

Mental Health Services Act REGIONAL PARTNERSHIP Implementation Progress Report

Region: Greater Bay Area

Fiscal Sponsor County: Alameda

Counties: Alameda, City of Berkeley, Contra Costa, Marin, Napa, San Francisco, Santa Clara, San Mateo, Solano, Sonoma.
Southern Bay Area Region: Monterey, San Benito, Santa Cruz.

Please include a brief introductory paragraph either here or in a cover letter describing the Regional Partnership.

The year 2010 marks ten years since the Greater Bay Area Mental Health & Education Workforce Collaborative (the Collaborative) began as an outgrowth of a Human Resources Summit convened by the California Mental Health Planning Council in 2000. The Collaborative developed in response to the growing need to develop pragmatic approaches to recruiting and retaining a diverse and qualified public mental health workforce. With initial direction from California State University Hayward (now CSU East Bay), the Greater Bay Area Mental Health Directors took on an early leadership role with the Collaborative that continues to this day. The California Institute for Mental Health (CiMH) has served as the Collaborative's fiscal sponsor since 2004, when it applied for and received its first grant from the Zellerbach Family Foundation for staffing support. With the first full-time Project manager hired in 2006, the Collaborative's work and scope has grown to become a true regional partnership of county mental health systems, contracted providers, educational partners, consumers and family members focused on public mental health workforce development. Through monthly meetings in Oakland and a new sub-region in the Southern Bay Area Region, CiMH continues to coordinate the work of Collaborative with a Project Manager based in the Bay Area, a local steering committee and oversight by the Greater Bay Area Mental Health Directors. Statewide Mental Health Services Act (MHSA) Workforce Education & Training (WET) funding provides critical resources for the Collaborative's work in the Greater Bay Area and has supported a variety of projects and activities.

Date Regional Partnership Funding Approved:	July 2009	Time period for this report:	October 2008 – October 2010
1) Major Goals/Priorities:			
<i>If the regional partnership has developed a work plan, a copy of the work plan can be utilized in this section. Include information on why the priorities in the work plan were identified.</i>			
<p>The Greater Bay Area Mental Health & Education Collaborative (the Collaborative) developed a three-year work plan in early 2010 (which is an update of an earlier plan developed in 2007). The priorities and activities identified in the work plan reflect the Collaborative's mission and goals, which have been developed and refined since 2006. The Collaborative's Steering Committee developed the work plan (attached) and it was approved by the Greater Bay Area Mental Health Directors in March 2010.</p> <p><u>Mission Statement</u> The mission of the Greater Bay Area Mental Health & Education Collaborative is to promote the growth and support of a public mental health workforce in the Bay Area that is wellness, recovery and resiliency-oriented and culturally and linguistically competent; employs consumers, family members, and people of ethnic and cultural diversity at all levels of the mental health system.</p>			

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Goals

- I. Develop regional training resources that integrate MHSA philosophy and values: promoting education, training and re-training of the mental health workforce to increase the practice of culturally competent, recovery oriented services.
- II. Increase County Human Resources/Civil Service responsiveness to and operational support of public mental health employment needs.
- III. Strengthen and expand educational partnerships to increase the viability and accessibility of the mental health workforce pipeline.
- IV. Increase the number of consumers and family members hired, retained and offered opportunities for career pathway development throughout the public mental health system.
- V. A diverse and culturally and linguistically competent public mental health workforce serving unserved, underserved and inappropriately served consumers and their families.
- VI. Increase public awareness of and interest in pursuing public mental health careers.

2) Description of Activities:

The report should identify the activities listed in the initial "Application for Funding" provided to the Department, as well as activities added since that time. Include the progress of the activities. If an activity was discontinued or changed please explain why.

A. OVERALL ORGANIZATIONAL SUPPORT & STRUCTURE

- *Provide staff leadership and support to the Collaborative and its Steering Committee.* The Collaborative identified CiMH as its fiscal administrating and coordinating entity in 2004. CiMH, in collaboration with the Steering Committee, recruited and hired Kimberly Mayer as Project Manager in October 2008. Prior to her employment with CiMH, Mayer was the MHSA Project Manager for Contra Costa Mental Health and had served on the Collaborative's Steering Committee since 2005. In 2009 the Steering Committee formalized its structure in a written document and increased its size and composition. The Collaborative holds monthly meetings in Oakland hosted by Alameda County Behavioral Health Care Services, and monthly Steering Committee meetings, also hosted by Alameda County. Donna M. Wigand, LCSW, Contra Costa Mental Health Director, is the Chair.
- *In consultation with the Steering Committee, prioritize activities/projects that meet the overarching goals of the Collaborative.* A three-year work plan was completed in early 2010, and approved by the GBA Directors in March 2010 (attached). This plan will be updated annually or as needed.
- *Develop cultural, consumer and family member supports to ensure the voice, participation and leadership of underserved consumers and family members at Collaborative meetings and special events.* The focus of this activity has changed with respect to "supports": The Collaborative has reached out to consumers and family members in different ways including direct outreach by the project manager and other Collaborative participants; collaborating with Ethnic Services Managers for projects; and recruitment of new members for the Steering Committee to ensure ethnic and cultural diversity, along with increased consumer representation. Most Collaborative participants are employees of their respective organizations, including consumers & family members (some of whom receive stipends for participation in county-sanctioned events, if they are not employees). Supports—in the form of gift cards—are offered to individuals who participate in specific meetings who are not employees. For example: high school students from LIFE Academy presented on their mental health internships;

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consumers from Momentum for Mental Health shared their experiences as part of a presentation on their Immersion Program.

- *Work with Southern Bay Area Counties to develop their regional Collaborative structure and process.* This new sub-region of the Collaborative – Monterey, San Benito and Santa Cruz Counties – is now in place. In December 2008, the Project Manager began discussions with the three mental health directors and their designees in the Southern Region. The recommendation was to designate a carve-out of Regional Partnership funding for this three-county region, with 100% of the funding dedicated to development of a new MSW Program at California State University Monterey Bay (CSUMB), continuing Monterey County Behavioral Health’s leadership for this workforce initiative on the Central Coast. This recommendation was approved by the GBA Mental Health Directors in November 2008. From January through October 2009, the Project Manger conducted meetings with County WET staff and developed the contract between CiMH, Monterey County Behavioral Health and CSUMB. In December 2009 we held the first “community” Southern Regional Collaborative meeting and invited partners from education, contracted providers, consumers and family members, along with Working Well Together staff. The group now has regularly established quarterly meetings, alternating between Monterey and Santa Cruz counties. The Southern Region also has a separate page on the Collaborative’s website. A representative from Monterey County is part of the Collaborative Steering Committee, ensuring ongoing communication and participation.
- *Serve as the liaison between the Collaborative and statewide initiatives.* The Project Manager serves in this role, sharing information on a variety of statewide initiatives via monthly meetings, conference calls, emails and website updates. Recent examples include: a presentation at a Collaborative meeting on the MHLAP Program; collaborating with CalSWEC staff for employment information; and partnering with CiMH staff working on statewide projects.
- *Meet quarterly with the Mental Health Directors to provide updates on project outcomes.* The Chair of the Collaborative and the Project Manager participate in monthly GBA Mental Health Director meetings and conference calls, and the Collaborative Report is a standing agenda item for meetings. Detailed monthly updates are sent via email to all directors. The Project Manager also attends CMHDA All Directors meetings.
- *Participate in county or regional activities as requested.* The Project Manager has participated in county workforce activities in San Francisco, San Mateo, Contra Costa, Monterey and the City of Berkeley. Most recently, the Collaborative co-sponsored a regional consumer & family member employment conference, *Can We Talk?* with San Mateo County Behavioral Health & Recovery Services.
- *Research/procure additional funding sources to support the activities of the Collaborative.* The Zellerbach Family Foundation has provided ongoing financial support to the Collaborative since its early years in 2004, and has recently invited CiMH to reapply for funding for 2011. These grants are for specific activities – some that are included in this report.
- *Continue to improve functionality of Collaborative’s website.* A new website, www.mentalhealthworkforce.org, was launched in December 2009 with information on Collaborative meetings, links to counties, partners and various public mental health workforce development resources. The website has been a great new resource for the region, and includes a calendar of events that lists a variety of regional workforce development activities from counties, CBOs and educational partners. In 2010 a job board was added. A snapshot of data on the website is included in the

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Outcomes section on page 8.

- *Serve as conduit in the Greater Bay Area for information on public mental health careers.* The Collaborative does this in several ways: through monthly meetings, through inquiries via the web site and other public meetings. The project manager also is an invited lecturer in local academic programs, and participates in local MFT consortia activities, and serves on the Mental Health Advisory Committee for CSUEB's MSW Program. The Collaborative has hosted staff from UCSF's Center for the Health Professions to share information on Allied workforce development.
- *Continuously track and evaluate the process and outcomes of Collaborative activities.* Primary evaluation focus has been on process and qualitative outcomes through reports, feedback, and regular communication with various stakeholders. A formal evaluation is proposed for 2011, pending funding from the Zellerbach Family Foundation.

B. TRAINING & TECHNICAL ASSISTANCE

- *Provide technical assistance/consultation as needed/requested to GBA counties in development, submission and implementation of local Workforce Education & Training Plans. Analyze plans, linking information on common activities.* The Project Manager provided three counties with direct consultation on their WET plans. Additionally, an analysis of submitted GBA WET Plans was developed and shared in May 2009 to show common themes. WET Coordinator meetings (following regular Collaborative meetings) offer time for TA and consultation from the Project Manager, along with county-to-county sharing on plan updates and changes. Currently, 12 of 13 GBA County Initial WET Plans have been approved by DMH.
- *Convene GBA Training/WET Coordinators to share information and resources.* Monthly working lunch meetings of Training/WET staff following regular Collaborative meetings began in December 2008. These meetings are focused on specific topics and offer support, information and resources. Beginning in fall 2010, meetings are held quarterly.
- *Explore regional training opportunities as appropriate.* This remains an activity in the Collaborative's current work plan. The Collaborative recently co-sponsored *Can We Talk?*, a consumer & family member employment conference with San Mateo County. A regional California Brief Multicultural Competence Scale (CBMCS) training is planned for 2010. In addition, the Collaborative works closely with Working Well Together, co-sponsoring regional trainings. A new project is currently in development: the Project Manager is working with the Bay Area Academy to leverage IVE funding to offer regional joint mental health/child welfare staff trainings. The Collaborative's meetings also serve as informal trainings with local experts. Recent presentations topics have included: Implications/Impact of Healthcare Reform and Parity for Behavioral Health, eLearning Resources, and Requirements for Licensed Professional Clinical Counselors. All presentation materials and handouts are available for download on the Collaborative's website.
- *Provide consultation and technical support for the development of an eLearning strategic plan for the Bay Area Collaborative to include identification of issues and barriers as well as opportunities and benefits for improved quality and cost effectiveness of eLearning for adult*

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learners. There are two activities related to this topic: The Collaborative supported development of an eLearning Course on the History of the California Public Mental Health System that is posted on CiMH's website, with links from www.mentalhealthworkforce.org. Additionally, a consultant developed a toolkit presentation to support Collaborative participants in using eLearning resources.

- *Develop a consumer and family member expert pool as a resource for local Training programs and staff.* This project has not started yet. We are beginning to develop a database of local trainers and will include this as one of the components. However, several local consumer and family member staff presented at the recent *Can We Talk?* consumer & family member employment conference that will serve as a good start for the expert pool.
- *Support efforts to increase capacity to accept interns, including sharing resources on best practices for clinical supervision.* The Collaborative has offered support on intern programs including: presentations on best practices; developing a matrix of intern/trainee supervision requirements—posted on the website—followed by a presentation facilitated by a local trainer; posted links to county intern training programs on the website; facilitated discussions/sharing of sample intern policies and university contracts/ MOUs with training staff.

The Steering Committee recently added Healthcare Reform to its standing agenda, anticipating emerging workforce development issues. While no particular regional strategy has been identified, we plan to disseminate information on resources, trainings and best practices.

C. CONSUMER & FAMILY MEMBER EMPLOYMENT

- *Increase consumer and family member participation in the Collaborative, including the Steering Committee.* There is regular consumer and family member participation in Collaborative meetings, and linkages with consumer groups including: Alameda County's Pool of Consumer Champions, PEERS and others. Consumer leaders are regular participants in Collaborative meetings and WET Coordinator meetings. The Project Manager offers a 30-minute orientation prior to monthly meetings open to all new participants. The number of consumer positions on the 13 member Steering Committee was increased. However, more effort needs to be made to reach out to family members for participation. A new activity in progress, funded by the Zellerbach Family Foundation, is expanding family member employment of adults, convening this group of family member employees, defining job descriptions, etc.
- *Identify concrete examples and effective strategies for peer support and reasonable accommodations for consumers in the workplace; share this information, including job descriptions, career ladders and lessons learned.* This is an ongoing process, related to the Consumer & Family Member Employment Conference and upcoming Human Resources Convening. During 2009-10, Working Well Together offered a regional training on Reasonable Accommodations. The Collaborative's website also has a "Consumer and Family Member Employment Resources" page.
- *Disseminate/review follow-up information from the first Consumer Employment Summit. In partnership with the Collaborative's consumer and family member participants, host regular consumer liaison and training staff conference calls to share what is working, what has been learned and what is needed to support consumer and family member employment.* In 2009 two Collaborative meetings were dedicated to this topic, along with several meetings with WET/Training staff. The Summit Report was distributed and is also posted on the website. County staff and

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the GBA Mental Health directors offered feedback that they would prefer an opportunity for regional face-to-face meetings to share information. Coincidentally, San Mateo County BHRS also shared interest in holding a consumer and family member employment conference to look at what is working and what still needs development in this area. The Collaborative, San Mateo and WWT co-sponsored this one-day regional event on October 20th, 2010, with over 170 attendees. The Collaborative also promotes monthly consumer and family member employee conference calls facilitated by WWT.

D. CULTURALLY AND LINGUISTICALLY COMPETENT WORKFORCE

- *Analyze Greater Bay Area goals for increased workforce diversity based on counties' MHSA WET Plans as submitted to State DMH. Present results to Bay Area Mental Health Directors and the Collaborative as foundation for planning and convening a forum/other activities. Collaborate with the CiMH Center for Multi-Cultural Development, CMHDA's MHSA Workforce Education and Training Coordinator, Greater Bay Area Ethnic Disparities/Cultural Competence Managers and MHSA Coordinators to plan content, process and desired outcomes for forum/other activities.* This activity is delayed as not all counties have submitted WET Plans to DMH. As requested by the Greater Bay Area counties, CiMH will offer cultural competence skills training in 2010 through a regional California Brief Multicultural Competence Scales (CBMCS) series.
- *Explore expansion of existing consumer and family member training programs into other languages.* This activity has not started yet.

Other activities: The Collaborative is working with local community colleges, which offer a large, diverse student body, to expand Educational partnerships with the public mental health system. This includes the funding of a new Psychosocial Rehabilitation (PSR) Program at Contra Costa College and convening of local community colleges that offer Human Services (or similar) Programs.

E. EXPANDING EDUCATIONAL PARTNERSHIPS/CAREER LADDERS

- *Offer technical assistance/support in the development of High School Mental Health Academies.* The Collaborative has contracted with Erik Rice, former principal of Life Academy in Oakland, a public high school with a mental health academy. In June 2009 the Project Manager hosted a statewide webinar for WET staff on developing high school pathways. Life Academy students presented at a Collaborative meeting in 2009 to share their internship experiences. Rice is currently providing technical assistance and consultation to five Greater Bay Area counties on developing high school mental health curriculum and pathway development.
- *Support county efforts for Community College Psychosocial Rehabilitation (CASRA) curriculum development, including advocating for matriculation.* The Collaborative is supporting this in several ways: CASRA's Training Director participates on the Steering Committee. The Collaborative hosted presentations by CASRA at monthly meetings. In spring 2009 the Collaborative agreed to fund PSR coursework at Contra Costa College for the 2010-11 academic years. Currently, 42 students are enrolled. In addition, in March 2010 the Collaborative—in partnership with the local Regional Health Occupation Resource Center (RHORC), now called the Health Workforce Initiative—convened bay

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Expanded Partnerships:

- **Southern Bay Area Regional Partnership** was launched in 2009.
- **Consumer & Family Member Employment Conference with San Mateo County BHRS:** *Can We Talk?* was a one-day conference highlighting best practices, lessons learned and areas to continue to explore on this topic: www.smhealth.org/bhrs/canwetalk.
- **Community College Convening** with the Interior Regional Health Occupations Resource Center (RHORC) was launched in March 2010. Meetings have included presentations from two colleges—City College of San Francisco, and Contra Costa College—who are partnering with their local county mental health department’s WET Program to offer career pathway programs.

4) Funds allocated for activities:

Please include annual expenditures in the following categories: a) personnel/salaries and related costs, b) direct program operating costs, c) contract/consulting expenses, and d) administrative/indirect costs. Also: include any other costs that may not fit into those categories. Please include a narrative for the “other” costs. Also please note if Regional Partnership funds are being matched or leveraged by other entities for any of the activities.

DMH Regional Partnership Funds

	Jul '08 - Jun 09	Jul '09 - Jun 10	Jul - Aug 10
Direct Program Expenses			
Personnel/Salaries and Related Costs	29,995.25	146,341.49	21,318.27
Contract/Consulting Fees	122,082.08	181,068.42	1,212.50
Other Direct Operating Expenses	1,134.32	18,227.52	3,324.65
Administrative / Indirect Costs	27,041.86	61,005.01	4,563.48
Total Expense	\$180,253.51	\$406,642.44	\$30,418.90

Zellerbach Family Foundation (awarded directly to CiMH)

(calendar-year funding)	2008	2009	2010
	\$85,000	\$85,000	\$65,000
			\$35,000 (MFT Project)

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area community colleges that offer Human Services (or similar) programs at Berkeley City College. Eight colleges participated in March; the next convening is November 2010 at City College of San Francisco. The goal of these convenings is to share resources and offer information on curriculum. This regional convening will eventually support advocating for matriculation.

- *Expand the mental health workforce through increasing the availability and effectiveness of 2-4 year post-secondary (undergraduate) institutions' public sector mental health fieldwork placements through developing and disseminating a best practices toolkit.* The Toolkit has been developed by Debra Brasher and Lucinda DeiRossi, with Inspired at Work. Their work included research of national programs, interviews with county WET staff, local community colleges and other stakeholders. An overview of the Toolkit was presented at a Collaborative meeting, and the Toolkit is in final edits. It will be posted on the Collaborative website.
- *Support the development of a new graduate MSW program at Cal State Monterey Bay.* As discussed on page 2, the development of the new MSW Program at CSUMB has been the primary focus of the new Southern sub-region of the Collaborative. The Collaborative is supporting the program financially, and the Project Manager has participated in some of the Community Advisory Board meetings. The program was formally approved by the California State University's Chancellor's Office in November 2009, and opened its doors in August 2010. It is designed for working adults, with a three-year program length. The first cohort includes 41 students from several Bay Area counties.
- *Serve as a resource for local educational post-graduate programs including social work, counseling, nursing and psychology graduate programs to inform and link students to job opportunities in public mental health (via website). Work with CalSWEC Coordinators to inform students on job opportunities in public mental health.* This is done in a variety of ways, including Collaborative meetings and the www.mentalhealthworkforce.org website, lectures and other information sharing.
- *Participate in local mental health educational and professional program development including: Northern California Consortium of Marriage and Family Therapists Graduate Programs effort to assist in the design and development of a new public mental health certificate; Bay Area RHORC activities.* The focus of the MFT project has changed: Originally, this was a project the Zellerbach Family Foundation had awarded in 2007 to a local professional graduate school. The graduate school was not successful in completing the project, and the funding returned. In 2009 the Collaborative was approached to take on the project, with a new focus: to support the new MHSA-infused requirements for MFT curriculum. Working with consultants from the California Institute for Integral Studies and San Francisco State University (who co-chair the Bay Area MFT Consortium), the Collaborative was awarded a grant for this project in September 2010.

The Project Manager served on the Interior Bay Area Regional Health Occupations Resource Center (RHORC) local advisory committee during 2009-2010, which was housed at San Francisco State University. The Community College convening in March 2010 was one of the outcomes of this partnership. In 2010 the Project Manager was nominated to serve on the statewide RHORC Advisory Committee—now the Health Workforce Initiative (HWI). In spring 2010 the Community College Chancellor's Office consolidated several RHORC programs, closing down the Interior RHORC. However, the partnership continues through the HWI (former RHORC) hosted by Mission College in Santa Clara County.

- *Continue to link with and support graduate level educational partnerships and initiatives including access to regional/state level stipend programs as they are developed and matching between students/graduates and public sector careers.* Local universities who receive WET-

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funded MSW, MFT and Psychologist stipend programs participate in Collaborative meetings and activities, along with the Steering Committee. The Project Manager and other county and CBO mental health staff participate in the MFT Stipend Award process.

F. HUMAN RESOURCES SUPPORT/RESPONSIVENESS

- *Convene an educational and problem-solving group to include Greater Bay Area Mental Health Directors, Human Resource (HR) Directors and key HR managers that will identify challenges and barriers as well as evolving best practices and commitments for future collaboration and mutual consultation. Evaluate/ recommend continuing activity in this arena.* This project was funded by the Zellerbach Family foundation. Work so far includes a survey of county mental health directors and recommendations for a one-day forum. Originally planned for 2009, this convening was postponed until 2010-11 due to challenging budget times and layoffs that were occurring in 2009. A consultant has been engaged and the event will occur in spring 2011.
- *Share information from the California Mental Health Planning Council's Benefits Planning project.* This has not begun yet as a Collaborative activity, however, we have co-sponsored trainings with Working Well Together on this topic.

3) Outcomes of Regional Partnership:

This section should include outcome information for the regional partnership. Consider both quantitative and qualitative outcomes. Outcomes can be either activity specific and/or more general to the Regional Partnership.

New Academic Programs:

- **New MSW Program:** California State University's MSW Program opened its doors in August 2010 with a cohort of 41 students.
- **New Psychosocial Rehabilitation Program:** Contra Costa College's PSR Program began in fall 2010 and currently has 42 students enrolled.
- **Another new MSW Program** was recently launched by Cal State University East Bay. This new three-year program is geared toward working adults and is offered through the University's Extension Program featuring a distance learning environment. The new program does not receive any Regional Partnership or local WET funding, but is an outgrowth of CSUEB's participation in the Collaborative, and local county mental health departments' participation in the University's Mental Health Advisory Board for its full-time MSW program

New Products:

- **New Website:** www.mentalhealthworkforce.org. Activity on the site is steadily increasing: From January – September 2010 the site received 515 visits. In October 2010 the site received 370 separate visits by 219 different individuals.
- **Toolkits:** The Collaborative developed a Regional Partnership Toolkit to support other regions in the start-up of their Regional Partnerships, and is posted on CiMH's website: <http://www.cimh.org/Services/MHSA/Workforce-Ed-Partnership/WET-Regional-Partnership-Toolkit.aspx> The Collaborative has also developed a Toolkit on best practices for Undergraduate Fieldwork Placements in Mental Health Settings.
- **eLearning Course** – History of the Public Mental Health System, is posted on CiMH's website, with a link from the Collaborative's website: <http://www.cimh.org/Learning/Online-Learning/Preview.aspx>.

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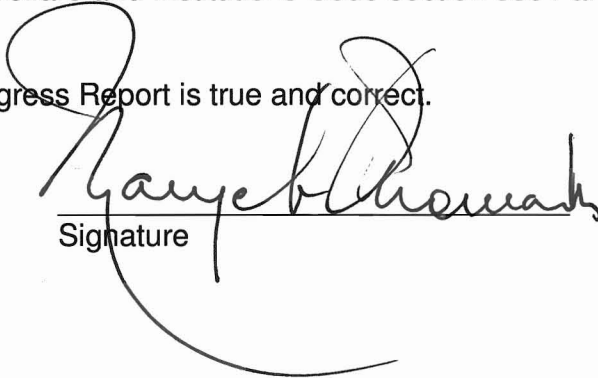
Name/Title of Person Completing Report	Kimberly Mayer, MSSW Project Manager, CiMH	Date:	November 8 th , 2010
Phone:	510-754-8248	Email:	kmayer@cimh.org

Director of Fiscal Sponsor County Attestation

I hereby certify that I am the official responsible for the administration of county mental health services in and for said Regional Partnership and that the Regional Partnership has complied with all pertinent regulations, laws and statutes for this implementation progress report, including all requirements for the Workforce Education and Training component. Mental Health Services Act funds are and will be used in compliance with Welfare and Institutions Code section 5891 and Title 9 of the California Code of Regulations section 3410, Non-Supplant.

All information in this Implementation Progress Report is true and correct.

Maey L. Thomas, MD
Mental Health Director/Designee


Signature

11/19/10
Date

4:30 PM
 10/01/10
 Accrual Basis

Greater Bay Area Regional Partnership Expenditures

	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	Inception - June 30, 2010	July 2010
Expenses by Major Category				
Salaries and Related Costs	29,995.25	146,341.49	176,336.74	9,499.16
Consulting Fees	122,082.08	181,068.42	303,150.50	175.00
Other Direct Program Costs	1,134.32	18,227.52	19,361.84	1,610.09
Indirect Program Costs	27,041.86	61,005.01	88,046.87	1,991.67
Total Expenses	180,253.51	406,642.44	586,895.95	13,275.92
Total Payments to CiMH				
Payments by vouchers	180,253.51	406,642.37	586,895.88	
56838	180,253.51		180,253.51	
58219		12,665.38	12,665.38	
58212		13,994.96	13,994.96	
58224		38,295.68	38,295.68	
58945		58,081.00	58,081.00	
61078		14,578.96	14,578.96	
61165		15,512.48	15,512.48	
61468		89,400.56	89,400.56	
62161		16,810.41	16,810.41	
62565		14,323.88	14,323.88	
63796		16,104.13	16,104.13	
64223		88,790.78	88,790.78	
64601		28,084.15	28,084.15	