

**APPLICATION COVER SHEET
CMSP Wellness & Prevention Pilot Project**

1. **CMSP County or Counties Included in the Pilot Project:**
Mendocino County

2. **Funding:**
CMSP Pilot Project Requested Amount: \$225,000.00
In-Kind and/or Other Matching Amount Provided by Applicant (if any): \$238,081.72

3. **Applicant:**
Organization: Mendocino County Health and Human Services Agency
Applicant's Director or Chief Executive: Tammy Moss Chandler, MBA, MPH
Title: Executive Director
Applicant's Type of Entity (specific county department): Public Health Department
Address: 747 S. State Street
City: Ukiah State: CA Zip Code: 95482 County: Mendocino
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E-mail Address: chandler@co.mendocino.ca.us

4. **Primary Contact Person (Serves as lead contact person during the application process.)**
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5. **Secondary Contact Person (Services as alternate contact during the application process.)**
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Attachment A


6. **Financial Officer** (*Serves as chief Fiscal representative for project.*)

Name: Mary Alice Willeford
Title: Administrative Services Manager
Organization: Mendocino County Health and Human Services Agency
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7. By submitting this application for Wellness & Prevention Pilot Project funding, the applicant signifies acceptance of the applicant's responsibility to comply with all requirements stated in this Request for Proposals (RFP) authorized by the County Medical Services Program Governing Board ("Governing Board"). Further, the applicant understands that should the Governing Board award pilot project funding to the applicant, the Governing Board is not obligated to fund the pilot project grant until the applicant submits correct and complete documents as required for the pilot project agreement; the Governing Board is otherwise satisfied that the applicant has fully met all Governing Board requirements for receipt of pilot project funding; and the pilot project agreement between the Governing Board and the applicant has been fully executed. The Governing Board shall have sole discretion on whether or not to award pilot project funding of any amount to the applicant.

I declare that I am an authorized representative of the applicant described herein. I further declare under penalty of perjury under the laws of the State of California that the information set forth in this Cover Sheet and the attached response to the Wellness & Prevention Pilot Project RFP is true and correct.

Official Authorized to Sign for Applicant:

Signature:  Date: 9/1/16

Name: Tammy Moss Chandler
Title: Executive Director
Organization: Mendocino County Health and Human Services Agency
Address: 747 S. State Street
City: Ukiah State: CA Zip Code: 95482 County: Mendocino
Telephone: (707) 463-7774 Fax: (707) 472-2335
E-mail Address: chandlert@co.mendocino.ca.us

Table 1. Reference list of acronyms used in the proposal

CHIP	Community Health Improvement Plan
CHNA	Community Health Needs Assessment
CRM	Community Resiliency Model
HHSA	Mendocino County Health and Human Services Agency
McWAP	Mendocino County Wellness & Prevention project
NCO	North Coast Opportunities
UVMC	Ukiah Valley Medical Center

B. Project Summary (2 pages)

Mendocino County Health and Human Services Agency (HHSA) requests \$225,000 over three years to implement the Mendocino County Wellness and Prevention (McWAP) project. The goal is to expand CMSP enrollment through local level wellness and prevention activities in the Mental Health priority area of Mendocino County's preliminary Community Health Improvement Plan (CHIP). The McWAP anticipated outcomes are: increase CMSP enrollment; increase CMSP enrollee participation in the primary care benefit; a 5% decrease in mental health crises addressed in hospital emergency departments; and a 5% decrease in 5150 arrests over the three-year project period.

McWAP will address CMSP's "*Addressing the Social Determinants of Health*" project area by supporting local level wellness and prevention activities identified in the preliminary CHIP that will positively influence social and economic conditions for the CMSP population and the other uninsured. The target population for McWAP includes current CMSP enrollees, the over 3,000 who may be eligible for CMSP as of 2012 (www.cmspcounties.org), the 7,000 uninsured adults, and others, uncounted, who may be eligible for CMSP.

The preliminary CHIP represents the culmination of a year-long, collaborative needs assessment process lead by Healthy Mendocino, an initiative of over 20 local agencies and organizations. Because the needs assessment utilized the Mobilizing for Action through Planning and Partnerships (MAPP) process, the preliminary CHIP reflects the deep and sustained involvement of a broad spectrum of county residents—interested community members, professional staff, government leaders, community leaders, and volunteers—who are committed to improving community health by addressing its social determinants.

Within the Mental Health component of the CHIP, McWAP will partner with FIRST 5 Mendocino and the Alliance for Rural Community Health (ARCH) to implement a mental health crisis prevention program called the Community Resiliency Model (CRM). CRM addresses the psychological effects of abuse and trauma (e.g., sexual abuse, PTSD, domestic violence, etc.), which are leading causes of mental health crises requiring police or emergency medical intervention. Over 50 professional medical and behavioral health care staff at the county's eight community health clinics and 120 community members and human service providers in the Ukiah area will train in CRM. In Year 1 of McWAP, Phase I one day trainings will teach participants skills to cope with crisis

triggers. In Phase II 3-day trainings are “train the trainer” workshops, to extend the benefits of the training more deeply in Ukiah as well as other communities. Participants in all trainings will be provided information and education about prevention, wellness, primary care, and health coverage through CMSP and other programs.

HHSA will also partner with North Coast Opportunities (NCO), Mendocino County’s community action agency, to continue working collaboratively with community members and organizations to further develop strategies in the County’s Community Health Improvement Plan’s Mental Health priority area. A contracted part-time project manager will continue to lead the community process that will include conducting inventories of existing programs and resources, talking with subject matter experts, recruiting additional Mental Health priority area team members, and setting actionable and measurable objectives for wellness implementation in Years 2 and 3 of the project.

Project deliverables will include: an evaluation report at the end of each year describing the extent to which the pilot project was successful in meeting its goals and objectives; the training of at least 120 community members and human service providers through CRM trainings coordinated by FIRST 5 Mendocino, the training of at least 50+ medical and behavioral health providers at community clinic trainings; and an increase in CMSP enrollment and use of the new CMSP primary care benefit.

C. Project Narrative (10 pages)

C1. Clear Statement of Problem or Need Within Community

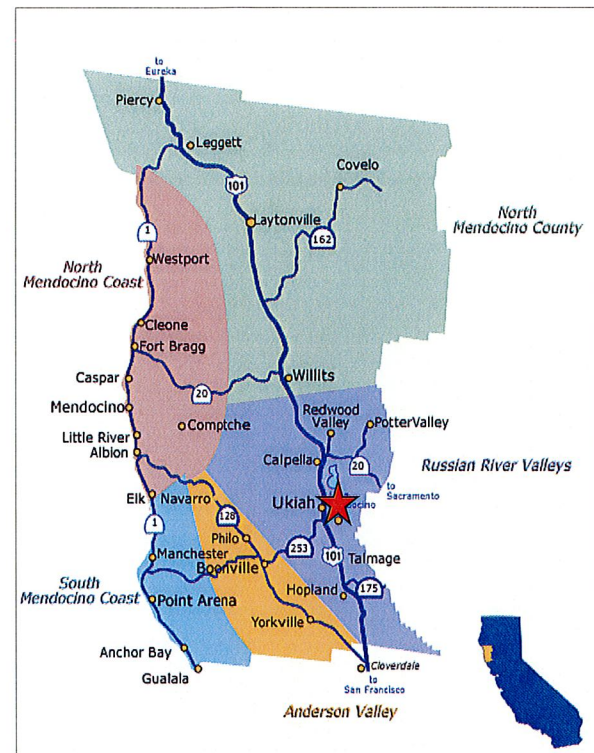
Background: Mendocino County is a large rural county (pop. 87,869, according to the US Census 2010 Demographic Profile) along California's north coast, two hours north of the Golden Gate. It is the 13th largest out of 58 California counties at 3,878 square miles. The Coastal Mountain Range, a formidable geographic barrier, divides the county. Two-thirds of residents live in the inland region—which includes Ukiah (pop. 32,808), the county seat of government. The remaining one-third are settled along 90 miles of isolated coastline, with a significant population cluster in the commercial center of Fort Bragg (pop. 14,799). Fort Bragg is a 1.5-hour drive from Ukiah along narrow, winding, mountain roads. Willits (pop. 13,264) is the population center for north inland region of Mendocino County and Willits is a 30-minute drive north from Ukiah along U.S. Highway 101.

Mendocino County's vast geography and rural, dispersed population make access to services a long and arduous process, especially without private transportation.

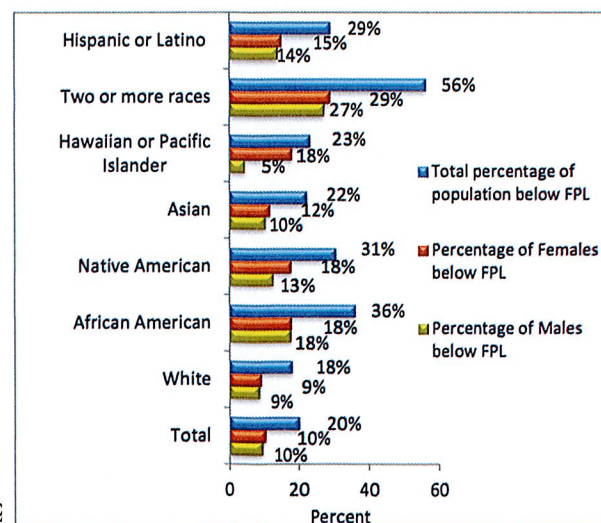
The ethnic composition of Mendocino County is in transition, as demonstrated by the County's 2014 kindergarten class, which was 45% Hispanic, compared with 24% of the general population. Other significant ethnic groups include White/non-Hispanic (67%) and Native American Indian (6%). Asians represent just 2.1% of the population and African Americans 1%.

Much of the county is economically impoverished, with a median household income of \$43,469

Figure 1. Mendocino County map



Population of Mendocino County below Federal Poverty Level (FPL),* 2014



(compared with \$61,094 statewide)¹. Solid middle-class jobs in the timber and fishing industries have disappeared over the past 25 years, leaving 20% of Mendocino County's population living below poverty level. Many more are living at 300% of poverty—the threshold for CMSP eligibility. Twenty-six percent of those whose income fell below the federal poverty level worked either full or part-time during the 12 months of 2014.

Target Population: The target population for McWAP includes the countywide CMSP-enrolled or CMSP-eligible population and others, many of whom, according to the 2016 CHNA, experience the mental health effects of various kinds of trauma, unstable housing, and limited access to financial resources. The Center for Budget and Policy Priorities estimates that 28% of California's population lives in substandard housing (i.e., lacking kitchen or adequate plumbing, or live in crowded conditions). Among members of the target population who are housed, 46-52% pay **more than half** of their income for housing (CHNA 2016). Those who can't afford or are unable to maintain a stable home remain homeless, bunking with family or friends or camping in the County's campgrounds or ubiquitous undeveloped areas. According to the Mendocino County Point-in-Time Count Report (2015), countywide there are 782 homeless adults 24 years of age and older and 187 homeless young adults 18-24 years of age. Almost half (44%) reported one or more chronic and/or disabling conditions (including substance abuse, HIV/AIDS, and severe mental health conditions and 16% were victims of domestic violence.) The Homeless Services Planning Group estimates that 2/3 of the homeless population resides in the Ukiah Valley area. Most of those with housing insecurity have experienced trauma and need mental health support.

The 2013-2014 California Health Interview Survey found that the number of adults in the general population with likely serious psychological distress has doubled from around 5% (2012) to over 10% (2014). And 9.5% of the population located in the Ukiah area experiences frequent mental distress. The needs are much higher among people with limited financial resources, such as the CMSP-eligible population. During the first seven months of 2013, HHSA reported at least 280 emergency department visits for psychiatric crisis (an average of 40/month) and 134 incidents of 5150 involuntary psychiatric hold. The Ukiah Valley Medical Center emergency department reports that more than 350 patients were treated for psychiatric crises during 2012 countywide. This is because Mendocino County lacks an inpatient psychiatric health facility. As a result, members of the target population cycle between the criminal justice and health care systems. Using the hospital's estimated average cost of \$4,000/crisis treatment yields a total cost of \$1,400,000 for emergency department-based crisis response in 2012. Community-based preventive mental health interventions, as proposed in McWAP, will interrupt this inhumane and costly cycle, resulting in improved health outcomes for the target population.

¹ Unfortunately, because of Mendocino County's small population size, accurate census and other data on population health indicators are not readily available for sub-county areas, so countywide data are presented.

McWAP project planners estimate that at least 210 persons will be served through the CRM prevention strategy and there will be an undefined number of new CMSP enrollees over the three-year project period as a result of McWAP.

C2. Local Health Care Delivery System Landscape

The health care delivery system in Mendocino County serves a Medically Underserved Population and is within a Primary Care Shortage Area, according to the Office of Statewide Health Planning and Development. The County is served by the following Federally Qualified Health Centers, Rural Health Centers, and Tribal Health Centers:

- Anderson Valley Health Center (Boonville)
- Round Valley Indian Health (Covelo)
- Mendocino Coast Clinics (Fort Bragg)
- Long Valley Health Center (Laytonville)
- Redwood Coast Medical Services (Gualala)
- Consolidated Tribal Health Project (Redwood Valley)
- Mendocino Community Health Clinic (Ukiah)
- Little Lake Clinic (Willits)

The County is also served by three hospitals:

- Ukiah Valley Medical Center (58 beds, Ukiah)
- Frank R. Howard Memorial Hospital (25 beds, Willits)
- Mendocino Coast District Hospital (49 beds, Fort Bragg)

In addition, the Mendocino County Department of Public Health provides nursing and public health services including: immunizations; Child Health Disability and Prevention Program; California Children's Services; Comprehensive Perinatal Services Program; Women, Infants, and Children program; public health nursing services; Maternal, Child, Adolescent Health programs; and HIV/AIDS information and resources.

HHSA contracts with Redwood Quality Management Company and its community partners to provide mental health services to adults in Mendocino County. The key community partners in the mental health care delivery are described in the following table.

Table 2. Community partners in Mendocino County's mental health delivery system

ORGANIZATION	LOCATION	SERVICES PROVIDED
Manzanita Services, Inc.	Ukiah, Willits	Peer support wellness and care management, drop-in center
Mendocino Coast Hospitality Center	Fort Bragg	Outreach, engagement and case management the homeless with serious mental illness
Redwood Community Services	Ukiah, Fort Bragg	Individual, family, and group behavior health services, crisis services
Mendocino Co. AIDS/ Viral Hepatitis Network	Ukiah	Drop-in center, counseling for Hep and HIV/AIDS

The strengths of the local health care system lie with the health clinic network, which serves people who reside in the far reaches of the County, and the nonprofits, which fill vital programmatic gaps in the public system. Many of their clients are CMSP-eligible.

The primary challenges occur in the cities of Ukiah, Willits, and Fort Bragg, where the mentally ill, frequently unstably housed, population cycles repeatedly between the criminal justice system (police, court, and jail) and hospital emergency departments because the County lacks a psychiatric health facility where people experiencing a mental health crisis can be stabilized and a case plan developed to support them when they are released. The McWAP project will provide local-level wellness and prevention services to address the social and economic factors that feed this cycle, ultimately improving health outcomes for target population.

The role of the lead partner, Mendocino County Health and Human Services Agency (HHSA), in the health care system includes the public health services described. In addition, Public Health is responsible for tracking action items implemented in the CHIP and evaluating their effectiveness in reducing critical health disparities identified in the CHNA. The other key McWAP planning partners and their roles are in the table below:

Table 3. Key planning partners' role in the health care system

KEY PLANNING PARTNER	ROLE IN HEALTH CARE SYSTEM
Alliance for Rural Community Health (ARCH)	ARCH is the association of health clinics in Mendocino County providing medical services to residents in the outlying communities.
North Coast Opportunities (NCO)	NCO is not a health care provider, but has taken a lead partnership role in the development of the CHNA and the CHIP.
FIRST 5 Mendocino	FIRST 5 Mendocino receives tobacco tax funds to implement programs and services for children 0-5 years of age.

C3. Description of Proposed Project

McWAP will implement local-level wellness and prevention activities that expand CMSP enrollment and improve social determinants of health—that is, “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.” (World Health Organization 2010) These economic, social, cultural and environmental factors affect a wide range of health risks and outcomes and most deeply impact the County’s most vulnerable citizens. The McWAP pilot project will implement activities within the Mental Health priority area of Mendocino County’s Community Health Improvement Project (CHIP) to improve health outcomes for the CMSP-enrolled and CMSP-eligible population in Ukiah. McWAP planners will focus on Ukiah in Year 1, evaluate the success of its efforts, and expand to other areas of the County as funds are available.

The CHIP is the fruit of a collaborative local effort by Healthy Mendocino (an initiative supported by a partnership of 20 community organizations), which is led by the Healthy Mendocino Steering Committee which began as a project of the Health & Humans

Services Advisory Board appointed by the Mendocino County Board of Supervisors. Healthy Mendocino enjoys institutional support and fiscal sponsorship from North Coast Opportunities, Mendocino and Lake Counties' community action agency. The CHIP builds upon the Community Health Needs Assessment (CHNA) process, completed in early 2016 after nearly two years of data gathering, community forums, and work following the Mobilizing for Action through Planning and Partnerships (MAPP) community-driven strategic planning process for improving community health. The CHNA process culminated on June 8, with a community health workshop attended by over 100 people. The group selected mental health, poverty, housing, childhood trauma, and childhood obesity/family wellness as its five priority areas.

The purpose of the community health needs assessment process was to identify the most pressing health priorities facing Mendocino County residents and have the partner organizations commit to a ***coordinated set of strategies to improve the health and well-being*** of County residents to achieve a greater combined impact and sustainability than the partners could achieve separately. The activities proposed in McWAP will begin to implement the mental health priority area identified in the CHIP—positively influencing the social and economic conditions that affect the target population while educating the public about CMSP and the CMSP Primary Care Benefit and linking potential CMSP beneficiaries to services.

The CHIP's Mental Health priority area envisions, "Countywide mental health consciousness is reflected in a proactive, no-shame view of the issues. Communities, agencies, and schools take a comprehensive approach to care and case management. People with mental illnesses and their families and health practitioners have access to needed treatment and case management resources across the continuum of care." Strategies in the mental health priority include: educate the community about mental illness to reduce stigma and increase resilience; expand treatment and case management options and access; and improve prevention for all residents and all mental health conditions.

FIRST 5 Mendocino has already begun to move forward in the Mental Health priority area by investing \$15,000 to train an initial cohort in the Community Resiliency Model (CRM) to pilot the approach in Ukiah. The CRM training aims to create communities that understand the impact of trauma and chronic stress on the nervous system and have the skills to prevent emotional distress and mental health crises. The Department of Behavioral Health in San Bernardino County conducted an evaluation of CRM training on 109 individuals identified as having experienced the effects of cumulative trauma associated with racism, homophobia, poverty, and untreated post-traumatic stress including military combat. These individuals reported an array of physical and emotional symptoms indicative of many members of vulnerable groups living in poverty—an average of six physical distress symptoms and six emotional distress symptoms. Participants were assessed immediately after the training, and again 3-6 months later. Participants reported improvements in distress indicators of depression, hostility, somatization, and anxiety, including 82% fewer depression symptoms, 59% fewer hostility symptoms, 59% fewer somatic symptoms, and 58% fewer anxiety symptoms.

McWAP proposes to contract with FIRST 5 for \$46,750 over three years to: 1) train community health clinic medical and behavioral health staff countywide in CRM; and 2) saturate Ukiah with CRM training. The purpose of these trainings is to give professional medical and behavioral health providers tools to share with their patients to prevent mental health crises. CRM trainings will allow McWAP to test the effectiveness of preventive mental health strategies among the target population both at community clinics and community-wide in Ukiah.

In year 1, Phase I trainings (1 day each) will teach participants skills to cope with crisis triggers. In Phase II trainings (3 days each) are “train the trainer” workshops, the purpose of which is to extend the benefits of the training more deeply in Ukiah as well as other communities in Mendocino County. Participants in all trainings will be provided information and education about prevention, wellness, primary care, and health insurance including CMSP.

The Alliance for Rural Community Clinics (ARCH) will partner with HHSA and FIRST 5 to coordinate CRM trainings at each of the County’s eight community health clinics. Many clinicians have and already recommend stress-reduction techniques to their patients. Understandably, it is difficult to pull health care providers away from direct, billable, patient care; funds are requested to incentivize the clinics/providers to participate in the CRM training. This grant will contribute to the clinics approximately half the expense in the amount of \$48,510.

Additional mental health priority strategies to be implemented in years 2 and 3 are still in the formative stage. The CHIP participants have identified the need for a Team Leader to organize the efforts by various agencies; this synergy of resources will be next to impossible without a specific leader named.

Funds in the amount of \$96,370 are requested to contract with NCO in each of the three years to continue working collaboratively with community members and organizations to conduct inventories of existing programs and resources, talk with subject matter experts, recruit additional priority area team members, and set actionable and measurable objectives for years 2 and 3 as funding for CRM tapers. All project participants will receive information about CMSP eligibility and the CMSP Primary Care Benefit and be linked to social services for CMSP enrollment.

C4. Organization and Staffing

The Mendocino County Health and Human Services Agency (HHSA) has a strong history of working collaboratively with Mendocino County organizations and community members to plan, implement, and evaluate projects designed to improve youth, adult, and community health. HHSA’s commitment to improving health outcomes has been demonstrated through several collaborative health assessment and evaluation efforts, including the Public Health Institute Partnership for the Public’s Health Initiative and the National Association of County and City Health Officials (NACCHO) Mobilizing for Action through Planning and Partnerships. HHSA staff has experience with population-level strategies to address the social determinants of health including:

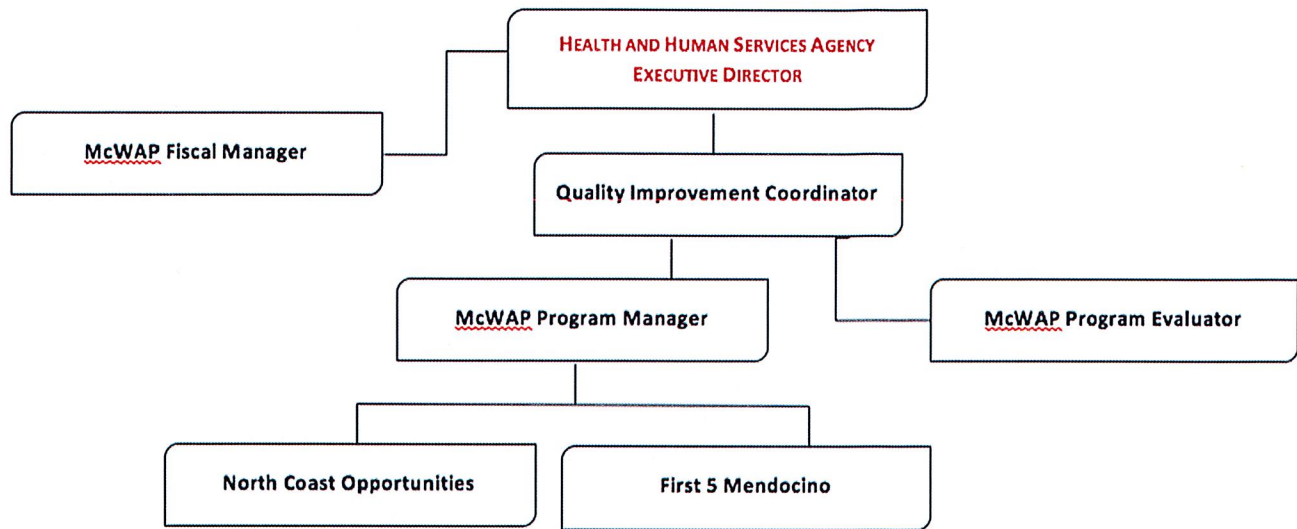
- **Chronic Disease.** Trained 30 Lay Leaders to deliver CDSMP workshops, using Stanford University's evidence-based curriculum to teach self-management strategies. Workshops have been funded by the California Heart Disease and Stroke Prevention Program, the Diabetes Prevention Program of the California Department of Public Health, and the CDC Community Transformation Grant. Two of the Lay Leaders have also been trained in the Spanish version of the program. Lay Leaders have delivered 26 workshop series, reaching 270 people with chronic diseases over the past 4 years.
- **Tobacco.** HHSA implements the county's Tobacco Control Program, which enacts policy changes to reduce access to tobacco products, and has successfully advocated with owners to voluntarily adopt smoke-free housing policies.
- **Nutrition.** Through the Community Transformation Grant Program, HHSA subcontracted with local schools and CBOs to train 55 youth to be advocates for healthy changes in their own communities. As a result, more than 25 entities have adopted healthy beverage policies. HHSA also co-founded the Mendocino County Food Policy Council and participated in the creation of its Food Action Plan, which outlines steps to reduce chronic illnesses such as heart disease and diabetes. Finally, HHSA has administered Supplemental Nutrition Assistance Education Program grants funded by USDA since 2002, providing nutrition education, physical activity promotion, and PSE change strategies to help shape environments that lead to healthy behaviors.
- **Physical Activity.** HHSA has worked with schools and school districts to develop and adopt safe routes to school policies and activities, working with trained youth groups.

HHSA is an experienced and successful grant seeker, and has proven its capacity to comply with the evaluation and reporting requirements of numerous federal and state grants. A Sr. Program Specialist will serve as the McWAP Project Director, providing overall guidance and direction to the project and monitoring contractor performance. A Sr. Department Analyst will provide fiscal administration for McWAP. And the McWAP evaluation will be conducted internally at HHSA by a Sr. Public Health Analyst with an MPH and extensive evaluation and statistical analysis experience.

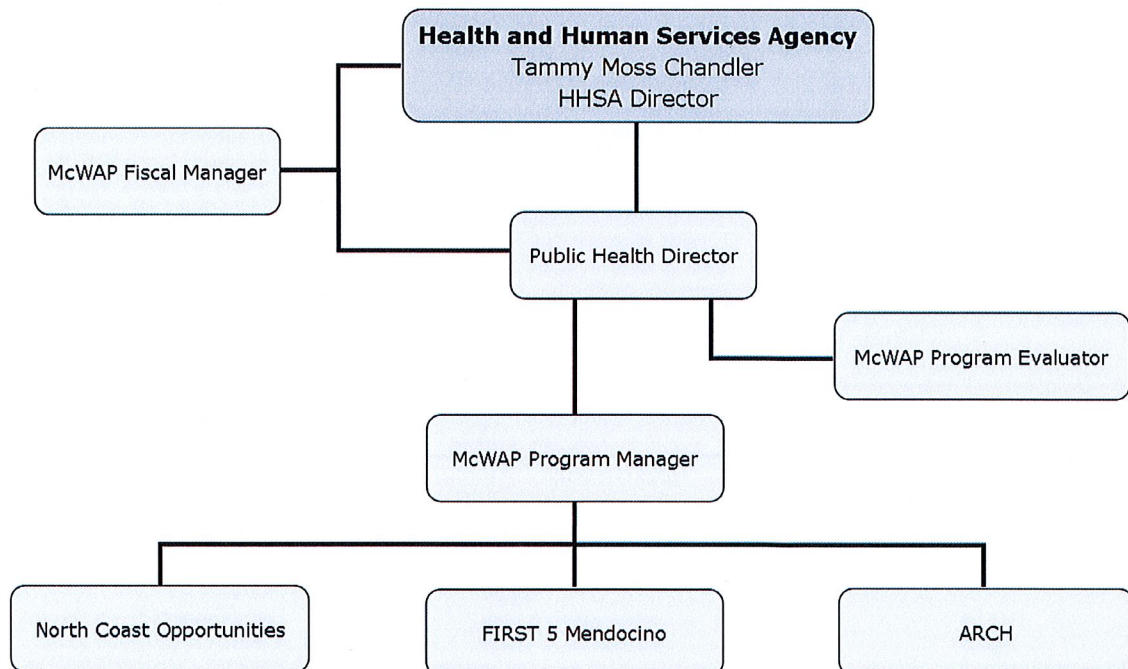
The following organizational chart for McWAP illustrates the relationship between HHSA and its collaborative partners.



MENDOCINO COUNTY WELLNESS & PREVENTION PROJECT ORGANIZATIONAL CHART



Mendocino County Wellness & Prevention Project Organizational Chart



The roles and responsibilities of key personnel and project partners are described in the following table.

Table 4. Key personnel and project partner roles and responsibilities

KEY PERSONNEL	ROLES AND RESPONSIBILITIES	QUALIFICATIONS AND EXPERTISE
Project Manager	The Program Manager will oversee McWAP contracts, track project expenditures, and ensure fulfillment of the grants goals and objectives.	MS; experience with verifying contracted providers submit required documentation, evaluate contractor workflow and provide on-site support. Has knowledge in calculating financial reports and reimbursements to contractors.
Project Evaluator	The Program Evaluator will: design and execute systems to monitor and review the success of the McWAP project interventions programs; assist with the development of the outreach flyer, client questionnaire, and focus group questions; assist with the coordination and analysis of questionnaire and focus groups; educate and train eligibility workers on implementing questionnaire; conduct advanced statistical analysis; track and communicate monthly enrollment counts as it becomes available to McWAP Project Director; complete annual assessment tool to support intervention goals; provides recommendations for continuous program improvement.	MPH; experience with planning, developing, and implementing systems for disease surveillance using epidemiological and health status monitoring statistical principals for Mendocino County Health and Human Services. Has prior knowledge of program management and coordination of multi-department initiatives that involved planning and policy development with the County of Los Angeles.
KEY PARTNER	ROLES AND RESPONSIBILITIES	
FIRST 5 Mendocino	The role of FIRST 5 Mendocino will be to implement a component of the Mental Health action area of Mendocino County's Community Health Improvement Plan. Specifically, FIRST 5 will leverage McWAP funding to provide Community Resource Model training to at least 120 human service providers and community members to teach them the impact of trauma and chronic stress on the nervous system and give them the tools they need to reduce mental health crises.	
North Coast Opportunities (NCO)	The role of NCO will be to complete strategy development and begin implementation of the Mental Health action area of Mendocino County's Community Health Improvement Plan.	
Alliance for Rural Community Health (ARCH)	The role of ARCH is to coordinate CRM trainings at each of the eight community health clinics in Mendocino County and to provide for release time for staff.	

C5. Implementation Work Plan

The McWAP work plan and timetable are shown in the table below.

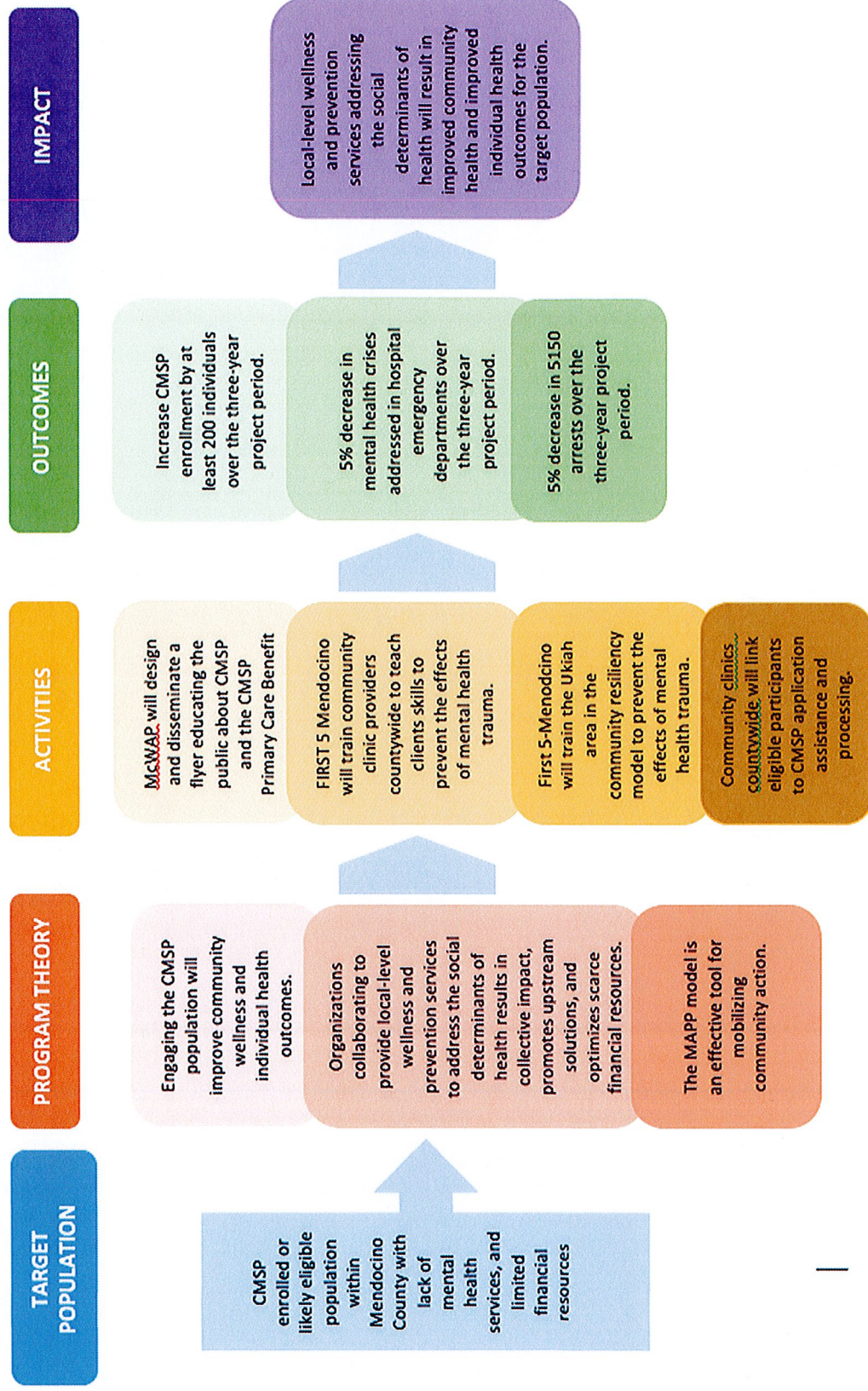
Table 5. McWAP work plan and timetable

Implementation Activities	Year 1				Year 2				Year 3			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
FIRST 5 Mendocino contract with HHSA to implement CRM												
NCO sign contract with HHSA for implementation of CHIP Mental Health priority area												
FIRST 5 Mendocino plan and implement Phase I trainings in Ukiah.												

Implementation Activities	Year 1				Q1	Year 2			Q1	Year 3		
	Q1	Q2	Q3	Q4		Q2	Q3	Q4		Q2	Q3	Q4
FIRST 5 Mendocino plan and implement Phase II trainings in Ukiah												
FIRST 5 Mendocino plan and implement community clinic trainings with ARCH												
Recruit additional Mental Health priority area team members												
Conduct inventories of existing programs and resources												
Talk with subject matter experts												
Set actionable and measurable objectives												
Implement additional activities in Mental Health priority area												
McWAP project evaluator gather process and outcome data												
McWAP project evaluator completes evaluation report												

D. Logic Model

MENDOCINO COUNTY WELLNESS AND PREVENTION PROJECT (McWAP) LOGIC MODEL



E. Proposed Evaluation Methodology (2 pages)

As described in the “Budget Narrative,” HHSA has allocated \$2,017 for the McWAP evaluation, which will be conducted internally within HHSA’s Department of Public Health by a Sr. Health Analyst. The internal evaluator will work collaboratively with NCO, FIRST 5 Mendocino, and ARCH staff to collect data efficiently and consistently and implement a comprehensive evaluation that assesses success of activities laid out in the McWAP work plan. Upon start up, the evaluator will discuss data collection and reporting procedures with project partners to determine the most appropriate ways to track project indicators and assess progress, present preliminary and final data, and lead discussion of course corrections based on collected data.

The evaluation builds on the McWAP Logic Model and will play a critical role in assessing whether the project is accomplishing what it set out to do and how it might be improved. The evaluator will develop a formal evaluation plan that will include both formative and summative evaluation components, with the goals of: 1) documenting implementation; 2) identifying areas in need of improvement; 3) providing formative guidance; and 4) assessing progress. The evaluation will inform program development (process evaluation) and measure program effects (outcome evaluation). The evaluator will be responsible for analysis and interpretation of evaluation data and drafting of the annual and final reports.

To assess implementation, the evaluation will seek answers to the following questions:

- **Fidelity.** With what degree of fidelity was the project implemented? What types of deviation occurred, and what effect did deviations have?
- **Context.** What program/contextual factors were associated with outcomes?
- **Barriers.** What barriers were encountered and how were they addressed?

The following questions address the project’s short-term impact:

- How many new enrollees in CMSP?
- How many community members were trained in CRM?
- How many human service providers were trained in CRM?
- How many medical care providers were trained in CRM?
- How many behavioral health care providers were trained in CRM?
- Were staff at each of the County’s community health clinics offered CRM training?
- Has the number of mental health crises managed at hospital emergency departments decreased?
- Has the number of 5150 arrests in the Ukiah area decreased?
- Has the CHIP Mental Health action team: gained new members? conducted an inventory of existing programs and resources? talked with subject matter experts? set actionable and measurable objectives for implementation in years 2 and 3 of the project?

The following table outlines the specific programmatic metrics that will be used to evaluate the effectiveness of McWAP.

Table 4. McWAP evaluation and data collection plan

INDICATOR	DATA SOURCE	ANALYSIS
# new CMSP enrollees	HHSA social services database	• Numerical count
# community members participating in CRM training	FIRST 5 Mendocino CRM project manager	• Numerical count • Documentation of process
# human service providers participating in CRM training	FIRST 5 Mendocino CRM project manager	• Numerical count • Documentation of process
# medical care providers participating in CRM training	FIRST 5 Mendocino CRM project manager	• Numerical count • Documentation of process
# behavioral health care providers participating in CRM training	FIRST 5 Mendocino CRM project manager	• Numerical count • Documentation of process
# of clinics that provided CRM training	FIRST 5 Mendocino CRM project manager	• Numerical count
# of health care crises managed at Ukiah Valley Medical Center's emergency department	Ukiah Valley Medical Center	• Numerical count
# of 5150 arrests in Ukiah area	Mendocino County Sheriff's office	• Numerical count
Completion of the CHIP Mental Health priority area	CHIP Project Manger	• Documentation of process
Implementation of Mental Health priority area strategies	CHIP Project Manager	• Documentation of process

The evaluator will present findings to the McWAP partners twice annually to ensure that lessons learned will be put to use immediately for program improvement. The evaluator will also prepare public announcements twice annually for submission to major media outlets in Mendocino County.

HHSA and its McWAP project partners, FIRST 5, NCO, and ARCH will comply with all federal and state laws requiring confidentiality of protected health information. As health care providers, policies and procedures to protect confidentiality are currently in place at HHSA, UVMC, and all community clinics through training in Health Information Portability and Accountability Act (HIPAA) requirements.

F. Budget

**Attachment B2: Budget Template - Detail Budget
CMSP County Wellness & Prevention Pilot Project**

Applicant:

County of Mendocino

Detail Budget – CY 2017 through CY 2019:

Category Item/Service	Qty (Year 1)	Cost (Year 1)	Qty (Year 2)	Cost (Year 2)	Qty (Year 3)	Cost (Year 3)	Total Cost
Personnel							
SR PH Analyst	0.03	2,017.20	0.03	2,057.64	0.05	3,498.00	7,572.84
Sr Program Spec	0.055	2,017.00	0.09	7,788.31	0.1	8,805.06	18,610.37
Total Personnel		4,034.20		9,845.95		12,303.06	26,183.21
Contractual Services							
NCO-Priority Project		31,231.20		32,123.52		33,015.84	96,370.56
FIRST 5-Priority Project		16,500.00		16,500.00		13,750.00	46,750.00
ARCH-Priority Project		17,325.00		15,592.50		15,592.50	48,510.00
Total Contractual Services		65,056.20		64,216.02		62,358.34	191,630.56
Office Expenses							
Total Office Expense		-		-		-	-
Travel							
County Garage Rental		66.33		66.33		66.33	199.00
Total Travel		66.33		66.33		66.33	199.00
Other							
Admin Overhead	15%	605.13	15%	1,476.89	15%	1,845.46	3,927.48
Total Other		605.13		1,476.89		1,845.46	3,927.48
Total Budget		\$ 69,761.86		\$ 75,605.20		\$ 76,573.19	\$ 221,940.25

**Attachment B2: Budget Template - Summary Budget
CMSP County Wellness & Prevention Pilot Project**

Applicant:

County of Mendocino - McWAP

Summary Budget – CY 2017 through CY 2019:

Category	Total Cost (Year 1)	CMSP Funding (Year 1)	Other Funding (Year 1)
Personnel	\$ 11,866.70	\$ 6,694.79	\$ 5,171.91
Contractual Services	\$ 139,897.86	\$ 65,056.20	\$ 74,841.66
Office Expenses	\$ 2,928.07		\$ 2,928.07
Travel	\$ 425.00	\$ 66.33	\$ 358.67
Admin Overhead	\$ 1,780.01	\$ 1,004.22	\$ 775.79
TOTAL YEAR 1	\$ 156,897.64	\$ 72,821.54	\$ 84,076.10

Category	Total Cost (Year 2)	CMSP Funding (Year 2)	Other Funding (Year 2)
Personnel	\$ 12,083.08	\$ 9,845.95	\$ 2,237.13
Contractual Services	\$ 138,226.66	\$ 64,216.02	\$ 74,010.64
Office Expenses	\$ 2,354.43	\$ -	\$ 2,354.43
Travel	\$ 250.00	\$ 66.33	\$ 183.67
Admin Overhead	\$ 1,812.46	\$ 1,476.89	\$ 335.57
TOTAL YEAR 2	\$ 154,726.63	\$ 75,605.19	\$ 79,121.44

Category	Total Cost (Year 3)	CMSP Funding (Year 3)	Other Funding (Year 3)
Personnel	\$ 12,303.61	\$ 12,303.06	\$ 0.55
Contractual Services	\$ 134,957.46	\$ 62,358.34	\$ 72,599.12
Office Expenses	\$ 2,100.84		\$ 2,100.84
Travel	\$ 250.00	\$ 66.33	\$ 183.67
Admin Overhead	\$ 1,845.54	\$ 1,845.54	\$ -
TOTAL YEAR 3	\$ 151,457.45	\$ 76,573.27	\$ 74,884.18

Total Budget	\$ 463,081.72	\$ 225,000.00	\$ 238,081.72
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F. Budget Narrative

This request is for \$225,000 over three years. Below are the details that developed the attached Summary Budget and Detail Budget.

- **Mendocino County HHSA Public Health** will oversee and evaluate this grant.

The primary CMSP expense is for a Senior Public Health Analyst for evaluation and Specialist for contract monitoring:

\$4,034 in Year 1; \$9,846 in Year 2; and \$12,303 in Year 3.

Personnel is calculated on the salary of \$67,240 and \$86,537 including benefits

Travel: Garage fees

- **FIRST 5 Mendocino** will organize the Community Resiliency Model training and will subcontract with the Trauma Resource Institute.

The primary CMSP expense is to pay the CRM trainers:

\$16,500 in Year 1; \$15,000 in Year 2; and \$12,500 in Year 3.

In-Kind: In addition, FIRST 5 will provide in-kind in the amount of \$34,130 in Year 1; \$35,536 in Year 2; and \$33,530 in Year 3. This in-kind consists of:

Personnel: 0.2 FTE for a project coordinator paid \$25 per hour with benefits at 30%.

Contractual Services: 50% of the contract amount with the trainers will be covered by FIRST 5 and its partners.

Office Expenses: Training and facility expenses; outreach; publicity.

Travel of the CRM trainers.

Administrative overhead/indirect is calculated at 10% of total costs.

- **The Alliance for Rural Community Health (ARCH)** will coordinate with the 8 clinics who serve CMSP/potentially eligible clients.

The primary CMSP expense is to ameliorate the cost of training health care providers:

\$15,750 in Year 1; \$14,175 in Year 2; and \$14,175 in Year 3.

Year 1 Personnel: 50 providers at an average of \$90 per hour including benefits for 7 hours

Years 2 and 3 Personnel: 15 people at an average of \$90 per hour including benefits for 7 hours for 3 days.

In-Kind: In addition, ARCH will provide in-kind in the amount of 50% of the training costs for a total of \$48,510. Note that this amount does not account for the loss of revenue that clinics will experience.

Administrative overhead/indirect is calculated at 10% of total costs.

- **North Coast Opportunities** (NCO) will hire the Mental Health Team Leader to coordinate and move forward the Community Health Improvement Action Team.

The primary CMSP expense is Personnel in the amount of \$28,392

\$31,231 in Year 1; 32,124 in Year 2; and \$33,016 in Year 3.

Personnel: 0.3 FTE for a Mental Health Team Leader paid \$35 per hour with benefits at 30%. Salary/COLA increase of 5% per year.

In-Kind: In addition, NCO will provide in-kind in the amount of \$23,387 in Year 1;

\$22,881 in Year 2; and \$23,476 in Year 3. This in-kind consists of:

Personnel: 0.2 FTE for a Mental Health Team Leader paid \$35 per hour with benefits at 30%.

Office Expenses: Phone and meeting technology to accommodate stakeholders in various locations in Mendocino County; Computer for Year 1 only.

Travel: once trip to Coast or Covelo per month at 110 miles at .555 per mile.

Administrative overhead/indirect is calculated at 10% of total costs.



Alliance for Rural Community Health

309 East Perkins Street, Ukiah, CA 95482 (707) 462-1477 www.ruralcommunityhealth.org

September 2, 2016

CMSP Governing Board
ATTN: Wellness & Prevention Pilot Project
1545 River Park Drive, Suite 435
Sacramento, CA 95815

To Whom It May Concern:

On behalf of the Alliance for Rural Community Health (ARCH), I am writing to express our commitment to work collaboratively with the Mendocino County Health and Human Services Agency (HHSA) on the Mendocino County Wellness and Prevention (McWAP) project. As a major provider of health care services to the CMSP population, we are looking forward to participating in this project.

Funding from McWAP will allow medical and behavioral health staff at each of our seven member clinics to receive training in the Community Resiliency Model, a mental health crisis prevention tool that has proven to be effective in reducing emotional distress and mental health crises in a number of evaluation studies. The goal is to train providers to pass along to their patients the skills and tools they learn from the CRM trainings to prevent mental health crises that escalate and then require police or emergency response.

ARCH will coordinate with the clinics and FIRST-5 Mendocino to schedule trainings and assist with the McWAP project evaluator as necessary. Thank you in advance for considering this funding request and supporting our efforts to educate and remediate the effects of mental health on our community.

Sincerely yours,

Diane Agee
Chairperson, Alliance for Rural Community Health



COMMUNITY ACTION
(707) 467-3200
(707) 462-0191 FAX
413 N. State St.,
Ukiah, CA 95482
www.ncoinc.org

September 2, 2016

CMSP Governing Board
ATTN: Wellness & Prevention Pilot Project
1545 River Park Drive, Suite 435
Sacramento, CA 95815

To Whom It May Concern:

North Coast Opportunities (NCO) was established in 1967 when President Johnson launched war on poverty. As Lake and Mendocino Counties' Community Action Agency, NCO has served as the backbone agency and fiscal sponsor for the Healthy Mendocino initiative since 2012. The mission of Health Mendocino is to improve quality of life in Mendocino County by encouraging informed dialogue about the actions local residents and organizations can take to improve community health. The efforts of Healthy Mendocino are supported financially by 20 community partners.

With institutional support from NCO, Healthy Mendocino created a website of health indicators in 2013 and its most recent accomplishment has been serving as the umbrella organization guiding, supporting, and overseeing development of the Community Health Needs Assessment and Community Health Improvement Plan, which is nearing completion.

If funded, the Mendocino County Wellness and Prevention (McWAP) will allow us to continue to provide leadership in facilitating the community group that is working collaboratively to develop the final stages of the action plan for the CHIP's Mental Health priority area and to implement these actions. As an organization that serves many CMSP-eligible individuals through its various programs, we also commit to informing our clients about CMSP and the CMSP primary care benefit and linking them to enrollment assistance through the Mendocino County Department of Social Services. Moreover, NCO will work cooperatively with HHSA's evaluation efforts.

We very much appreciate the opportunity to play an instrumental partnership role in creating and implementing local-level prevention and wellness programs to positively influence the social and economic conditions affecting the target population.

Sincerely yours,

A handwritten signature in cursive script that reads "Patty Bruder" followed by a stylized flourish.

Patty Bruder
Executive Director



September 2, 2016

CMSP Governing Board
ATTN: Wellness & Prevention Pilot Project
1545 River Park Drive, Suite 435
Sacramento, CA 95815

Commissioners
Ben Anderson, LCSW
Jim Flaherty, M.D.
Dan Hamburg
Bryan Lowery
Jeremy Mann, M.D.
John Passalacqua
Lucresha Renteria
Paul Tichinin

Interim
Executive Director
Carol Mordhorst

To Whom It May Concern:

On behalf of FIRST 5 Mendocino, I am writing to express our commitment to implementing the Community Resiliency Model (CRM) Training presented by the Trauma Resource Institute (TRI) over a three-year period in Ukiah. We are collaborating with three local groups (Children's Action Committee, Children's Health Committee and The Mendocino County Health & Human Services Agency) that all have a keen interest in locally piloting this training. Ameliorating the effects of trauma on children is quickly gaining recognition worldwide as an important step for social service agencies to end the cycle of abuse. The CRM is an effective approach to giving human service providers and victims of trauma the tools they need to reduce physical and emotional distress which, if unaddressed, often leads to child abuse and other crises involving police or ambulance.

FIRST 5 Mendocino has invested \$15,000 to initiate Phase I of the CRM training in 2016. The goal of Phase I is to introduce six different skills to help individuals cope with regular stressors and more complicated triggers. With funding from CMSP through the Mendocino County Wellness & Prevention (McWAP) project, we will implement Phase II of the CRM in 2017. Phase II involves a 3-day "Train the Trainer" training which teaches participants how to spread the six resilience building skills throughout their individual communities. Phase II also includes monthly follow up with the TRI staff for those in our county who attend the training. Training participants include staff from community clinics county-wide as well as Ukiah area community members and service providers. In the subsequent years of 2018 and 2019, the CMSP funding will be utilized to provide quarterly meetings and to cover the cost of materials from TRI. Those community members and human service providers that are trained will continue to train others in our county.

We are seeking members from local Native American and Latino communities, in addition, we expect that there will be human service providers in attendance. FIRST 5 Mendocino will fully participate in HHSA's evaluation of this pilot project. If the project proves successful, we hope to replicate the trainings in other areas of Mendocino County. An estimated 50 members from our communities and 70 human service providers will participate in the CRM trainings over the three-year period. Additional funding to support the CRM trainings over 3 years will come from tuition and can be written into other FIRST 5 Mendocino budgets.

Thank you in advance for considering this funding request and supporting our efforts to educate and remediate the effects of trauma on our community.

Sincerely yours,

A handwritten signature in black ink that reads "Carol Mordhorst". The signature is written in a cursive, flowing style.

Carol Mordhorst
Interim Executive Director,
FIRST 5 Mendocino