice issues through the creation of art and film projects; to facilitate healing and belonging through creative expression, and to support schools and communities through curriculums, trainings, and awareness activities in creating safe spaces where young people feel seen, heard, and supported in reaching out for help.

The organization's signature program, The Directing Change Film Contest, launched at the beginning of the 2012-13 school year. Learn about some of our [outcomes](#) from our NYU evaluation partner, view our [2023-24 program year outcome statement](#), and learn about us in this segment on [ABC Los Angeles](#).

The Directing Change Film Contest delivers mental health and suicide prevention curriculums through creative expression. As a result of the creative process, participants are engaged via all methods of the "learning spectrum" to see, experience, discuss, and apply concepts learned about suicide prevention, mental health, healthy coping, and help-seeking. Youth created films are used to elevate and place youth voices at the center of mental health programming, as well as to raise awareness and start conversations about these topics in schools and communities. Schools are supported with educational resources, training, and support.

The Hope & Justice Initiative centers topics youth are grappling with in their day to day lives – mental health, economic uncertainty, health disparities – with monthly prompts that ask them to creatively express and process their feelings in a positive and impactful format. Youth are asked to share how they find hope, ways they cope with tough times and complex feelings, and the changes they hope to see in their communities.

Additional Initiatives:

- Youth Council and Youth Development
- Mental Health Thrival Kits to Promote Social Emotional Learning and Healthy Coping
- Toolkits for Mental Health Matters Month and Suicide Prevention Week
- Trainings for Districts and Schools
- Statewide Award Ceremony to Elevate Youth Voice



YOUTHCREATINGCHANGE.ORG



Proposed Scope of Work

The following activities will support integration of the program's core activities in Tri-City's youth suicide prevention and intervention efforts.

- The Youth Creating Change Team will offer two virtual informational meetings to share information about the program with Tri-City youth, educators, CBOs and other partners and one virtual workshop to support interested youth and advisors.
 - Workshop attendees will receive an event kit (up to 25).
 - A select number of virtual "office hours" will be offered to provide technical assistance to interested youth and advisors throughout the school year.
 - Additional on-demand support will be provided to youth and schools as resources permit.
- The Youth Creating Change team will support monthly meetings with Tri-City staff to provide an update on program activities and discuss suicide prevention/intervention topics and provide other technical assistance as needed.
- Youth Creating Change will support the Tri-City team with promoting the organization's programs and initiatives in Tri-City. A quarterly update of youth participation in the Hope & Justice initiative and the annual film contest will be provided to the Tri-City team.
 - In addition, co-branded social media graphics will be created for winning entries from Tri-City students.
- Youth Creating Change will host and maintain the dedicated landing page for Tri-City with updated announcements and art/films created by Tri-City youth.
- As appropriate, Tri-City youth who placed first in specialty categories, or as a finalist in the statewide Mental Health or Suicide Prevention categories will be celebrated at the statewide award ceremony hosted in Los Angeles County in May. If applicable, Tri-City youth who place in art and film contest will receive awards. Tri-City will be acknowledged as an event sponsor online and at the event.
- The YCC team will work in collaboration with Tri-City staff to plan and implement two trainings. The budget includes design of the training flyer, facilitation, training materials, and travel. Tri-City staff will be responsible for promotion, registration and the training location.



YOUTH CREATING CHANGE



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**Postvention: Responding Effectively After Suicide Deaths (In-Person)**

- This full-day interactive workshop will focus on preparing your school/district to respond effectively after a suicide death. During the workshop, attendees will be instructed on best practices including communicating effectively with the school community, supporting students and staff, and managing memorials. Participants will apply these skills during mock-scenario exercises and identify next steps to ensure their school or district is prepared to respond effectively to incidents related to suicide.

Youth Suicide Prevention 101 (Virtual)

- This one-hour webinar is designed specifically for youth. The webinar provides an overview of suicide warning signs, how to support a friend who discloses they are thinking about suicide, as well as information about crisis resources. There will be an opportunity for questions.

Proposed Budget:

The budget supports general operating expenses and staffing of the organizations Hope & Justice Initiative, the Directing Change Film Contest and the annual red carpet award ceremony, as well as awards to Tri-City students if applicable. Activities will focus on offering two virtual informational webinars, a workshop, and technical assistance office hours to youth and educators and community partners in Tri-City; production of 25 event kits; hosting, maintaining and updating the content on Tri-City's local landing page; and promoting the program with Tri-City youth, schools and organizations. In addition, the budget allows for youth suicide prevention training (virtual) and one in-person postvention training.



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Budget FY 2025-26	
Program Staffing	\$ 16,900.00
Estimated for Program Manager at 0.16 FTE	
Staffing for activities related to updating the Tri-City landing page with monthly prompts and films/art submitted by local students, promoting the program at the local level, supporting youth and schools with implementing the program, submission review, coordinating activities with Tri-City Mental Health Services team, project management and reporting. This also includes creation of co-branded social media graphics for winning entries from Tri-City students.	
This includes facilitation of two virtual (1-hour) informational meetings open to youth, educators and CBO partners in Tri-City to learn about the program.	
This includes facilitation of one virtual workshop to support submissions to film and art contests, technical assistance office hours to support youth and schools, and as resources permit on-demand support to youth and schools.	
Out of Pocket Expenses	\$ 10,550.00
Sponsorship of red-carpet award ceremony to support the event, as well as, when appropriate attendance of the event by Tri-City finalists, and when applicable, recognitions and trophies for Tri-City youth. (\$5,000)	
Produce Event Kits (25 kits at \$150/kit for an estimated total of \$3750)	
Hosting and maintenance of Tri-City landing page (\$150/month for 12 month)	
Trainings	
Postvention (in-person)	\$ 6,000.00
Youth Suicide Prevention 101 (virtual)	\$ 2,500.00
Subtotal	\$ 35,950.00
Admin Fee (20%)	\$ 7,190.00
TOTAL BUDGET	\$ 43,140.00



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