



RICHARD FIGUEROA
ACTING DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



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GOVERNOR

BY:

November 19, 2019

Phebe Bell
BH Director
Nevada County
500 Crown Point Circle, Suite 120
Grass Valley, CA 95945

Dear Ms. Bell:

We have reviewed your county's original application package for renewal of your Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS) Community Mental Health Services Block Grant (MHBG) program for Fiscal Year 2019-2020.

All of the required documents have been received and are in compliance with the applicable federal and state requirements. Your program description and your enclosed budget(s) have been reviewed and approved.

Should you have any questions or need to revise any element of your application package, please contact your Grants Management Analyst at MHBG@dhcs.ca.gov.

Sincerely,

A handwritten signature in blue ink, appearing to read "Casey Heinzen".

Casey Heinzen, Chief
Contracts and Grants Management Section, Unit 2

Enclosure(s)

FEDERAL GRANT DETAILED PROGRAM BUDGET

STATE FISCAL YEAR: 2019 - 2020

TYPE OF GRANT: MHBG

COUNTY: Nevada

SUBMISSION DATE: August 5, 2019

FISCAL CONTACT: Danielle Rutherford

PROGRAM CONTACT: Darryl Quinn

TELEPHONE NUMBER: (530)265-1287

TELEPHONE NUMBER: (530)265-2559

EMAIL ADDRESS: danielle.rutherford@co.nevada.ca.us

E-MAIL ADDRESS: darryl.quinn@co.nevada.ca.us

PROGRAM NAME: Co-Occuring Disorders (Contract)

STAFFING			1	2	3
TITLE OF POSITION	ANNUAL SALARY	GRANT FTE	LAST APPROVED BUDGET	REQUEST OR CHANGE	TOTAL
1 Program Manager	\$ 117,207	0.05			\$ 5,860.35
2 Registered Nurse - SMWG (Contractor)	\$ 85,680	0.25			\$ 21,420.00
3 Therapist Licensed/Intern - SMWG (Contractor)	\$ 68,999	0.25			\$ 17,249.75
4 Benefits					\$ 9,797
5					\$ -
6					\$ -
7					\$ -
8					\$ -
9					\$ -
10					\$ -
11					\$ -
12 TOTAL STAFF EXPENSES (sum lines 1 thru 11)	\$ 271,886	0.55	\$ -	\$ -	\$ 54,327
13 Consultant / Contract Costs (Itemize):					\$ -
14 Sierra Mental Wellness Group (Contractor):					\$ -
15 Office Supplies					\$ 6,500
16 Meetings/Training/Staff Development					\$ 5,004
17 Equipment (Where feasible lease or rent) (Itemize):					\$ -
18					\$ -
19					\$ -
20					\$ -
21					\$ -
22 Supplies (Itemize):					\$ -
23					\$ -
24					\$ -
25					\$ -
26					\$ -
27					\$ -
28 Travel -Per diem, Mileage, & Vehicle Rental/Lease					\$ -
29					\$ -
30 Other Expenses (Itemize):					\$ -
31					\$ -
32					\$ -
33					\$ -
34					\$ -
35					\$ -
36					\$ -
37 COUNTY ADMINISTRATIVE COSTS (10% MHBG)					\$ 5,433
38 NET PROGRAM EXPENSES (sum lines 12 thru 37)			\$ -	\$ -	\$ 71,264
39 OTHER FUNDING SOURCES: Federal Funds					
40 Non-Federal Funds					
41 TOTAL OTHER FUNDING SOURCES (sum lines 39 & 40)			\$ -	\$ -	\$ -
42 GROSS COST OF PROGRAM (sum lines 38 and 41)			\$ -	\$ -	\$ 71,264

DHCS APPROVAL BY: Seongsook Duncar

TELEPHONE: (916) 713-8755

DATE: 10/16/2019

FEDERAL GRANT DETAILED PROGRAM BUDGET

STATE FISCAL YEAR: 2019 - 2020

TYPE OF GRANT: MHBG

COUNTY: Nevada

SUBMISSION DATE: August 5, 2019

FISCAL CONTACT: Danielle Rutherford

PROGRAM CONTACT: Darryl Quinn

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PROGRAM NAME: Crisis Insight Respite Center- Contract FEP

STAFFING			1	2	3
TITLE OF POSITION	ANNUAL SALARY	GRANT FTE	LAST APPROVED BUDGET	REQUEST OR CHANGE	TOTAL
1 Program Manager	\$ 117,207	0.028			\$ 3,282
2 Program Director - Turning Point (Contractor)	\$ 55,336	0.300			\$ 16,601
3 Peer Counselors - Turning Point (Contractor)	\$ 25,584	2.200			\$ 56,285
4 Benefits					\$ 43,415
5					\$ -
6					\$ -
7					\$ -
8					\$ -
9					\$ -
10					\$ -
11					\$ -
12 TOTAL STAFF EXPENSES (sum lines 1 thru 11)	\$ 198,127	2.53	\$ -	\$ -	\$ 119,583
13 Consultant / Contract Costs (Itemize):					\$ -
14 Turning Point (Contractor):					\$ -
15 Training/Mileage					\$ 4,500
16 Program Supplies/Household Supplies/Office Expense					\$ 7,780
17 Equipment (Where feasible lease or rent) (Itemize):					\$ -
18 Rent					\$ 14,220
19					\$ -
20					\$ -
21					\$ -
22 Supplies (Itemize):					\$ -
23					\$ -
24					\$ -
25					\$ -
26					\$ -
27					\$ -
28 Travel -Per diem, Mileage, & Vehicle Rental/Lease					\$ -
29					\$ -
30 Other Expenses (Itemize):					\$ -
31 Client Support Expenses (Food/Clothing/Hygiene)					\$ 8,715
32					\$ -
33					\$ -
34					\$ -
35					\$ -
36					\$ -
37 COUNTY ADMINISTRATIVE COSTS (10% MHBG)					\$ 11,958
38 NET PROGRAM EXPENSES (sum lines 12 thru 37)			\$ -	\$ -	\$ 166,756
39 OTHER FUNDING SOURCES: Federal Funds					
40 Non-Federal Funds					
41 TOTAL OTHER FUNDING SOURCES (sum lines 39 & 40)			\$ -	\$ -	\$ -
42 GROSS COST OF PROGRAM (sum lines 38 and 41)			\$ -	\$ -	\$ 166,756

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