



2000 Embarcadero Cove, Suite 400 Oakland, California 94606 (510-) 567-8100 / TTY (510) 533-5018

MHSA STAKEHOLDER GROUP

Friday September 28, 2018

2:00-4:00pm

2000 Embarcadero Cove, Oakland

Alvarado Niles Conference Room - 5th Floor

To participate by phone, dial-in to this number: (605) 475-4834 Participant access code: 102839

MICCION	VALUE	FUNCTIONS	
MISSION	VALUE STATEMENT	FUNCTIONS	
The MHSA Stakeholder Group	• · · · · · · · · · · · · · · · · · · ·	The MHSA Stakeholder	Group:
advances the principles of the Mental	We maintain a		·
Health Services Act and the use of effective practices to assure the	focus on the people served, while	Reviews the effectiveness of MHSA	
transformation of the mental health	working together	 Recommends current and future fur Consults with BHCS and the comm 	
system in Alameda County. The group	with openness and	approaches that have potential for t	
reviews funded strategies and provides counsel on current and future	mutual respect.	health systems of care	
funding priorities.		Communicates with BHCS and rele	vant mental health
37		constituencies.	
1. Welcome, Agenda & Community	Announcements (2	2:00)	p. 1-2
2. Design Team Alliance (DTA) Act	tivity (2:10)		p. 3-4
3. Upcoming BHCS Events – Please	share with commu	nity members (2:20)	
• 10/12/18: Graduate Stipend A	application, funded b	y Workforce, Education, Training (W	ET)
(http://www.acbhcs.org/interr	* *		p. 5
• 10/20 Reground – Symposi			p. 6
		p. 7	
1		p. 8	
4. Updates: MHSA Request for		•	1
	_	apport Group for African American	ns, funded by Prevention
& Early Intervention (PEI)			•
(http://www.acgov.org/gsa_app/gsa/purchasing/bid_content/contractingdetail.jsp?BID_ID=1987)			9?BID_ID=1987)
• 10/20/18 Due: Request for	Proposal (RFP) #1	8-05 African American Reentry M	ental Health Program,
funded by Community Services & Supports (CSS)			_
(http://acgov.org/gsa_app/g	sa/purchasing/bid_	content/contractingdetail.jsp?BID	<u>ID=2031</u>)
5. MHSA Stakeholder Group I	Member Nominati	ions Update (2:30)	
6. Stakeholder Input (2:35)			
 Innovations Mental 	Health Technology	y Survey	p. 9-10
 MHSA Outreach Ca 	ampaign		
 BHCS Follow Up 			
<u>*</u>	SA Site Visit Input		p.11-12
	vation Subcommitt	ee Input	p. 13-17
- Glos	sary		p.18-41

Attached Documents

- 1. MHSA Designed Team Alliance (DTA) Notes (p.3-4)
- 2. BHCS Graduate Stipend Application (p.5)
- 3. ReGround Symposium (P.6)
- 4. MHSOAC State Community Input Forum on Suicide Prevention (p.7)
- 5. Asian Pacific/ Islander (API) Mental Health Empowerment Conference (p.8)
- 6. INN Mental Health Technology Survey (p.9-10)
- 7. 8/24/18 MHSA Site Visit Input Notes (p.11-12)
- 8. 8/24/18 Stakeholders Innovations Subcommittee Notes (p.13-17)
- 9. BHCS Network Office and Consumer Terms Glossary (p.18-41)

Next Stakeholder Meeting: October 26, 2018

MHSA Stakeholder Group DESIGNED TEAM ALLIANCE

What is the Desired Atmosphere or Culture of MHSA Stakeholder Group?		
Informed	Feeling of Safety	
Emotionally supportive	Probing	
Collaborative	Effective	
Honest	Reflective	
Productive	Critically Thinking	
Warm	Instructive	
Engaged		
In order to Thrive, how do we want to be in the MHSA Stakeholder Group?		
Trust	People able to listen to different perspectives	
Accepting/open to ideas of others	Strategic	
Diversity matters	Taking responsibility	
Open/inclusive	Mutual respect	
How do we deal with Conflict or Difficulty when it arises within the MHSA Stakeholder		
Group?		
Assume good intent	Being ok with conflict- not try to fix it	
Accept different perspectives	Listening	
Being patient, don't interrupt	Agree to disagree & move on w/ what we agree on	
Trying to find the "lowest common denominator" and move forward	Where there are disparities, be able to call them out "Name it"	

DESIGN LEADERSHIP ALLIANCE

What do Stakeholders need from Group Leaders (Tracy/ Linda)?		
Responsive	Transparency	
Follow through	Concrete goals	
To be informed	Purpose	
Clear expectations for effective participation	Respecting timelines	
To feel like there are "No dumb questions"	Meeting reminders	
Explain Acronyms (provide Acronym dictionary)	Refreshments	
Be a resource	Outlook invites	
Provide MHSA meeting minutes	Hard copies of Agenda/Materials mailed	
Provide handouts Sensitivity		
Help committee be better informed about challenges, priorities and responsibilities		
What do Group Leaders Need from the Stak	eholders?	
Agenda respect	Be responsive	
Respect time	Helping w/ community connection	
Start at 2 p.m.	Understanding Linda & Tracy don't have full decision-making power	
"Step in, Step Out"		



ANNOUNCEMENT

Alameda County Behavioral Health Care Services (ACBHCS) is pleased to announce that the <u>FY2018-19 application cycle for the Graduate Intern Stipend Program (GISP) is now open!</u> The application, instructions and eligibility requirements are posted HERE.

PLEASE INSTRUCT STUDENTS TO COMPLETE THE APPLICATION ONLINE—THEN PRINT, SIGN, AND MAIL.

We are looking for student applicants who meet eligibility requirements and are from diverse backgrounds to help increase the cultural responsiveness of our system, bridge gaps in skill sets, and improve language capacity. Please inform your students for the **2018-19 school year** about this great opportunity to enhance their internship experience.

Each stipend is worth up to **\$6,000** dollars for a maximum of **720** internship hours and will be pro-rated if the student works less hours.

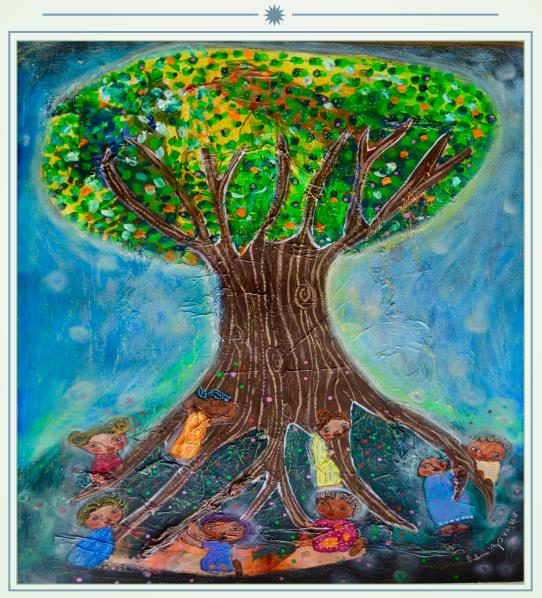
THE APPLICATION DEADLINE IS FRIDAY, OCTOBER 12, 2018.

For questions, please contact Ebony Jacob at ebony.jacob@acgov.org or 510-567-8093.

A ONE DAY SYMPOSIUM FOR COMMUNITY LEADERS, HEALERS AND MENTAL HEALTH PROVIDERS OF COLOR

REGROUND

SATURDAY, OCTOBER 20, 2018 9:00 AM- 4:30 PM OAKLAND INTERNATIONAL HIGH SCHOOL



A SPACE DEDICATED TO GENERATING CREATIVE EXPLORATION, NETWORKING AND SUPPORT



REGISTER AT https://reground2018.eventbrite.com



Diverse Approaches to Preventing Suicide and Inspiring Hope in Our Communities

Register today!

COMMUNITY FORUM

Join us for this forum to provide input into the State's new suicide prevention plan!

We'll work together to develop diverse approaches to preventing suicide and inspiring hope. Together we can end suicide in our communities statewide.

Date: Wednesday, October 24, 2018

Time: 1 p.m.— 5 p.m.

Location: Redwood Conference Room, 1100 San Leandro Blvd.,

San Leandro, California

Register for your spot today:

https://mhsoac-bay-area-prevention.eventbrite.com

Lunch will be provided

Translation services may be available if requested at time of registration

Suicide is a leading cause of death in California, for both youth and adults. The legislature directed the Mental Health Services Oversight and Accountability Commission to develop a new statewide suicide prevention plan. This event is part of a series of Commission events to gather community input and expertise.









ASIAN & PACIFIC ISLANDER

MENTAL HEALTH EMPOWERMENT CONFERENCE

UNIFIED IN RESILIENCE: DRAWING STRENGTH FROM OUR COMMUNITIES

2018 KEYNOTE SPEAKERS



WILMA CHAN

ALAMEDA

COUNTY SUPERVISOR



PISEY SOK

SPIRITUAL HEALER &

MENTAL HEALTH ADVOCATE



HELEN HSU
PRESIDENT, ASIAN AMERICAN
PSYCHOLOGICAL ASSOCIATION



ROBERT BONTA

CA STATE ASSEMBLY
18TH ASSEMBLY DISTRICT

NOVEMBER 29 – 30, 2018 HILTON OAKLAND AIRPORT - OAKLAND, CA

ADMISSION IS FREE AND SPACE IS LIMITED! REGISTER NOW AT: WWW.APIMHEC.ORG







Alamda County BHCS MHSA Innovations - Mental Health Technology

Community Input Survey (Please respond by October 19, 2018)

Alameda County Behavioral Health Care Services (BHCS) is requesting community input on the Innovation Mental Health Technology proposal, funded by Mental Health Services Act.

1. Have you ever used mobile technology (i.e., smart phone, laptop) to support your mental health?
Yes
○ No
If yes, in what ways? (please specify)
2. Who do you think would benefit most from using mobile technology to support mental health? (Please name specific groups for each age group)
Children/ Youth (0-18 yrs. old) and Families
Transition Age Youth (16-24 yrs. old)
Adults (18-59 yrs. old)
Older Adults (60+ yrs. old)
Other (please specify groups for each age group)
3. Please rank in order of importance (1=not important to 4=most important): Which category of mobile technology would best support your mental health?
Mental Health Wellness Promotion (ie., promote strategies of mental health, wellness and self care)
Recovery Support (i.e., provide easy access to recovery support services)
Outreach, Education, and Education (i.e., engage community members with linguistically and culturally appropriate services)
Care Coordination (i.e, improve coordinated care through consumer's selected team of providers and loved ones)

4. In your experience, how can mobile technology improve outreach and engagement with consumers who are isolated, underserved, and/ or inappropriately served?
5. Is there anything else you would like to share about how mobile technology can support mental health?
6. Which of the following groups do you primarily identify with?
Consumer/ Peer
Family Member
Community Based Provider
Other (please specify)
7. What age group do you represent?
Children/ Youth (12-18 yrs. old
Transition Age Youth (19-25 yrs. old)
Adults (25-59 yrs. old)
Older Adults (60+ vrs. old)

Stakeholder Group Input on MHSA Site Visits 8/24/18

MHSA Stakeholder participated in the MHSA programs site visits in July and August 2018. They met with providers and had the opportunity to tour the program sites. Providers

1. Older Adult Peer Support Program (PEI 19)

Provider: City of Fremont

- Consumers/ Peers, older adults (OA) 60+ years old, are referred by City of Fremont Senior Mobile Mental Health program to Peer OA Program.
- This program began as the INN 3 project then funded later by City of Fremont and expanded to Hayward.
- Stable Peers are trained to be coaches for other OA consumers: 9 peer coaches each support 1-2 consumers.
- Program offers 7 week training and 3hr/ week training and supervision.
- 11 peers graduated; Current peers are very diverse: Russian, Korean, Chinese, Afr. Am., Indian, Hispanic, LGBT, Afghan (monolingual).
- Program Staff: Program Manager (LCSW), 1 LCSW clinical specialist, 1 part-time psychiatrist (12-15 hr/ wk); 1 physician assistant for home visits and mobile program
- What are the program demographics and budget?

2. Transition To Independence Process (TIP -FSP6)

Provider: Berkeley Mental Health/ Family, Youth, and Children's Services

- Amazing TAY clients who are really sad that TIP will no longer be implemented. Berkeley
 Mental Health did not apply for the RFP because scope of work would be serving clients
 county-wide. It is hard for small organizations to implement a countywide program.
- TAY clients felt strongly connected to TIP staff and were devastated that the program is closed. Majority of clients were African American. It is troubling there is no African American clinician/ therapist on staff.
- Stakeholders recommend a transition protocol to help TAY clients during their transition.
 - Perhaps City based CBO can provide services to clients
 - RFP conversion to the new FSP countywide scope of work need to consider losses in program transition that impact clients and support clients by building bridges with new providers.

BHCS Follow-up

Stakeholder input shared with BHCS Adult System of Care Director and FSP Division Director.

3. Beats, Rhymes and Life (BRL - PEI 20A)

Provider: Beats, Rhymes and Life

- BRL go to where the clients/ youth are in the community
- BRL is funded by other sources, not just BHCS. BRL has received awards for their program.
- Stakeholder comment: MHSA should fund only consumers/ clients with serious mental illness (SMI) and are homeless.

BHCS Response

State MHSA guidelines require Counties to fund and implement Prevention & Early Intervention (PEI) programs

4. Fremont Health Start (FHS - PEI 24)

Provider: East Bay Agency for Children

- This is a rich program and needs to be continued
- Recommend expansion of program in needed languages and dialects (i.e., Afghani)

BHCS Follow-up

Stakeholder input shared with MHSA Division Director and Prevention & Early Intervention (PEI) Coordinator.

Stakeholder input shared with

5. Juvenile Justice Transformation of the Guidance Clinic (CSS- OESD 8)

Alameda County BHCS

- This program provide comprehensive services to youth and TA clients/ consumers.
- Challenges: program staff diversity does not reflect clients/ consumers.
- Recommend connecting Workforce Education Training (WET) to fund a program in developing a pipeline for African American clinicians
- How could peer specialists support this program?

BHCS Follow-up

Stakeholder input shared with Workforce Employment Training Manager and Consumer Empowerment Manager.

6. Individual Placement Services (CSS – OESD 20)

This site visit was scheduled but not attended by Stakeholders.

- IPS has expanded to collaborate with a number of MHSA programs, including FSPs.
- Great case management support.
- Stakeholders comment: Need more than minimum wage; need good pay, education, junior college and apprenticeship opportunities.

BHCS Follow-up

Stakeholder input shared with BHCS Vocational Services Director.

MHSA STAKEHOLDER GROUP

INN Subcommittee

ACBHCS 2000 Embarcadero Cove, Ste. 400, Alvarado Niles Room 8/25/18 (1-2pm) Meeting Notes

Participants

MHSA Stakeholders: Alane Friedrick, Liz Ribenzdorf, Julia Egan, Viveca Bradley

BHCS staff: Linda Leung Flores

MHSA Stakeholders INN Subcommittee members discuss selected INN Round 3 final project reports. Evaluation criteria included:

- How is the project innovative or culturally responsive?
- What strategies can be utilized in current mental health services?
- What type of training can benefit providers or community members?
- Who can benefit from the training (i.e., providers or community members)?

Stakeholder Review INN 3 Projects

Feedback on all INN 3 projects:

- Need table of contents
- The grantees did not answer the questions. It's "politician style". Had to search for answers in the reports
- Final reports have variation in reporting style and language
- Training requests should be generated from community needs
- Find out what's working. Look at other INN over the years

Stakeholder Comments	Stakeholder Recommendations	BHCS Response
INN3 Project Name:		
Adapting Supports for LGBTQI2S & Families		
Description:		
Project provides a training curriculum for		
peers to learn how to run support groups,		
for differing generations. While the title		
indicates LGBTQ2, the content description of		
the training appears to be on how to run a		
group. It was unclear the content that was		
specific to LGBTQ2 vs. just group process procedure.		
All providers could use training and		
refreshers on best practices for facilitating a		
group. The role play example of difficult		
group characteristics was particularly		
relevant.		
Strengths:		
Group process training		
First aid for emotional trauma information		
sheet		
Challenges:		
Was not clear how it is specific to LGBTQI2S.		
What's the subculture for LGBT? It is not		
clearly addressed.		
No specific anecdotes from consumers.Need more support for LGBT Group		
Nothing about participants' potential issues		
and problems are included in the curriculum.		
Could not access the videos in the		
curriculum.		
Too much time for volunteers training.		

Sity of Fremont (COF) Peer Mental Health Coach rogram: A Community Mental Health Model Use of peer counselors is growing in popularity, and something some agencies are Stakeh was should be community of the coach of th	Response nolders' input nared with Adult System e Division or.
something some agencies are starting to embrace. Adding a counselor/coach to a mobile teams and other community supports would be beneficial. With that, the programs will need training on how to provide support to a peer, as the work can be triggering. The part about hoarding and how the fire department supports people in the community shows the need for training for non-mental health providers and adherence to the model. I like a larger group supporting it. Training is crucial. There	nared with Adult System e Division
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needs to be collaboration between similar	
programs on peer mentors so that it is not	
reinventing the wheel.	
Benefits the community. Keeps OA from	
emergency/ crisis services and improves	
their self-care, breaking their isolation.	
There should be a balance of different communities to compare together. Community.	
communities to come together. Community	
mental health team approach is recommended.	
uccess :	
They had support with COF Fire Dept,	
Mobile MH program. It might not be as	
successful if other programs were not	
supportive.	
hallenges:	
Report is too long.	
Need a mobile program similar to GART.	
Need a collaborative, cohesive peer program	
with first responders and other providers.	
Original packet has repeating information	
and is hard to follow.	
question:	
How are isolated consumers identified and	
engaged?	

Stakoholder Comments	Stakeholder Pecommendations	RUCS Posnonso
	Stakeholder Recommendations	Brics Kesponse
Stakeholder Comments INN3 Project Name: An SRO Culture of Inclusion Among Residents with Serious Mental Illness Description: • This program addresses the needs of SRO residents; typically SRO's are thought of as primarily inexpensive housing for individuals but not much in terms of treatment. This program helps bring meaning, purpose and social engagement back into the lives of the residents. • Who benefits – clients as some become more involved with community helps reduce stigma, ER visits (no documentation), SRO residents • Program provided yoga, music, art, coffee, food – helped to increase wellness. Strength: • Providing food seems very important and motivating. Basic daily living issues are a struggle and helping meet those needs even in a simple way and can have impact and make others feel cared about. The clubhouse model (which it is based on), has research behind it for this type of population and could be used in other facilities and treatment settings. • This report answered all 4 questions – culturally responsive, music; program replication • Food, music, movement are important to resident recovery. Challenges: • Transportation difficulty for SRO residents to get to Wellness Centers • If they wish to keep the Cognitive	This could be developed into a mobile program for consumers of SRO and Board & Cares. Revise the program to address family as a program component and include opportunities for Family members and consumers share and communicate. Stakeholders recommended this project to be implemented in other SROs and Board & Cares.	Stakeholders' input was shared with BHCS Adult System of Care Director and Division Director of Adult Service Teams and Wellness Centers.
 If they wish to keep the Cognitive Training component, more support and training would be need for providers. They may choose to eliminate it and focus more on outings, meals, socialization, etc. It seems like perhaps families could use some training, as there was little family 		
involvement. A family visit might be something that would help engage some of the residents, particularly if it required the person to engage in the activity provided WITH their family member.		

 Residents fell apart/ declined when the program left. This program can make a difference in residents' lives. There were 		
also positive results for participants (i.e., getting jobs, etc.) Need buy in from building owner/ managers.		
Questions		
 Where is a structured proposal (i.e., how to pilot program findings, outcomes, etc)? 		
 Looks like the program stopped after 1 year, would perhaps be hard to restart?) 		
Stakeholder Comments	Stakeholder Recommendations	BHCS Response
INN3 Project Name: Reaching In: Reducing Isolation Due to Mental Illness by Partnering With Family Members/Loved Ones Description: • This project addresses a need for primarily for family members, although the initial purpose read as though it was for the individual with mental illness. Highlights seem to be the assistance provided to family members who may not be able to afford their own family therapy services or are reluctant to obtain them. • The workshop model allowed for more personal processing and group discussion vs. the more psycho education based services typically provided. Challenges • If peer counselors are to be used, it seems they need more training and experience. More research would be needed for this model to be used for adults with longer histories of mental illness and isolation, seemed to be better for perhaps TAY age individuals.	 Would be nice for the program to be longer, as making family systems changes takes significant time. Seems a useful resources for many. It reads as an adjunctive service to NAMI and FERC, would be good for them to receive the training to integrate the ongoing workshop model into their programs. 	Stakeholders' input was shared with Family Empowerment Manager.

BEHAVIORAL HEALTH - SELECTED GLOSSARY Updated 5/09

Consumer/Client	A consumer is a person who has experienced mental health issues that have disrupted his or her education, employment, housing, social connections and/or quality of life. He or she has utilized mental health services and has a personal experience of stigma, discrimination or social exclusion.
Consumer Driven	In a consumer -driven system, consumers choose their own programs and the providers that will help them most. Their needs and preferences drive the policy and financing decisions that affect them. Care is consumer-centered, with providers working in full partnership with the consumers they serve to develop individualized plans of care.
Consumer Empowerment	Consumers have the authority to choose from a range of options and to participate in all decisions including the allocation of resources that will affect their lives and are educated and supported in doing so. Consumers have the ability to join with other consumers to collectively and effectively speak for themselves about their needs, wants, desires and aspirations.
Consumer Involvement	Consumers share their unique expertise by directly and significantly participating and affecting the mental health system at all levels, in policy development, program planning, implementation, management, oversight, and evaluation, as well as service delivery and training.
Consumer-Run	Defined as services that are planned, operated and evaluated by consumers. Consumer-run or operated services do not preclude non-consumers or professionals from being involved, but the inclusion of non-consumers is within in the control of consumer operators.
Family Member	A person, who has provided primary support for, is a primary caregiver of, or whose daily life is impacted by, being a family member (by personal or biological definition) of a person who is living with symptoms of mental illness. Family members may be the biological parents, foster parents, siblings, spouses, children, aunts, uncles, cousins, friends, or anyone else whom the consumer defines as "their family members."
Family-Driven	A system of care that involves the family of a youth/consumer in the process of assessment, identifying treatment options and developing a treatment plan that is based on and adapted to the youth/consumer's individual needs.
Family Involvement	The full participation of family members in all levels of our systems of care including: direct service peer support, system development workgroups, clinical teams, training, management, administration, policy development and legislative advocacy.
Family Partnership	This term has two meanings: 1) Family Partnership is an intentional focus on working with the consumer as a member of a family unit that offers insight, strength and support to the consumer's treatment team. 2) Family Partnerships are programs that include Family Partners as a peer professional position in the treatment team or direct service unit. Family Partners are persons who have been primary caregivers of persons with SED/SMI and have undergone significant training in multi-disciplinary settings to assist families in understanding and navigating the behavioral health care system, as well as other systems that they will interact with to become their own advocates for their families.
Wellness, Recovery & Resiliency	Effective mental health services and supports offer people opportunities to build their <u>resiliency</u> , giving people the internal resources required to fully pursue <u>recovery</u> and manage <u>wellness</u> . Wellness is the experience of health across the dimensions of mind, body and spirit; Recovery refers to the process of people returning to a meaningful life, guided by their own choices, in their natural community; Resiliency is a person's innate capacity for positive growth and transformation across the life span despite difficult challenges

AB109	Assembly Bill 109.
ACBHCS	Alameda County Behavioral Health Care Services This department is part of the Alameda County Health Care Services Agency. Also known as Behavioral Health Care Services (BHCS).
ACCESS	Acute Crisis Care and Evaluation for System-Wide Services (ACCESS). This is ACBHCS' County-wide evaluation and referral system.
Accessible Services	Services that are affordable, available and sensitive to individual needs and cultural values.
ACT	Assertive Community Treatment, sometimes referred to as Program of Assertive Community Treatment (PACT), is a team-based approach to the provision of treatment, rehabilitation, and support services. ACT/PACT models of treatment are built around a self-contained multidisciplinary team that serves as the fixed point of responsibility for all patient care for a fixed group of patients. In this approach, normally used with clients with severe and persistent mental illness, the treatment team typically provides all patient services using a highly integrated approach to care. Hallmark features include 24/7/365 availability, a "whatever it takes" approach to problem solving, a low client-staff ratio, and services brought to clients where they reside.
Activities	A task that needs to be accomplished within a defined period of time.
Actual Cost	A method of payment where a provider is reimbursed for their actual reasonable line-item costs for a particular program.
Acute Psychiatric Inpatient Hospital Services	Services provided in general acute care hospitals, acute psychiatric hospitals and psychiatric health facilities. These facilities provide service 24/7. Services include routine hospital services, all hospital-based ancillary services and professional services. Routine hospital services include but are not limited to all Medi-Cal, nursing and other support services usually provided to an inpatient by a psychiatric inpatient hospital. Included are psychotherapy, consultation, case conference, case management, occupational therapy, pharmacy, medication management, school/education/tutoring, translation/language support, and financial counseling.
Admin Status/Admin Days	A hospitalized patient waiting for transfer to another facility.
Administrative Costs	A budgetary term used to describe non-direct services costs. Costs of operating and managing programs. These costs cannot be tied to the provision of specific services.
Adolescent	Youth between the ages of 12 and 17.
ADP	California Department of Alcohol and Drug Programs.
Adult	Individuals between the ages of 18 and 59.
Agreement	A formal contract between ACBHCS and a Contractor
Alternative Activities	A Primary Prevention CSAP strategy, which provides participation of target populations in activities that exclude alcohol, tobacco, and other drug use. The assumption is that constructive and healthy activities offset the attraction to or otherwise meet the needs usually filled by alcohol, tobacco, and other drugs and would, therefore, minimize or remove the need to use these substances.
AOD	Alcohol and Other Drug Services
AOD Primary Prevention	An AOD modality, which provides strategies to reduce or prevent the use or abuse of alcohol and other drugs among diverse populations and change community conditions that contribute to alcohol and drug related problems. Activities are directed at individuals who do not require treatment for substance abuse.
AOD Primary Prevention Indicated Preventative Interventions	Primary Prevention modality activities targeted to individuals in high risk environments, who do not meet DSM-IV criteria for addiction, but who are showing early danger signs, such as falling grades. The mission of indicated prevention is to identify individuals who are exhibiting early signs of substance abuse.
AOD Primary Prevention Selective Preventative Interventions	Primary Prevention modality activities targeted to a subgroup of the population that are deemed to be at risk for substance abuse by virtue of their membership in a particular population segment, e.g. foster youth. Selective Prevention targets the entire subgroup regardless of the degree of risk any individual within a group. An individual's personal risk is not specifically assessed or identified and is based solely on a presumption given his or her membership in the at-risk subgroups.
AOD Primary Prevention	Primary Prevention modality activities targeted to the general public or a whole population group. The aim is to prevent/delay use of alcohol and other

Universal Preventative	drugs by providing individuals with information/skills. All members of the population share the same general risk for substance abuse, although risk may
Interventions	vary greatly among individuals. As of 2011, ACBHCS will no longer contract with providers for this activity, as it is too broad.
AOD Secondary Prevention	An AOD modality, which targets individuals who are involved in unhealthy alcohol and other drug use and/or have been identified to need treatment, but
	have not engaged in treatment services.
Assessment	A service activity used in both AOD and mental health based on a method of interview, observation, and testing. This service may include a clinical
	analysis of the history and current status of a client or patient's mental, emotional, or behavior disorder, relevant cultural issues and history, diagnosis, and
	the use of testing procedures.
	A mental health billing procedure code. Defined as a clinical analysis of the history and current status of the Individual's mental, emotional, or behavioral
	disorder. Relevant cultural issues and history may be included where appropriate. Assessment includes diagnosis and the use of testing procedures.
	This includes Plan Development when provided on the same day as the service.
Average Intensity	A contract term, expressed in a number format. It is defined as the number of times a client receives a particular service in a defined period of time, such
	as month or year.
BASN	Bay Area Services Network. BASN is a drug and alcohol recovery program for people on California state parole. As of 2011, the program has been
	renamed Parolee Services Network (PSN).
BERT	Behavioral Emergency Response Team
Best Practice	A body of knowledge that may include scientific, practical or anecdotal elements and that is perceived as an effective method of treatment.
BHCS	Behavioral Health Care Services. This department is part of the Alameda County Health Care Services Agency. Also known as Alameda County
	Behavioral Health Care Services (ACBHCS)
Bid	A procurement term, which is a bidder's response to a procurement request.
Bidder	The specific person or entity that responds to a procurement request.
Board and Care Home	(Also called adult care home or group home.) Residence which offers housing and personal care services for 3 to 16 residents. Services (such as meals,
	supervision, and transportation) are usually provided by the owner or manager. May be single family home. (Licensed as adult family home or adult group
	home.)
BOS	Board of Supervisors. Usually used in referenced to the Alameda County Board of Supervisors. http://www.acgov.org/board/
Brokerage Services	A mental health billing procedure code. Defined as activities provided by program staff to access needed medical, educational, social, prevocational,
Linkages and Consultation	vocational, rehabilitative or other needed community services for eligible Individuals.
Lilikages and Consultation	Identification and pursuit of resources necessary and appropriate to implement the Individual Service Plan (ISP). Placement Services – Supportive assistance in the assessment and determination of need and in the securing of adequate and appropriate living
	arrangements including, but not limited to, the following: locating and securing living quarters and/or finding funding, pre-placement visit(s), related
	contract negotiations, placement, follow-up, and related supportive contacts with clients or others. This service includes Plan Development when provided
	on the same day as a primary service.
Budget	Estimate of proposed expenditures prior to actually incurring the expenditures. May or may not reflect actual expenditures. Should be developed using the
Duaget	best information available at the time the budget is developed.
Calendar Year	Twelve month period from January 1st to December 31st
CalOMS	California Outcome Measurement Service, which is the AOD State designed and managed web based database. Contractors directly enter all of their
- Calo III C	service data here.
CalOMS Pv	California Outcome Measurement Service for Prevention (CalOMS Pv) is a web-based State prevention database.
CalWORKs	(California Work Opportunity and Responsibility to Kids) is a State program that provides cash aid, employment services and other benefits to eligible
	needy families. The program provides AOD and mental health services if needed for individuals on public assistance to allow their return to work.
CAMHDA	California Mental Health Directors Association

	REVISION DATE. SEPTEMBER 24, 2010
CAO	County Administrators Office. The County Administrator is responsible for the implementation of policies and decisions of the Board of Supervisors. The County Administrator's Office is composed of six units that provide and oversee programs serving the entire County. These units include Administrative Services, Budget and Finance, Clerk of the Board of Supervisors, Diversity Programs, East Bay Economic Development Alliance, and Risk Management. http://www.acgov.org/cao/services.htm
Care Coordinator	A person who acts as a coordinator to ensure that patients receive all needed health care services. Within governmental programs, care coordinators also help patients remove barriers to access, and help link patients to other needed services in the community (such as financial assistance, housing, social services, etc.). Sometimes plans or insurance companies use the term care coordinator for a case manager who is also concerned with controlling health care costs
Care Giver	A person who has special training to help people with mental health problems. Caregivers include family members of adults and older adults, as well as family members of children.
Case Management	A treatment modality, which is usually offered in mental health and sometimes under AOD funding. It is a participant-centered, goal-oriented process for assessing the needs of an individual for particular services; assisting clients in obtaining those services and reviewing accomplishments, outcomes and barriers. Case management may be either an element of a recovery/treatment program or a free-standing services.
Case Management (HIV Early Intervention Services)	This definition only pertains to Outreach under SAPT Grant HIV Early Intervention Services. Case Management is for persons who are confirmed HIV positive, for whom early intervention services can delay the progression of the disease and meet their current medical needs, a case management process used for assessing the needs of an individual for particular ancillary services and assisting in obtaining those services.
Case Management Support	A treatment services modality, which is not specifically related to an identified client. Examples include developing the coordination of systems and establishing systems monitoring.
Case Management/ Brokerage	A treatment modality, which is usually offered in mental health and sometimes in AOD. It is the total provision of services to a client that addresses the needs of the client to function at his or her best level in the community, often arranging for appropriate services and support. A case manager coordinates mental health, social work, educational, health care, vocational, housing, transportation, advocacy, respite care, and recreational services, as needed. The case manager makes sure that the changing needs of the consumer and family are met. Services include, but are not limited to communication, coordination, referral, monitoring service delivery and progress and plan development. (This definition does not apply to managed care). See also definition of Personal Care Coordinator in Full Service Partnership section of the glossary.
Case Manager	An individual who organizes and coordinates services and supports for individuals with mental illness and their families.
CDCR	California Department of Corrections and Rehabilitation
Center for Substance Abuse Prevention (CSAP)	CSAP provides national leadership in the Federal effort to prevent alcohol, tobacco, and other drug problems. CSAP has identified six key categories of prevention strategies: information dissemination; education; alternative activities; problem identification and referral; community based process; and environmental. As of 2011, BHCS only funds five of the strategies, as information dissemination is too broad.
CFT	Capital Facilities and Technology. This is one of the funding categories under the MHSA meant to fund physical buildings and technology infrastructure to support mental health service delivery.
CGF	County General Fund.
Child	Youth between the ages of 0 and 17.
CHOICES for Community	A large scale pilot project in Alameda County's adult mental health system geared at implementing a positive vision of how recovery principles can change
Living	individuals and whole systems of care. CHOICES primary objective is to promote wellness and recovery for CHOICES partners to bring about organizational transformation to ACBHCS. This will be directly accomplished by integrating evidence based practices in peer mentoring, housing assistance, employment training and care management.
Chronically Homeless	Under the Housing and Urban Development (HUD) definition applicable to the HOST Shelter Plus Care Certificates, the term "chronically homeless" or "chronically homeless individual" or "homeless person" is an unaccompanied homeless individual with a disabling condition who has either: a) been continuously homeless for a year or more, or; b) has had at least four (4) episodes of homelessness in the past three (3) years.
CiMH	California Institute for Mental Health http://www.cimh.org/About.aspx

Clawback	The amount states pay to the federal government as required by the Medi-Care Prescription Drug Improvement and Modernization Act of 2003 (MMA). It is intended to offset some of the added expense to Medi-Care Part D of assuming drug costs for residents dually eligible for both programs.
Client	Used synonymously with Consumer.
Client Housing Operation Expenditures	Operating costs of providing housing supports to clients, including building repair and maintenance, utilities, housing agency management fees, insurance, property taxes and assessment, credit report fess and other operating costs. This does not include capital costs used to purchase, build or rehab housing or the salaries and benefits of staff used to provide client housing supports.
Client Housing Support Expenditures	The cost of providing housing supports, including subsidies for permanent, transitional and temporary housing, master leases, motel and other housing vouchers, rental security deposits, first and last month rental payments and other fiscal housing supports. This does not include capital costs used to purchase, build or rehab housing or the salaries and benefits of staff used to provide client housing supports.
Clinician's Gateway	
COLA	Cost Of Living Allowance
COLA	Cost of Living Adjustment
Collaboration	Work jointly with others.
Collateral	A mental health billing procedure code. Defined as contact with one or more significant support persons in the life of the Individual which may include consultation and training to assist in better utilization of services and understanding mental illness. Services include, but are not limited to, helping significant support persons to understand and accept the Individual's condition and involving them in service planning and implementation of service plan(s). Family counseling or therapy which is provided on behalf of the Individual is considered collateral. This includes Plan Development when provided on the same day as the service.
Community Based Process	Used to describe an AOD Primary Prevention CSAP strategy, which aims to enhance the ability of the community to more effectively provide prevention and treatment services for alcohol, tobacco, and drug abuse disorders. Activities in this strategy include organizing, planning, and enhancing efficiency and effectiveness of services implementation, interagency collaboration, coalition building and networking.
Community Client Services	Activities directed toward assisting clients and families for whom there is an open case record to achieve a more adaptive level of functioning through a single or occasional contact and that enhance or expand the knowledge and skills of human service agency staff in meeting the needs of mental health clients.
Community Collaboration	The process by which various stakeholders (which may include consumers, families, citizens, agencies, organizations, and businesses) work together to share information and resources in order to accomplish a shared vision. Collaboration allows for shared leadership, decisions, ownership, vision, and responsibility.
Community Service and Support	A general reference to community-based mental health services and support programs, which includes a variety of services, a wide range of intensities and purpose. This term is often referred to as a "continuous system of care" model able to respond to a variety of user needs. See "Integrated Services" and "System of Care.
Community-Based Organization (CBO)	A non-governmental organization that provides direct services to participants.
Compliance	Accurately following the rules, for example, on Medicare billing system requirements and other federal or state regulations. A compliance program is a self-monitoring system of checks and balances to ensure that an organization consistently complies with applicable laws relating to its business activities.
Conditional Release Program	A California statewide program of mental health outpatient treatment in local communities under court supervision. When an individual is committed to CONREP, he or she remains within the constructive custody of the Department of Mental Health. See Penal Code 1605, 1615. Courts may order outpatient commitment to CONREP instead of confinement in a state hospital. People on Incompetent to Stand Trial, Not Guilty by Reason of Insanity, Mentally Disordered Offender, and Mentally Disordered Sex Offender commitments are all eligible for outpatient placement in the CONREP program.
CONREP	Conditional Release Program

Conservatorship A legal term where an entity (person or organization) is subjected to the legal control of an external entity, known as a conservator. Conserve established by a court order for an individual living with psychosis, are incapacitated or are a harm to themselves. Mental capacity must be a Medi-Cal physician or a psychiatrist experienced in the field and is documented and provided to the court as evidence. When used in health care terms, it is defined as the meeting of two or more professionals to discuss the diagnosis, prognosis, and treatmen particular case. Also used to describe receiving advice or guidance from an expert. Consumer A consumer is a person who has experienced mental health issues that have disrupted his or her education, employment, housing, social conduction and/or quality of life. He or she has utilized mental health issues and has a personal experience of stigme, discrimination or social evalusiful in a consumer-driven system, consumers choose their own programs and the providers that will help them most. Their needs and preference policy and financing decisions that affect them. Care is consumer-centered, with providers working in full partnership with the consumers the develop individualized plans of care. Consumer Empowerment Consumer Involvement Consumers have the authority to choose from a range of options and to participate in all decisions including the allocation of resources that lives and are educated and supported in doing so. Consumers have the ability to join with other consumers to collectively and effectively specified development, program planning, implementation, management, oversight, and evaluation, as well as service delivery and training. Consumer/Client Consumer is a person who has experienced mental health issues that have disrupted his or her education, employment, housing, social or and/or quality of life. He or she has utilized mental health issues of the have disrupted his or feltime, discrimination or social explains. Consumer/Client A consu	
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Crisis Residential Treatment Therapeutic or rehabilitative mental health service modalities provided in a non-institutionalized residential setting which provides a structure	d program as
Service an alternative to hospitalization for clients experiencing an acute psychiatric episode or crisis, who do not have Medi-Cal complications requ	
care. Services are available 24 hours per day, seven days a week. Services may include, but are not limited to assessment, plan development	ent, therapy,

	collateral and crisis intervention.
Crisis Service/Program	A mental health outpatient service modality program offering either crisis intervention or stabilization services.
Crisis Stabilization	A mental health service modality of less than 24 hours duration for a condition which requires more timely response than a regularly scheduled visit.
	Crisis stabilization may include, but is not limited to, assessment, collateral, therapy. The service can only be delivered at a site that has been certified by
	the Mental Health Plan (MHP) or State to provide crisis stabilization services.
CSAP	Center for Substance Abuse Prevention. CSAP provides national leadership in the Federal effort to prevent alcohol, tobacco, and other drug problems.
	CSAP has identified six key categories of prevention strategies: information dissemination; education; alternative activities; problem identification and
	referral; community based process; and environmental.
CSS	Community Services and Supports. This is one of the funding categories under the MHSA.
CTF	Community Treatment Facility, a type of residential mental health facility.
Cultural Competence/ Multi-	The practice of continuous self-assessment and community awareness on the part of service providers to assure a focus on the cultural, linguistic, socio-
Culturalism	economic, educational and spiritual experiences of consumers and their families/support systems relative to their care.
Cultural Responsiveness	The practice of continuous self-assessment and community awareness on the part of service providers to assure a focus on and adapt to the cultural,
	linguistic, socio-economic, educational and spiritual experiences of consumers and their families/support systems relative to their care.
CQRT	Clinical Quality Review Team (CQRT)
Data Source	Is a contract term used to describe where information (data) will be entered, saved, stored, etc.
Day Care Habilitative	Is an AOD step down service modality from Residential and provides outpatient counseling and rehabilitative services to individuals with substance abuse
	issues. Clients attend the program at least three hours a day, three to five days per week. Clients participate in regular, structured, supervised treatment
	services
Day Rehabilitation	A mental health modality of rehabilitation and therapy to improve, maintain or restore personal independence and functioning, consistent with
	requirements for learning and development, which provides services to a distinct group of individuals. There is half day treatment and full day treatment.
	Half day treatment is available at least three hours, but less than four. Full day treatment is available for at least four hours per day and less than 24.
	Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral.
Day Treatment Intensive	A mental health modality, multi-disciplinary program of therapy, which may be an alternative to hospitalization, avoid placement in a more restrictive
	setting or maintain the client in a community setting, which provides services to a distinct group of individuals. There is half day treatment and full day
	treatment. Half day treatment is available at least three hours, but less than four. Full day treatment is available for at least four hours per day and less
	than 24. Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral.
Decompensation	The deterioration of existing defenses, leading to an exacerbation of pathological behavior.
Deliverable	A term used in project management or contract monitoring to describe a tangible or intangible object produced as a result of the project that is intended to
Dama was this	be delivered to a customer The statistical shared with a file of the season of the se
Demographics Count	The statistical characteristics of human populations (as age or income) used especially to identify markets (services needed).
Dependents of the Court	When children are made Dependents of the Court, the Court takes legal jurisdiction over many aspects of their lives. The Court delegates some of that
	authority to the child welfare system, which is charged with ensuring that the children are placed in a safe environment and that their day-to-day physical
	and emotional needs are met as well as reasonably possible. Child Welfare Workers (CWWs) are the main link between Dependent Children of the Court
Detoxification	and their biological parents. An AOD modality and process that supports withdrawal from alcohol and other substance overuse.
Detoxilication	State of California, Department of Health Services
Direct Service Costs	Costs of providing services to clients
Discrimination	Discrimination occurs when people and societies act upon their feelings of rejection and discomfort with mental illness by depriving those associated with
	it the rights and life opportunities that are afforded to all other people.

	NEVISION DATE. SEPTEMBER 24, 2010
Disinhibition	Freedom to act according to one's inner drives or feelings, with less regard for restraints imposed by cultural norms or one's superego; removal of an inhibitory, constraining, or limiting influence, as in the escape from higher cortical control in neurologic injury, or in uncontrolled firing of impulses, as when a drug interferes with the usual limiting or inhibiting action of GABA within the central nervous system.
Disparities	Markedly distinct in quality or character, especially in regards to accessing mental health services.
DMC	Drug Medi-Cal
DMH	State of California, Department of Mental Health
Donut Hole	More formally known as the Medi-Care Part D coverage gap. After a Medi-Care beneficiary surpasses the prescription drug coverage limit, the Medi-Care beneficiary is in the coverage gap, or "donut hole", and is financially responsible for the entire cost of prescription drugs until the expense reaches the catastrophic coverage threshold.
Drug Medi-Cal	
DSM-IV	Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition
Dual Diagnosis	Often used to indicate the co-occurrence of mental health disorders and substance abuse disorders (alcohol and/or drug dependence or abuse), although can be used to indicate other combinations of disorders.
Due Date	A term used in project management or contract monitoring. This is not used often used, as may deliverables will be due by the end of the contracted fiscal year. However, if there is a time-sensitive activity, such as start-up phases, this would be used in the contract.
Dx	Diagnosis
Early Intervention	Usually joined in phrase with the term "prevention", it means providing services or treatment early on at the onset of an illness with the goal of reducing the duration of the disorder. This term is used in both AOD and mental health.
Eating Disorders	A group of disorders in which there are significant disturbances in eating. Two common examples are Anorexia Nervosa, a refusal to maintain an acceptable body weight for one's age and height: and Bulimia Nervosa, uncontrollable binge eating which may be followed by purging the food through self-induced vomiting, laxatives or diuretics.
Education	Used to describe an AOD Primary Prevention CSAP strategy, which involves two-way communication and is distinguished from the Information Dissemination Strategy by the fact that interaction between the educator/facilitator and the participants is the basis of its activities.
Eligibility	When used in a contract, it indicates that an individual must meet particular stipulations in order to participate in and/or receive services. Sometimes these stipulations are: type of insurance needed; referral source; age range, etc.
Emerging Business	A procurement term used to describe a business, which has been certified by the County as local and meets one half of the U.S. Small Business Administration (SBA) size standards for its classification and has been in business for less than five years.
Environmental Strategy	An AOD Primary Prevention CSAP strategy, which establishes or changes written and unwritten community standards, codes, and attitudes, thereby influencing incidence and prevalence of the abuse of alcohol, tobacco, and other drugs used in the general populations. This strategy is divided into two subcategories to permit distinction between activities, which center on legal and regulatory initiatives and those which relate to the service and action-oriented initiatives.
Episode	A period during which a patient is treated by a clinic, hospital, or provider.
EPSDT	Early Periodic Screening Diagnosis and Treatment (Federal Medicaid/California Medi-Cal). Settlement of lawsuit against the state in 1995 expanded Medi-Cal services to beneficiaries less than 21 years of age needing specialty mental health services to correct or ameliorate mental illnesses.
Ethnic Disparity	The mental health system has not kept pace with the diverse needs of racial and ethnic minorities, often under serving or inappropriately serving them. Specifically, the system has neglected to incorporate respect or understanding of the histories, traditions, beliefs, languages, and value systems of culturally diverse groups.
Evaluation	A mental health billing procedure code. Defined as an appraisal of the Individual's community functioning in several areas including living situation, daily activities, social support systems and health status. Cultural issues may be addressed where appropriate. This includes Plan Development when provided on the same day as the service.

	REVISION DATE. SEPTEMBER 24, 2010
Evidence Based Model or	Those clinical and administrative practices that have been proven to consistently produce specific intended results through
Practice	research using controlled (randomized) clinical trials in relevant community settings and programs.
Expand	Increase in the kind or amount of services offered or increase in the number of people served or increase in the capacity to provide extended or new
	services.
Expenditure	An actual incurred cost.
Family Advocate	Staff assigned as a liaison for families to assist them with services, complaints and education about mental health issues and available services.
Family Involvement	The full participation of family members in all levels of our systems of care including: direct service peer support, system development workgroups, clinical teams, training, management, administration, policy development and legislative advocacy.
Family Member	A person, who has provided primary support for, is a primary caregiver of, or whose daily life is impacted by, being a family member (by personal or biological definition) of a person who is living with symptoms of mental illness. Family members may be the biological parents, foster parents, siblings, spouses, children, aunts, uncles, cousins, friends, or anyone else whom the consumer defines as "their family members."
Family Partnership	This term has two meanings: 1) Family Partnership is an intentional focus on working with the consumer as a member of a family unit that offers insight, strength and support to the consumer's treatment team. 2) Family Partnerships are programs that include Family Partners as a peer professional position in the treatment team or direct service unit. Family Partners are persons who have been primary caregivers of persons with SED/SMI and have undergone significant training in multi-disciplinary settings to assist families in understanding and navigating the behavioral health care system, as well as other systems that they will interact with to become their own advocates for their families.
Family, Significant Other, Significant Support Person	A person, who has provided primary support for, is a primary caregiver of, or whose daily life is impacted by, being a family member (by personal or biological definition) of a person who is living with symptoms of mental illness. Family members may be the biological parents, foster parents, siblings, spouses, children, aunts, uncles, cousins, friends, or anyone else whom the consumer defines as "their family members."
Family-Driven	A system of care that involves the family of a youth/consumer in the process of assessment, identifying treatment options and developing a treatment plan that is based on and adapted to the youth/consumer's individual needs.
Federal	Refers to United States Federal Government, its departments and/or agencies
Federal Poverty Level	Poverty guidelines are established by the Department of Health and Human Services and are issued each year in the Federal Register. They are used to determine individuals' and families' eligibility for various Federal and non-Federal programs. They are the same in the 48 contiguous States and the District of Columbia and are higher in Alaska and Hawaii. (Source: Alpha Center, Glossary of Terms Commonly Used in Health Care)
Fiscal Year (FY)	Twelve month period from July 1st. June 30th, used in the County accounting and contracting system.
FMR	Financial Management Rewards. This involves assigned departmental targets for end of year savings. Upon meeting their target, a department is able to use their FMR savings in the next fiscal year.
Forensic Mental Health	Services and programs that provide treatment for persons living with mental illness committed to treatment as a result of involvement with the criminal justice system
Forensics	Scientific tests or techniques used in the investigations in crimes. When used in a program name, it implies that the program works with individuals convicted of a crime.
Fremont HSD	Fremont Human Services Department
FSP	Full Service Partnership
FTE	Full Time Equivalent
Full Service Partnership (FSP)	With the initial implementation and funding of the MHSA, DMH will take the first step in funding counties to develop full service partnerships with identified initial populations. These partnerships shall be culturally competent and shall include individualized client/family-driven mental health services and supports plans which emphasize recovery and resilience, and which offer integrated service experiences for clients and families. In selecting initial populations, specific attention should be paid to populations and individuals that are currently unserved, and to reducing racial/ethnic disparities. The goal will be to eventually provide all needed cost-efficient and effective services and supports for <u>all</u> those in need of mental health services and their families

HIV Early Intervention		consistent with the individualized plans.
GART Geriatric Assistance. Financial support for eligible adults with no other means of support. GART Geriatric Assessment Team Goal A project management or contract monitoring term used to describe a result a person or system envisions, plans and commits to achieve. Group Home A 24-hour facility of any capacity that provides services in a group setting for children or adults who need or desire care and supervision. A mental health billing procedure code. Defined as rehabilitation some provided on the same day as the service. Group Rehabilitation A mental health billing procedure code. Defined as rehabilitation service activity, including any or all of the following: assistance in restoring or maintaining a group of individuals functional skills, daily limps skills, goaroning and proval provided on the same day as the service. Group Therapy A mental health billing procedure code. Defined as therapeutic interventions delivered to a group of Individuals suggestion of the Individuals and/or family, training in leisure activities needed to achieve the Individuals' goals/desired results/personal milestones, medication education. This includes Plan Development when provided on the same day as the service. A mental health billing procedure code. Defined as therapeutic interventions delivered to a group of Individuals consistent with the Individuals' goals/desired results/personal milestones which focus primarily on symptom reduction as a means to improve functional impairments. This service may include family therapy. This includes Plan Development when provided on the same day as the service. Health Care Services Agency (Alameda County) Health PAC Health Families Health PAC In a program designed for people who need, but cannot afford health care and do not qualify for help from other programs. HealthPAC is only for Alameda County residents and is funded by County, State and federal dollars. HealthPAC is not an insurance. Healthy Families Healthy Families A result of the federal powerly level, for children	Full Time Equivalent	defined by law. For example, if the normal schedule for a staff person is 40 hours per week (40* 52 weeks – 4 weeks for vacation=1,920) Someone
Goal A project management or contract monitoring term used to describe a result a person or system envisions, plans and commits to achieve. Goals Are desired results a person or system envisions, plans and commits to achieve. Group Home A 24-hour facility of any capacity that provides services in a group setting for children or adults who need or desire care and supervision. Group Rehabilitation A mental health billing procedure code. Defined as the service as rehabilitation service activity, including any or all of the following: assistance in restoring or maintaining a group of Individuals' functional skills, daily living skills, social skills, grooming and personal hygiene skills, meal preparation skills, medication compliance, and support resources, counseling of the Individuals and preparation skills, medication compliance, and support resources, counseling of the Individuals and preparation skills, medication ocompliance, and support resources, counseling of the Individuals and preparation skills, medication ocompliance, and support resources, counseling of the Individuals and preparation skills, medication ocompliance, and support resources, counseling of the Individuals and preparation skills, medication ocompliance, and support resources, counseling of the Individuals and preparation skills, medication ocompliance, and support resources, counseling of the Individuals and preparation skills, medication ocompliance, and support resources, counseling of the Individuals and preparation skills, and preparation skills, daily individuals and preparation skills, and preparation skill	GA	
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	Incompetent to Stand Trial	understand the nature of the criminal proceedings or assist counsel in the conduct of a defense. The court then commits the defendant to treatment to
	Independent Living Services	Assistance, skills training and supportive services designed to maximize the client's ability to function in the community.

	NEVISION DATE. SEFTEINBER 24, 2010
Indicated Prevention	This Institute of Medicine (IOM) category is designed to catch problems in their earliest stages to prevent long-term suffering. The mission of indicated prevention is to identify individuals who are exhibiting early signs of serious mental health issues, substance abuse and other associated behaviors and to
	provide appropriate services.
Individual Rehabilitation	A mental health billing procedure code. Defined as rehabilitation service activity, including any or all of the following: assistance in restoring or maintaining an Individual's functional skills, daily living skills, social skills, grooming and personal hygiene skills, meal preparation skills, medication compliance, and support resources, counseling of the Individual and/or family, training in leisure activities needed to achieve the Individual's goals/desired results/ personal milestones, medication education. This includes Plan Development when provided on the same day as the services.
Individual Service Plan	Person-directed plan of care developed with the assistance of the interdisciplinary team to prevent institutionalization and facilitate an individual's ability to fully participate in the community, taking into account the individual's preferences.
Individual Therapy	A mental health billing procedure code. Defined as therapeutic interventions delivered to an Individual consistent with the Individual's goals/desired results/personal milestones which focus primarily on symptom reduction as a means to improve functional impairments. This service may include family therapy. This includes Plan Development when provided on the same day as the service.
Innovation (INN)	New and creative approaches and programs that increase access, quality of services and/or collaboration. This is one of the funding categories under the MHSA.
Inpatient Services	Voluntary or involuntary admission to a facility providing psychiatric care.
Institute for Mental Diseases	(IMD) A hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases, including Medi-Cal attention, nursing care, and related services. Whether an institution is an institution for mental diseases is determined by its overall character as that of a facility established and maintained primarily for the care and treatment of individuals with mental diseases, whether or not it is licensed as such. These instutions cannot bill to Medi-Cal or Medi-Care. http://www.dmh.ca.gov/DMHDocs/docs/letters02/02-06.pdf
Institute of Medicine	The Institute of Medicine (IOM) is an independent, nonprofit organization that works outside of government to provide unbiased and authoritative advice to decision makers and the public.
INSYST	It is a client and service tracking and billing application that is used by CoSD and contract mental health providers to coordinate client care, perform required State reporting requirements and bill Medi-Cal and other payors.
Integrated Services	The range of community and supportive services available to a consumer that are coordinated, integrated and reflect common values and focus on the delivery of services.
Integrated Services & Supports Plan (ISSP)	A strength-based planning tool that each enrollee is required to develop with a Personal Services Coordinator. It includes goals and provides a map of the steps that the enrollee identifies as necessary to move along his/her recovery path.
Involuntary	Actions taken without regard to the willingness, or in opposition to the intentions of the client and/or his parent/guardians.
IOM	Institute of Medicine. The IOM provides information and advice concerning health and science policy. The IOM is an independent, nonprofit organization that works outside of government to provide unbiased and authoritative advice to decision makers and the public. The IOM has identified three key categories for prevention universal, selective and indicated.
IST	Incompetent to Stand Trial
ITWS	Information Technology Web Services
Jail	Jails are most often run by sheriffs and/or county governments and are designed to hold individuals awaiting trial or a serving short sentences.
JGPP	John George Psychiatric Pavilion. The local Alameda County psychiatric emergency inpatient facility.
Lanterman Petris-Short	begin with a temporary 30 day conservatorship, and if the conservatee remains gravely disabled, the conservator is reappointed for a year and can be
Conservatorship	renewed annually, or terminated if no longer needed. A court appointed conservator over the person is responsible for managing the conservatee's placement, Medi-Cal decisions, and mental health treatment.
Lanterman/Petris/Short Act	A national model of mental health legislation; it "Deinstitutionalized" mental health services, supported the Civil Rights of people with mental illness, established "due process" prior to involuntary treatment, served people with mental health disabilities in the community rather than in state hospitals.

	NEVISION DATE. GET TEIMBER 24, 2010
Level I Services	Are for those who meet Medi-Cal Medi-Cal necessity for specialty mental health. Services are designed for severe and persistent mental illness including significant functional impairment resulting in an inability to manage activities of daily living and may also include high risk for harm to self or others. It may or may not have co-occurrence of substance use disorder. Service types include Service Teams, Full Services Partnerships and Assertive Community Treatment Teams.
Level II: Moderately Intensive	Are for those who meet Medi-Cal Medi-Cal necessity for specialty mental health. Services are designed for moderate-to-severe presentation of mental disorder with or without substance use disorder. Service types include Temporary Case Management and Treatment Services.
Level III: Solo Practitioner in Office Based Practice	Are for those who meet Medi-Cal Medi-Cal necessity for specialty mental health. Services are designed for mild to moderate presentation of mental illness with at least one signification impairment in an important area of life functioning. Includes all 'included' DSM IV-TR diagnosis.
Level IV	Services are designed for mild to moderate presentation of symptoms, which may at times interfere with activities of daily life and/or adherence to treatment of chronic Medi-Cal conditions.
Level V	Services are designed for the need for information and referral services only for individuals who seek various resources and supports, but generally function well in daily life.
Levels of Care	Classification of the amount and kind of treatment support needed to help individuals remain in the community at the lowest, safe level of care.
LGBTQQI2-S	LGBTQQI2-S is an abbreviation to refer collectively to Lesbian, Gay, Bisexual, Queer, Questioning, Transgender, Intersex, and two spirited individuals/communities.
Local Business	A contract term used to describe a business having a fixed office with a street address in Alameda County for a minimum period of six months and a valid business license issues by the County or City within Alameda County.
Logic Model	An organized, graphical depiction of the logical connections (based on theory) that shows what a program is expected to achieve and the underlying rationale and steps by which it is to produce positive effects. It includes the approaches and activities that specifically address underlying needs and resources and specifies the expected short and intermediate-term outcomes, or objectives, and the expected long-term outcomes, or goals.
LPS	Lanterman/Petris/Short Act:
LPS Conservatorship	The Lanterman-Petris-Short (LPS) Act outlines the legal process for involuntary mental health services in California. Under the LPS Act, individuals so severely disabled by mental illness they cannot provide for their own food, clothing or shelter, may be considered "gravely disabled."
MAA	Medi-Cal Administrative Activities
Maintenance of Effort	A required contribution in order to receive funding. In the case of the MHSA, the maintenance of effort is based on a prior level of funding used for mental health services.
Major Mental Disorder	ACBHCS defines a major mental disorder or illness to be a condition associated with a diagnosis within the DSM-IV-TR that meets the Medi-Cal necessity criteria as specified in the California Code of Regulations, Title 9, Chapter 11, Sections 1820.205(a)(1) for Psychiatric Inpatient Hospital Services and 1830.205(b)(1) for Specialty Mental Health Services. Same definition as Severe Mental Illness.
Managed Care	A system requiring that a single individual in the provider organization is responsible for arranging and approving all services needed under the contract. Embraced by employers, mental health authorities, and insurance companies, managed care helps to ensure that individuals receive appropriate and reasonable health care services.
Marriage Family and Child	An individual or group practice comprised solely of licensed MFCC(s) or a licensed clinical or hospital outpatient department that contracts with the MHP
Counselor (MFCC)	to provide only marriage, family and child counseling services. Used only for fee-for services providers.
Master Contract	A contract that is used for ongoing funding, which does not typically change unless the program/services are put out to bid or augmented.
MDO	Mentally Disordered Offenders
MDSO	Mentally Disordered Sex Offenders
Measure A	Local voter approved ½ cent sales tax for health services. 75% to Alameda County Medi-Cal Center. 25% for other health services
Med Screen	Client record from the computer database that indicates whether individuals have Medi-Cal.
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	REVISION DATE. SEPTEMBER 24, 2016
Medicaid	The federal program, begun in 1965, which was intended to provide medical benefits to low income patients. Each State administers its own program, so there is no consistency from state to state. The costs are shared between the federal and state governments (in California, the program is called Medi-
	Cal, and costs are shared 50-50). Medi-Cal is a program to provide health insurance to low-income people. More than 50% of babies born in SB County
	are Medi-Cal beneficiaries. Medi-Cal is provided locally by the Santa Barbara Regional Health Authority which is increasing its focus on preventive
	measures as this public health approach is both cost-effective and leads to a healthier population.
Medi-Cal	California's Medicaid program. It provides health care coverage for more than six million
	low-income children and families as well as elderly, blind, or disabled individuals. Medi-Cal is jointly funded by the state and federal government and
	administered by the California Department of Health Services. People enroll in Medi-Cal through their county social services department.
Medi-Cal Administrative	Administrative activities necessary for the proper and efficient administration of the Medi-Cal program.
Activities (MAA)	
Medi-Cal FFP	Federal Financial Participation – 50% ratio as of 2011.
Medical Necessity	A service or treatment which is appropriate for a patient's diagnosis, and which if not rendered, would adversely affect the patient's condition. The Medi-
	Cal program covers only medically necessary services.
Medi-Cal Services	Health care services other than mental health services
Medication Management	Appointments with Mental Health medical staff including evaluation for effects of medications taken and follow up education.
Medication Support	Medication support may include evaluation of the need for medication, evaluation of its clinical effectiveness and side effects, obtaining informed consent,
	medication education, and plan development related to the delivery of the service and/or assessment of the client/patient.
Medi-Medi	Refers to persons eligible for both Medicare and Medi-Cal programs; also referred to as "crossover" patients. Medicare pays first.
Mental Health Adult	A mental health treatment modality, which is provided in a non-institutional residential setting for clients who would be at risk for hospitalization or other
Residential Treatment	institutional placement if they were not in the residential treatment program. The services include activities that restore an individual's ability to maintain
Services	and apply independent living skills. Services are available 24 hours a day, seven days a week. Services include, but are not limited to assessment, plan
	development, therapy, rehabilitation and collateral.
Mental Health Court	Program funded by the State through a 4-year grant in 1999. Participation is optional once eligibility has been determined by assessment at the Main Jail.
Mental Health Plan	California Welfare & Institutions Code Section 5775: "the State Department of Mental Health shall implement managed mental health care for Medi-Cal
	beneficiaries through fee-for-service or capitated rate contracts with mental health plans, including individual counties, counties acting jointly, any qualified
	individual or organization, or a nongovernmental entity.
Mental Health Promotion	Activities directed toward enhancing or expanding organizations' knowledge and skills in the mental health field for the benefit of the community at-large or
	special groups and providing education and/or consultation to clients and communities regarding mental health program in order to prevent the onset of
	mental health problems.
Mental Health Rehabilitation	A mental health service modality, which provides intensive support and rehabilitation services designed to assist persons, 18 years or older, with mental
Center	disorders who would have been placed in a state hospital or another mental health facility to develop the skills to become self-sufficient and capable of
	increasing levels of independent functioning.
Mental Health Services	Individual or group therapies and interventions that provide reduction in mental disability and restoration, improvement or maintenance of functioning
	consistent with the goals of learning development, independent living and self-sufficiency that are not provided as a component of adult residential
	services, crisis residential treatment services, crisis intervention, crisis stabilization, day rehabilitation or day treatment services. Services activities may
	include, but are not limited to, assessment, plan development, therapy and rehabilitation and collateral.
Mental Illness	Behavioral or psychological syndromes or patterns which cause painful symptoms and interference with normal functioning in important areas
	(relationships, school, work, etc.)
Mentally Disordered	A legal term used to describe a prisoner who at the time or upon termination of parole, meets the following criteria:
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Offenders	The prisoner has a treatable mental disorder that was one of the causes of the commission of the crime for which he or she was incarcerated;
	The disorder is not in remission or will not remain in remission without treatment
	The prisoner has been in treatment for the disorder for 90 days or more in the year prior to his or her parole or release date
	The disorder causes the prisoner to be dangerous to others
	The crime for which the prisoner was incarcerated involved force or violence or caused serious bodily injury.
	See California Penal Code 2960-291. The MDO commitment provisions apply only to persons who committed their crimes on or after January 1986.
Mentally Disordered Sex	A legal term used to describe any person who is by reason of a mental disorder has a predisposition to commit sexual offenses to such a degree that he
Offenders	or she is a danger to the health and safety of others Welfare and Institutions Code Section 6250
Methadone	A harm reduction AOD modality, either maintenance or detoxification, which treats opiate addiction.
MFT	Marriage and Family Therapist (replaces MFCC)
MHP	Mental Health Plan
MHRC	Mental Health Rehabilitation Center
MHS	Mental Health Services
MHSA	Mental Health Services Act. Also known as Prop 63.
MIA	The Medically Indigent Adults (MIA) program is for people who are uninsured and who are not eligible for other health care coverage. MIA helps people
	get medical care by paying for all or part of the cost of their medical care. Does not cover mental health care.
Mobile Crisis Unit	A crisis service that is delivered where and when the crisis occurs, ensuring that persons in psychiatric crisis are served by mental health professionals
	whenever possible.
Modality	The broad category of services purchased by BHCS from a contractor.
MOE Budget	Maintenance of Effort Budget: The cost of providing the same services in a subsequent Fiscal Year as in the prior Fiscal Year (including adjustments for
	Cost of Living Adjustments, etc).
MOU	Memorandum of Understanding
Murphy's Conservatorship	A special type of conservatorship (WIC 3008(h)(1)(B) for persons with a mental disorder, defect or disease who are charged with felonies involving death,
	great bodily injury or a services threat of physical harm to others who have not been restored to competence to stand trial in the a time allowed by statue(
	PC 1370) . The County Mental Health Department is responsible for their placement treatment and cost of care.
Narcotic Treatment Program	Is also known as Methadone Maintenance, which treats opiate addiction. The programs provide individuals addicted to heroin or other opiates with daily
	doses of legal, regulated substitutes. This narcotic replacement therapy may be for the purpose of detoxification or maintenance. The amount and
	duration of the drug is determined on an individual basis. Individual and group counseling are a part of the treatment. Replacement drugs include
	methadone and LAAM (Levomethadly acetate). Depending on a person's improvement and functioning, the drugs may be prescribed for home use.
National Provider Identifier	NPI is a unique identification number for health care providers that will be used by all health plans. Health care providers and all health plans and health
	care clearinghouses will use the NPIs in the administrative and financial transactions specified by HIPAA. The NPI was proposed as an 8-position
	alphanumeric identifier. However, many commenters preferred a 10-position numeric identifier with a check digit in the last position to help detect keying
	errors. The NPI contains no embedded intelligence; that is, it contains no information about the health care provider such as the type of health care
NINIA	provider or State where the health care provider is located.
NNA NPI	Net Negotiated Amount: (which is usually but sometimes inappropriately used for County funding) National Provider Identifier
NRT	
	Nicotine Replacement Therapy
Older Adult	Individuals age 60 years or older.
Outcome Measures	A project management or contract monitoring term. The actual impacts/benefits/changes for clients during or after an intervention
	(program/session/project). Outcomes are observable and measurable. Outcomes may be expressed in terms of:

	TEVISION DATE. OLI TEVISION 24, 2010
	Knowledge, Skills or Behavior (short to intermediate term): Prevention and Early Intervention; Outreach, Education and Training, Outpatient Mental Health, Consultation
	 Conditions and/or Status (long term): Outpatient Mental Health; Residential Services; Day Treatment Services; Supportive Service
	Satisfaction (short, intermediate and long term): All programs
Outcomes	Conditions of well-being for children, youth, adults, families and/or communities. County MHSA CSS plans will be evaluated for their contribution to
	meeting specific outcomes for the individuals served including: meaningful use of time and capabilities, including things such as employment, vocational
	training, education, and social and community activities; safe and adequate housing, including safe living environments with family for children and youth;
	reduction in homelessness; a network of supportive relationships; timely access to needed help, including times of crisis; reduction in incarceration in jails
_	and juvenile halls, and reduction in involuntary services, reduction in institutionalization, and reduction in out-of-home placements.
Outcomes	The extent of change in attitudes, values, behaviors, or conditions between baseline measurement and subsequent points of measurement. Depending on
	the nature of the intervention and the theory of change guiding it, changes can be short, intermediate, and longer-term outcomes.
Outpatient Clinic	A facility without any other license indicated in the DMH Provider System document (updated August 2004). It may be certified to provide SD/Medi-Cal
O. 4 4 4 M 4 - 1 11 14h	Services.
Outpatient Mental Health Services	All mental health services except those services that are provided within a psychiatric hospital inpatient service.
Outpatient Mode of Services	Services designed to provide short-term or sustained therapeutic intervention for clients experiencing acute and/or ongoing psychiatric distress.
Outreach	The act of extending services or assistance to those in the community who may benefit from care but who have not, or have not been able to, come forth
Outreadii	to seek it.
Outreach (HIV Early	This definition only pertains to Outreach under SAPT Grant HIV Early Intervention Services. Outreach promotes awareness among AOD abusers and
Intervention Service)	treatment staff about the relationship between AOD use and communicable diseases, and encourages high-risk individuals to test for HIV, TB, Hepatitis
•	and other communicable diseases.
Outreach and Engagement	The act of extending services or assistance to those in the community who may benefit from care but who have not, or have not been able to, come forth
	to seek it.
Outreach Mode of Service	Services delivered in the community-at large to special population groups, human service agencies, and clients and families who are not usually clients of
	the County mental health program.
Parole	Parole is the conditional release of a prison inmate after serving part (if not all) of his or her sentence, allowing the inmate to live in the community under
	supervision of the parole period. The decision to grant parole is the responsibility, in a majority of states, of a board of parole or commission. Violation of
Donalas Camilasa Naturada	the conditions of parole result in revocation and re-imprisonment.
Parolee Services Network Part A Medicaid	Previously Bay Area Services Network (BASN) until 2011. PSN provides community-based alcohol and drug treatment and recovery services to parolees. Medical Hospital Insurance (HI) under Part A of Title XVIII of the Social Security Act, which covers beneficiaries for inpatient hospital, home health,
Part A Medicald	hospice, and limited skilled nursing facility services. Beneficiaries are responsible for deductibles and copayments.
Part B Medicaid	Medicare Supplementary Medical Insurance (SMI) under Part B of Title XVII of the Social Security Act, which covers Medicare beneficiaries for physician
i are 5 modicard	services, medical supplies, and other outpatient treatment. Beneficiaries are responsible for monthly premiums, copayments, deductibles, and balance
	billing.
Patient	This term was used to describe individuals in mental health and/or AOD treatment, however, this term has fallen out of favor, due to its negative
	connotation related to the medical model. However, this term is currently used when referring to services provided in hospital settings.
Peer Counselor	Partners in the multidisciplinary team who have experience as consumers in the public mental health system and whose duties include a peer support
	role, contributing significantly to the recovery culture and client orientation of the team.
Peer Mentorship	Individually designed services intended to improve the Mentee's self-confidence, life skills management, self-sufficiency, proactive participation in
	recovery and ability to access needed services and opportunities in the community. This can to be accomplished through a variety of ways including

	educational and experiential opportunities, information sharing, and self-advocacy training.
PEI	Prevention and Early Intervention. This is one of the funding categories under the MHSA.
Pharmaceuticals	Services which include the prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals which are necessary to alleviate
	the symptoms of mental illness.
PHF	Psychiatric Hospital Facility
Position	A budgetary term used to describe the number of staff working per job title/classification in a particular project/program.
Post-Test Counseling (HIV	This definition only pertains to Outreach under SAPT Grant HIV Early Intervention Services. Post-Test Counseling reinforces the prevention and risk
Early Intervention Service)	reduction information discussed in the Pre-Test Counseling session.
Pre-Test Counseling (HIV	This definition only pertains to Outreach under SAPT Grant HIV Early Intervention Services. Pre-Test Counseling is risk reduction education and
Early Intervention Service)	counseling for a minimum of 20 minutes, which include the following components: introduction, risk assessment/reduction, transmission prevention and
	education, implication of the test results, informed decision, educational materials.
	The numbers of cases of the condition present in a defined population at a specified time or in a specified time interval (e.g., the total number of cases
Prevalence	with a specific disease or condition, such as ischemic heart disease, at a given time divided by the total population at that time.) (Source: Agency for
	Health Care Policy and Research, Glossary of Quality of Care Terms)
Prevention	Services using interventions that reduce the likelihood of an onset of a severe illness or disorder.
Prevention and Early	This definition is used for MHSA funded PEI programs. The prevention component includes programs and services defined as universal and selective,
Intervention	both occurring prior to a diagnosis for a mental illness. Prevention involves reducing risk factors or stressors, building protective factors and skills and
	increasing support. Generally, there are no time limits imposed on prevention programs. Early intervention is short-duration (usually less than one year) relatively low-intensity intervention appropriate to measurably improve a mental health problem.
Preventive and Therapeutic	This definition only pertains to Outreach under SAPT Grant HIV Early Intervention Services. Preventive and Therapeutic Measures prescribed for treating
Measures (HIV Early	the deterioration of the immune system and for preventing and treating conditions arising from HIV.
Intervention Services)	the deterioration of the infinitine system and for preventing and treating conditions arising from this.
	Health care professional capable of providing a wide variety of basic health services. Primary care providers include practitioners of family, general, or
Primary Care Provider (PCP)	internal medicine; pediatricians and obstetricians; nurse practitioners; midwives; and physician's assistant in general or family practice.
Prison	Prisons are operated by state governments and the Federal Bureau of Prisons (BOP) and are designed to hold individuals convicted of crimes.
Probation	Probation is a decision by a judge at trial. It may be in lieu of jail time or in combination with some jail time. It allows the convicted person to live in the
	community for a specified period of time under supervision of a Probation Officer. Depending on the circumstances and the seriousness of the crime, the
	judge can specify restrictions on the offender's activities during the probationary period. If an offender violates the conditions or rules of probation, he or
	she may be sentenced to imprisonment by the judge. This is known as revoking the probation or revocation.
Problem Identification and	An AOD Primary Prevention CSAP strategy, which aims at identification of those individuals who have indulged in illegal/age-inappropriate use of tobacco
Referral Services	or alcohol and those individuals who have indulged in the first use of illicit drugs and to assess whether their behavior can be reversed through education.
	It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment.
Process Measures	A project management or contract monitoring term and process used to measure the degree to which key objectives are achieved.
Promising Practice	Programs and strategies that have some quantitative data showing positive outcomes over a period of time, but do not have enough research or
	replication to support generalized outcomes. It has an evaluation design in place to move towards demonstration of effectiveness; however, it does not yet
Duersaal	have evaluation data available to demonstrate positive outcomes.
Proposal PRS	Shall mean Bidder/Contractor response to a procurement request.
PKS	Post Release Supervision (under AB 109) A term used for community supervision by County probation department for the three 'nons': non-serious; non-violent; non-sex offenders) released from State prison, which replaces State parole for this population.
PSC	Personal Services Coordinator
r o c	Leiponial pervices containator

PSN	Parolee Services Network
Psychiatric Health Facility	A non-hospital 24-hour acute care facility licensed by the DMH pursuant to the provision in WIC section 5652.5.
Psychiatric Hospital	A facility, which provides 24-hour inpatient care, including the following basic services: Medi-Cal, nursing, rehabilitative, surgical, anesthesia, laboratory,
	radiology, pharmacy and dietary services.
Psychiatrist	An individual or group practice composed solely of physician(s) with a specialty of psychiatry or a licensed clinical or hospital outpatient department that
_	contracts with a Mental Health Plan to provide only psychiatric services. Used only for fee-for service providers.
Psychological Assessment	This definition only pertains to Outreach under SAPT Grant HIV Early Intervention Services. Psychological Assessment are a comprehensive
(HIV Early Intervention	psychosocial assessment, including demographics, social history, mental health status, risk summary, health and education needs and basic needs
Services)	assessment.
Psychologist	An individual or group practice comprised solely of licensed psychologist(s) or a licensed clinic or hospital outpatient department that contracts with the
	MHP to provide only psychological services. Used only for fee-for-service providers.
Psychotropic Medication	Psychoactive medications used to change, modify, or alter an individual's behavior, thought processes or mood. This general term includes antianxiety,
	antidepressant, antipsychotic, and hypnotic medications.
Rate-Based	Rate-based payments to providers. Shifts more risk to providers than actual cost payment. Several different ways of doing rate-based payments,
	including provisional rate, negotiated rate and fee-for-service.
Realignment	Enacted in 1991 by the Bronzan-McCorquodale Act. Provided Mental Health with a revenue source (½ cent increase in State sales tax and part of the
	State vehicle license fee) that flows directly to counties, and shifted authority from state to counties for operation of mental health programs
Reassessment	Annual (at least) evaluation of an individual's progress towards agreed-upon goals.
Recovery	For mental health: A process where mental health clients learn how to self-direct their lives and mental health, regain hope and optimism and reclaim
	positive social experiences beyond the mental health system.
	For substance abuse or alcohol and other drug issues: Recovery is a voluntarily maintained lifestyle characterized by sobriety, personal health and
	citizenship
Referral	When used in a contract, it means to a process by which an individual and/or organization must follow before receiving/providing services.
Release of Information	A legal document that must be signed by the individual receiving services before Mental Health staff can disclose treatment information.
Request For Proposal	A procurement term, which is a request for contractor's/bidder's proposal to provide the goods and/or services being solicited.
Residential Treatment	An organization, not licensed as a psychiatric hospital, the primary purpose of which is the provision of individually planned programs of mental health
	treatment services in conjunction with residential care for its patients/clients.
Resilience	The enduring ability of someone to recover from assaults to their person, whether physical, mental or emotional and, in the midst of that, maintain a sense
	of spirit and hope used in reference to children and youth.
Respite Care	Services that provide a break for parents who have a child with a serious emotional disturbance. Respite services may also include adults and older
•	adults.
Revenue	A budgetary term used to describe leveraged funds from payor sources, such as grants, Medi-Cal, etc.
RFP	Request For Proposal
Risk Factor	Any one of a number of characteristics of a community, school, family, or individual domains that are known, through prospective, longitudinal research
	efforts, to be predictive of AOD or mental health issues.
RU	Reporting Unit. A series of numbers and sometimes letters associated with specific programs
SACPA	Substance Abuse Crime Prevention Act (Prop 36)
SAMHSA	Substance Abuse Mental Health Services Administration (Federal Agency)
SAMHSA	Substance Abuse and Mental Health Services Association
SAPT	Substance Abuse Prevention and Treatment.

Selective Prevention Selective Prevention Self-Help Serious Emotional Disturbance. This is a type of Medi-Cal necessity that is required in many children's programs as a criteria for receiving mental health services. Targets individuals or s a subgroup whose risk of developing mental illness is significantly higher than average. Is a self-defined group of mental health clients which decides its own goals and methods and makes all major decisions. Ideally, it should be autonomous of professionals and mental health centers. Self Help is always voluntary. The W8I Code, Section 5878.1 (a) specifies that MHSA services will be provided to children and young adults with severe mental illness as defined in the W8I Code, Section 5878.1 (a) specifies that MHSA services will be provided to children and young adults with severe mental illness or adolescents. The W8I code, Section 5813.5 specifies that MHSA services will be available to adults and seniors with severe mental illnesses who meet the eligibility criteria in the W8I Code Section 5600.3 (b) – adults and older adults who have serious mental disorder and (c) – adults and older adults who require or are at risk of requiring acute psychiatric inpatient care, residential treatment, or outpatient crisis intervention because of a mental disorder with symptoms of psychosis, suicidality, or violence. Some transition age youth may also be served under these provisions. Service Provider Service Provider An organization's ability to identify and provide a given service or services to its target community or population. Individuals, groups, and organizations, including County-operated programs, that deliver services to clients and patients under an agreement or contract with ACBHCS Service Team Provide services to individuals with serious mental ill who needs case and management psychiatry services. All the service teams include case managers and a psychiatrist. Only clients with primary mental health diagnosis are accepted. Services as Needed (SAN) Contract S		REVISION DATE. SEPTEMBER 24, 2016
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Serious Mental Illness criteria in the W&I Code Section 5600.3 (b) – adults and older adults who have serious mental disorder and (c) – adults and older adults who require or are at risk of requiring acute psychiatric inpatient care, residential treatment, or outpatient crisis intervention because of a mental disorder with symptoms of psychosis, suicidality, or violence. Some transition age youth may also be served under these provisions. Service Capacity	Disturbance (OLD)	
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standards for its classification.	Small Business	
		standards for its classification.

	REVISION DATE: SEPTEMBER 24, 2018
SMI	Severe Mental Illness
SOC	System Of Care
Socialization Services	Services designed to provide activities for persons who require structured support and opportunity to develop skills necessary to move toward
	independent functioning.
Specialty Mental Health	Rehabilitative services which include mental health services, medication support services, intensive day treatment, day rehabilitation, crisis intervention,
Services	crisis stabilization, adult residential treatment services, crisis residential services, and psychiatric health facility services.
SPMI	Severe and Persistent Mental Illness
SRP	Supplemental Rate Program
SSI	Supplemental Security Income
Stakeholder	(a) A person or group of people who impacts or is impacted by mental health services;
Stakenolder	(b) A person who represents others' interests relative to mental health services.
Start-Up Funds	A budgetary term used to describe funds provided to a Contractor for a limited period of time to help in the implementation of a new program or program
-	expansion.
State	Refers to State of California, its departments and/or agencies
State Hospital	A psychiatric facility owned and operated by the State of California
	Stigma refers to a cluster of negative attitudes and beliefs that motivate the general public to fear, reject, avoid, and discriminate against people with
	mental illnesses. Stigma is widespread in the United States and other Western nations. Stigma leads others to avoid living, socializing, or working with,
Stigma	renting to, or employing people with mental disorders – especially severe disorders, such as schizophrenia. It leads to low self-esteem, isolation, and
Sugma	hopelessness. It deters the public from seeking and wanting to pay for care. Responding to stigma, people with mental health problems internalize public
	attitudes and become so embarrassed or ashamed that they often conceal symptoms and fail to seek treatment. (Source: President's New Freedom
	Commission on Mental Health Final Report.)
Stigma	Shall refer to the attitudes and beliefs that lead to fear, rejection, and avoidance. For purposes of this RFP, societal stigmas/biases include one or more of
	the following categories: mental health status, physical ability status, sexual orientation, and race/ethnicity.
Strategies	Coherent collections of actions that have a reasoned chance of improving our outcomes.
Strategy	A method for doing or accomplishing something. It could include method for mobilizing a community or coalition, or a method for creating community
	awareness of the down-side of substance abuse through media offerings. When used in Primary Prevention, it encompasses broad-based approaches or
	generalized activities to be used in attempts to delay the onset, reduce, or cause the cessation of the use of tobacco or alcohol among minors and/or the
	use and abuse of legal and illegal drugs and substances by all members of a given population.
Substance Abuse and Mental	The Substance Abuse and Mental Health Services Administration (SAMHSA) is an agency of the U.S. Department of Health and Human Services (HHS).
Health Services	Its mission is to provide a national focus for the Federal effort to promote effective strategies for the prevention and treatment of addictive and mental
Administration (SAMHSA)	disorders. SAMHSA is primarily a grant-making organization, promoting knowledge and scientific state-of-the-art practice. SAMHSA strives to reduce
	barriers to high quality, effective programs and services for individuals who suffer from, or who are at risk for, these disorders, as well as for their families
	and communities. For more information, please visit their website at http://www.samhsa.gov . (Source: Alpha Center, Glossary of Terms Commonly Used
	in Health Care)
Substance Abuse Prevention	Funding is "block granted" to state and allocated to Counties by formula from the federal government. The goal of the SAPT Block Grant program is to
and Treatment	support substance abuse prevention and treatment programs at the state and local levels. While the SAPT Block Grant provides Federal support to
	addiction prevention and treatment services nationally, it empowers states to design solutions to specific addiction problems that are experienced locally.
Substance Overuse	Refers to the use of alcohol and/or other drugs that interfere with day to day living.
Supplant	Literally means to take the place of and serve as a substitute for. Thus, MHSA funds are not to take the place of and serve as a substitute for (or replace)
Guppiani	existing state or county funds utilized to provide mental health services.
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Supplemental Rate Program	Provides supplemental funding for non-clinical patient care in a licensed Board and Care/Residential Care home.
Supplemental Security Income	A cash benefit to eligible individuals, such as homeless individuals, the elderly and those living with mental and physical health issues.
Syndrome	A grouping of signs and symptoms, based on their frequent co-occurrence, that may suggest a common underlying pathogenesis, course,
	familial pattern, or treatment selection.
System Development Funds	One of three categories of MHSA funding used to improve services and infrastructure for the identified initial full service populations and for other clients.
System of Care	A multi-disciplinary, multiagency delivery system of services that supports a consumer through a continuum of care and that uses a "person first" approach
-	to build on the strengths of the person being served and his or her support system.
System Utilization Team	An internal BHCS team comprised of Executive members and system of care directors. This team helps to determine appropriate placement for
	individuals. Sometimes this team is referred to as 'Bed Control', however, Bed Control is a subset of this team.
Tarasoff Warning	Based on a 1976 court case that found that mental health professionals have a duty not only to a patient, but also to individuals who are being threatened
	by a patient.
Target Population	A group of individuals that share qualities, usually defined by age, geographic locations, race/ethnicity and other characteristics. When defined as a target
	population, this group is meant to receive particular services.
TAY	Transition Age Youth
TBS	Therapeutic Behavioral Services
Technical Assistance	Operational or management assistance given to an organization. It can include fundraising assistance, budgeting and financial planning, program
	planning, legal advice, marketing and other aids to improve the organization's functions, processes and/or outcomes.
Telemedicine	The use of telecommunications (i.e., wire, radio, optical or electromagnetic channels transmitting voice, data and video) to facilitate medical diagnosis,
1 0.0	patient care, and/or distance learning. (Source: Alpha Center, Glossary of Terms Commonly Used in Health Care)
Therapeutic Behavioral	Are one-to-one therapeutic contacts for a specified short-term period of time between a mental health provider and a child or youth with serious emotional
Services	disturbances (SED). Services are designed to maintain a child/youth's residential placement at the lowest level by resolving target behaviors and
	achieving short-term goals. TBS is available to full-scope Medi-Cal beneficiaries under 21 who meet MHP Medi-Cal necessity criteria. These services may
	be offered up to 24 hours a day, depending on the need of the youth.
Therapeutic Community	A term of British origin, now widely used, for a specially structured mental hospital milieu that encourages patients to function within the range of
	social norms.
Therapeutic Justice System	A program in which courts offer nonviolent drug offenders reduced sentences in return for entering treatment programs.
Threshold Language	A term used by the state of California to denote a language spoken by 3,000 beneficiaries or 5% of the Medi-Cal population, whichever is lower, whose
	primary language is not English.
TMSA	Tobacco Master Settlement Agreement
Tobacco Master Settlement	The TMSA is funding to states resulting from lawsuits against the tobacco industry for Medicaid costs associated with smoking-related diseases.
Agreement	
Transfer	Assignment to a different level of care or to a different service provider.
Transform	To wholly change the mental health services system in appearance, structure, nature or function.
Transition Age Youth	Young adults between the ages of 16 and 25 years who would benefit from mental health community services and support to maximize their life skills and
	independence.
Transportation (HIV Early	This definition only pertains to Outreach under SAPT Grant HIV Early Intervention Services. Transportation is covered under this modality to transport
Intervention Services)	individuals who are HIV positive to meet their current medical needs.
Treatment	Specified mental health, Medi-Cal and appropriate ancillary services to be assessed, prescribed, implemented, and monitored for clients by the contractor
	or BHCS designees.
UMDAP (Uniform Method for	A method of determining annual financial liability for County Mental Health services. Medi-Cal beneficiaries usually have full coverage for services unless

Determining Ability to Pay)	benefits are reduced or discontinued.
Universal Prevention	This AOD Primary Prevention IOM category addresses the entire population (national, local community, school, and neighborhood) with messages and
	programs aimed at taking action before behavioral health problems occur. Universal prevention programs are delivered to large groups without any prior
	screening for risk of serious mental health issues or substance abuse. The entire population is assessed as at-risk and capable of benefiting from
	prevention.
Unserved or Underserved	Individuals that have received no services or are receiving inadequate services to meet their needs.
Populations	
UR (Utilization Review)	The review of services delivered by a health care provider or supplier to determine whether those services were medically necessary; may be performed
	on a concurrent or retrospective basis.
VBB Budget	Values Based Budget: adjustments to a Department's requested Budget based on values and priorities established by the Board of Supervisors
Vocational Rehabilitation	A facility that may provide work activity programs, job development, job placement, work evaluation or work adjustment.
Center	
Vocational Services	Services designed to encourage and facilitate client motivation and focus upon realistic and attainable vocational goals.
Voluntary	To receive services by request and/or consent. In the case of a minor, refers to the request and/or consent of a parent, guardian, or other responsible
	agent unless the minor may give consent.
Voluntary Status	A legal term used to describe a person transferred to an inpatient facility under California Penal Code 4011.6 who may convert to voluntary status without
	obtaining consent from the court, the person in charge of the jail, juvenile detention or the local mental health director.
Ward	Refers to a minor who is under guardianship of the court.
	Effective mental health services and supports offer people opportunities to build their <u>resiliency</u> , giving people the internal resources required to fully
	pursue <u>recovery</u> and manage <u>wellness</u> .
Wellness, Recovery &	
Resiliency	Wellness is the experience of health across the dimensions of mind, body and spirit; Recovery refers to the process of people returning to a meaningful
	life, guided by their own choices, in their natural community; Resiliency is a person's innate capacity for positive growth and transformation across the life
W II D	span despite difficult challenges
Wellness, Recovery &	Effective mental health services and supports offer people opportunities to build their resiliency, giving people the internal resources required to fully
Resiliency	pursue recovery and manage wellness. Wellness is the experience of health across the dimensions of mind, body and spirit; Recovery refers to the
	process of people returning to a meaningful life, guided by their own choices, in their natural community; Resiliency is a person's innate capacity for
WET	positive growth and transformation across the life span despite difficult challenges
	Workforce Education and Training. This is one of the funding categories under the MHSA.
WRAP (Wellness Recovery Action Plan)	Plans authored by consumers to draw on their strengths, advance wellness, prevent escalation of symptoms, and promote successful recovery from crises. Consumers work in collaboration with trusted peers to create and use their unique WRAPs.
Wraparound	Wraparound is a dynamic process that helps a family develop individualized, strength based needs driven services for children and families in their own
vvraparouriu	communities. Key features of wraparound services include:
	A comprehensive individualized plan, which is developed by the child and family team, the people who know the child best.
	 This plan is needs driven rather than service driven. Services are not based on a traditional mental health services model.
	 This plan is fleeds driven rather than service driven. This plan is family-driven while meeting the needs of children.
	The parents/caregivers are an integral part of the team and direct the treatment plan.
	 The plan is strengths based. Mental health services have traditionally relied on identifying problems, focusing on pathology. Positive reframing
	to assets and skills is a key element in all wraparound planning.
	The plan is focused on a normal environment. Normal needs are the basic human needs that of persons of like age, sex, culture, etc. have.
Youth	Individuals between the age of 0-18 years and sometimes up to 25 years of age.
i outii	individuals between the age of 0-10 years and sometimes up to 25 years of age.

Actual Gross Cost	An AOD Fiscal Term: The total cost to provider for negotiated contracted services.
Available Capacity	An AOD Fiscal Term: The total number of units of service that a Contractor makes available in the current fiscal year.
Available Staff Hour	An AOD Fiscal Term: For Outpatient and All Other Modalities (Including, but Not Limited to, Secondary Prevention, HIV Early Intervention, Perinatal
	Outreach, Perinatal Case Management: All hours staff are available to work, exclusive of time off, such as vacation, sick leave and lunch. The available
	staff hours shown in Section II of this exhibit reflect ninety percent (90%) of 1,779 available hours per FTE reflected in the program budgets contained in
Day Care Habilitation (DOH)	this exhibit.
Day Care Habilitative (DCH)	An AOD Fiscal Term: For Non-Residential Program; A visit in which a client actively participates for a minimum number of hours a day and is scheduled to
Day	participate a minimum number of days a week. Each day of attendance is a unit of service. Requirements are as follows:
	Parolee Services Network (PSN): Minimum four (4) hours a day, scheduled five (5) days a week. All Old Al
	All Others: Minimum three (3) hours a day, scheduled three (3) days a week.
FTE	A fiscal term: Full time Equivalent; One full time equivalent (FTE) has an average of 1,779 available hours per year.
Direct Time (Service Hours):	For AOD Primary Prevention: The face-to-face time spent on an activity. Also known as Service Time.
Direct Treatment Service	For AOD Outpatient And All Other Modalities (Including, But Not Limited To, Secondary Prevention, HIV Early Intervention, Perinatal Outreach, Perinatal
Hour	Case Management) With Combined Drug Medi-Cal And NNA Funding:
	An individual direct treatment service hour refers to the actual length of time of face-to-face contact between a client or significant person in the life of
	the identified client and a counselor/therapist.
	A group direct treatment service hour refers to the actual length of time of one or more counselors/therapists in a face-to-face group contact with
	identified clients.
Drug Medi-Cal Funding	State General Funds that are used to match Drug Medi-Cal, and Federal Medi-Cal
Drug Medi-Cal Program	State of California system wherein eligible beneficiaries receive covered services from Drug Medi-Cal certified substance abuse treatment providers who
	are reimbursed for the services with State General Fund and federal Medicaid funds.
FFP	Federal Financial Participation known as (FFP)
Group Counseling	For AOD Chemically Assisted Service: A ten (10) minute face-to-face contact in which one or more counselors/therapists treat a minimum of four (4) and
	a maximum of ten (10) clients at the same time. Each ten (10) minutes per client is considered to be one counseling increment.
Group Session	For AOD Outpatient NNA Only or NNA/Medi-Cal Funding: A face to face contact in which one or more counselors/therapists treat at least two (2) or more
	clients at the same time.
Group Session	For AOD Outpatient - Drug Medi-Cal Funding Only: A face-to-face contact in which one or more counselors/therapists treat a minimum of four (4) and a
	maximum of ten (10) clients at the same time.
Group Visit	For AOD Outpatient NNA Only or NNA/Medi-Cal Funding: Each individual in a single group session is counted as one visit.
Group Visit	For AOD Outpatient - Drug Medi-Cal Funding Only ;Each individual in a single group session is counted as one visit.
Indirect Staff Hour	For AOD Primary Prevention: The time that is spent preparing for the activity and traveling to and from the activity site.
Individual Visit	For AOD Outpatient NNA Only or NNA/Medi-Cal Funding: A face to face contact between a client or significant person in the life of the identified client
	and a counselor/therapist.
Individual Visit	For AoD Outpatient - Drug Medi-Cal Funding Only: A face-to-face contact between a client or significant person in the life of the identified client and a
	counselor/therapist. Individual counseling is limited to intake, assessment, treatment planning, which may include collateral services, discharge planning
	and crisis intervention.
Major Budget Expenditure	Salaries and benefits, services and supplies, and fixed assets
Categories	
Methadone Individual	For AOD Chemically Assisted Services: A ten (10) minute face-to-face contact between a client and a counselor/therapist.
Counseling	

Methadone/Maintenance Daily Dose	For AOD Chemically Assisted Services: Core, Lab Work and Dosing. A face-to-face or take-home methadone dose.
Negotiated Net Amount (NNA)	Refers to all funding within this contract, with the exception of State General Funds that are used to match Drug Medi-Cal and Federal Drug Medi-Cal.
Net Cost	The total cost to provider less applicable revenues.
Net Reimbursable Cost	Total amount reimbursed to provider from this contract, as specified in Section IV – Basis for Final Settlement.
Provisional Rate	An interim rate of reimbursement paid to Contractor based on an established funding allocation and the negotiated services to be delivered with that funding to be settled at year-end based on actual costs.
Residential Bed Day	For AOD: A calendar day (12:01 a.m. to Midnight) in which a person participates and resides in a program.
	If a resident participates in a program for more than one Resident Day, the following shall also apply: The calendar day of admission shall constitute a Resident Day, regardless of the time of admission. The calendar day of discharge shall not constitute a Resident Day.
Residential Detoxification	For AOD: When a person occupies a bed for more than three (3) hours.
Bed Day	If an individual is admitted to a residential program more than once during any calendar day only one Residential Bed Day or Residential Detoxification Bed Day shall be counted.
Slot	For AOD: A slot is the capacity to provide treatment services to an individual. Total slots reflect the minimum number of individuals a provider can serve at one-time, given its complement of staffing and other resources.
Slot Day (visit)	 For Methadone Detoxification – 21 Day: An outpatient face-to-face contact directed at the provision of opioid detoxification services as follows: a. Services rendered during the first seven days shall include: taking of the initial history; physical examination by a physician; other physician services necessary to the opioid detoxification services; necessary urine screening tests and related specimen handling; daily visits to the clinic for medication or reexamination; any other procedures related to outpatient opioid detoxification services. b. Services rendered from the 8th through the 21st day shall include administering medication and other procedures related to outpatient opioid detoxification services. c. Reexamination by a physician between 8th and 21st days - Maximum one per week. Reexamination by a physician shall be provided only as a substitute for visits under b. and payment shall include all other services as specified under b.
Slot Day (visit)	For AOD Methadone Detoxification – 22nd Day to a maximum of 180 Days: An outpatient face-to-face contact directed at the provision of opioid detoxification services.
Staff Hours	For AOD Primary Prevention: The time that staff member spends on the direct service.
Transitional Living Bed Day	For AOD: A calendar day (12:01 a.m. to Midnight) in which a person resides in an alcohol and drug free living environment. If a resident participates in a program for more than one Resident Day, the following shall also apply: The calendar day of admission shall constitute a Resident Day, regardless of the time of admission. The calendar day of discharge shall not constitute a Resident Day.
Utilization	The total actual units of service provided.
Engagement Fee	For CalWORKs Reporting: Reimbursement for signed CalWORKs Release of Information submitted to BHCS Social Services Agency for a CalWORKs client.
Title 9	Section of California Code of Regulations pertaining to standards for the State Department of Mental Health
Proposition 36	See SACPA (Substance Abuse Crime Prevention Act)
Substance Abuse Crime Prevention Act (Prop 36)	Passed by California voters in 2000. The vote changed California state law to allow first and second time nonviolent crime drug possession offenders the option of receiving substance overuse treatment as an alterative to incarceration. Provides treatment in lieu of incarceration for non-violent drug offenses. SACPA programs no longer exist.

Proposition 63	See MHSA (Mental Health Services Act)
AB 109	Passed in 2011, a California law, which approved certain inmates to be released from State prisons to County jails.
	http://www.cdcr.ca.gov/realignment/AB-109-final-crime-exclusion-list.html
501 (c) 3	Refers to the Internal Revenue Services tax code, which is an American tax-exempt nonprofit corporation or association.
1370	A designated W&I Code given to individuals who have been determined by the courts as incompetent to stand trial.
2034	The California Assembly Bill that amended the California Welfare and Institutions Code and provides funding to address the issues of the homeless and their unmet needs. Counties and cities that operate independent public mental health programs provide health services and outreach to mentally ill adults who are homeless or at risk of becoming homeless. Many of the clients receiving services provided under the mandates of AB 2034 and AB 34 (passed in 1999) reside in housing arrangements that do not require licensure by Community Care Licensing.
AB 2034	AB 2034 is a "whatever-it-takes" program to end homelessness, incarceration and psychiatric hospitalization for adults with severe mental illness and to support consumers in recovery and self-sufficiency. The hallmark of this program is that it is supported by non-Medi-Cal flexible funding. This flexible funding sustains formerly homeless people in housing by providing housing subsidies, rental assistance, a range of comprehensive integrated services and the intensive staff support. Peer support services are offered by consumers who are well into their recovery and have been in the public mental health system. AB 2034 programs were funded to support the "cultural shift" that must take place for real cultural change to occur on the individual, program and system levels. These programs were identified as a national model for delivering services to homeless people with severe mental illness in the report by the President's New Freedom Commission on Mental Health. The Mental Health Services Act (MHSA)/ Prop 63 Full Service Partnership model was based on the AB 2034 program.
AB 3632	AB 3632 is California law that reiterates Federal law, which entitles all children with disabilities to a free, appropriate, public education that prepares them to live and work in the community. AB 3632 mandates mental health services to special education pupils. As of 2011, AB3632 is no longer funded.
5120	Provision of the California Welfare & Institutions Code that places a 14-day intensive treatment limit on persons involuntarily held on a 5150.
5150	5150 is a designated California Welfare and Institutions Code, which allows a professional person designated by the County to transport individuals in a psychiatric emergency to a psychiatric facility for involuntary 72-hour treatment and evaluation.
5350	Provision of the California Welfare & Institutions Code providing for appointment of a conservator for any person who is gravely disabled as a result of mental disorder or impairment by chronic alcoholism.
5355	Provision of the California Welfare & Institutions Code outlining the qualifications of a Conservator.