

Investment in Mental Health Wellness Grant Program



NEXT STEPS FOR GRANTEES

Contact Information

CHFFA@TREASURER.CA.GOV

(916) 653-2799

OVERVIEW



Next Steps After CHFFA Approval:

- Grant Agreement
- Documentation or detailed statement of status
- Project readiness and feasibility
- Eligible project cost
- Request for Disbursement form
- Actual Expenditures Report form
- Status Reports
- Certificate of Completion and Final Report

THE GRANT AGREEMENT



- ✓ Board of Supervisors' ("BOS") resolution authorizing an official to accept the Grant
- ✓ BOS must designate a signer for all day-to-day grant transactions
- ✓ Two copies signed by Grantee official and CHFFA's Executive Director
- ✓ One copy sent back to Grantee for records

DOCUMENTATION OR DETAILED STATEMENT



Please submit to your grant officer:

- Documentation for all of the following (*if applicable*) or detailed statement regarding the status of obtaining this documentation
 - ✓ Construction or renovation
 - ✓ Acquisition of real property
 - ✓ Evidence of control of property (lease agreement, grand deed, title report)
 - ✓ Acquisition of supplies, furniture and equipment, including vehicles
 - ✓ Personnel costs
 - ✓ Other eligible costs
- For construction Projects on leased property
 - ✓ Lease agreement requirements
 - ✓ Current title report

Release of Grant Funds & Requirements for Construction Projects on Leased Property - Section 7125 & 7126

FEASIBILITY, SUSTAINABILITY AND READINESS



CHFFA must determine project is ready & feasible within 9 months of Final Allocation

Limited extensions

- Case by case at the discretion of the Executive Director

Cancellation of Grant

- Failure to demonstrate readiness and feasibility
- Grant funds shall be made available to other applicants

Release of Grants- Section 7125(a)(3)(C) + (D)

ELIGIBLE PROJECT COSTS



Must be incurred during the Grant Period

- Purchase of real property
- Construction or renovation
 - Appraisals, inspections, permit fees, surveying, architectural and engineering fees
- Furnishings or equipment (including vehicles for Mobile Crisis Support Team)
- IT hardware and software (not to exceed 1%)
- 3 months of program startup or expansion
 - Lease payments, utilities, facilities repairs or maintenance, personnel cost, moving expense, and certain supplies

Grant funds shall be used only for reasonable costs directly related to and essential for the completion of the Project

Eligible Project Costs - Section 7115

Designated Private Nonprofit Requirements



If County designates a private nonprofit corporation to hold title of the real property purchased with CHFFA grant funds or to receive CHFFA grant funds directly for construction/renovation on property acquired with CHFFA funds

Designated private nonprofit corporation shall:

- Provide Program(s) services
- Execute a Grant Agreement that:
 - ✓ Complies with Section 7124 of regulations
 - ✓ In the event the nonprofit fails to provide services as provided in the Grant Agreement, title to the real property shall be given to the County
 - ✓ In the event the County does not take and hold title, the Authority may take any action necessary to take and hold title to property.

Release of Grant Funds - Section 7125.1

Designated Private Nonprofit Requirements



- Upon request, provide audited financial statements and retain project and financial records of all grant funds spent for a period of three years after Project completion
- Upon request, provide a current title report with:
 - ✓ No easements, exceptions or restrictions on the use of site that interferes with or impairs the operation of the Project
 - ✓ Fee title subject to the lease agreement
 - ✓ Deed of Trust recorded in the chain of title against the real property that contains a lease agreement (next slide)

Release of Grant Funds - Section 7125.1

Designated Private Nonprofit Requirements



- ❑ Execute a Lease Agreement for use of the real property for the useful life of the Project, including any renewals with the County that:
 - ✓ In the event the nonprofit fails to provide services as provided in the Grant Agreement, the County shall be given title to the real property
 - ✓ In the event the County does not take and hold title, the Authority may take any action necessary to take and hold title to real property

DISBURSEMENT OF FUNDS



1st Disbursement

- Request for Disbursement Form + required documents

2nd Disbursement (and so on...)

- Request for Disbursement Form + required documents
- Actual Expenditure Report + required documents
- Status Report

Release of Grant Funds - Section 7125

REQUEST FOR DISBURSEMENT FORM

REQUIRED DOCUMENTATION



Required documentation, if available; if not available, Grantee must submit detailed statement on the status of obtaining such documentation

Construction or Renovation

- Grant Deed , Lease Agreement or Title Report
- Detail of Building plans, cost and timelines
- Executed Construction Contract
- Architect contract, design contracts, engineering contract (if applicable)
- Building permits, conditional use permits (if applicable)
- Compliance with CEQA and prevailing wage

Release of Grant Funds - Section 7125

REQUEST FOR DISBURSEMENT FORM

REQUIRED DOCUMENTATION



Real Property Acquisition

- Recent appraisal

Acquisition of Supplies, Furniture, Equipment (including vehicles for Mobile Crisis Support Team)

- List of items purchased with purchase orders

3 Month Startup

- Staffing plans and payroll projections
- Utility statements
- Invoices, contracts, P.O's , receipts

Release of Grant Funds - Section 7125(a)

REQUEST FOR DISBURSEMENT FORM

REQUIRED DOCUMENTATION



Personnel Costs

- Staffing plan with number of full time staff
- Job description, minimum qualification and licensing/certification required
- Documentation of hourly wage, employers contribution
- Payroll Projections

Release of Grant Funds - Section 7125

REQUEST FOR DISBURSEMENT FORM

Form # CHFFA 7 MH-02 (Rev. 06/2014)



California Health Facilities Financing Authority ("CHFFA")
Investment in Mental Health Wellness Grant Program

Request for Disbursement Form

Project Name or Description: Butte County Crisis Residential Treatment Facility	\$867,425.00	<input checked="" type="checkbox"/> Crisis Residential
	\$ 0.00	<input type="checkbox"/> Crisis Stabilization
	\$ 0.00 (C)	<input type="checkbox"/> Mobile Crisis Support Team
	\$ 0.00 (P)	

Lead Grantee: County of Butte

Cost Type(s)	Total of previous disbursement	Projected Expenditure Amount
Capital Funding except vehicle purchase:	\$ _____	\$ _____
Vehicle Purchase:	\$ _____	\$ _____
Personnel Funding:	\$ _____	\$ _____
Total - Previous Disbursement:	\$ 0.00	

Documentation to Accompany Form:

Please attach a spreadsheet and other documentation used to establish this projection.

TOTAL DISBURSEMENT REQUEST: \$ 0.00

Request # _____
Grant # BTTE-01
Award Amount \$867,425.00

Amy Voong
CHFFA Project Officer
Phone: (916) 653-2771
Fax: (916) 654-5362
E-Mail: Amy.Voong@treasurer.ca.gov

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Disbursement	
This Disbursement	Total to Date
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____

Please attach a spreadsheet listing projected expenditures as well as all documentation used to establish this projection. Your analyst may contact you for an electronic copy of your spreadsheet.

Total Disbursement Request should include Capital Funding, Vehicle Purchase and Personnel Funding, as applicable.

Has the scope of the Project changed from the description in your grant agreement? YES or NO (circle one) If yes, use Attachment 1 to request approval of and explain any line item changes needed.

I certify that to the best of my knowledge, the information contained in this projection and the accompanying materials is true and accurate. I understand that misrepresentation may result in the cancellation of the grant and other actions which the Authority is authorized to take.

By (Print Name of Authorized Officer) _____ Signature _____
Title _____ Date _____
Phone: _____ Email: _____

Except for the initial submission of this form, please attach status report in accordance with Section 7125(a)(4) and 7128 in the regulations.

It is especially important to indicate if the scope of the Project has changed from the description in your Agreement. Material changes require pre-approval from CHFFA.

REQUEST FOR DISBURSEMENT FORM

Form # CHFFA 7 MH-02 (Rev. 06/2014)



ATTACHMENT 1

California Health Facilities Financing Authority ("CHFFA")
Investment in Mental Health Wellness Grant Program

Grant # BTTE-01

Date Submitted: _____

REQUEST FOR CHANGE

Lead Grantee County of Butte

1) Please detail the requested change or changes in the table below.

Line/Category	Approved Amount	Change Requested	Amount, if approved
			0.00
			0.00
			0.00
			0.00

2) Explain budget change requested above. Why is the change needed?

3) Does the change affect the scope of the project as shown in your grant agreement YES or NO (circle one)
If yes, please explain in detail.

4) Request change of Grant Period end date from _____ to _____
Please explain.

If you would like to move funds between categories (construction, acquisition, furniture, equipment, IT, 3-month startup), please fill out your approved amounts in the 1st column, your requested changes to the approved amounts, and then what the final approved amounts would be.

ACTUAL EXPENDITURES REPORT FORM

REQUIRED DOCUMENTATION



Due after each disbursement or
45 days ending June 30th and December 31st

Required documentation (if applicable):

Payroll Schedule with Signed Certification

- *“Grantee represents and warrants that the attached payroll expenditure schedule is a complete and accurate summary of the performed activities for the project. Grantee represents and warrants that each line item detailed in the attached payroll expenditure schedule is for incurred costs related to the project schedule.”*

Final Settlement Statement or Property Title Report

Invoices, Receipts, and Cancelled Checks or proof of wire transfers

Reporting Requirements – Section 7128(a)

ACTUAL EXPENDITURES REPORT FORM

Form # CHFFA 7 MH-03 (Rev. 06/2014)



California Health Facilities Financing Authority ("CHFFA")
Investment in Mental Health Wellness Grant Program

Actual Expenditures Report
SUMMARY SHEET

Grant # BTTE-01
Award Amount \$867,425.00

Project Name or Description Butte County Crisis Residential Treatment Facility	\$867,425.00	<input checked="" type="checkbox"/> Crisis Residential
		<input type="checkbox"/> Crisis Stabilization
		<input type="checkbox"/> Mobile Crisis Support Team

Amy Voong
CHFFA Project Officer
Phone: (916) 653-2771
Fax: (916) 654-5362
E-Mail: Amy.Voong@treasurer.ca.gov

Lead Grantee: County of Butte

Cost Type(s)	Date of Expenditures		Actual Expenditures
	From	to	
Purchase of real property (Attachment A):	\$		
Construction or renovation (Attachment B):	\$		
Furnishings or equipment including vehicles (Attachment C):	\$		
Information technology hardware and software (Attachment D):	\$		
Program startup or expansion costs (Attachment E):	\$		
Personnel Funding (Attachment F):	\$		
TOTAL:	\$		<u>0.00</u>

FOR CHFFA USE ONLY	
Verified as Eligible	Budget Remaining
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$

I certify that to the best of my knowledge, the information contained in this report form and the accompanying materials is true and accurate. I understand that misrepresentation may result in the cancellation of the grant and other actions which the Authority is authorized to take.

By (Print Name of Authorized Officer)

Signature

Title

Date

Phone:

Email:

Please check applicable status report submitted with this form:

- Mid-year Due within 45 days following June 30
- End of year Due within 45 days following December 31
- Supplemental Upon CHFFA Request

ACTUAL EXPENDITURES REPORT FORM

Form # CHFFA 7 MH-03 (Rev. 06/2014)



ATTACHMENT C

California Health Facilities Financing Authority ("CHFFA")
 Investment in Mental Health Wellness Grant Program
ACTUAL EXPENDITURES FORM – CONSTRUCTION OR RENOVATION

Grant # MH: _____

Date: _____

Lead Grantee _____

CHFFA has separate sheets for construction or renovation, purchase of real property, furnishings or equipment, IT hardware and software, program start up costs, personnel and other costs

Document Description	Date of Document	Description	Amount, (if applicable)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
TOTAL DISBURSEMENT REQUEST – CONSTRUCTION OR RENOVATION (All pages):			

- NOTE:**
1. Attach supporting documentation behind this form in the above order and numbered as shown above.
 2. If more than 15 items are to be listed, copy this form for additional pages and please note total number of pages included _____.

STATUS REPORTS



Due after each disbursement or
45 days ending June 30th and December 31st

Summary of:

- 1) Activities performed and populations served
- 2) Incurred costs and expenditures consistent with application; if not, explain
- 3) Data or preliminary results on outcomes and challenges in obtaining data
- 4) Other funding sources
- 5) Remaining work and an estimated completion timeline
- 6) If Project is within the proposed budget and, if not, why and actions to be taken to ensure sufficient funding

Reporting Requirements – Section 7128(a)

CERTIFICATE OF COMPLETION AND FINAL REPORT



Due within 60 days after Project completion

Required documentation (if applicable):

- ❑ License and certification of Programs
- ❑ Summary of sources and uses of funds
- ❑ Project outcomes, key milestones and accomplishments
- ❑ Real Property Projects: Final closing statement with certification by title company
- ❑ Construction/ Renovation Projects: Certificate of occupancy
- ❑ Vehicle Acquisition Projects: Executed sales agreement or title

Reporting Requirements – Section 7128(b)

HELPFUL TIPS



- ✓ Refer to the Regulations as noted on the slides
- ✓ Collect contracts, purchase orders, invoices and cancelled checks as you go
- ✓ Develop and maintain electronic spreadsheets to track expenditures
- ✓ Keep Project and financial records handy for audits, requests from CHFFA and site visits
- ✓ Stay in frequent contact with your grant officer

CHFFA's Website

[HTTP://WWW.TREASURER.CA.GOV/CHFFA](http://www.treasurer.ca.gov/chffa)

□ Link to statute & regulations

□ Link to regulations - your handbook

■ **Investment in Mental Health Wellness Act of 2013:** A grant program for California counties supporting the development of programs that increase access to and capacity for crisis mental health services

■ **Peer Respite Care:** A grant program for California counties supporting the development of programs that increase access to and capacity for crisis mental health services operated by peers.