

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

635



FROM : Office on Aging

SUBMITTAL DATE:
February 14, 2013

SUBJECT: Memorandum of Understanding (MOU) between Riverside County Office on Aging (RCOOA) and Riverside County Department of Mental Health (RCDMH) to Amend Ordinance No. 440 pursuant to Resolution No. 440- 8923 submitted herewith.

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Receive and file the MOU between RCOOA and RCDMH.
- 2) Approve and direct the Auditor-Controller to make the budget adjustments shown on Schedule A, attached.
- 3) Amend Ordinance No. 440 pursuant to Resolution No. 440- 8923 submitted herewith.

BACKGROUND: Office on Aging and Department of Mental Health have entered into an agreement in order to effectively implement the Mental Health Services Act (MHSA) received and filed by the Board on January 26, 2010, Agenda Item 3.32. As part of MHSA, Prevention and Early Intervention services will be provided by the Office on Aging for Caregiver Support Groups, *Care Pathways*, in Western, Mid-County and Eastern Regions of Riverside County.

Continued next page.
FISCAL PROCEDURES APPROVED

PAUL ANGULO, CPA, AUDITOR-CONTROLLER
BY: Samuel Wong 2/27/13
SAMUEL WONG

Michele Wilham
Michele Wilham, Director

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 267,928	In Current Year Budget:	No
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	Yes
	Annual Net County Cost:	\$ 0	For Fiscal Year:	12/13

SOURCE OF FUNDS: 100% State

Positions To Be Deleted Per A-30	<input checked="" type="checkbox"/>
Requires 4/5 Vote	<input checked="" type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

County Executive Office Signature

BY: Lani Sioson
Lani Sioson

- Policy
- Policy
- Consent
- Consent

Dept. Recomm.
Per Exec. Cfd.

Prev. Agr. Ref.: 3:32 01/26/10 | District: All | Agenda Number:

ATTACHMENTS FILED
WITH THE CLERK OF THE BOARD

3-31

FORM APPROVED COUNTY COUNSEL
BY: Neal R. Kipnis 2/27/13
NEAL R. KIPNIS
DATE

Approved by Barbara A. Olivier,
AS the County Executive Officer/
Human Resources Director

Subject: Memorandum of Understanding (MOU) between Riverside County Office on Aging (RCOOA) and Riverside County Department of Mental Health (RCDMH) to Amend Ordinance No. 440 pursuant to Resolution No.440- 8923 submitted herewith.

The funding provided by Department of Mental Health will support the *Care Pathways* project which includes targeted outreach and caregiver support with special consideration to bi-lingual or mono-lingual caregivers and caregivers of older adults with dementia in the outlined service area.

The goal of the *Care Pathways* PEI support groups is to reduce the likelihood of caregivers developing mental health problems and having to seek formal mental health services.

There are sufficient funds in the Department of Mental Health Services Act – Prevention and Early Intervention FY 2012/2013 budget for these services. One (1) full time Office on Aging Program Specialist II will coordinate and oversee the *Care Pathways* Program. Additionally, One (1) full time, qualified bilingual, Program Specialist I, will be assigned to the Coachella Valley for the program expansion. The total annual cost of the program may not exceed \$430,154 and the annual cost for these two positions will not exceed \$180,701. The position(s) will be deleted when funds are exhausted, pursuant to Board Policy A-30.

The MOU is effective from July 1, 2012 through June 30, 2013, and may be renewed in one year increments, upon available PEI funding, with mutual, written consent and signatures by both parties involved.

The current budget for Care Pathways PEI support groups is \$162,226 per Board approval on June 13, 2011. This amendment is increasing the budget by \$267,928 for a total program budget of \$430,154; therefore, a budget adjustment is needed as outlined on Schedule A, attached.

There are sufficient funds in the Department of Mental Health Services Act- Prevention and Early Intervention FY 2012/2013 budget for these services. There is no impact to county general fund and we are requesting no additional matching funds.

**Office on Aging
SCHEDULE A
FY12/13**

SUBJECT: Memorandum of Understanding (MOU) between Riverside County Office on Aging (RCOOA) and Riverside County Department of Mental Health (RCDMH) to Amend Ordinance No. 440 pursuant to Resolution No.440-8923 submitted herewith.

INCREASE ESTIMATED REVENUE:

21450-5300100000-781360	Other Misc. Revenue	267,928
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INCREASE APPROPRIATIONS:

21450-5300100000-510040	Regular Salaries	87,821
21450-5300100000-518100	Budgeted Benefits	43,176
21450-5300100000-510330	TAP Salaries	49,704
21450-5300100000-523640	Computer Equip – Non Fixed Asset	6,000
21450-5300100000-523700	Office Supplies	5,000
21450-5300100000-523760	Postage- Mailing	2,000
21450-5300100000-523840	Computer Equip – software	1,000
21450-5300100000-525440	Professional Services	29,000
21450-5300100000-527780	Special Program Expenses	37,185
21450-5300100000-527880	Training Other	2,542
21450-5300100000-529040	Private Mileage Reimbursement	4,500
		=====
	Total:	267,928

1 RESOLUTION NO. 440-8923

2
3 BE IT RESOLVED by the Board of Supervisors of the County of Riverside, State of California, in
4 regular session assembled on _____, 2013, that pursuant to Section 4(a)(ii) of Ordinance No.
5 440, the Director of Office on Aging is authorized to make the following listed change(s), operative on
6 the date of approval, as follows:

7

<u>Job Code</u>	<u>+/-</u>	<u>Department ID</u>	<u>Class Title</u>
8 74090	+ 1	5300100000	Office on Aging Program Specialist I
9 74091	+ 1	5300100000	Office on Aging Program Specialist II

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MEMORANDUM OF UNDERSTANDING

DEPARTMENTS: RIVERSIDE COUNTY,
DEPARTMENT OF MENTAL HEALTH

AND

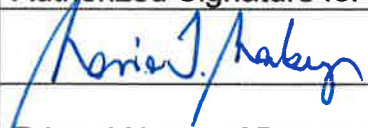
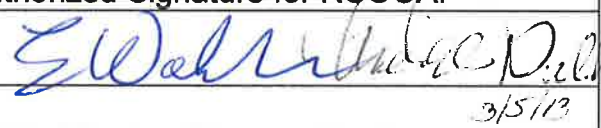
RIVERSIDE COUNTY OFFICE ON AGING

TYPE OF SERVICE: PREVENTION AND EARLY INTERVENTION CAREGIVER
SUPPORT GROUPS

THIS MEMORANDUM OF UNDERSTANDING, herein after referred to as MOU, entered into by and between Riverside County Department of Mental Health (hereinafter "RCDMH"), and Riverside County Office on Aging (hereinafter "RCOOA"), effective July 1, 2012 to June 30, 2013, is hereby amended, effective July 1, 2012.

- Terms and Conditions for Fiscal Year 2012/13 are attached.
- Attachments A, B, and C, updated for Fiscal Year 2012/13, are attached.

IN WITNESS WHEREOF, the Parties hereto have caused their duly authorized representatives to execute this renewal of the MOU.

Authorized Signature for RCDMH:	Authorized Signature for RCOOA:
	
Printed Name of Person Signing:	Printed Name of Person Signing:
for Jerry A. Wengerd	Ed Walsh Michele Wilham
Title: Mental Health Director	Title: Office on Aging Director
Address: 4095 County Circle Drive Riverside, California 92503	Address: 6296 Rivercrest Drive # K Riverside, CA 92507
IN WITNESS WHEREOF, the parties hereto have executed this MOU on this <u>12</u> day of <u>Dec</u> 2012.	

FORM APPROVED COUNTY COUNSEL
BY: 
NEAL R. KIPNIS DATE: 12/27/13

I. DUTIES AND RESPONSIBILITIES:

A. RCOOA RESPONSIBILITIES.

1. RCOOA will provide PEI Family Caregiver Support Program in the Western (Rubidoux, East-Side Riverside, Casa Blanca and Moreno Valley), Mid-County (San Jacinto, Lake Elsinore, Perris, Romoland and Winchester) and Desert Regions (Coachella, Thermal, Indio, Palm Desert, Thousand Palms and Mecca) of Riverside County.
2. RCOOA will make targeted outreach efforts and give priority for participation in the support groups to:
 - caregivers of participants in PEI programs
 - caregivers of adults with mental illness
 - caregivers of older adults with dementia
3. Make targeted outreach efforts to the Spanish speaking community and provide support groups to monolingual and/or bilingual caregivers.
4. Utilize the Caregiver curriculum outlined in Attachment "A."
5. RCOOA will provide two (2) group sessions each week, in each region, in distinct locations estimating a total of 48 combined group sessions per region over the course of the fiscal year.—During the period covered by the MOU, a minimum of 144 individuals will participate in each of the regions.
6. Encourage participants to register over the phone; however walk-ins will be served as long as the class numbers do not exceed the maximum of fifteen participants per group session.
7. Verify caregiver status and have participants sign in for each class.
8. RCOOA may offer specialized topics featured in the months of December and June for workshops.
9. Administer an RCDMH approved depression screening and caregiver burden screening pre and post, to support group attendees during the first and last sessions.
10. Administer a Participant satisfaction survey developed by RCDMH to each participant at the end of each 12 week cycle.
11. RCOOA will include flexibility to accommodate caregivers throughout the workshop series.
12. Monitor measurement of lost participation. The facilitator of the group will be responsible for follow-up with the participant to encourage attendance and/or secure a reason for dropping out.
13. Assign codes to track the measurement of lost participation.
14. Record class observations, progress and provide a brief synopsis of the workshops in a narrative format, to accompany required statistical data, reports and the Participant Satisfaction Surveys following each cycle of classes.
15. Provide the class sign in sheets, and the documentation included in #9 and #10 above to RCDMH within two weeks of the conclusion of each cycle of classes.

16. Take the lead role to establish a local coalition within the Inland Empire; thus, strengthening partnerships, enabling the FCSP to identify gaps in service, advocate on behalf of caregivers and coordinate programs to better serve residents of the inland communities.
17. RCOOA will design a flyer for each region which will be updated as information changes.
18. Market the classes via flyers that will be posted and available for distribution at Community and Senior Centers, Adult Day Care/Adult Day Health Programs Centers (ADC/ADHC) serving the regions outlined, key partners in the care economy, including but not limited to the National Family Caregiver Support Program (NFCSP) contract agencies. Partner physicians will receive flyers for their patients.
19. Post announcements on community bulletin boards in faith based organizations, libraries and health clinics. The RCOOA Info-Van Program will be available and distribute the flyer to senior housing complexes, medical clinics, pharmacies, malls, in rural areas, centralized community meeting places including town hall meetings and store fronts (i.e., in Romoland the Info Van regularly distributes literature in front of the post office). The Info-Van Program, as well as staff from the FCSP, attend and participate in local health fairs and in many community events.
20. Mail flyers quarterly to caregivers residing in the target regions and surrounding communities that have been entered into a data base of family caregivers managed by the RCOOA staff, and updated quarterly. In addition, the flyer will be mailed to newly identified caregivers who call into the RCOOA HelpLink assistance center, throughout the year.
21. RCOOA will translate the flyer into Spanish and distribute it to the Latino communities through partner agencies and physicians offices known to serve Non-English speaking patients.
22. Staff will make announcements (in English and Spanish) at Senior Nutrition sites, as well as other gathering places for seniors and younger family caregivers.
23. RCOOA will work with partners of the Korean community, to inform them about the needs of the caregivers served by RCOOA and avenues for language sensitive appropriate materials will be provided.
24. Staff will outreach to specialized populations including the deaf and hard of hearing through the Model Deaf Community and partner with local audiologists to disseminate information and services for the hard of hearing.
25. Provide ongoing web announcements posted on www.riverside.networkofcare.org under "Upcoming Caregiver Events" and the RCOOA's website www.rcaging.org.
26. RCOOA will work with local media outlets, such as local cable television, public access television, as well as with newspaper agencies to advertise quarterly news releases.
27. RCOOA staff will consist of 1 FTE Program Specialist II for oversight of the whole program; 2.8 FTE Program Specialist I positions and .5 FTE

Program Specialist II position will provide the caregiver support groups.
1.8 FTE of the Program Specialist I positions will be qualified bilingual.

B. RCDMH RESPONSIBILITIES.

1. RCDMH staff will work cooperatively with the RCOOA to provide referrals to the support groups of caregivers identified as the priority target populations.
2. RCDMH will provide support and technical assistance for administering pre and post testing.
3. RCDMH will provide technical assistance and monitor the program.
4. RCDMH will perform a qualitative report to be provided to the support group coordinator after each class cycle.
5. RCDMH will reimburse RCOOA for services, products, and other approved expenses as described in Section III.

II. TERM OF MOU

The period of performance shall be July 1, 2012 until June 30, 2013, and may be renewed in one-year increments, upon available PEI funding, mutual, written consent and signatures by both Parties involved.

III. REIMBURSEMENT/PAYMENT

- A. The RCDMH shall be responsible for reimbursing RCOOA up to the maximum amount of \$430,154 for services performed, products provided and expenses incurred as describe in Attachment "A". RCDMH is not responsible for any fees or costs incurred above or beyond the contracted amount and shall have no obligation to purchase any specified amount of services or products.
- B. Services provided by RCOOA pursuant to this understanding, shall receive quarterly reimbursement based upon Attachment "B" Budget and Claiming's actual cost breakdown and shall not to exceed the maximum obligation of RCDMH as specified herein.
- C. RCOOA shall submit a quarterly claim, a Journal Entry (JE) Worksheet and invoices copies in accordance with the claiming and JE instructions included in Attachment "B".
- D. In consideration of services provided by RCOOA, RCDMH shall reimburse RCOOA in the amount and manner described in Attachment "C".
- E. Claiming period shall consist of a three (3) calendar month (quarterly) claiming period. All claims must be submitted on a quarterly basis to RCDMH for reimbursement no later than thirty (30) calendar days after the end of each quarter in which the services were provided. If by the 30th calendar day, actual figures are not available, an estimated claim shall be submitted.
- F. The RCDMH obligation for payment of this MOU beyond the current fiscal year end is contingent upon and limited by the availability of RCDMH funding from which payment can be made. No legal liability on the part of the RCDMH shall arise for payment of services provided beyond June 30 of each calendar year unless funds are made available for such payment. In the event that such funds are not forthcoming for any reason, RCDMH shall immediately notify RCOOA in writing; and this MOU shall be deemed terminated and have no further force and

effect.

IV. REALLOCATION OF FUNDS:

RCOOA may not, under any circumstances and without prior approval and/or written consent from the Regional Administration/Program Manager and confirmed by the Supervisor of RCDMH Fiscal Unit, reallocate funds between line item categories as designed in the Attachment B – “Budget and Claiming”. Approval shall not exceed the total maximum obligation for the fiscal year.

V. TERMINATION OF THE MOU

- A. Either party may terminate this MOU immediately upon breach of the MOU by the other party, provided written notice of such breach is given and the notifying Party fails to cure such breach to the reasonable satisfaction of the noticing party within ten (10) days of delivery of the notice of breach, or such extended period as is necessary to cure the breach. Such termination by the noticing party shall be effective at the end of the cure period if no cure has been affected.
- B. This MOU may be terminated without cause by either party upon the giving of thirty (30) days written notice to the other party. In the event RCDMH elects to abandon, indefinitely postpone, or terminate the MOU, RCDMH shall make payment for all services performed up to the date that the written notice was given in a prorated amount.
- C. Additionally, this MOU may be terminated subject to availability of funds provided by MHSA PEI funding. In this event, RCDMH shall notify RCOOA immediately and provide a date of termination.

VII. FINANCIAL RECORDS

- A. RCOOA shall maintain financial, programmatic, statistical and other supporting records of its operations and financial activities in accordance with State and Federal requirements. All records shall be open to inspection and may be audited by the authorized representatives of RCDMH, and any State and/or Federal governing agencies.
- B. All financial records, supporting documents, statistical records, and all other records pertaining to the use of the funds provided under this MOU shall be retained collectively by RCDMH and RCOOA for a period of seven (7) years, at a minimum, and shall be made available for audit by County, State or Federal representatives as necessary. In the event of litigation, claim or audit, the records shall be retained until all litigation, claims and audit findings involving the records, have been fully resolved. The seven (7) year period commences upon issuance of certificate of occupancy to RCOOA. Exceptions to the seven (7) year retention period will be made if County, State, and/or Federal laws mandate a longer retention period.

VIII. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)/CONFIDENTIALITY

- A. RCDMH and RCOOA in this MOU are subject to all relevant requirements contained in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, enacted August 21, 1996, and the laws and regulations promulgated subsequent thereto. RCDMH and RCOOA hereto agree to cooperate in accordance with the terms and intent of this MOU for implementation of relevant law(s) and/or regulation(s) promulgated under this

Law. The RCDMH and RCOOA further understands that it shall be in compliance, and shall remain in compliance with the requirements of HIPAA, and the laws and regulations promulgated subsequent hereto, as may be amended from time to time.

All privacy complaints should be referred to:
Riverside County Dept. of Mental Health
Attn: Mary Stetkevich
P.O. Box 7549
Riverside, CA 92503
(951) 358-4521

B. CONFIDENTIALITY

RCDMH and RCOOA understand to maintain the confidentiality of all mental health and/or substance abuse Participant information in accordance with all applicable Federal, State and local laws and regulations. RCDMH and RCOOA will ensure that names, addresses, phone numbers, and any other individually identifiable information concerning mental health and/or substance abuse Participants and the services they may be receiving are kept confidential. Applicable confidentiality laws include, but may not be limited to, California Welfare & Institution Code, Section 5328 through 5330, inclusive, 45 CFR Section 205.50,42 CFR-Chapter 1-Part 2. The RCOOA will notify the RCDMH Compliance Officer of any breach of applicable confidentiality laws referenced herein.

IX. ALTERATION OF TERMS AND ENTIRE AGREEMENT

A. The body of this MOU along with all incorporated Attachments fully expresses all understandings of the parties concerning all matters covered and shall constitute the total MOU. No addition to, or alteration of, the terms of this MOU, whether by written or verbal understanding of the parties, their officers, agents, or employees, shall be valid unless made in the form of a written amendment to this MOU, which is formally approved and executed by RCDMH and RCOOA.

B. All notices pertaining to this MOU shall be sent to the following:

Riverside County Department of Mental Health
Tony Ortego, Older Adult Manager
10182 Indiana Avenue
Riverside, CA 92503
Tel: 951-358-5293 Fax: 951-358-7312

Riverside County Department of Mental Health
Janine Moore, MHSA/PEI Coordinator
3801 University Ave., Suite 400
Riverside, CA 92501
Tel: 951-955-7125 Fax: 951-955-7207

Riverside County Office on Aging
Michele Wilham, Deputy Director
6296 Rivercrest Drive #K
Riverside, CA 92507
951-867-3800

X. AVAILABILITY OF FUNDING

- A. Funding for this MOU is contingent upon the availability of funds through the Mental Health Service Act/Prevention and Early Intervention from which payment can be made. In addition, this MOU is subject to any additional restrictions, limitations, or conditions enacted by the State of California, which may affect the funding for this project.
- B. No legal liability on the part of RCDMH shall arise for payment of services provided beyond June 30, 2013, unless funds are made available for such performance.

XI. SUPPLANTATION

According to the California Code of Regulations, Title 9, Division 2, Chapter 14, Section 3410, the MHSA's non-supplant requirements related to county expenditure consist of the following, all of which must be met in order for an expenditure to be eligible for reimbursement under the MHSA:

Funds cannot be used to replace other state or county funds required to be used to provide mental health services. Funds must be used on programs that were not in existence in the county at the time of the enactment of MHSA, November 2, 2004, or to expand the capacity of existing services that were being provided at the time of MHSA enactment.

XII. MISCELLANEOUS PROVISIONS

- A. **MOU:** This MOU shall not be assigned by RCOOA, either in whole or in part, without prior written consent from RCDMH. Any assignment or purported assignment of this MOU by RCOOA without the prior written consent of RCDMH will be deemed void and of no force or effect.
- B. **LICENSE AND CERTIFICATION:** RCDMH and RCOOA verifies upon execution of this MOU, possession of a current and valid license in compliance with any local, State, and Federal laws and will be performed by properly trained and licensed staff. RCOOA warrants and certifies that it shall comply with new, amended, or revised laws, regulations and/or procedures that apply to the performance of this MOU.
- C. **SEVERABILITY:** If any provision in this MOU is held by a court of competent jurisdiction to be invalid, void or unenforceable, the remaining provisions will nevertheless continue in full force without being impaired or invalidated in anyway.

ATTACHMENT "A" CURRICULUM

The curriculum is organized to cover approximately 12 group sessions. Curriculum was developed using a variety of resources including literature, booklets, videos and relevant articles specific to the needs of the caregiver. The Family Caregiver Support Program (FCSP) offers an extensive library of literature and research material on caregiving and will use these resources to develop the curriculum. The workshop series will be organized into two hour group sessions. The proposal has listed 11 classes. Two of those classes (Legal Issues Related to Caregiving and Communicating in Challenging Situation) may be subdivided and cover 2 group sessions. RCOOA has agreed to add a last session to cover Healthy Lifestyles as suitable to RCDMH. Each participant will receive a copy of the book, The Caregiver Help book-Powerful Tools for Caregiver, published by Legacy Caregiver Services. The topics proposed will include, but will not be limited to the following:

Goal: To provide caregivers the opportunity to attend two hour PEI support group sessions that will include psycho-educational curriculum, in a supportive environment.

A. How to Talk to Your Doctor

Objective: Participants will learn how to effectively communicate with their health care practitioner.

1. Choosing Doctors you can Talk To
2. How Should I Prepare? Getting Ready for an Appointment.
3. What Can I Say? Giving Appropriate Information
4. What Can I Ask?
5. Making Decisions With Your Doctor

B. Legal Issues Related to Caregiving

Objective: Participants will understand their legal rights and responsibilities as a caregiver.

1. Laws and Policies that Help the Caregivers
 - a. Family Medical Leave Act
 - b. Paid Family Leave
 - c. Community Spouse Resource Allowance
2. Legal and Financial Decision Making
 - a. Durable Power of Attorney
 - b. Wills
 - c. Trusts
 - d. Representatives Payee
 - e. Conservatorship

C. Preventing Caregiver Burnout

Objective: Participants will be able to identify signs and symptoms of caregiver burnout and will gain knowledge of community resources to alleviate stress.

1. Managing Self Care
2. Taking Care of You
3. Setting Goals and Making Action Plans
4. Problem Solving
5. Community Resources

D. Learning From Our Emotions

Objective: Participants will learn about the importance of emotional health and self-help techniques to alleviate emotional stress.

1. What is Depression?
2. Reducing Anxiety, Guilt and Fear
3. Practicing Self-care

E. Signs of Stress and Stress Reduction Techniques

Objective: Participants will be able to identify stressors and challenges related to caregiving and will learn three stress reduction techniques.

1. Factors that Affect Stress
2. Steps to Maintain Health and Avoid Stress
3. Using Techniques that Lower Stress (meditation, breathing for relaxation, humor, journaling, art therapy, music therapy, aromatherapy)

F. Communicating In Challenging Situations

Objective: Participants will gain an understanding of effective communication and its importance in self-care and methods to facilitate positive interaction with the care recipient.

1. Communicating to Take Care of You
 - a. Setting Limits
 - b. Asking for Help
 - c. Criticism
 - d. Frustration and Anger
2. Communicating with Older Adults
 - a. Hearing impaired
 - b. Visually impaired
 - c. Memory Impaired

G. Taking Charge of Your Health

Objective: Participants will learn how emotional health affects their physical health.

1. Healthy Diet, Healthy Weight
2. Staying Active, Staying Healthy
3. Screening for Good Health
4. Channeling Emotions

H. Managing Medications

Objective: Participants will learn to ask the right questions regarding medications, strategies to prevent over-medication and the importance of safe medication practices.

1. How to Manage My Medication
2. Importance of a Medication Summary
3. Tips for Safe Medication Practices
4. Proper Medication Disposal

I. Grieving - a Natural Reaction to Loss

Objective: Participants will gain an understanding of the role grief plays in emotional health and they will learn that there are many different responses to loss.

1. Grieving Your Own Way
2. Anticipatory Grief
3. Tasks of Grieving
4. Grieving Your Losses

J. Living with Dementia

Objective: Participants will gain an understanding of dementia, safety issues and strategies in dealing with challenging behaviors.

1. Causes of Dementia
2. Family Adjustment – How to Help Yourself
3. Coping with Problem Behaviors
4. Supporting the Care Receiver

K. Healthy Lifestyles

Objective: Participants will gain an understanding of activities they can choose and choices they can make to ensure a healthy, positive impact on their lives.

1. Healthy Eating
2. Exercise

**ATTACHMENT "B"
BUDGET AND CLAIMING**

1. This MOU is funded in accordance with the Mental Health Services Act, PEI Plan. RCOOA shall perform duties described in Section 1: Duties and Responsibilities.
2. The MOU maximum reimbursement for the PEI FCSP shall not exceed \$430,154. Reimbursement will be made in accordance with Section III, REIMBURSEMENT/PAYMENT. The cost breakdown is as follows:

ACCOUNT		TOTAL
510000	SALARIES & BENEFITS	
510330	Salaries and Benefits	278,369
527780	Administrative Costs	<u>32,785</u>
	SUB-TOTAL	311,154
520000	SERVICES & SUPPLIES	
523700	Office Supplies	9,000
523760	Postage-Mailing	2,500
523640	Computer Equipment	7,000
525440	Professional Services	52,000
526420	Advertising	4,000
527780	Special Program Expense	30,000
527880	Training-Other	7,000
529040	Private Mileage	<u>7,500</u>
	SUB-TOTAL	119,000
	GRAND TOTAL	<u>430,154</u>

3. RCOOA will provide RCMHD copies of invoices to supplement the Claim Form and JE Worksheet which are to be submitted quarterly for reimbursement/payment.
4. Instructions for JE Worksheet Contractor Payment Request

The Debt Id to be used for reimbursement is 4100221539-74720-524660.

- JE Number: Leave Blank. (This number will be assigned by Oasis at the time JE is processed by MRU.)

In () are the amount of characters required and allowed for description.

Fill in the required information for your department per line needed.

(Required fields are in BOLD.)

- **Business Unit (5)**
- **Account (6)**
- **Fund (5)**
- **Dept ID (10)**
- **Program (5)**
- **Class (10)**
- **Project/Grant (15)**
- **Debit/Credit Amount**
- **Description (30)**
- **Signature of Approved by and Date**

- Prepared by and Phone number.

MRU will process all JE's and will supply other Department with a copy of processed JE.

5. Instructions for Claim Form.

- a. Enter the Date and Dept Id - 4100221539-74720-524660.
- b. Fill in the total claimed amount for each line item in the appropriate quarter claiming period for your department. Prior quarter claims should also be entered.
- c. Contact Information should include name of preparer, position title, phone number and email address.

ATTACHMENT "B" (cont.) JE WORKSHEET

**COUNTY OF RIVERSIDE
JOURNAL ENTRY WORKSHEET**

TRANS TYPE: JE JE DATE: _____ FY: 2012/2013
 JE NUMBER: _____
 SET ID: RIVCO

Debit Doc Total	Credit Doc Total
\$0.00	\$0.00

Line #	BUS UNIT (5)	ACCOUNT (6)	FUND (6)	DEPT ID (10)	PROGRAM (5)	CLASS (10)	PROJECT/GRANT (15)	(+) DEBIT AMOUNT	(-) CREDIT AMOUNT	DESCRIPTION (30)
1	RIVCO									
2	RIVCO									
3	RIVCO									
4	RIVCO									
5										
6										
7										
8										
9										
10										
11										
12										

CASH DEBIT

CASH CREDIT

APPROVED BY _____ DATE _____

APPROVED BY _____ DATE _____

PREPARED BY _____ PHONE _____

PREPARED BY _____ PHONE _____

ATTACHMENT "C"
ADDITIONAL FISCAL PROVISIONS

A. GENERAL FISCAL PROVISIONS:

1. Unless otherwise notified by RCDMH, RCOOA claims will be paid by RCDMH fifteen (15) days after the date the claim is received by the applicable COUNTY Program/Region.
2. Monthly reimbursement(s) may be withheld at the discretion of the Director or designee due to material non-compliance, including audit disallowances and/or adjustments or disallowances resulting from RCDMH'S Program Monitoring and/or Cost Reconciliation process.
3. An estimated Fourth (4th) Quarter claim is due no later than June 6, 2013.
4. A Final year end claim, based on the cost of actual services provided, is due within thirty (30) days after the end of the fiscal year.
5. RCDMH will reimburse RCOOA within thirty (30) days of receipt of the final year end claim, if applicable.

B. AUDITS:

1. RCOOA agrees that any duly authorized representative of the Federal Government, the State or COUNTY shall have the right to audit, inspect, excerpt, copy or transcribe any pertinent records and documentation relating to this MOU or previous years' MOUS(s).
2. RCDMH will conduct an Annual Program Monitoring. Upon completion of monitoring, RCOOA will be mailed a report summarizing the results of the site visit. If necessary, a corrective Plan of Action will be submitted by RCOOA within thirty (30) calendar days of receipt of the report. RCOOA's response shall identify time frames for implementing the corrective action. Failure to provide adequate response or documentation for this or previous years' MOU(s) may result in MOU payment withholding and/or a disallowance to be paid in full upon demand.
3. Termination in accordance with Section V of the MOU allows RCDMH, Federal and/or State governments to conduct a final audit of RCOOA. Final reimbursement to RCOOA by RCDMH shall not be made until all audit results are known and all accounts are reconciled. Revenue collected by RCOOA during this period for services provided under the terms of this MOU will be regarded as revenue received and deducted as such from the final reimbursement claim.

4. Any audit exception resulting from an audit conducted by any duly authorized representative of the Federal Government, the State or RCDMH shall be the responsibility of RCOOA. Any audit disallowance adjustments may be paid in full upon demand or withheld at the discretion of the Director of Mental Health against amounts due under this MOU or MOU(s) in subsequent years.

**ATTACHMENT "B" (Cont.)
SAMPLE CLAIM FORM**

**MEMORANDUM OF UNDERSTANDING
QUARTERLY CLAIM - FY 2012/2013**

DATE: _____

RCOOA
6296 Rivercrest Drive #K
Riverside, CA 92507

RCMHD
Janine Moore, MHS/PEI Coordinator
P.O. Box 7549
Riverside, CA 92503

DEPT ID # _____

ACCOUNT	1 ST	2 ND	3 RD	4 TH	BUDGET TOTAL	Remaining Balance
	QUARTER CLAIM AMOUNT	QUARTER CLAIM AMOUNT	QUARTER CLAIM AMOUNT	QUARTER CLAIM AMOUNT		
510330 Salaries and Benefits					278,369	
527780 Administrative Costs					32,785	
SUB-TOTAL	0	0	0	0	311,154	0

SERVICES & SUPPLIES	1 ST	2 ND	3 RD	4 TH	BUDGET TOTAL	Remaining Balance
	QUARTER CLAIM AMOUNT	QUARTER CLAIM AMOUNT	QUARTER CLAIM AMOUNT	QUARTER CLAIM AMOUNT		
523700 Office Supplies					9,000	
523760 Postage-Mailing					2,500	
523640 Computer Equipment					7,000	
525440 Professional Services					52,000	
526420 Advertising					4,000	
527780 Special Program Expense					30,000	
527880 Training-Other					7,000	
529040 Private Mileage					7,500	
SUB-TOTAL	0	0	0	0	119,000	0
GRAND TOTAL	0	0	0	0	430,154	0