

**AGREEMENT BETWEEN THE
OFFICE OF STATEWIDE HEALTH PLANNING & DEVELOPMENT
(HEALTHCARE WORKFORCE DEVELOPMENT DIVISION) AND
SANTA BARBARA COUNTY
AGREEMENT NUMBER 14-5012**

THIS REGIONAL PARTNERSHIP AGREEMENT ("Agreement") is entered into on December 2, 2014 by and between the State of California, Office of Statewide Health Planning and Development ("OSHPD") and Santa Barbara County, (the "Contractor").

WHEREAS, the Budget Act of 2012 (AB1467) statutorily allocated OSHPD funding for WET Regional Partnerships and authorized OSHPD to implement the Workforce Education and Training ("WET") Regional Partnership program.

WHEREAS, the Healthcare Workforce Development Division ("HWDD") supports healthcare accessibility through the promotion of a diverse and competent workforce while providing analysis of California's healthcare infrastructure and coordinating healthcare workforce issues.

WHEREAS, Regional Partnerships are set forth in Section 5822 (d) of the Welfare and Institutions Code ("WIC") as an important workforce strategy to assist the Public Mental Health System ("PMHS").

WHEREAS Regional partnerships are included as a priority strategy under the WET Five-Year Plan 2014-2019 which was approved by the California Mental Health Planning Council.

WHEREAS Regional Partnerships will develop and implement mental healthcare workforce development strategies that align with the WET Five-Year Plan 2014-2019 and address regional needs by strengthening recruitment, training, education, and retention of the public mental health system workforce.

WHEREAS The Contractor will provide ongoing staffing support to coordinate/administer programs and activities for individuals and entities that have made a commitment to work collaboratively as a Regional Partnership in the Southern Region.

NOW THEREFORE, OSHPD and the Contractor, for the consideration and under the conditions hereinafter set forth, agree as follows:

A. Definitions:

1. "Director" means the Director of the Office of Statewide Health Planning and Development or his designee.
2. "Regional Partnership Agreement/Agreement Number" means Agreement Number 14-5012 awarded to Contractor.
3. "Contractor" means the fiscally responsible entity in charge of administering the Agreement Funds and includes the Counties and other entities/organizations identified on the Agreement Scope of Work/Deliverables.
4. "Agreement Funds" means the money provided by OSHPD for the Program described by Contractor in the Scope of Work/Deliverables contained herein.

5. "Other Sources of Funds" means all cash, donations, or in-kind contributions that are required or used to complete the Program in addition to the Agreement funds provided by this Agreement.
6. "Program Representative" means the Representative of Contractor's training program(s) for which Agreement funds are being awarded.
7. "Program" means the activity described in the Contractor's Scope of Work to be accomplished with the Agreement Funds.
8. "Regional Partnership(s)" means a group of County approved individuals and/or organizations within geographic proximity that act as an employment and education resource for the Public Mental Health System. The group may include education and employment service entities, individuals and/or entities within the Public Mental Health System, and individuals and/or entities that have an interest in the Public Mental Health System, such as county staff, mental health service providers, clients, and clients' family members. (Title 9 CCR 3200.255).
9. "State" means the State of California and includes all its Departments, Agencies, Committees and Commissions.
10. "Caregivers" means adoptive parents and their partners, foster parents and their partners, grandparents and their partners who are now or have in the past been the primary caregiver for a child, youth, or adolescent with a mental health challenge who accessed mental health services.
11. "Consumer" means Referred to as Client in *Title 9, CCR, Section 3200.040*, is an individual of any age who is receiving or has received mental health services. The term "client" includes those who refer to themselves as clients, consumers, survivors, patients or ex-patients.
12. "Culturally Diverse Communities" mean communities of different diversity dimensions including: race/ethnicity, gender, sexual orientation/identity, socio-economic status, age, religion, physical and/or mental/neurological abilities, language, geographical location (i.e. urban/rural), veteran, and/or other pertinent characteristics.
13. "Family Member" means siblings, and their partners, kinship caregivers, friends, and others as defined by the family who is now or was in the past the primary caregiver for a child, youth, adolescent, or adult with a mental health challenge who accessed mental health services.
14. "Inappropriately Served" means populations that are not being provided appropriate culturally responsive and/or culturally appropriate services and are provided services often inconsistent with evidence-based and/or community-identified practices
15. "Parents" means biological parents and their partners, who are now or have in the past been the primary caregiver for a child, youth, or adolescent with a mental health challenge who accessed mental health services.
16. "Underrepresented" means populations that are underrepresented in the mental health professions relative to their numbers in the total population.

17. "Underserved" means clients of any age who have been diagnosed with a serious mental illness and/or serious emotional disturbance and are receiving some services, but are not provided the necessary or appropriate opportunities to support their recovery, wellness and/or resilience. When appropriate, it includes clients whose family members are not receiving sufficient services to support the client's recovery, wellness and/or resilience. These clients include, but are not limited to, those who are so poorly served that they are at risk of homelessness, institutionalization, incarceration, out-of home placement or other serious consequences; members of ethnic/racial, cultural, and linguistic populations that do not have access to mental health programs due to barriers such as poor identification of their mental health needs, poor engagement and outreach, limited language access, and lack of culturally competent services; and those in rural areas, Native American Rancherias and/or reservations who are not receiving sufficient services. Title 9, CCR, 3200.300
18. "Unserved" means those individuals who may have serious mental illness and/or serious emotional disturbance and are not receiving mental health services. Individuals who may have had only emergency or crisis-oriented contact with and/or services from the County may be considered unserved. Title 9, CCR, 3200.310

B. Term of the Agreement:

1. This Agreement shall take effect on the December 2, 2014 and shall terminate on September 30, 2017.
2. The Contractor will submit any requests to extend the contract period in writing to OSHPD. Requests for a time extension must be made to OSHPD no later than thirty (30) calendar days prior to the expiration of the Agreement. There shall be no activity pursuant to this Agreement after its expiration.

C. Scope of Work/Deliverables:

1. Santa Barbara County (Contractor) as the fiscal sponsor will provide ongoing staffing support to coordinate/administer programs and activities for individuals and entities that have made a commitment to work collaboratively as a regional partnership in the Southern Mental Health Region. The counties that are included in the Southern Mental Health Region are: Imperial, Kern, Orange, Riverside, San Bernardino, San Diego, San Luis Obispo, Santa Barbara, Tri-City, and Ventura.
2. Contractor shall perform the Scope of Work and provide the Deliverables outlined below:

Contractor will provide OSHPD: 1) One-year work plans for FY 2014-15, FY 2015-16, and FY 2016-17 outlining proposed activities, justification for activities, and cost of activities for that year; 2) Annual outcomes progress report for the first fiscal year and semi-annual outcomes progress reports providing outcomes of activities outlined for that year; and 3) a summary report of top accomplishments for FY 2014-15 through FY 2016-17.

Contractor shall submit the Deliverables as provided below:

Deliverable	Description	Due Date
1. FY 2014-15 Work Plan	<p>The Contractor shall submit a work plan using the template found in Attachment 1 to outline proposed activities and cost of activities for FY 2014-15.</p> <p>Within the work plan the contractor shall:</p> <ul style="list-style-type: none"> A. Specify which WET Five-Year Plan 2014-2019 goal, objective, and action each of the proposed activities address. B. Specify how the Regional Partnership proposes to reach out to and include key stakeholder groups such as: state and local government partners, health systems, providers, educational institutions, faith-based organizations, training consortia, consumers, family members, local WIBs, non-profit organizations, social service agencies, children networks, TAY networks, aging networks, businesses, other community and system partners. C. Specify the activities the Regional partnership proposes to engage in to support the increase of groups such as: consumers, family members, parents/caregivers, culturally diverse communities, rural, and other underrepresented, underserved, unserved, and inappropriately served population in the PMHS workforce. D. Specify what activities the Regional Partnership proposes to engage in to support the leveraging of federal funding. E. Provide the proposed metrics/data elements that will be used to evaluate and report on each activity outlined in bullets A-D. Additionally, the Regional Partnership shall indicate how these proposed metrics align to the Key Performance Indicator outlined in the WET Five-Year Plan 2014-2019. Metrics will require approval by OSHPD F. Provide a budget detail and narrative for proposed activities. 	December 3, 2014
2. FY 2014-15 Annual Outcomes Progress Report	<p>The contractor shall submit a progress report using the template found in Attachment 2 to demonstrate outcomes of activities outlined in Deliverable 1 Work Plan. The progress report will demonstrate outcomes of activities for the time period of July 1, 2014 through June 30, 2015.</p> <p>Within the progress report the contractor shall:</p> <ul style="list-style-type: none"> A. Provide Regional Partnership activity outcomes based on the approved metrics/data developed 	August 15, 2015

	<p>under deliverable 1 activity E.</p> <p>B. Provide an expenditure detail and narrative for activities.</p>	
3. FY 2015-16 Work Plan	<p>The Contractor shall submit a work plan using the template found in Attachment 1 to outline proposed activities and cost of activities for FY 2015-16.</p> <p>Within the work plan the contractor shall:</p> <p>A. Specify which WET Five-Year Plan 2014-2019 goal, objective, and action each of the proposed activities address.</p> <p>B. Specify how the Regional Partnership proposes to reach out to and include key stakeholder groups such as: state and local government partners, health systems, providers, educational institutions, faith-based organizations, training consortia, consumers, family members, local WIBs, non-profit organizations, social service agencies, children networks, TAY networks, aging networks, businesses, other community and system partners.</p> <p>C. Specify the activities the Regional partnership proposes to engage in to support the increase of groups such as: consumers, family members, parents/caregivers, culturally diverse communities, rural, and other underrepresented, underserved, unserved, and inappropriately served population in the PMHS workforce.</p> <p>D. Specify what activities the Regional Partnership proposes to engage in to support the leveraging of federal funding.</p> <p>E. Provide the proposed metrics/data elements that will be used to evaluate and report on each activity outlined in bullets A-D. Additionally, the Regional Partnership shall indicate how these proposed metrics line up to the Key Performance Indicator outlined in the WET Five-Year Plan 2014-2019. Metrics will require approval by OSHPD</p> <p>F. Provide a budget detail and narrative for proposed activities.</p>	June 30, 2015
4 (A). FY 2015-16 Semi-Annual Outcomes Progress Report	<p>The contractor shall submit a progress report using the template found in Attachment 2 to demonstrate outcomes of activities outlined in Deliverable 3 Work Plan. The progress report will demonstrate outcomes of activities for the time period of July 1, 2015 through December 31, 2015.</p> <p>Within the progress report the contractor shall:</p> <p>A. Provide Regional Partnership activity</p>	February 15, 2016

	<p>outcomes based on the approved metrics/data developed under deliverable 3 activity E.</p> <p>B. Provide an expenditure detail and narrative for activities.</p>	
4 (B). FY 2015-16 Semi-Annual Outcomes Progress Report	<p>The contractor shall submit a progress report using the template found in Attachment 2 to demonstrate outcomes of activities outlined in Deliverable 3 Work Plan. The progress report will demonstrate outcomes of activities for the time period of January 1, 2016 through June 30, 2016.</p> <p>Within the progress report the contractor shall:</p> <p>A. Provide Regional Partnership activity outcomes based on the approved metrics/data developed under deliverable 3 activity E.</p> <p>B. Provide an expenditure detail and narrative for activities.</p>	August 15, 2016
5. FY 2016-17 Work Plan	<p>The Contractor shall submit a work plan using the template found in Attachment 1 to outline proposed activities and cost of activities for FY 2016-17.</p> <p>Within the work plan the contractor shall:</p> <p>A. Specify which WET Five-Year Plan 2014-2019 goal, objective, and action each of the proposed activities address.</p> <p>B. Specify how the Regional Partnership proposes to reach out to and include the following key stakeholder groups such as: state and local government partners, health systems, providers, educational institutions, faith-based organizations, training consortia, consumers, family members, local WIBs, non-profit organizations, social service agencies, children networks, TAY networks, aging networks, businesses, other community and system partners.</p> <p>C. Specify the activities the Regional partnership proposes to engage in to support the increase of groups such as: consumers, family members, parents/caregivers, culturally diverse communities, rural, and other underrepresented, underserved, unserved, and inappropriately served population in the PMHS workforce.</p> <p>D. Specify what activities the Regional Partnership proposes to engage in to support the leveraging of federal funding.</p> <p>E. Provide the proposed metrics/data elements that will be used to evaluate and report on each activity outlined in bullets A-D. Additionally, the Regional Partnership shall indicate how these</p>	June 30, 2016

	<p>proposed metrics line up to the Key Performance Indicator outlined in the WET Five-Year Plan 2014-2019. Metrics will require approval by OSHPD</p> <p>F. Provide a budget detail and narrative for proposed activities.</p>	
6 (A). FY 2016-17 Semi-Annual Outcomes Progress Report	<p>The contractor shall submit a progress report using the template found in Attachment 2 to demonstrate outcomes of activities outlined in Deliverable 6 Work Plan. The progress report will demonstrate outcomes of activities for the time period of July 1, 2016 through December 31, 2016.</p> <p>Within the progress report the contractor shall:</p> <p>A. Provide Regional Partnership activity outcomes based on the approved metrics/data developed under deliverable 6 activity E.</p> <p>B. Provide an expenditure detail and narrative for activities.</p>	February 15, 2017
6 (B). FY 2016-17 Semi-Annual Outcomes Progress Report	<p>The contractor shall submit a progress report using the template found in Attachment 2 to demonstrate outcomes of activities outlined in Deliverable 5 Work Plan. The progress report will demonstrate outcomes of activities for the time period of January 1, 2017 through June 30, 2017.</p> <p>Within the progress report the contractor shall:</p> <p>A. Provide Regional Partnership activity outcomes based on the approved metrics/data developed under deliverable 5 activity E.</p> <p>B. Provide an expenditure detail and narrative for activities.</p>	August 15, 2017
7. Summary Report of Top Accomplishments for FY 2014-15 through FY 2016-17	<p>The Contractor shall provide a summary report of Top 3 Regional Partnership accomplishments from FY 2014-15 through FY 2016-17. The Summary report shall also include major lessons learned.</p>	September 30, 2017

3. The contractor shall comply with the following additional conditions:

1. Funding shall be contingent on the submission of Deliverables outlined in Agreement Section C-2 by their respective due dates.
2. Contractor shall commence performance of the Deliverables on December 2, 2014.
3. OSHPD will work collaboratively with Contractor to finalize the Deliverables to be performed and submitted by Contractor that demonstrate regional partnership activities and outcomes of those activities as indicated In Agreement Section C-2. The parties shall finalize the Deliverables on or before September 30, 2017.

4. The Contractor shall be responsible for all the performance of all tasks and deliverables specified in Agreement Section C-2.
5. The Contractor shall perform the tasks and activities set forth in Agreement Section C-2 and submit the required Deliverables within the deadlines specified in this Agreement. Contractor shall be responsible for anticipating potential overlaps, conflicts, and scheduling issues, to adhere to the terms of this Agreement.
6. OSHPD will monitor the activities and progress of the Contractor by attending quarterly Regional Partnership meeting; and reviewing the semi-annual progress reports submitted by the Contractor. OSHPD reserves the right to require the Contractor to submit additional reports or documentation to evaluate the Program and performance of the Deliverables, during the term of the Agreement.
7. Funding for each cycle shall be contingent on the satisfactory performance of the Deliverables. OSHPD reserves the right to withholding funding for subsequent years until Contractor complies with the terms of this Agreement including this Scope of Work provision.

D. Budget Detail:

Budget: Contractor shall expend the Agreement Funds in accordance with the Budget provided in the Contractor's annually submitted work plan deliverables or in accordance with the information provided in the "Revision to Work Plan Activities" section in the semi-annual progress report deliverables. The funds provided under this Agreement shall be the funds provided from FY 2014-15 through FY 2016-17 which shall cover the costs of activities under deliverables set under contract #14-5012. The funds provided under this contract shall not be comingled with any other funds administered by this contractor.

Budget All-Inclusive Rate: The costs for travel, goods and services must be reflected in the all-inclusive rate for each deliverable identified in Agreement Section C-2. The all-inclusive rate will include but will not be limited to: travel, per diem, supplies, and sub-contractor fees.

E. Reports and Deliverables:

SUBMISSION DEADLINE - Contractor shall submit all the *deliverables and Invoices* for contract #14-5012, no later than the deliverable dates outlined in Agreement Section C-2. Deliverables shall be submitted electronically to brent.houser@oshpd.ca.gov with a hard copy mailed to the address below. Both the electronic and hard copy of invoice must be received to be processed for approval.

Invoices will not be processed for payment until deliverables have been received and approved by OSHPD WET Program Manager. Mail all invoices and deliverables to:

Office of Statewide Health Planning and Development
Healthcare Workforce Development Division
WET Regional Partnership Program Attn: Brent Houser
400 R Street, Suite 330
Sacramento, CA 95811-6213

F. Invoicing and Payment:

Agreement Fund installments shall be released to Contractor upon approval of the invoices submitted by Contractor in accordance with the budget schedule below. Approval of the

invoices shall be based on the satisfactory performance of deliverables as outlined in Agreement Section C-2 Scope of Work within the deadlines specified by OSHPD.

Payment Installment	Payment Amount	Deliverables Requiring Submittal/Approval Prior to Payment Installment Release	Due Date for Set of Deliverables to Receive Payment Installment Approval
1	\$600,000	1	December 3, 2014
2	\$600,000	2 and 3	August 15, 2015
3	\$550,000	4(A) and 5	July 15, 2016
4	\$50,000	4(B); 6(A); 6(B); and 7	September 30, 2017

2. Payment will be made in accordance with, and within the time specified in, Government Code Chapter 4.5, commencing with Section 927.
3. Approval of the invoices shall be based on the satisfactory performance as outlined in Agreement Section C-2 Scope of Work within the deadlines specified by OSHPD.
4. Additional information may be requested by OSHPD upon reviewing the Deliverables.

G. Prompt Payment Clause:

Payment will be made in accordance with, and within the time specified in, Government Code Chapter 4.5, commencing with Section 927.

H. Budget Contingency Clause:

1. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the OSHPD shall have no liability to pay any funds whatsoever to Contractor or to furnish any other considerations under this Agreement and Contractor shall not be obligated to perform any provisions of this Agreement
2. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this Program, the OSHPD shall have the option to either cancel this Agreement with no liability occurring to the OSHPD, or offer an agreement amendment to Contractor to reflect the reduced amount.

I. Breach:

OSHPD reserves the right to recover any and all amounts provided to the Contractor for Contractor's failure to perform the Scope of Work set forth in this Agreement. OSHPD expressly reserves the right pursue all legal and equitable remedies in the event of a breach by Contractor, including the right to disqualify Contractor from future funding opportunities.

J. General Terms and Conditions:

1. Time: Time is of the essence in this Agreement. Contractor will submit the required deliverables as specified and adhere to the deadlines as specified in this Agreement. Anticipating potential overlaps, conflicts, and scheduling issues, to adhere to the terms of the Agreement, is the sole responsibility of the Contractor.

2. Cumulative Remedies: A failure to exercise or a delay in exercising, on the part of the OSHPD, any right, remedy, power or privilege hereunder shall not operate as a waiver thereof; nor shall any single or partial exercise of any right, remedy, power or privilege hereunder preclude any other or further exercise thereof or the exercise of any other right, remedy, power or privilege. The rights, remedies, powers and privileges herein provided are cumulative and not exclusive of any rights, remedies, powers and privileges provided by law.
3. Ownership and Public Records Act: All reports and the supporting documentation and data collected during the funding period which are embodied in those reports, shall become the property of the State and subject to the Public Records Act.
4. Additional Audits: Contractor agrees that the awarding department, the Department of General Services, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Contractor agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. (Gov. Code §8546.7, Pub. Agreement Code §10115 et seq., Cal. Code Regs. tit. 2, §1896).
5. Independent Contractor: Contractor and the agents and employees of Contractor, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State. Nothing contained in this Agreement shall create any contractual relation between the State and any subcontractors, and no subcontract shall relieve the Contractor of their responsibilities and obligations hereunder. The Contractor agrees to be as fully responsible to the State for the act and omissions of its subcontractors and of persons either directly or indirectly employed by the Contractor. The Contractor's obligation to pay its subcontractors is an independent obligation from the State's obligation to make payments to the Contractor. As a result, the State shall have no obligation to pay or to enforce the payment of any money to any contractor.

The Contractor shall not be required under the provisions of this paragraph to keep confidential any data or information, which is or becomes publicly available, is already rightfully in the Contractor's possession, is independently developed by the Contractor outside the scope of this Agreement, or is rightfully obtained from third parties.
6. Waiver: The waiver by OSHPD of a breach of any provision of this Agreement will not operate or be construed as a waiver of any other subsequent breach by OSHPD expressly reserves the right to disqualify Contractor from any future Agreement awards for failure to comply with the terms of this Agreement.
7. Approval: This Agreement is of no force or effect until signed by both parties. Contractor may not commence performance until such approval has been obtained.
8. Entire Agreement / Amendment: This Agreement including Contractor's Application constitutes the entire Agreement between the parties. No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Agreement not incorporated in the Agreement is binding on any of the parties.

9. Assignment: This Agreement is not assignable by the Contractor, either in whole or in part, without the consent of the State in the form of a formal written amendment.
10. Indemnification: Contractor agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to Contractor in connection with the performance of this Agreement, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Contractor in the performance of this Agreement.
11. Disputes: Any dispute arising under this Agreement, shall be resolved as follows:
- The Contractor will discuss the problem informally with the OSHPD Program Coordinator. If unresolved, the problem shall be presented, in writing, as a grievance to the Deputy Director, Healthcare Workforce Development Division stating the issues in dispute, the legal authority or other basis for the Contractor's position and the remedy sought.
 - The Deputy Director shall make a determination within ten (10) working days after receipt of the written grievance from the Contractor and shall respond in writing to the Contractor indicating the decision and reasons for it.
 - Contractor may appeal the decision of the Deputy Director by submitting written notice to the Director of its intent to appeal, within ten (10) working days of receipt of the Deputy Director's decision. The Director or designee shall meet with the Contractor within twenty (20) working days of receipt of the Contractor's letter. The Director's decision will be final.
12. Termination For Cause: OSHPD may terminate this Agreement and be relieved of any payments should the Contractor fail to perform the requirements of this Agreement at the time and in the manner herein provided.
13. Governing Law: This Agreement is governed by and shall be interpreted in accordance with the laws of the State of California.
14. Unenforceable Provision: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.
15. Non-Discrimination Clause: During the performance of this Agreement, Contractor shall not unlawfully discriminate, harass, or allow harassment against any member of the underserved population in performing the obligations under this Agreement because of sex, race, color, ancestry, religious creed, national origin, physical disability (including HIV and AIDS), mental disability, medical condition (e.g., cancer), age (over 40), marital status.
16. Agreement Representatives: The program representatives during the term of this agreement are listed below. Direct all inquiries to:

State Agency: Office of Statewide Health Planning and Development	Contractor: Santa Barbara County
Section/Unit: Healthcare Workforce Development Division/WET	Section/Unit:

Santa Barbara County
Agreement #14-5012

Name: Brent Houser (or designee)	Name (Main Contact): Refugio Rodriguez
Address: 400 R Street, Suite 330 Sacramento, CA 95811-6213	Address: 300 N. San Antontio Road Santa Barbara, CA 93110
Phone: (916) 326-3702	Phone: (805) 681-5220
Fax: (916) 322-2588	Site Fax Number:
Email: brent.houser@oshpd.ca.gov	Email: cucorodriguez@co.santa-barbara.ca.us

Direct all Contract Inquiries to:

State Agency: Office of Statewide Health Planning and Development	Contractor: Santa Barbara County
Section/Unit: Healthcare Workforce Development Division/WET	Section/Unit:
Name: Brent Houser (or designee)	Name of Contracts Officer: Refugio Rodriguez
Address: 400 R Street, Suite 330 Sacramento, CA 95811-6213	Address: 300 N. San Antontio Road Santa Barbara, CA 93110
Phone: (916) 326-3702	Phone: (805) 681-5220
Fax: (916) 322-2588	Site Fax Number:
Email: brent.houser@oshpd.ca.gov	Email: cucorodriguez@co.santa-barbara.ca.us

Official Authorized to Sign Contract for Organization:

State Agency: Office of Statewide Health Planning and Development	Contractor: Santa Barbara County
Section/Unit: Budget, Procurement and Contract Services	Section/Unit:
Attention: Patty Nelson	Attention: Dr. Takashi Wada
Address: 400 R Street, Suite 359, Sacramento, CA 95811	Address: 300 N. San Antontio Road Santa Barbara, CA 93110
Phone: (916) 326-3216	Phone: (805) 681-5220
Fax: (916) 322-2530	Fax: ()
Email: Patty.Nelson@oshpd.ca.gov	Email:

IN WITNESS WHEREOF, the parties hereto have executed or have caused their duly authorized officers to execute this Agreement as of the date first written above.

OFFICE OF STATEWIDE HEALTH
PLANNING AND DEVELOPMENT

CONTRACTOR: SANTA BARBARA
COUNTY

Signature:

Signature

Name: Pattye Nelson

Name: _____

Title: Budget and Facilities Operations Service
Manager

Title: _____

WORKFORCE EDUCATION AND TRAINING REGIONAL PARTNERSHIP
Annual Work Plan Template
(Attachment 1)

Region:	Fiscal Sponsor:
Work Plan Year:	Regional Partnership Coordinator

Please describe the Regional Partnership: (Please include the following: counties and stakeholders engaged in the regional partnership, and regional partnership structure/process used to decide engagement in activities)

A. Regional Needs *(Provide a description of your regions mental health workforce needs including but not limited to: workforce shortages, hard-to-fill, hard-to-retain positions, diversity needs, and regional mental healthcare workforce development challenges)*

“The regions incumbent workforce does not have full competencies to provide culturally responsive care to the Native American population.”

B. Key Goals and Priorities <i>(Provide a description of your Regional Partnerships key goals and priorities, that align with the WET Five-Year Plan 2014-2019, to meet the identified mental health workforce needs)</i>			
Mental Health Workforce Need		Goals to Meet Mental Health Workforce Needs	
<i>For Example:</i> "There is a lack of incumbent providers with cultural competencies to provide care to the Native American population"		<i>For Example:</i> "The partnerships goal is to develop and fund regional trainings for incumbent providers that include training in cultural responsiveness of Native American populations"	
C. Description of Activities <i>(Provide a description of the activities and timelines the Regional Partnership proposes to meet the key goals and priorities. Also include what WET Five-Year Plan 2014-2019 goals, objectives, and actions are met with the proposed activity)</i>			
Proposed Activity		Proposed Timeline	WET Five-Year Plan 2014-2019 Goals, Objectives, and Actions met with Proposed Activity
1	<i>Example:</i> The partnership will develop and fund regional continuing education trainings in: cultural responsiveness of Native American populations. The trainings will be provided in multiple formats including on-the-job trainings and distributed learning trainings.	<i>Develop continuing education training program: July 2014 - September 2014. Provide training October 2014 - March 2015.</i>	<i>Goal 2 Objective A Action 2 and Action 4.</i>

2			
3			
4			
5			
6			
7			
D. Description of Proposed Activities for Priority Elements <i>(Describe how the regional partnership proposes to address each of the elements outlined in this section)</i>			
A. How does the Regional Partnership propose to reach out to and include key stakeholder groups such as: state and local government partners, health systems, providers, educational institutions, faith-based organizations, training consortia, consumers, family members, local Workforce Investment Boards (WIBs), non-profit organizations, social service agencies, children networks, Transitional Age Youth (TAY) networks, aging networks, businesses, other community and system partners?			
Type of Stakeholder		Type of Outreach	
<i>For Example:</i> <i>"Local Workforce Investment Boards (WIBs)"</i>		<i>For Example:</i> <i>"The regional partnership will reach out to every County WIB Director within the region and notify them of quarterly partnership meetings to encourage them to attend."</i>	

B. How does the Regional Partnership Propose to include the stakeholder groups listed above in proposed activities?

Type of Stakeholder	Proposed Activities to Include Stakeholder
<i>For Example: Local Workforce Investment Board (WIBS)</i>	<i>For Example: “The partnership will collaborate with WIBs to provide outreach to current providers on the incumbent training programs. The partnership will also look to leverage local WIB funding to make trainings available to more providers.”</i>

C. What activities does the Regional partnership propose to support the increase of groups such as: 1) consumers, family members, parents/caregivers, 2) culturally diverse communities, 3) rural, and other 4) underrepresented, 5) underserved, 6) unserved, and 7) inappropriately served population in the Public Mental Health System (PMHS) workforce?

Population “Group” Identified	Proposed Activity to support an Increase of the Population Group in the Public Mental Health System (PMHS) workforce
<i>For Example: “2)Culturally Diverse Communities”</i>	<i>For Example: “The partnership proposes to engage in mental health career awareness efforts at local high schools with concentrated populations of culturally diverse communities.”</i>

D. Is the Regional Partnership proposing to engage in activities to support the leveraging of federal funding? (If so, please describe. If not, identify as “not applicable”)

*For example:
“Not applicable”*

E. Evaluation Data Elements <i>(Provide the type of data that will be collected to evaluate each of the activities outlined in sections C and D. Data elements align to the key-performance indicators outlined in the WET Five-Year Plan 2014-2019. Where applicable and to the extent possible, data elements should include data on population served per activity to include: total number of participants, gender, race/ethnicity, languages spoken, County of residence, age, consumer and/or family member experience, and profession.)</i>		
Proposed Activity		Type of Data Elements to be collected
1	For Example: <i>Provide regional continuing education trainings in: cultural responsiveness of Native American populations.</i>	For Example: Types of data elements that will be collected include: <i>total number of individuals that received training; location of trainings; frequency of trainings; type of training received, and demographics of individuals receiving training including: gender, race/ethnicity, languages, County of residence, age, consumer and/or family member experience, and profession.</i>
2		
3		
4		
5		
6		
7		
8		

E. Funds Allocated for Proposed Activities: *(Include a copy of your existing Partnership budget detail. Each line item should have a 1-2 sentence budget narrative which explains the line item and ties it back to the proposed activities outlined in this work plan. The budget narrative would preferably be on the budget, however an attached sheet identifying the budget line item with the budget narrative is acceptable.)*

All information in this Work Plan is true and correct to the best of my knowledge.

Regional Partnership Coordinator

Signature

Date

WORKFORCE EDUCATION AND TRAINING REGIONAL PARTNERSHIP
Semi-Annual Outcomes Progress Report Template
(Attachment 2)

Region:	Fiscal Sponsor:
Progress Report Time Period:	Regional Partnership Coordinator

A. Revisions to Work Plan Activities:

(If the regional partnership has revised the work plan submitted to OSHPD for the time period of this report, please indicate those changes here or include as an attachment to this document.)

Activity as Proposed in Work Plan	Revision to Activity
<i>For Example: The partnership will develop and fund regional continuing education trainings in cultural responsiveness of Native American populations. The trainings will be provided in multiple formats including on-the-job trainings and distributed learning trainings.</i>	<i>For Example: The partnership added two additional competency elements to the training including stigma reduction and tele-health competencies.</i>

<p>B. Description of Activities and Outcomes <i>(This section should describe the activities of the Regional Partnership to meet identified goals during the time period of this report and outcomes. Also include Key activity dates, status of activity and the WET Five-Year Plan 2014-2019 goals, objectives, and actions met with the activity)</i></p> <p><i>Outcome should be reported only for activities during the time period of this progress report. Only report one (1) activity per row which are numbered below. Outcomes should be reported using the data elements approved by OSHPD. Where applicable and to the extent possible outcomes should include data on population served per activity to include: total number of participants, gender, race/ethnicity, sexual orientation, languages spoken, County of residence, age, consumer and/or family member experience, and profession. OSHPD prefers outcomes of demographic data to be reported by excel or other electronic means that facilitates analysis of information. To the extent possible and where applicable, include excel attachments with demographic data.</i></p>					
Description of Activity Engaged in to Meet Work Plan Goals		Key Activity Dates	Status of Activity	WET Five-Year Plan 2014-2019 Goals, Objectives, and Actions met with Activity	Contract Funds Used for Activity (Identify if Funds Used are FY2008-14 Funds or FY2014-17 Funds)
1	<p><i>For Example:</i> <i>Provided regional continuing education trainings to incumbent providers in: cultural responsiveness of Native American populations; stigma reduction; and tele-health competencies. The trainings were provided in multiple formats including on-the-job trainings and distributed learning trainings.</i></p> <p><u>Outcomes:</u></p>	<p><i>Developed continuing education training program between: July 2014 - September 2014. Provided training October 2014 - March 2015.</i></p>	<p><i>In progress. Will continue to engage in activity for subsequent years.</i></p>	<p><i>Goal 2 Objective A Action 2; and Action 4.</i></p>	<p><i>FY 2008-14 funds</i></p>
2					

	<u>Outcomes:</u>				
3					
	<u>Outcomes:</u>				
4					
	<u>Outcomes:</u>				
C. Description of Activities Engaged in for Priority Elements <i>(Describe how the regional partnership addressed each of the elements outlined in this section)</i>					
1. How did the Regional Partnership reach out to and include key stakeholder groups such as: state and local government partners, health systems, providers, educational institutions, faith-based organizations, training consortia, consumers, family members, local Workforce Investment Boards (WIBs), non-profit organizations, social service agencies, children networks, Transitional Age Youth (TAY) networks, aging networks, businesses, other community and system partners?					
Type of Stakeholder		Type of Outreach Conducted		Status	
<i>For Example:</i> “Local Workforce Investment Boards (WIBs)”		<i>For Example:</i> “The regional partnership reached out to every County WIB Director within the region and notified them of quarterly partnership meetings to encourage them to attend.”		For example: “Five (5) of the Eight (8) WIBs within the region have sent staff to attend the partnerships quarterly meetings”	

2. How did the Regional Partnership Include the stakeholder groups listed above in proposed activities?		
Type of Stakeholder	Activities Stakeholders Engaged In	Status
<i>For Example: Local Workforce Investment Board (WIBS)</i>	<i>For Example: "The partnership collaborated with WIBs to provide outreach to current providers on the incumbent training programs."</i>	<i>For Example: The partnership has increased participation in the incumbent training program due to WIB collaboration and will continue to partner with the WIBs to provide outreach to incumbent mental health providers.</i>
3. What activities did the Regional partnership engage in to support the increase of populations such as: 1) consumers, family members, parents/caregivers, 2) culturally diverse communities, 3) rural, and other 4) underrepresented, 5) underserved, 6) unserved, and 7) inappropriately served population in the Public Mental Health System (PMHS) workforce?		
Population "Group" Identified	Activities Engaged in to Support an Increase of the Population Group in the Public Mental Health System (PMHS) workforce	Status
<i>For Example: "2)Culturally Diverse Communities"</i>	<i>For Example: "The partnership engaged in mental health career awareness efforts at local high schools with concentrated populations of culturally diverse communities."</i>	<i>For example: The partnership engaged in Mental health career awareness efforts in 16 high schools throughout the region. The career awareness efforts included speaking during classes and general assembly's. The partnership will continue engaging remaining schools.</i>

4. Where there activities engaged in to support the leveraging of federal funding?

Activity	Outcomes
For Example: “Not Applicable”	For Example: “Not Applicable”

D. Expenditures Report: *(This section should include regional partnership expenditures for activities engaged in during the time period of this report. The expenditure categories should align with the proposed budget categories from the annual work plan. Include a 1-2 sentence budget narrative for each categorized expenditure. Be aware that there should be no commingling of funds. You should not include expenditure information for activities from the funds provided from 2008-09 through 2013-14. Expenditures reported should only include those from funds received between 2014-15 through 2016-17.)*

All information in this Work Plan is true and correct to the best of my knowledge.

Regional Partnership Coordinator

Signature

Date _____