

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: San Joaquin	Fiscal Year: 2006/07	Program Work Plan Name: Housing Empowerment and Employment Recovery Services
Program Work Plan #: SD-3		Estimated Start Date: July 1, 2006
<p>Description of Program:  <i>Describe how this program will help advance the goals of the Mental Health Services Act</i></p>	<p>For people recovering from symptoms of severe mental illness, a home and a job are the cornerstones of the Recovery Vision. The Housing Empowerment and Employment Recovery Services program proposes specific services that will increase stable, safe, affordable, permanent housing. Through employment services, individual goals for security and personal identity will be identified and supported.</p> <p>A home can be a space to live in dignity and a way to move toward recovery. Housing is the foundation of community care. While stable housing does not directly result in recovery, it is a necessary element that increases the effectiveness of all other mental health and support service interventions. The Housing Empowerment Service goal is to increase the number of days of safe and affordable housing for each participating consumer. Housing is repeatedly placed high in the priorities articulated by people with symptoms of mental illness, family members, community based organizations, and mental health staff, and most recently expressed at the Mental Health Services Act's Public Hearings, Workgroups and Consensus Meetings throughout San Joaquin County.</p> <p>A second cornerstone of a Recovery Vision is employment and/ or other focused daily activities. The primary goal of Recovery Employment Services (RES) is to empower consumers to identify employment as a viable goal and to facilitate the process of choosing, getting and keeping a job. The first steps toward these goals may include developing planned activities and/or employment day goals for each participating consumer. Employment interventions will result in easy access and rapid placement, with the incorporation of psychosocial rehabilitation principles into employment services. This focus is an assurance of the integration of an individualized support plan to sustain employment activities and reduce losses of resources and personal identity.</p>	

**Enhancement of the Full Service Partnership through the Housing and Employment Services:**

The Community Based Housing and Employment Specialist Teams will be developed within non-profit organizations specializing in housing and employment. A non-profit program specializing in independent living skills activities will provide support to both of these teams. The formation of these teams will enhance and develop a system wide opportunity for housing and employment that will be the cornerstones of recovery for those enrolled in San Joaquin County's Full Service Partnerships. Consumer and family input and employment opportunities will be identified within the community-based organizations. This involvement will ensure ongoing focus on the daily housing and employment needs of the population and communities served. These community-based housing and employment teams will expand the Adult System of Care. San Joaquin County will utilize experiences and promising practices gained by participating in demonstration grant funded Dual Diagnosis Housing Project awarded by PATH (Federal Projects for Assistance in Transition from Homelessness) funding and SHIA grant (Supportive Housing Initiation Assistance) housing project funded by State General Funds, that have been completed in this county during the past 4 years. Outcomes from these programs illustrate promising practice interventions, including use of Resident Counsel, activities coordination, Harm Reduction, Motivational Interviewing, and SAMHSA Tool Kits for both Housing and Employment. An onsite consumer housing recovery coach and a central drop in apartment in a scattered site situation provided needed supports and direction. Services intervention planning and outcomes will be based on individualized wellness plans, utilizing the WRAP (wellness recovery action intervention) to partner with the consumers in developing their steps to success for training, education, and employment and housing that is tailored to their level functioning, desires and hopes.

Linkage for mental health service prior to need for crisis or hospitalization services will be available through the current systems of care and the proposed Community Behavioral Intervention Program and the Full Service Partnership recovery teams. The current

	<p>collaboration and linkages with various housing organizations such as the Stockton Shelter for the Homeless, Salvation Army, St. Mary's Dinning Hall, San Joaquin County Community Development Department, Housing Authority, and St. Mary's Dinning Hall will be strengthened by adding specific outcome measures developed by MHSA outcome measures and related to specific promising practice interventions.</p> <p>Partnerships with the State Department of Rehabilitation, along with the State supported WorkNet Program, San Joaquin County Human Resources and other employers of this area will continue to provide additional opportunities toward training and employment. Linkages are also available to the Gipson Center, a socialization and employment readiness contract program.</p>
<p>Priority Population: <i>Describe the situational characteristics of the priority population</i></p>	<p>The priority population for this program will be 60 individuals for housing and 60 individual for employment identified by the Full Service Partnerships, who experience symptoms of serve mental illness with identified needs for stabilized housing and employment, education and training. The numbers served will be selected from the total number of enrolled adult or older adult members, 255. This population may experience co-occurring alcohol and substance abuse issues and / or medical health challenges. The population identified for these services are among the un-served, underserved and inappropriately served in San Joaquin County and focusing on Latino, African-American, Native American, Muslim/Middle Eastern, and Southeast Asian along with those in each unserved population who identify with diverse life styles and sexual preferences.</p>

Describe strategies to be used, Funding Types requested (check all that apply), Age Groups to be served (check all that apply)	Fund Type			Age Group			
	FS P	Sy s De v	O E	CY	TA Y	A	OA
<b>Implement Housing Empowerment Services - C.H.O.I.C.E. – Creating Housing Opportunities In a Community Environment services with Housing Specialist Team and RES- Recovery Employment Services Team</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recruitment and Employment of diverse population with emphasis on the Un-served community and consumer and family members.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Enhance Education and Training in the Recovery and Empowerment –including Motivational Interviewing; Wrap (Wellness Recovery Action Plan) development; Harm Reduction; Core Gift identification; SAMHSA Tool kits for housing and employment.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Develop performance outcome infrastructure to monitor and evaluate the program status and progress	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**2) Please describe in detail the proposed program for which you are requesting MHSA funding and how that program advances the goals of the MHSA.**

Enhancement of the FSP through the Housing Coordination Services:

**C.H.O.I.C.E. – Creating Housing Opportunities In a Community Environment**

Background: Creating Housing Opportunities in Community Environments (CHOICE) is an effort to assist consumers in locating and maintaining permanent housing as a cornerstone to their recovery process. Specific housing assessments will be conducted to assess for rental history, financial stability, stages of recovery as defined by Porchansky, personal preferences such as totally independent to shared or supported living environments, and cultural needs to assist in developing “community” for the consumer. The psychologists, Dr. Porchansky and Dr. DiClemente, are well-know for their work in the field of recovery and development of ‘Service Outreach and Recovery’ program. The community- based organization network developed in the planning of San Joaquin County’s MHSA proposals will provide information and support to the housing and employment coordinators in locating and dedicating housing and employment in neighborhoods that will foster community integration and recovery.

**Component A:**

Tasks: Identify landlords already willing to rent to mental health consumers and provide incentives to expand the number of units available to the target population. In addition, identify landlords and management firms who are hesitant about providing space to mental health consumers and use income levels or other criteria to deny them housing opportunities. Engage this second set of landlords in attempt to expand the available pool of housing opportunities.

Staffing: Housing Specialist and one part-time consumer Housing Recovery Coach (HRC)

**Component B:**

Tasks: Provide support services to landlords, along with mitigation of possible financial loss due to unpaid rent or damages (limited to deposit + \$500) to encourage additional housing opportunities for consumers whose background and prior housing record present a higher than usual threat to the property itself or to the health, safety, or quiet enjoyment of their residence to others. Elements would include guarantee of consumer rent payment, additional deposits (repayable by consumers through scheduled payments), regular site visits by program staff, assurance of professional mental health intervention as required, and assistance in relocation of consumers as required.

Staffing: Housing Specialist and three part-time consumers Housing Recovery Coaches (HRC)

Component C:

Tasks: Provide move-in assistance for consumers whose background and prior housing record present a higher than usual threat to the property itself or to the health, safety, or quiet enjoyment of their residence to others. Elements would include obtaining basic furnishings, moving consumer-owned furniture, initial rent deposit (to be repaid), initial month rent (to be repaid), and essential utility deposits.

Staffing: Housing Specialist and consumer team (assumes Component A and/or B in place).

Component D:

Tasks: in conjunction with Full Service Partnership providers, provide ongoing housing opportunities (as described below) to participating consumers.

A continuum of housing opportunities presents the best strategy to address the housing needs of consumers. Individual housing assessments, in coordination with service partnerships, will serve as the basis for providing housing that provides the highest practical level of community integration and recovery. Housing options, all with appropriate support services, fall into three main categories: short-term crisis housing, transitional housing, and permanent housing.

### **Short –term or crisis housing**

Experience has shown that there are instances when a consumer's immediate need will best be served through housing that is available for short periods of time (from a few days to two months) during periods of crisis, emergency or assessment of needs. The most effective method of providing crisis housing is through the master leasing of a single location, with permanent on-site housing staffing. The cost of a single site that would provide housing for up to six people at a time, including on-site staff, is approximately \$40,000 per year. This beginning stage of recovery for housing may involve daily support of Full Service Partner outreach workers and recovery coaches. It may also involve Wraparound services by Community Behavioral Intervention Specialists. The need for structure and supervision will be determined by individual assessments.

An additional alternative is to master lease single room occupancy units at various locations throughout the County. While lower in cost, the delivery of support services to consumers with crisis situation can be compromised. The budget for each unit would be approximately \$4,800 per year, with no staffing.

A third option is to provide vouchers to local motels for crisis situations. The cost for vouchers is \$300 per week per unit.

### **Transitional housing**

The concept of transitional housing is to provide a combination of temporary housing (up to two years in duration) and intensive supportive services to consumers who require assistance in reaching a level of recovery that is conducive to fully independent living (with or without supportive services). Transitional housing models include a single site for all participants, shared units (more than one person per bedroom) at either a single site or in multiple sites, shared housing (one person per bedroom) at scattered sites, and single units at shared sites. Consumers would be expected to pay at least thirty percent of income toward housing costs; cost of utilities is usually a tenant cost. Onsite staff would only be used in a large (ten units or more), single site project.

Single site: Twenty, one-bedroom units, tenant responsible for some utilities, with on-site staff; approximate annual budget \$140,000.

Scattered site, single apartments/houses: Available for families and single individuals, tenant responsible for utilities, up to thirty percent of income as rent share. Estimated average cost per household assisted: \$6,500 per year (includes housing-related staff)

Shared housing (apartments): Ten two-bedroom apartments, two persons per apartment, tenant rent share includes utilities, up to thirty percent of income as rent share. Estimated annual budget: \$110,000.

Shared housing (single family houses): Three and four-bedroom houses would be rented throughout the community; the number of consumers served would equal the number of total bedrooms leased. Consumers would have their own private room but would be required to share common areas. Assuming a client rent share not exceeding thirty percent of income, the annual budget of each house would be approximately \$40,000 per year (includes cost of utilities and housing related staff), however economies of scale could reduce the cost to approximately \$30,000 per year if program operated eight houses

### **Permanent housing**

Permanent housing is defined as housing available to a consumer for an undefined, unlimited period of time, absent major disruptions or failure to pay rent. Options related to permanent housing include variations on descriptions and the following:

General Rental Assistance

This would consist of rental subsidies not necessarily tied to any specific program component or recovery plan. Unless the support was somehow time-limited, the number of people receiving assistance would be relatively low. On-going subsidies without expectations tend to foster continued dependence. Subsidies could be on a scattered site basis or through master lease arrangements. Agreed upon amounts of rental subsidy would be paid to landlords for identified consumers. Cost of utilities would be the responsibility of the consumer. The amount of subsidy would be tied to both income and household size. The total budget for this effort would depend on the level of subsidy and the number of persons targeted for assistance. Estimated average cost per household assisted is between \$2,500 and \$5,000 per year (includes housing related staff)

S.P.I.C.E. II – Supporting People in a Community Environment II (shared housing)

Three and four-bedroom houses would be rented throughout the community; the number of consumers served would equal the number of total bedrooms leased. Consumers would have their own private room but would be required to share common areas. Assuming a client rent share not exceeding thirty percent of income, the annual budget of each house would be approximately \$40,000 per year (includes cost of utilities and housing related staff); however economies of scale could reduce the cost to approximately \$30,000 per year if program operated eight houses.

**Staffing for Housing Empowerment Services (C.H.O.I C.E)**

1 FTE	Housing Specialist	CBO
3 Part time	Housing Recovery Coaches (HRC)	CBO
As needed 24-hour Wraparound	Provided by Full-Service Partner Staff	

**The Enhancement of the Full Service Partnership through Recovery Employment Services:**

- A. Individuals in recovery from symptoms of mental illness who want to work will have simple and rapid access to employment, volunteer opportunities, and linkages to education and support.

Assessment: An employment readiness assessment tool; recovery plan indicating current barriers to employment, including recurring symptoms of mental illness or substance abuse and the

consumer's assessment of the menu of employment options will begin the process. More specifically, identification of strengths, skills and core gifts will be addressed. Core gift identification has been an important part of the promising practices utilized by San Joaquin County's AB2034 program. This assessment will be conducted in a process utilizing employment specialists, clinical team recommendations, and the consumer recovery stages and goals.

The menu of options and beginning places will include:

Job placement and referral will be provided through linkage to employment opportunities in the community. Employment specialists will provide linkage and or preparation as indicated to utilize local WorkNet Program as well as the large San Joaquin County Human Resources recruitment programs.

Resume development and interviewing role-play will be provided as indicated.

Resources are identified to assist with clothing suitable for employment if this is an identified need.

Special vouchers will be provided by the Full Service Partnerships for the acquisition of needed tools or equipment where these are a requirement.

Short-term enhancement of skills and experiences by linkage to education/or training, vocational or certificate programs leading to job placement. Fees for enrollment and materials will be provided by Full Service Partnerships.

Long -term education linkage through adult schools, community college and university career counseling will be provided.

Direct linkage with disabled student service may assist consumers in education placement testing and support services such as tutoring and mentoring. Applications for tuition assistance and student loans are also available through this service or linkage is provided.

Immediate placement in volunteer positions to encourage confidence and skill building along with experience to be listed on job applications, illness management skill development groups focused on accomplishment of job related activities, identification of triggers and risk factors to maintain in a job setting. Employment support coaches will assist in identifying and reinforcing success while providing immediate assistance for redirecting or correcting self-defeating behaviors and beliefs.

Sheltered work settings with employment support coaches (consumer employees) to provide ongoing feedback for success

Stipends and incentives will be provided by Full Service Partnerships on the recommendations of the Recovery Employment Services team.

B. Individuals in recovery who have no recent work experience may exhibit fear. Support will be provided by the employment recovery coaches who will be responsive to consumers' need for hands-on assistance and for clarification of the specific job's expectations. Individuals with recent success in job functioning may need only brief support in re-identification with learned worker roles and attitudes.

C. Individuals may be linked to individual and group therapy utilizing Cognitive Behavioral Therapy interventions for identification of attitudes, beliefs and behaviors that will promote long-term employment and skill to reduce those that are barriers. Emotional regulation, problem solving and an observing self are key skills in gaining and maintaining employment.

D. The proposed Community Behavioral Intervention Service system development program will provide behavioral specialist interventions as needed to identify and enhance behaviors needed to secure and maintain employment while reducing behaviors which create barriers.

E. Community-based organizations will be a key in locating and supporting employment opportunities within community businesses considering a cultural match for each consumer. The employment team will meet with the members of the proposed Consortium in developing linkages in each community for employment opportunities.

F. Referrals: Referrals for the Recovery Employment Service (RES) will originate from the Full Service Partnerships and the clinical staff currently providing mental health services for transition age youth, adults and older adults in the system of care. Employment /activity referral will be based on consumer's long and short-term goals. A specific emphasis will be placed on the development of an employment-focused WRAP plan to identify client goals, along with strengths and barriers to be addressed.

## Staffing for Employment Recovery Services (ERS)

1 FTE	Employment Specialist	CBO
.5 FTE	Clinician	CBO
.5 FTE	Skills & Education Facilitator	CBO
3 Part Time	Employment Recovery Coaches	CBO
As needed 24-hour Wraparound	Provided by Full-Service Partner Staff	

**Training and recruiting staff** –The process for linking and preparing recovering consumers for housing and employment will begin with the recruitment and training of a diverse population identified by community-based organizations and those consumers currently active in the San Joaquin County Power and Support recovery team. The diversity represented by community-based organizations participating in the San Joaquin County Consortium Program will provide a flow of potential housing, employees and employers who have cultural match to the un-served as well as the interest in providing culturally appropriate job training. All housing and employment staff will be trained and mentored in the utilization of Core Gift and strengths identification, Harm Reduction in housing and Employment, Motivational Interviewing, and the SAMHSA Tool Kits for housing and employment.

The Community Colleges and Universities in the area will be encouraged to utilize the mental health continuum as field placement experience for professional, para-professional, medical, and clerical career paths.

In order to build capacity of available staff who are highly specialized in housing for people in mental health recovery, the following strategies will be utilized: by training and recruiting a diverse population to become mental health professionals with a knowledge of the housing needs and the use of housing as a central treatment component; by training staff in core services to be culturally competent; by ensuring that training in ethnicity, recovery, and empowerment as part of all professional qualifying requirement at behavioral health; and by employing culturally competent staff, interpreters and advocates in the area of housing network and resources. Staff will be trained to utilize harm reduction, motivational interviews, and the TIP model of services as core treatment strategies. Consumers and staff will be trained to utilize Wellness Recovery Action plans as a way to identify behavior patterns of both staff and consumers that will facilitate stabilized housing.

**Program Goals:**

To provide housing needs and recovery stage-based assessment for 60 consumers enrolled in FSP's

To provide employment needs and recovery stage-based assessment for 60 consumers enrolled in Full Service Partnerships

To provide to each of 20 consumers stabilized housing, with no homeless days, for at least six months starting from the date of entering housing

To provide 15 consumers with permanent housing within one year of beginning the housing empowerment CHOICES program.

To provide 20 consumers with an increase of 35% in the number of education or employment days based on the previous years assessment.

**3) Describe any housing or employment services to be provided.**

Please refer to question #2 above.

**4) Please provide the average cost for each Full Service Partnership participant including all fund types and fund sources for each Full Service Partnership proposed program.**

This is a system development project that will support consumers enrolled in the Full Service Partnerships.

The average housing cost to each consumer utilizing the CHOICES Program will be estimated at \$1,700 to provide each Full Service Partner consumer with a range of housing needs. This cost includes maintenance of housing supplies staffing for assessment, and support services including brief support for utilities.

The average employment opportunity cost for each consumer of a Full Service Partnership is \$500.00

**5) Describe how the proposed program will advance the goals of recovery for adults and older adults or resiliency for children and youth. Explain how you will ensure the values of recovery and resiliency are promoted and continually reinforced.**

Recovery goals for adults will advance based on a joint assessment and plan developed by the housing and employment staff and the enrolled consumers. The focus of consumer responsibility for identifying recovery stages and realistic housing and employment will be based on daily living skills, need for support, management of illness, and financial situation with room to grow in resiliency. Each successful day of housing and/or employment will provide the consumer, as well as the staff, with evidence of success.

By living and working within a community setting, consumers will identify themselves as participating and contributing members.

**6) If expanding an existing program or strategy, please describe your existing program and how that will change under this proposal.**

This is not an expansion program.

**7) Describe which services and supports clients and/or family members will provide. Indicate whether clients and/or families will actually run the service or if they are participating as a part of a service program, team or other entity.**

All program elements contain provisions for employment of consumers and family members from the cultural community as an integral feature of program service delivery.

In this program, the Consumer Housing and Employments Specialist and Recovery Coaches will be involved in peer support and facilitating self-help skills of daily living activities; and support and advocacy in maintaining housing and employment at the consumers' highest functioning levels. Clinical staff assessments will provide input to the housing and employment beginning, an ongoing assessment process. Consumers will be provided information concerning the overall assessment in order to assist them in selecting the best starting place for their housing and employment recovery.

**8) Describe in detail collaboration strategies with other stakeholders that have been developed or will be implemented for this program and priority population, including those with tribal organizations. Explain how they will help improve system services and outcomes for individuals.**

Mental Health Collaborations include the consortium of community-based programs. The proposed San Joaquin County Behavioral Health Services MHS-funded Community Consortium will be comprised of community-based organizations (CBO), consumers and family members, social service organizations, community members, primary care providers, tribal and faith-based organizations. The Consortium is a means to continue the inclusiveness and transparency that was started by the MHS process. Additionally, the Consortium will assist Behavioral Health Services in rolling out the approved mental health programs and to evaluate evidence-based practices. The Consortium provides a means to continue the partnership and trust that has developed. Educational efforts of the Consortium will focus on program orientation, service delivery, with a targeted emphasis on the un-served and underserved populations. Within some cultural groups a word does not exist in their language to explain “mental illness.” Stigma is present and the fear of being labeled “crazy” has kept individuals from accessing services. The Consortium will provide education and cross training on mental illness emphasizing wellness and recovery. Community strengths and resiliency will be identified and supported by all efforts of the Consortium.

The goal of the Consortium will be to reduce cultural, racial, ethnic and linguistic disparities in the mental health delivery system. To assist in achieving these goals, a full-time Ethnic Services Manager/Cultural Competency (ESM/CC) Coordinator will provide the staff infrastructure to address cultural, racial, ethnic and linguistic disparities within the mental health system. The Consortium is ways to continue community collaboration resulting in improved service delivery for all consumers and family members.

In San Joaquin County, Behavioral Health Services (BHS) will work closely with the Three River Lodges, a Native American Substance Abuse Treatment programs located in Manteca, California. In partnership with the organization, BHS will provide outreach and engagement services and through the consortium relationships. This CBO will be integrated with the mental health continuum of care. As a result, San Joaquin County Behavioral Health Service will improve system of services and outcomes for mentally ill persons.

**9) Discuss how the chosen program/strategies will be culturally competent and meet the needs of culturally and linguistically diverse communities. Describe how your program and strategies address the ethnic disparities identified in Part II Section II of this plan and what specific strategies will be used to meet their needs.**

Culture and values influence views of mental health and wellness. It is the mission of this program to enhance the commitment of cultural competency to a comprehensive county mental health plan that strives to meet the needs of culturally and linguistically diverse communities. The population identified for this service is among the unserved, underserved and inappropriately served in San Joaquin County, with focus on the Latino, African-American, Native American, Muslim, GLBT, and Southeast Asian communities. This program service delivery system will empower consumers and communities in their mental health care decision-making as it relates to the continuum of safe and affordable housing resources. Furthermore, this program will offer choices to consumers to meet diverse housing needs of the mental health communities with the core values and foundation being culturally competent in meeting the needs unserved, underserved and inappropriately served community.

**10) Describe how services will be provided in a manner that is sensitive to sexual orientation, gender-sensitive and reflect the differing psychologies and needs of women and men, boys and girls.**

This housing and employment program underscores the acceptance by competency and sensitivity to sexual orientations, gender differences, and preferences by alleviating the myths and stereotypes of the consumers' diverse lifestyles. In addition, the program will respect individual differences and will provide choices to enhance therapeutic alliances with the diverse providers and consumers' with diverse life styles and sexual preferences. Finally, the mission of this program is to augment, facilitate, and advocate the values of diversity.

The housing and employment staff will attend the Lesbian, Gay, Bi-sexual and Transgender training regularly in partnerships with San Joaquin AIDS Foundation.

Emphasis on gender awareness and differing psychological frameworks on the needs of women and men, boys, and girls will be considered in providing services. The San Joaquin County Women's Center staff will participate in trainings related to women's issues and concerns in housing and employment. Furthermore, the problems related to the primary caregiver in the family, need for respite care and transportation to benefit from services, childcare, women's health issues and domestic violence will be addressed, with the focus on transition youth, trauma in adults, sexual harassment and partner abuse.

**11) Describe how services will be used to meet the service needs for individuals residing out-of-county.**

Community Behavioral Intervention Services will provide assessments to consumers in out-of-county facilities as a prelude to their returning to San Joaquin County and receiving needed supportive services to live in the least restrictive setting in the community.

**12) If your county has selected one or more strategies to implement with MHSA funds that are not listed in Section IV, please describe those strategies in detail including how they are transformational and how they will promote the goals of the MHSA.**

Not applicable

**13) Please provide a timeline for this work plan, including all critical implementation dates.**

This timeline begins with approval by DMH:

Month 1 & 2:

- RFP to select provider to operate program
- Selection of Provider

Month 3:

- Program Development
- Staff hired and Trained
- Equipment Purchased

Month 4:

- Program Begins

**4) Exhibit 5: Budget and Staffing Detail Worksheets**

Exhibits 5a and 5b for each fiscal year are presented on the following pages.

All of this budget will be allocated to the FSP's

**EXHIBIT 5a--Mental Health Services Act Community Services and Supports Budget Worksheet**

County(ies): San Joaquin Fiscal Year: 2005-06  
 Program Workplan # SD-3 Date: 3/6/06  
 Program Workplan Name Housing Empowerment & Employment Recovery Services Page 1 of 1  
 Type of Funding 2. System Development Months of Operation 1  
 Proposed Total Client Capacity of Program/Service: \_\_\_\_\_ New Program/Service or Expansion New  
 Existing Client Capacity of Program/Service: \_\_\_\_\_ Prepared by: Bruce Mahan  
 Client Capacity of Program/Service Expanded through MHSA: 0 Telephone Number: 209 468-9815

	County Mental Health Department	Other Governmental Agencies	Community Mental Health Contract Providers	Total
<b>A. Expenditures</b>				
<b>1. Client, Family Member and Caregiver Support Expenditures</b>				
a. Clothing, Food and Hygiene				\$0
b. Travel and Transportation				\$0
c. Housing <span style="margin-left: 20px;">Housing allocated to Full Service Partnerships</span>				\$0
i. Master Leases				\$0
ii. Subsidies				\$0
iii. Vouchers				\$0
iv. Other Housing				\$0
d. Employment and Education Supports-allocated to Full Service Partnerships			\$0	\$0
e. Other Support Expenditures (provide description in budget narrative)				\$0
f. Total Support Expenditures	\$0	\$0	\$0	\$0
<b>2. Personnel Expenditures</b>				
a. Current Existing Personnel Expenditures (from Staffing Detail)				\$0
b. New Additional Personnel Expenditures (from Staffing Detail)				\$0
c. Employee Benefits	\$0			\$0
d. Total Personnel Expenditures	\$0	\$0	\$0	\$0
<b>3. Operating Expenditures</b>				
a. Professional Services				\$0
b. Translation and Interpreter Services				\$0
c. Travel and Transportation				\$0
d. General Office Expenditures				\$0
e. Rent, Utilities and Equipment				\$0
f. Medication and Medical Supports				\$0
g. Other Operating Expenses (provide description in budget narrative)				\$0
h. Total Operating Expenditures	\$0	\$0	\$0	\$0
<b>4. Program Management</b>				
a. Existing Program Management				\$0
b. New Program Management				\$0
c. Total Program Management		\$0	\$0	\$0
<b>5. Estimated Total Expenditures when service provider is not known</b>	\$0			\$0
<b>6. Total Proposed Program Budget</b>	\$0	\$0	\$0	\$0
<b>B. Revenues</b>				
<b>1. Existing Revenues</b>				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. Realignment				\$0
d. State General Funds				\$0
e. County Funds				\$0
f. Grants				\$0
g. Other Revenue				\$0
h. Total Existing Revenues	\$0	\$0	\$0	\$0
<b>2. New Revenues</b>				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. State General Funds				\$0
d. Other Revenue				\$0
e. Total New Revenue	\$0	\$0	\$0	\$0
<b>3. Total Revenues</b>	\$0	\$0	\$0	\$0
<b>C. One-Time CSS Funding Expenditures</b>	\$4,700			\$4,700
<b>D. Total Funding Requirements</b>	\$4,700	\$0	\$0	\$4,700
<b>E. Percent of Total Funding Requirements for Full Service Partnerships</b>				

**EXHIBIT 5 b--Mental Health Services Act Community Services and Supports Staffing Detail Worksheet**

County(ies): San Joaquin Fiscal Year: 2005-06  
 Program Workplan # SD-3 Date: 3/6/06  
 Program Workplan Name Housing Empowerment & Employment Recovery Services Page 1 of 1  
 Type of Funding 2. System Development Months of Operation 1  
 Proposed Total Client Capacity of Program/Service: 0 New Program/Service or Expansion New  
 Existing Client Capacity of Program/Service: 0 Prepared by: Bruce Mahan  
 Client Capacity of Program/Service Expanded through MHSA: 0 Telephone Number: 209 468-9815

Classification	Function	Client, FM & CG FTEs <sup>a/</sup>	Total Number of FTEs	Salary, Wages and Overtime per FTE <sup>b/</sup>	Total Salaries, Wages and Overtime
<b>A. Current Existing Positions</b>					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
		<b>Total Current Existing Positions</b>	0.00	0.00	
<b>B. New Additional Positions</b>				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
				\$0	\$0
		<b>Total New Additional Positions</b>	0.00	0.00	
<b>C. Total Program Positions</b>		0.00	0.00		\$0

a/ Enter the number of FTE positions that will be staffed with clients, family members or caregivers.  
 b/ Include any bi-lingual pay supplements (if applicable). Round each amount to the nearest whole dollar.

**EXHIBIT 5a--Mental Health Services Act Community Services and Supports Budget Worksheet**

County(ies): San Joaquin Fiscal Year: 2006-07  
 Program Workplan # SD-3 Date: 3/6/06  
 Program Workplan Name Housing Empowerment & Employment Recovery Services Page 1 of 1  
 Type of Funding 2. System Development Months of Operation 12  
 Proposed Total Client Capacity of Program/Service: 60 New Program/Service or Expansion New  
 Existing Client Capacity of Program/Service: \_\_\_\_\_ Prepared by: Bruce Mahan  
 Client Capacity of Program/Service Expanded through MHSA: 60 Telephone Number: 209 468-9815

	County Mental Health Department	Other Governmental Agencies	Community Mental Health Contract Providers	Total
<b>A. Expenditures</b>				
<b>1. Client, Family Member and Caregiver Support Expenditures</b>				
a. Clothing, Food and Hygiene				\$0
b. Travel and Transportation				\$0
c. Housing      Housing allocated to Full Service Partnerships			-\$416,500	-\$416,500
i. Master Leases				\$0
ii. Subsidies				\$0
iii. Vouchers				\$0
iv. Other Housing				\$0
d. Employment and Education Supports-allocated to Full Service Partnerships			-\$142,000	-\$142,000
e. Other Support Expenditures (provide description in budget narrative)				\$0
f. Total Support Expenditures	\$0	\$0	-\$558,500	-\$558,500
<b>2. Personnel Expenditures</b>				
a. Current Existing Personnel Expenditures (from Staffing Detail)				\$0
b. New Additional Personnel Expenditures (from Staffing Detail)				\$0
c. Employee Benefits	\$0			\$0
d. Total Personnel Expenditures	\$0	\$0	\$0	\$0
<b>3. Operating Expenditures</b>				
a. Professional Services				\$0
b. Translation and Interpreter Services				\$0
c. Travel and Transportation				\$0
d. General Office Expenditures				\$0
e. Rent, Utilities and Equipment				\$0
f. Medication and Medical Supports				\$0
g. Other Operating Expenses (provide description in budget narrative)				\$0
h. Total Operating Expenditures	\$0	\$0	\$0	\$0
<b>4. Program Management</b>				
a. Existing Program Management				\$0
b. New Program Management				\$0
c. Total Program Management		\$0	\$0	\$0
<b>5. Estimated Total Expenditures when service provider is not known</b>	\$558,500			\$558,500
<b>6. Total Proposed Program Budget</b>	\$558,500	\$0	-\$558,500	\$0
<b>B. Revenues</b>				
<b>1. Existing Revenues</b>				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. Realignment				\$0
d. State General Funds				\$0
e. County Funds				\$0
f. Grants				\$0
g. Other Revenue				\$0
h. Total Existing Revenues	\$0	\$0	\$0	\$0
<b>2. New Revenues</b>				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. State General Funds				\$0
d. Other Revenue				\$0
e. Total New Revenue	\$0	\$0	\$0	\$0
<b>3. Total Revenues</b>	\$0	\$0	\$0	\$0
<b>C. One-Time CSS Funding Expenditures</b>	\$0			\$0
<b>D. Total Funding Requirements</b>	\$558,500	\$0	-\$558,500	\$0
<b>E. Percent of Total Funding Requirements for Full Service Partnerships</b>				

**EXHIBIT 5 b--Mental Health Services Act Community Services and Supports Staffing Detail Worksheet**

County(ies): San Joaquin Fiscal Year: 2006-07  
 Program Workplan # SD-3 Date: 3/6/06  
 Program Workplan Name Housing Empowerment & Employment Recovery Services  
 Type of Funding 2. System Development Months of Operation 12  
 Proposed Total Client Capacity of Program/Service: 60 New Program/Service or Expansion New  
 Existing Client Capacity of Program/Service: 0 Prepared by: Bruce Mahan  
 Client Capacity of Program/Service Expanded through MHSA: 60 Telephone Number: 209 468-9815

Classification	Function	Client, FM & CG FTEs <sup>a/</sup>	Total Number of FTEs	Salary, Wages and Overtime per FTE <sup>b/</sup>	Total Salaries, Wages and Overtime
<b>A. Current Existing Positions</b>					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
	<b>Total Current Existing Positions</b>	0.00	0.00		\$0
<b>B. New Additional Positions</b>	CBO-Housing Specialist		1.00	\$0	\$0
	CBO-Employment Specialist		1.00	\$0	\$0
	CBO-Case Manager		1.00	\$0	\$0
	Recovery Coaches	3.00	3.00	\$0	\$0
	Recovery Specialists	3.00	3.00	\$0	\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
		<b>Total New Additional Positions</b>	6.00	9.00	
<b>C. Total Program Positions</b>		6.00	9.00		\$0

a/ Enter the number of FTE positions that will be staffed with clients, family members or caregivers.  
 b/ Include any bi-lingual pay supplements (if applicable). Round each amount to the nearest whole dollar.

**EXHIBIT 5c—Mental Health Services Act Community Services and Support Budget Narrative  
Housing Empowerment & Employment Recovery Services System Development Work Plan**

**County: San Joaquin**  
**Workplan # SD-3**

**Fiscal Year: 2006-07**  
**Date: 3/10/06**

<b>1. Expenditures</b>	
<b>a. Client, Family Member and Caregiver Support Expenditures</b>	
<b>i. Travel and Transportation</b>	
<b>ii. Housing</b>	
1. Housing allocated directly back to Full Service Partnerships based on clients served	(\$416,500)
<b>iii. Employment and Education Supports</b>	
1. Employment and Education Supports allocated directly back to Full Service Partnerships based on clients served	<u>(\$142,000)</u>
<b>iv. Other Support Expenditures</b>	
<b>v. Total Support Expenditures</b>	<u>(\$558,500)</u>
<b>b. Estimated Total Expenditures when service provider is not known</b>	
i. Community Based Organization Contracts based on staffing and housing costs	<u>\$558,500</u>
<b>c. Total Proposed Program Budget</b>	<u>\$ 0</u>
<b>2. Revenues</b>	
<b>a. New Revenues</b>	
<b>b. Total Revenues</b>	<u>\$ 0</u>
<b>3. One-Time CSS Funding Expenditures</b>	
<b>4. Total Funding Requirements</b>	<u><u>\$ 0</u></u>

**EXHIBIT 5a--Mental Health Services Act Community Services and Supports Budget Worksheet**

County(ies): San Joaquin Fiscal Year: 2007-08  
 Program Workplan # SD-3 Date: 3/6/06  
 Program Workplan Name Housing Empowerment & Employment Recovery Services Page 1 of 1  
 Type of Funding 2. System Development Months of Operation 12  
 Proposed Total Client Capacity of Program/Service: 60 New Program/Service or Expansion New  
 Existing Client Capacity of Program/Service: \_\_\_\_\_ Prepared by: Bruce Mahan  
 Client Capacity of Program/Service Expanded through MHSA: 60 Telephone Number: 209 468-9815

	County Mental Health Department	Other Governmental Agencies	Community Mental Health Contract Providers	Total
<b>A. Expenditures</b>				
<b>1. Client, Family Member and Caregiver Support Expenditures</b>				
a. Clothing, Food and Hygiene				\$0
b. Travel and Transportation				\$0
c. Housing Housing allocated to Full Service Partnerships			-\$437,325	-\$437,325
i. Master Leases				\$0
ii. Subsidies				\$0
iii. Vouchers				\$0
iv. Other Housing				\$0
d. Employment and Education Supports-allocated to Full Service Partnerships			-\$149,100	-\$149,100
e. Other Support Expenditures (provide description in budget narrative)				\$0
f. Total Support Expenditures	\$0	\$0	-\$586,425	-\$586,425
<b>2. Personnel Expenditures</b>				
a. Current Existing Personnel Expenditures (from Staffing Detail)				\$0
b. New Additional Personnel Expenditures (from Staffing Detail)				\$0
c. Employee Benefits	\$0			\$0
d. Total Personnel Expenditures	\$0	\$0	\$0	\$0
<b>3. Operating Expenditures</b>				
a. Professional Services				\$0
b. Translation and Interpreter Services				\$0
c. Travel and Transportation				\$0
d. General Office Expenditures				\$0
e. Rent, Utilities and Equipment				\$0
f. Medication and Medical Supports				\$0
g. Other Operating Expenses (provide description in budget narrative)				\$0
h. Total Operating Expenditures	\$0	\$0	\$0	\$0
<b>4. Program Management</b>				
a. Existing Program Management				\$0
b. New Program Management				\$0
c. Total Program Management		\$0	\$0	\$0
<b>5. Estimated Total Expenditures when service provider is not known</b>	\$586,425			\$586,425
<b>6. Total Proposed Program Budget</b>	\$586,425	\$0	-\$586,425	\$0
<b>B. Revenues</b>				
<b>1. Existing Revenues</b>				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. Realignment				\$0
d. State General Funds				\$0
e. County Funds				\$0
f. Grants				\$0
g. Other Revenue				\$0
h. Total Existing Revenues	\$0	\$0	\$0	\$0
<b>2. New Revenues</b>				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. State General Funds				\$0
d. Other Revenue				\$0
e. Total New Revenue	\$0	\$0	\$0	\$0
<b>3. Total Revenues</b>	\$0	\$0	\$0	\$0
<b>C. One-Time CSS Funding Expenditures</b>	\$0			\$0
<b>D. Total Funding Requirements</b>	\$586,425	\$0	-\$586,425	\$0
<b>E. Percent of Total Funding Requirements for Full Service Partnerships</b>				

**EXHIBIT 5 b--Mental Health Services Act Community Services and Supports Staffing Detail Worksheet**

County(ies): San Joaquin Fiscal Year: 2007-08  
 Program Workplan # SD-3 Date: 3/6/06  
 Program Workplan Name Housing Empowerment & Employment Recovery Services  
 Type of Funding 2. System Development Months of Operation 12  
 Proposed Total Client Capacity of Program/Service: 60 New Program/Service or Expansion New  
 Existing Client Capacity of Program/Service: 0 Prepared by: Bruce Mahan  
 Client Capacity of Program/Service Expanded through MHSA: 60 Telephone Number: 209 468-9815

Classification	Function	Client, FM & CG FTEs <sup>a/</sup>	Total Number of FTEs	Salary, Wages and Overtime per FTE <sup>b/</sup>	Total Salaries, Wages and Overtime
<b>A. Current Existing Positions</b>					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
	<b>Total Current Existing Positions</b>	0.00	0.00		\$0
<b>B. New Additional Positions</b>	CBO-Housing Specialist		1.00	\$0	\$0
	CBO-Employment Specialist		1.00	\$0	\$0
	CBO-Case Manager		1.00	\$0	\$0
	Recovery Coaches	3.00	3.00	\$0	\$0
	Recovery Specialists	3.00	3.00	\$0	\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
	<b>Total New Additional Positions</b>	6.00	9.00		\$0
<b>C. Total Program Positions</b>		6.00	9.00		\$0

a/ Enter the number of FTE positions that will be staffed with clients, family members or caregivers.  
 b/ Include any bi-lingual pay supplements (if applicable). Round each amount to the nearest whole dollar.

**EXHIBIT 5c—Mental Health Services Act Community Services and Support Budget Narrative  
Housing Empowerment & Employment Recovery Services System Development Work Plan**

**County: San Joaquin**  
**Workplan # SD-3**

**Fiscal Year: 2007-08**  
**Date: 3/10/06**

<b>1. Expenditures</b>	
<b>a. Client, Family Member and Caregiver Support Expenditures</b>	
<b>i. Travel and Transportation</b>	
<b>ii. Housing</b>	
1. Housing allocated directly back to Full Service Partnerships based on clients served	(\$437,325)
<b>iii. Employment and Education Supports</b>	
1. Employment and Education Supports allocated directly back to Full Service Partnerships based on clients served	<u>(\$149,100)</u>
<b>iv. Other Support Expenditures</b>	
<b>v. Total Support Expenditures</b>	<u>(\$586,425)</u>
<b>b. Estimated Total Expenditures when service provider is not known</b>	
i. Community Based Organization Contracts based on staffing and housing costs	<u>\$586,425</u>
<b>c. Total Proposed Program Budget</b>	<u>\$ 0</u>
<b>2. Revenues</b>	
<b>a. New Revenues</b>	
<b>b. Total Revenues</b>	<u>\$ 0</u>
<b>3. One-Time CSS Funding Expenditures</b>	
<b>4. Total Funding Requirements</b>	<u><u>\$ 0</u></u>