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Mayor

**San Francisco Department of Public Health**  
Department of Public Health  
Community Behavioral Health Services

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# **MENTAL HEALTH SERVICES ACT**

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**FISCAL YEAR 2009 -2010**

**ANNUAL PLAN UPDATE**

# Table of Contents

EXHIBIT A – County Certification .....	1
EXHIBIT B – Program Planning and Local Review Process .....	2
EXHIBIT C – Report on FY07/08 CSS Activities .....	4
EXHIBIT D – Work Plan Descriptions .....	6
EXHIBIT E – Summary Funding Request .....	15
EXHIBIT E-1 – CSS Funding Request .....	16
EXHIBIT E-2 – WET Funding Request .....	17



# EXHIBIT B

## Description of Community Program Planning and Local Review Processes MHSA FY 2009/10 ANNUAL UPDATE

County Name: San Francisco

**Instructions:** Utilizing the following format please provide a brief description of the Community Program Planning and Local Review Processes that were conducted as part of this Annual Update.

**1. Briefly describe the Community Program Planning Process for development of the FY 2009/10 Annual Update. It shall include the methods for obtaining stakeholder input. (suggested length – one-half page)**

The Community Behavioral Health Services (CBHS) unit of the Department of Public Health continuously informs all its stakeholders in multiple settings. The County conducts a monthly meeting with the full service partnerships, general system development funded agencies, and housing service partnerships to discuss local and statewide implementation issues. Also on a monthly basis, the Community Behavioral Health Services (CBHS) Director's Report, which includes MHSA updates, is widely circulated within the county, posted on the Department of Public Health website, and discussed at the Mental Health Board meetings. In addition, the County holds bi-monthly MHSA Advisory Committee meetings, alternating between community-held meetings and committee meetings held at the administration building and co-chaired by the County Mental Health Director and a consumer advocate. At these meetings, the participants are briefed about the progress of local implementation and evaluation activities as well as state-wide updates about finances, statewide projects, policies, and other issues that would have an impact on MHSA.

The FY2009/10 Annual Update was posted on the DPH website for a 30 day public review and comment from February 9, 2009 to March 11, 2009. After the 30 day review, a public hearing was conducted by the Mental Health Board on March 11, 2009. Public participation was broadly advertised through email distributions and direct mailings by CBHS, the Mental Health Board, the Mental Health Association of San Francisco, National Alliance of Mental Illness, Client Council, and the CA Network of Mental Health Clients.

**2. Identify the stakeholder entities involved in the Community Program Planning Process.**

The following entities were involved in the Community Planning Process: the Mental Health Board, the Mental Health Association of San Francisco, National Alliance of Mental Illness, Client Council, and the CA Network of Mental Health Clients, MHSA Advisory Committee, and CBHS funded agencies.

**3. Describe how the information provided by DMH and any additional information provided by the County regarding the implementation of the Community Services and Supports (CSS) component was shared with stakeholders.**

All information from DMH and local implementation activities are shared with our partners on a monthly basis and with the public at the MHSA Advisory Committee's bi-monthly meetings. Public meeting minutes and a listing of DMH Notices with links to the DMH website are posted at the county MHSA website at: <http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/default.asp>

**4. Attach substantive comments received about the CSS implementation information and responses to those comments. Indicate if none received.**

None received.

**5. List the dates of the 30-day stakeholder review and public hearing. Attach substantive comments received during the stakeholder review and public hearing and responses to those comments. Indicate if none received.**

The 30 day stakeholder review was posted on the local MHSA website at:  
<http://www.sfdph.org/dph/comupg/oservices/mentalHlth/MHSA/mnu30-DayNotice.asp> from February 9, 2009 to March 11, 2009.

There were no comments received during the 30 day public review and comment period.

The Mental Health Board hearing occurred on March 11, 2009.

Though not a response to public review and hearing, the MHSA Coordinator revised the budget to: (1) reflect the final unspent amount of \$4,364,878 ( a reduction of \$472,199 from the amount posted for 30 day public review and comment) reported in the FY07-08 Revenue and Expenditure Report which was submitted to DMH on March 28, 2009 and (2) reflect the correct amount for operating reserve of \$1,372,496 (a reduction of \$441,697 from the amount posted for 30 day public review and comment) so that the total budget equals the allocated amount of \$16,467,000. The work plans were also revised to show the gender, ethnicity, and preferred languages of all FSP programs to comply with the FY09-10 Annual Update guidelines. These revisions were presented at the Mental Health Board public hearing on March 11, 2009.

The annual plan update was presented by the County Mental Health Director at the Mental Health Board public hearing. A question was raised whether the county includes outreach in MHSA services. The County Mental Health Director responded that outreach is included in all services thus negating the need for a separate funding category for this. The Mental Health Board accepted the annual plan update with no further comments.

## EXHIBIT C

### Report on FY 2007/08 Community Services and Supports Activities MHSA FY 2009/10 ANNUAL UPDATE

County Name: San Francisco

**Provide a brief narrative description of progress in providing services through the MHSA Community Services and Supports (CSS) component to unserved and underserved populations, with emphasis on reducing racial/ethnic service disparities. (suggested length – one-half page)**

San Francisco County has a very diverse population and has a long and proud history of providing services to the disenfranchised members of society. The CSS planning process identified local priority needs and populations and resulted in the funding of eight full service partnerships and eleven general system development projects awarded to fourteen agencies.

The full service partnerships serve those who have been circling in and out of the behavioral health systems, homeless or at risk of homelessness, children at risk of separation from families, youths transitioning out of foster care, individuals involved in the criminal justice system, and neighborhoods where majority of behavioral health clients tend to congregate. Included in the full service partnerships are: housing service partnerships that contracts housing units for the FSPs and act as liaisons with property management, a Family and Youth Involvement Team that provide supportive services including mentorship and assistance with navigating the children and family systems, and Pathways to Discovery, a wellness and recovery center that provides community integration supports to the TAY and adult FSPs.

The general system development projects were funded to: reach the API, African American, Latino, and LGBTQQ communities; provide behavioral health services in non-traditional settings; offer services to children youth and families affected by trauma and violence; develop community centers with very low thresholds for participation; encourage development of consumer-led centers and activities; assist consumers in obtaining and maintaining housing; enhance existing vocational rehabilitation activities; provide integrated assessments and referrals to behavioral health services; and extend services to non Medi-Cal eligible clients who otherwise would not be able to access services.

The FY09-10 Annual Update includes an additional outreach component to the full service partnerships for CYF, Adult, and Older Adult populations, to be awarded to nine agencies. This outreach component will assist these full service partnerships with the transformation of the mental health system by widening the scope of clients served, educating communities about mental illness and preparing them for the larger prevention and early intervention initiatives that will soon be implemented. In addition, the outreach components will endeavor to:

- connect with children and families in the impoverished southeast sector of the City to behavioral health services
- reach out to the Asian communities wherein stigma around mental illness is still widespread
- engage adults who meet these new criteria, especially those located in the south of Market area
- reach veterans, by working in close collaboration with the VA Clinic

- create a widespread understanding of behavioral health resources
- connect with community based organizations to encourage them to respond to the prevention and early intervention initiatives that will soon be implemented.

The FY09-10 Annual Update also includes an expansion of the capacity to increase cultural competency initiative with the general system development programs to serve API adults with gambling compulsions and families who are impacted by their excessive gambling. This expansion will target the API community. Also included in the FY09-10 Annual Update is an outreach component for the Violence and Trauma Recovery program to ramp up awareness about this issue and prepare programs for the wider prevention and early intervention efforts that would soon be implemented.

# **EXHIBIT D**

## **WORK PLAN DESCRIPTIONS**

# Mental Health Services Act—Work Plan Description (EXHIBIT D)



County Name: San Francisco

Work Plan Title: 1 A- Children Youth and Family Services Full Service Partnerships

**Population to Be Served**

- Children at risk of being separated from families
- Children in foster care
- Special outreach to African American, API, and Latino communities

**Work Plan Description**

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served  
1,622 Total  
 Number of Clients By Funding Category  
222 Full Service Partnerships  
           System Development  
1,400 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served  
           Total  
 Number of Clients By Type of Prevention  
           Early Intervention  
           Indicated/Selected  
           Universal

Two full service partnerships (FSPs) will continue to be funded through this work plan. Both serve children who are at risk of being separated from their families. One of the full service partnerships also serve those who are currently housed in foster care and leverages MHSA funds with SB163 funding. Both provide wraparound services to children and their families, including tutorial services to children, culturally-specific psychiatric services, mentoring, and assistance with access to other resources provided by the Family and Youth Involvement team. Both FSPs integrate outreach into their services. The demographic characteristics of each FSP's current active caseload are presented below.

		Family Mosaic (n=31)	Seneca Connections (n=102)
Gender	Male	21	62
	Female	10	40
Ethnicity	Black	10	74
	White	7	12
	Latino	8	8
	Asian	6	3
	Pacific Islander	0	3
	Other	0	2
Preferred Language	English	24	100
	Spanish	3	2
	Cantonese	3	0
	Mandarin	1	0

An additional outreach component will be added in FY09-10 to be delivered by seven agencies. The outreach services will engage children and families located in the southeast sector of the city, where most families living in poverty reside. It will also reach out to the API and Latino communities where mental health issues are not openly discussed due to stigma and perceived discrimination or "shame" resulting from such disclosures. This short-term outreach and engagement efforts will help with the transformation of the mental health system by educating communities about mental illness and preparing them for the larger prevention and early intervention initiatives that will soon be implemented.



County Name: San Francisco

Work Plan Title: 1 B- Children Youth and Family General System Development

**Population to Be Served**

- LGBTQQ
- Children and families affected by community violence
- Children with developmental disorders, esp. autism
- High school youths
- API, Latinos, and African Americans

**Work Plan Description**

Five agencies will continue to be funded in FY09-10 to provide:

- culturally appropriate services to API and LGBTQQ youths;
- de-escalation, counseling, and culturally specific interventions to youths and families affected by violence in the Mission, Bayview, Excelsior, and Western Addition neighborhoods;
- behavioral health services to high school youths attending the School of the Arts; and
- behavioral health assessments and treatment for API children receiving primary care services at the Chinatown Health Center.

An additional agency will be funded to provide culturally appropriate services to API parents with gambling compulsions. Also added in FY09-10 is an outreach component for one of the Trauma and Violence Recovery agency to help with the transformation of the mental health system by educating communities about mental illness and preparing them for the larger prevention and early intervention initiatives that will soon be implemented.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

2,012 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

420 System Development

1,592 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal



County Name: San Francisco

Work Plan Title: 2 A- Transitional Age Youth Full Service Partnerships

**Population to Be Served**

- Youths transitioning out of foster care
- Youths exiting the Juvenile Justice Center
- Homeless and Runaway youths

**Work Plan Description**

Two full service partnerships (FSPs) will continue to be funded through this work plan. One full service partnership serve homeless and runaway youths while the other serve youths exiting from foster care homes and the Juvenile Justice Center. Both full service partnerships access housing for the youths they serve through the housing service partner. In FY09-10, plans are underway to master lease a 50 unit building with commercial/retail space on the ground floor, which will be renovated to accommodate a youth wellness and activity center and a space for the full service partnership staff to meet/counsel with clients housed in the building. Existing scattered housing site negotiated last fiscal year will be maintained and may be phased out as units become empty and/or as demand for housing decrease which is anticipated to happen as the new master leased housing opens. The demographic characteristics of each FSP's current active caseload are presented below.

		Family Services Agency TAY FSP (n=23)	CBHS TAY FSP (n=22)
Gender	Male	16	14
	Female	7	8
Ethnicity	Black	11	11
	White	6	4
	Latino	4	5
	Asian	1	1
	Pacific Islander	1	0
	Other/Unknown	0	1
Preferred Language	English	22	22
	Russian	1	0

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

114 Total

Number of Clients By Funding Category

114 Full Service Partnerships

System Development

Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

Total

Number of Clients By Type of Prevention

Early Intervention

Indicated/Selected

Universal



County Name: San Francisco

Work Plan Title: 2 B- Transitional Age Youth General System Development

**Population to Be Served**

- Dually-diagnosed homeless youths
- Youths involved in the Juvenile Justice system

**Work Plan Description**

Three agencies will continue to be funded in FY09-10 to provide behavioral health services to dually-diagnosed homeless youths and those detained at the Juvenile Justice Center. Services include:

- a low threshold peer center where clients engage in art activities, educational group activities, and other structured activities
- provision of transitional housing to youths participating in peer based activities and other homeless youths with behavioral health issues;
- supportive services for housing to assist youths in securing and maintaining housing, vocational and job development and coaching, money management, and emergency financial assistance to marginally housed youths
- Behavioral health services in primary care settings, including one situated at the Juvenile Justice Center.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

1,215 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

762 System Development

453 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal

# Mental Health Services Act—Work Plan Description (EXHIBIT D)



County Name: San Francisco

Work Plan Title: 3A Adult Full Service Partnerships

**Population to Be Served**

- Adults involved in the criminal justice system
- Homeless adults
- Adults living in the Tenderloin area
- Adults cycling in and out of the behavioral health system
- Dually diagnosed adults with multiple complex issues
- Veterans

**Work Plan Description**

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

327 Total

Number of Clients By Funding Category

327 Full Service Partnerships

System Development

200 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

Total

Number of Clients By Type of Prevention

Early Intervention

Indicated/Selected

Universal

Four full service partnerships (FSPs) will continue to be funded through this work plan. Two full service partnerships serve those who are homeless or at risk of homelessness and clients who have long histories of unmet needs as evidenced by a continuous cycle of entering and exiting through several behavioral health agencies. One focuses on individuals living in the Tenderloin where most clients served by the behavioral health system are housed in single room occupancy hotels located in the area. Another full service partnership targets individual referred by the Behavioral Health Court. All of these agencies access housing through the housing service partner and at times, access emergency housing using their flexible funds. The Pathways to Discovery staff, a peer run wellness and recovery team, will work in tandem with the full service partnerships to support and assist their clients in integrating within their communities through educational, spiritual, recreational, and social activities. The demographic characteristics of each FSP's current active caseload are presented below.

		Family Services Agency FSP (n=35)	SF First FSP (n=184)	Citywide Forensics FSP (n=29)	Hyde Street FSP (n=37)
Gender	Male	19	152	26	26
	Female	16	32	3	11
Ethnicity	Black	11	51	16	14
	White	14	88	9	17
	Latino	5	32	2	0
	Asian	3	6	2	4
	Pacific Islander	0	3	0	0
	Other/Unknown	2	4	0	2
Preferred Language	English	35	151	27	37
	Spanish	0	26	1	0
	Filipino	0	0	1	0
	Cantonese	0	1	0	0
	Italian	0	1	0	0
	Other/Unknown	0	5	0	0

DMH has recently clarified the eligibility criteria for full service partners to include not only those with serious mental illness needing very intensive services but also those who are well into their recovery process but still needing less intensive assistance and continuous monitoring. In light of this new development, an additional outreach component will be added in FY09-10. The outreach services will engage adults who meet these new criteria, especially those located in the south of Market area and will reach veterans, by working in close collaboration with the VA Clinic located in close proximity. The engagement efforts will help with the transformation of the mental health system by widening the scope of clients served by these full service partnerships, educating communities about mental illness and preparing them for the larger prevention and early intervention initiatives that will soon be implemented.



County Name: San Francisco

Work Plan Title: 3 B- Adult General System Development

**Population to Be Served**

- Adults living in the Tenderloin
- Adults living in the 6<sup>th</sup> Street Corridor
- Adults in recovery
- Adult affected by violence
- Homeless or at risk of homelessness

**Work Plan Description**

Seven agencies will be funded through this work plan for:

- The Behavioral Access Center – an integrated assessment and referral to behavioral health services and an onsite pharmacy to provide medication consultation and prescription and medication management
- Three Peer Run Centers serving different neighborhoods, providing alternative therapies such as massage, art therapy, group activities, access to computers, warm line, and van service to visit families in out of city home placements
- Residential treatment to dually-diagnosed clients who do not have Medi-Cal coverage
- Supportive Services for housing to assist clients in securing and maintaining housing
- Four stabilization units to assist clients with establishing SF residency to qualify for permanent housing within the city
- Crisis and Response team to help clients and their families after a violent incident and provide assistance with accessing services and resources during their grieving process
- Four vocational rehabilitation services to provide Spanish-speaking capability, computer classes in basic Microsoft Office applications and internet and website design, basic typing skills, access to computers with specialized software for clients with learning disabilities, and supported employment services.

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served

3,039 Total

Number of Clients By Funding Category

\_\_\_\_\_ Full Service Partnerships

2,610 System Development

429 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served

\_\_\_\_\_ Total

Number of Clients By Type of Prevention

\_\_\_\_\_ Early Intervention

\_\_\_\_\_ Indicated/Selected

\_\_\_\_\_ Universal

# Mental Health Services Act—Work Plan Description (EXHIBIT D)



County Name: San Francisco

Work Plan Title: 4 A- Older Adult Full Service Partnerships

**Population to Be Served**

- Homeless or at risk of homelessness
- Older adults with hoarding and cluttering compulsions
- Older adults exiting from institutionalized care
- Dually and multiply diagnosed older adults
- Veterans

**Work Plan Description**

**COMMUNITY SERVICES AND SUPPORTS**

Annual Number of Clients to Be Served  
 185 Total  
 Number of Clients By Funding Category  
 60 Full Service Partnerships  
 System Development  
 125 Outreach & Engagement

**PREVENTION AND EARLY INTERVENTION**

Annual Number to Be Served  
 Total  
 Number of Clients By Type of Prevention  
 Early Intervention  
 Indicated/Selected  
 Universal

One full service partnership (FSP) will continue to be funded through this work plan. Older adults in this full service partnership will have access to housing through the housing service partner and to new developments funded by the MHSA Housing initiative. The demographic characteristics of the Older Adult FSP's current active caseload are presented below.

		Family Services Agency Older Adult FSP (n=33)
Gender	Male	18
	Female	15
Ethnicity	Black	7
	White	18
	Latino	2
	Asian	4
	Pacific Islander	0
	Other/Unknown	2
Preferred Language	English	21
	Filipino	1
	Other	1

DMH has recently clarified the eligibility criteria for full service partners to include not only those with serious mental illness needing very intensive services but also those who are well into their recovery process but still needing less intensive assistance and continuous monitoring. In light of this new development, an additional outreach component will be added in FY09-10. The outreach services will engage older adults who meet these new criteria, especially those in residential facilities and will reach veterans, by working in close collaboration with the VA Clinic. The engagement efforts will help with the transformation of the mental health system by widening the scope of clients served by these full service partnerships, educating communities about mental illness and preparing them for the larger prevention and early intervention initiatives that will soon be implemented.



County Name: San Francisco

Work Plan Title: 4 B- Older Adult General System Development

Population to Be Served

- Dually-diagnosed older adults
- Older adults living in the 6th Street Corridor
- Homeless or at risk of homelessness

Work Plan Description

Population to Be Served

- Four agencies will continue to be funded in FY09-10 for:
- Two peer based centers to provide a safe haven and low threshold space for older adults to interact with their peers, engage in therapeutic, holistic, and recreational activities, participate in volunteer or paid part time activities/employment, and organize socialization and self-help group activities
  - Supportive services for housing to help older adults maintain their housing and sustain independent living within the community through regular home visits by a psychiatric nurse practitioner
  - Integration of behavioral health services at the Tom Waddell Health Center located in the Civic Center area of the city, which is in close proximity to both peer based centers.

COMMUNITY SERVICES AND SUPPORTS

Annual Number of Clients to Be Served

907 Total

Number of Clients By Funding Category

Full Service Partnerships

645 System Development

262 Outreach & Engagement

PREVENTION AND EARLY INTERVENTION

Annual Number to Be Served

Total

Number of Clients By Type of Prevention

Early Intervention

Indicated/Selected

Universal

# EXHIBIT E

## FY 2009/10 Mental Health Services Act Summary Funding Request

County: San Francisco

Date: 2/9/2009

	MHS Component				
	CSS	CFTN	WET	PEI	Inn
<b>A. FY 2009/10 Planning Estimates</b>					
1. Published Planning Estimate <sup>a/</sup>	\$16,467,000		\$2,026,200	\$6,483,800	
2. Transfers <sup>b/</sup>		\$0	\$0		
3. Adjusted Planning Estimates	\$16,467,000	\$0	\$2,026,200	\$6,483,800	\$0
<b>B. FY 2009/10 Funding Request</b>					
1. Required Funding in FY 2009/10 <sup>c/</sup>	\$19,792,503		\$854,440		
2. Net Available Unspent Funds					
a. Unspent FY 2007/08 Funds <sup>d/</sup>	\$4,364,878				
b. Adjustment for FY 2008/09 <sup>e/</sup>	\$1,039,375				
c. Total Net Available Unspent Funds	\$3,325,503	\$0	\$0	\$0	\$0
<b>3. Total FY 2009/10 Funding Request</b>	<b>\$16,467,000</b>	<b>\$0</b>	<b>\$854,440</b>	<b>\$0</b>	<b>\$0</b>
<b>C. Funding</b>					
1. Unapproved FY 06/07 Planning Estimates					
2. Unapproved FY 07/08 Planning Estimates	\$0				
3. Unapproved FY 08/09 Planning Estimates	\$0		\$854,440		
4. Unapproved FY 09/10 Planning Estimates	\$16,467,000				
<b>5. Total Funding<sup>f/</sup></b>	<b>\$16,467,000</b>	<b>\$0</b>	<b>\$854,440</b>	<b>\$0</b>	<b>\$0</b>

a/ Published in DMH Information Notices

b/ CSS funds may be transferred to CFTN, WET and Prudent Reserve up to the limits specified in WIC 5892b.

c/ From Total Required Funding line of Exhibit E for each component

d/ From FY 2007/08 MHS Revenue and Expenditure Report

e/ Adjustments for FY 2008/09 additional expenditures and/or lower revenues than budgeted

f/ Must equal line B.3., Total FY 2009/10 Funding Request, for each component

# EXHIBIT E-1

## FY 2009/10 Mental Health Services Act Community Services and Supports Funding Request

County: San Francisco

Date: 3/10/2009

CSS Work Plans				FY 09/10 Required MHSA Funding	Estimated MHSA Funds by Service Category				Estimated MHSA Funds by Age Group			
No.	Name	New (N)/ Approved Existing (E)			Full Service Partnerships (FSP)	System Development	Outreach and Engagement*	MHSA Housing Program	Children, Youth, and Their Families	Transition Age Youth	Adult	Older Adult
1.	1 Children Youth & Families	E	\$3,045,994	\$1,999,837	\$1,046,157			\$3,045,994				
2.	2 Transitional Age Youth	E	\$3,234,068	\$2,340,620	\$893,448				\$3,234,068			
3.	3 Adult	E	\$7,483,875	\$4,890,616	\$2,593,259					\$7,483,875		
4.	4 Older Adult	E	\$2,193,040	\$1,197,860	\$995,180						\$2,193,040	
5.												
6.												
7.												
8.												
9.												
10.												
11.												
12.												
13.												
14.												
15.												
16.	Subtotal: Work Plans <sup>a/</sup>			\$15,956,977	\$10,428,933	\$5,528,044	\$0	\$0	\$3,045,994	\$3,234,068	\$7,483,875	\$2,193,040
17.	Plus County Administration			\$2,463,030								
18.	Plus Optional 10% Operating Reserve			\$1,372,496								
19.	Plus CSS Prudent Reserve <sup>b/</sup>			\$0								
20.	Total MHSA Funds Required for CSS			\$19,792,503								

a/ Majority of funds must be directed towards FSPs (Title 9, California Code of Regulations Section 3620(c)). Percent of Funds directed towards FSPs=

65.36%

b/Transfers to Capital Facilities and Technological Needs, Workforce Education and Training, and Prudent Reserve are subject to limitations of WIC 5892b.

## EXHIBIT E-2

### FY 2009/10 Mental Health Services Act Workforce Education and Training Funding Request

County: San Francisco

Date: 2/9/2009

Workforce Training and Education Work Plans				FY 09/10 Required MHSA Funding	Estimated Funds Requested by Funding Category				
No.	Name	New (N)/ Approved Existing (E)			Workforce Staffing Support	Training and Technical Assistance	Mental Health Career Pathway	Residency and Internship	Financial Incentive
1.	8	Internships for Hard-To-Fill Positions and Underrepresented Populations	E	\$654,743				\$654,743	
2.	4	Summer Bridge Program	E	\$33,636			\$33,636		
3.	1	Workforce Staffing & Support	E	\$166,062	\$166,062				
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19.									
20.									
21.									
22.									
23.									
24.									
25.									
26.	Subtotal: Work Plans			\$854,441	\$166,062	\$0	\$33,636	\$654,743	\$0
27.	Plus County Administration								
28.	Plus Optional 10% Operating Reserve								
29.	Total MHSA Funds Required for Workforce Education and Training			\$854,441					