

Application: Monterey County Regional MHRC

Patricia Zerounian - zerounianp@co.monterey.ca.us
BHCIP Round 5: Crisis and Behavioral Health Continuum

Summary

ID: R5--2951946726
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Pre-Application Consultation Request Form Completed - Dec 18 2022

1. Please provide organization information:

Project Information

Project Title	Monterey County MHRC
Amount Requested	\$20,166,779.00
Match Value	\$5,000,000

Applicant Information

First Name	Katy
Last Name	Eckert
Telephone	831-755-4500
Email	eckertk@co.monterey.ca.us

Organization Information

(Entity Applying for Funding Information)

For addresses: please put apt., suite, place, etc. information ONLY on the line labeled as such.

Name of Entity	County of Monterey Health Department
Street Address	1270 Natividad Road
Apt., suite, place, etc.	(No response)
City	Salinas
State	CA

ZIP Code	93906
Telephone	831-755-4500
Fax	(No response)
Website	http://www.co.monterey.ca.us/
Federal Tax ID (EIN)	94-6000524
UEI Number	(No response)

Lead Authorized Representative

First Name	Katy
Last Name	Eckert
Title	Behavioral Health Bureau Chief / Behavioral Health Director
Email	eckertk@co.monterey.ca.us

2. What type of entity is the lead applicant?

County

2a. Is there a co-applicant?

No

3. What type of facility are you planning on developing?

Click on the boxes below to open the drop down and select facility type. Use the horizontal scroll bar at the bottom of your browser window to view the full facility name. Please choose as many types as necessary/appropriate. See [full list of facilities in the BHCIP Round 5 RFA.](#)

Crisis Continuum Eligible Facility Types

1.	Mental Health Rehabilitation Center (MHRC) only with Lanterman-Petris-Short (LPS) Designation
2.	(No response)
3.	(No response)
4.	(No response)
5.	(No response)

Behavioral Health Continuum Eligible Facility Types

1.	Mental Health Rehabilitation Center (MHRC)
2.	(No response)
3.	(No response)
4.	(No response)
5.	(No response)

4. Tell us briefly about your organization and your overall project and how BHCIP Round 5: Crisis and Behavioral Health Continuum funds would help achieve your project goals.

Monterey County's 75-100-bed Mental Health Rehabilitation Center (MHRC) will fill gaps in services for three counties – Monterey, San Benito, and San Luis Obispo – on the central coast. The MHRC will be sited in an existing building on a large county campus that is home to the county's acute care safety-net hospital, the county Health Department, the Behavioral Health Bureau, and physical and mental health clinics. Monterey County has recently vacated a 40,000 square foot county-owned, free-standing facility that is approximately 60 years old and has been continuously occupied since its construction. The building is in the shape of an octagon with 7 wings and a reception area radiating from the center. The MHRC will dedicate a wing to serve Transition Aged Youth (age 18-25), with other wings dedicated for special populations (such as elder adults and justice involved clients) and uses. All MHRC bedrooms will have windows and one or two beds. One wing will be dedicated to kitchen, dining, and utility areas.

5. Every capital project involves many development and construction-related activities. Please indicate where, specifically, your organization would apply BHCIP funds.

(Select all that apply)

To purchase real property	<input checked="" type="checkbox"/>
For reimbursement of acquisition costs already incurred to purchase real property	<input checked="" type="checkbox"/>
To plan and design the facility	<input checked="" type="checkbox"/>
To renovate existing square footage of a facility	<input checked="" type="checkbox"/>
For new construction of a facility	<input checked="" type="checkbox"/>
For new construction to add new square footage to an existing facility	<input checked="" type="checkbox"/>
Other	(No response)

6. What is the address of the proposed project site?

Street Address	1410 Natividad Road. APN: 003-851-035-000
Apt., suite, place, etc.	(No response)
City	Salinas

7. What is the county in which the proposed project is located?

Monterey

8. On a scale of 1 - 3, what is the anticipated level of community support for the project?

(Support from local elected officials, county/city support and other stakeholders who support the project; any stakeholder engagement efforts conducted or planned, etc.)

1 = No support from the community; no effort made to contact or connect with community members

2 = Some support expressed by community members; at least some contact or connection made.

3 = Positive support from the community overall; connections made with local leaders, who support the project

3

9. Do you anticipate any barriers at the community level? Describe any possible barriers and solutions:

No barriers are anticipated. NAMI Monterey County and the County of Monterey Mental Health Commission have formally endorsed the project. The project is located on a county campus that includes the existing building, county hospital, clinics, health department administration, behavioral health bureau administration, probation, and jail facilities.

10. Do you or your co-applicant have all current required licensing, certifications, and/or accreditations from the appropriate state or local agencies to operate the proposed facility? Answer N/A if not applicable.

No

11. If you are not currently licensed, certified, or accredited, do you intend to pursue licensing, certification, or accreditation?

Yes

12. Do you have a proposed budget?

(If yes, please upload below. Any format is acceptable.)

Yes

Budget Upload

[Pre-app Survey MHRC Budget Upload.xlsx](#)

Filename: Pre-app Survey MHRC Budget Upload.xlsx **Size:** 26.3 kB

13. Is it anticipated that the project will result in the displacement of existing residents during construction?

No

14. Would you like technical assistance from a community development financial institution (CDFI) to better understand the match requirements or financing options?

Yes

15. Have you identified your real estate project development team?

Yes

Question 12: Pre-Application Budget Form

Completed - Dec 18 2022

[Pre-app Survey MHRC Budget Upload](#)

Filename: Pre-app_Survey_MHRC_Budget_Upload.xlsx **Size:** 26.3 kB

Round 5 Application

Application Questions

1. Please provide organization information:

Project Title	Monterey County Regional MHRC
Amount Requested	20166779
Match Value	25619011

2. Applicant Information

(Name and Contact Information for Project Director)

First Name	Kathryn (Katy)
Last Name	Eckert, MPBA
Telephone	831-755-4500
Email	eckertk@co.monterey.ca.us

3. Organization Information

(Entity Applying for Funding Information)

Name of Entity	County of Monterey
Street Address	1270 Natividad Road
Apt., suite, place, etc.	(No response)
City	Salinas
State	CA
ZIP Code	93906
County	Monterey
Telephone	831-755-4500
Fax	(No response)
Website	https://www.co.monterey.ca.us/home https://www.co.monterey.ca.us/government/departments-a-h/health
Federal Tax ID (EIN)	94-6000524
UEI Number	(No response)

4. Lead Authorized Representative

First Name	Elsa M.
Last Name	Jimenez, MPA
Title	Director of Health
Email	jjimenezma@co.monterey.ca.us
Work Phone	831-755-4500
Mobile Phone Number	831-287-4307

5. Please Identify Fiscal Agent

First Name	Fabricio
Last Name	Chombo
Title	Finance Manager II
Email	chombof@co.monterey.ca.us
Work Phone	831-755-4578
Mobile Phone Number	831-261-9729

6. Please Identify Project Director

First Name	Kathryn (Katy)
Last Name	Eckert, MPBA
Title	Bureau Chief
Email	eckertk@co.monterey.ca.us
Work Phone	831-755-4500
Mobile Phone Number	530-277-5000

7. What type of entity is the lead applicant?

County: Behavioral Health Agency

8. Is there a co-applicant?

No

9. Please summarize the applicant entity's organization and experience working with the target population.

The County of Monterey was one of the original counties of California created, in 1850 at the time of statehood. The Health Department, now consisting of seven bureaus, was established in 1920.

Monterey County Health Department, through seven bureaus, serves approximately 440,000 residents with more than 1,000 staff. Bureaus include Administration, Behavioral Health, Clinic Services, Emergency Medical Services, Environmental Health, Public Administration/Public Guardian, and Public Health. The Department operates 14 health, behavioral health, and integrated clinics, plus offices and specialty facilities throughout the county.

In 2019-2020, the Health Department's Behavioral Health Bureau served more than 13,000 people of all ages, 78% of which were people of color. Approximately 74% of clients are covered by Medi-Cal, 16% by Medicare Part B, and the remaining 10% are privately insured or self-pay.

The bureau provides five systems of care: Access to Services, Children and Youth Services, Adult Services, Alcohol and Substance Use Disorders, and Crisis Services. The Bureau works to prevent suicides through its MC HOPES program and works to reduce felonies to misdemeanors for certain non-serious and non-violent drug and property crimes (Prop 47).

Project Information

10. Facility Category

Using the checkboxes below, please select the category or categories of the facility(ies) according to requirements of eligible projects outlined in the RFA in Section 3.3: Eligible Facilities. (Do not double count beds or slots).

The definition of slots is the unduplicated number of persons served by this facility on an annual basis. For example, the number of clients served in a mental health clinic, or the number of patients served by a partial hospitalization program or crisis stabilization unit.

All client counts should be unduplicated. Unduplicated means each client is counted only once, no matter how many times they may have received the same service during the year.

****To calculate total slots please use formula - Annual Slots Current + Annual Slots Added = Annual Slots Total****

****To calculate total beds please use formula - Beds Current + Beds Added = Total Beds****

Outpatient Crisis Services

	Check	Annual Slot Counts: Current	Annual Slot Counts: Added	Annual Slot Counts: Total
Behavioral Health Urgent Care (BHUC)/Mental Health Urgent Care (MHUC)	✘			
Crisis Stabilization Unit (CSU)	✘			
Sobering Center (Funded by DMC- ODS and/or Community Supports)	✘			
Total				0

Outpatient Behavioral Health Services

	Check	Annual Slot Counts: Current	Annual Slot Counts: Added	Annual Slot Counts: Total (Sum of Current + Added)
Hospital-Based Outpatient Treatment (outpatient detoxification/withdra wal management)	✘			
Intensive Outpatient Treatment	✘			
Narcotic Treatment Program (NTP)	✘			
NTP Medication Unit	✘			
Office-Based Outpatient Treatment	✘			
Total				0

Residential Crisis Services

	Check	Beds Current	Beds Added	Beds Total (Sum of Current + Added)
Acute Psychiatric Hospital	✘			
Adolescent Residential SUD Treatment Facility with a DHCS/ASAM Level of Care 3.5 Designation and Withdrawal Management (WM) Designation	✘			
Adult Residential SUD Treatment Facility with Incidental Medical Services (IMS) and BHCS/ASAM Level of Care 3.5 Designation only or with DHCS Level of Care 3.2 WM Designation only	✘			
Children's Crisis Residential Program (CCRP)	✘			
Community Residential Treatment System (CRTS)/Social Rehabilitation Program (SRP) with the category of Short-Term Crisis Residential only	✘			
Mental Health Rehabilitation Centers (MHRC) only	✘			

with Lanterman-Petris-Short (LPS) Designation				
Peer Crisis Respite	✘			
Psychiatric Health Facility (PHF)	✘			
Psychiatric Residential Treatment Facility (PRTF)	✘			
Total				0

Residential Behavioral Health Services

	Check	Beds Current	Beds Added	Beds Total (Sum of Current + Added)
Acute Inpatient Hospital - medical detox/withdrawal management (medically managed inpatient detoxification/withdrawal management facility)	✘			
Acute Psychiatric Inpatient Facility	✘			
Adolescent Residential SUD Treatment Facility	✘			
Adult Residential SUD Treatment Facility	✘			
Community Treatment Facility (CTF)	✘			
Chemical Dependency Recovery Hospital	✘			
General Acute Care Hospital (GACH) and Acute Care Hospital (ACH)	✘			
Mental Health Rehabilitation Center (MHRC)	✔	0	100	100
Peer Respite	✘			
Short-Term Residential	✘			

Therapeutic Program (STRTP)				
Skilled Nursing Facility with Special Treatment Program (SNF/STP)	✘			
Social Rehabilitation Facility (SRF) with Transitional or Long-Term Social Rehabilitation Program (SRP)	✘			
Total				100.0

11. Community Wellness Center

If your facility is a community wellness center, please indicate whether it will provide mental health and/or SUD treatment.

	Facility Type	Annual Slot Counts: Current	Annual Slot Counts: Added	Annual Slot Counts: Total (Sum of Current + Added)
Mental Health	✘			
SUD Treatment	✘			
Wellness/Prevention	✘			
Other	✘			

Community Wellness Center

Other explanation:

(No response)

12. Populations

Estimate the percentages of the racial and ethnic populations that you will serve.

(Whole numbers only and percentages must add up to 100%.)

	% Population Served
African American/Black:	5
Asian American/Pacific Islander:	3
Latino/Hispanic:	54
Native American/Alaska Native:	0
White:	22
Mixed race:	16
Other (please specify below and limit your response to a paragraph):	0
Total	100.0

Other explanation:

(No response)

13. Project Site Information

Enter the street address of the proposed project. For new ground-up construction, enter the APN# or Parcel ID if no address has been assigned. Abbreviate as follows: Rd., St., Pl., Blvd., Ave.

Street Address	1420 Natividad Road
Apt., suite, place, etc.	(No response)
City	Salinas
State	CA
ZIP Code	93906
County	Monterey
APN #	003-851-035-000
Parcel ID	(No response)

14. Please provide a narrative description of the proposed project, including the structural plan for the facility and all planned services.

The Regional MHRC facility will be located in an existing county-owned building at 1420 Natividad Rd, Salinas, CA 93906 on 2.6 acres. The facility is a recently vacated, free-standing building sited on a campus consisting of the County safety-net hospital, Sheriff's and Probation Departments, physical and mental health clinics, County Health Department, and the Behavioral Health Bureau administrative offices. The approximately 100-bed Regional MHRC will accommodate clients from Monterey, San Benito, and San Luis Obispo counties, for a total service area of 8,777 square miles.

Monterey County alone averaged 130 outpatient placements monthly (2017-2021 average admits), which totals 305 individuals monthly when accounting for turnover, for a total of 3,662 annual placement events. The race/ethnic breakdown of out-of-county clients is 56% Hispanic/Latino; 26% Other, 14% White; 2% Asian; and 2% African American.

The existing facility design is an octagon hub with 7 long radiating wings. The facility would have a wing dedicated to serve Transition Aged Youth (age 18-25), with flexibility to dedicate other wings for special populations (such as elder adults or justice involved). All bedrooms are either one or two bed private spaces and have windows. One wing is dedicated to the kitchen and dining/common area. Adults would occupy the balance of the wings, that accommodate 20-26 beds each. Staff offices and private counseling rooms are contained in the central octagon. The facility is in a gated area with 24/7 security. The site is flat and landscaped. Initially, laundry will be done offsite, but a permanent laundry may be added in the future.

The preliminary, conservative project cost estimate of \$45,785,790 and milestone schedule was developed by Health Department Facilities staff with input from our Architect and Engineering Team and is informed by our current health facility renovation costs. Our preliminary cost estimate includes \$3,099,500 in contingencies to help address unknowns such as remediation and possible retrofits. Our application request is \$20,166,799 and our matching funds of \$25,699,000 account for 150% of the entire project costs. Our administration costs total 1.74% of the entire project costs. Our milestone schedule indicates construction start in June 2024 and completion in June 2026.

15. Describe how the proposed project will expand service capacity for crisis and/or behavioral health facilities.

A Regional Monterey County MHRC will allow our area's most severely mentally ill residents to receive intensive treatment close to their home and family. As there is no MHRC facility in Monterey County, our affected clients and conservatees must be moved outside of Monterey County, away from their family and away from their permanent community. Approximately 3,662 Monterey County residents are annually placed in facilities all over the state due to our lack of local infrastructure. Out-of-county placement is difficult for the client and the client's family, who are frequently unable to maintain contact due to economic and time/distance realities. This creates a disparate impact to populations who have been historically underserved and marginalized. It also reduces the ability of the Behavioral Health Bureau and the Public Guardian's office to coordinate care and benefits for clients and conservatees who are so far away. For many of our clients and conservatees, the least restrictive placement is an MHRC, and sadly, with no in-county facilities, we have no choice but to move them away from Monterey County.

Currently, most Monterey County affected clients and conservatees must wait for several weeks, and sometimes several months, for a bed at the MHRC level of care. This means clients and conservatees must either stay in an acute hospital bed or in jail (for persons referred for conservatorship from the criminal courts), while they are on a waiting list for placement. Many of these individuals may continue to cycle in and out of mental health care, hospitals, and the criminal justice system. If there is an LPS Conserved patient in a psychiatric bed in the hospital awaiting placement, the hospital cannot serve another needy patient. The Monterey County Mental Health Plan must pay local hospitals a daily rate of \$693 per conservatee. In comparison, the typical cost of a bed at MHRC costs the Mental Health Plan a daily rate of \$400. That "savings" would be better utilized to help provide supportive services to individuals transitioning back into unlocked treatment.

Survey results from our outreach into our client community indicate that 100% of respondents consider a Regional MHRC to be "Extremely Important." Regarding urgency for the development of a Regional MHRC, 86% considered the development to be "Extremely Urgent."

A Regional Monterey County MHRC would be of great benefit to clients, their families, the operations of the Behavioral Health and Public Guardian's Department, and our safety-net hospital. San Benito and San Luis Obispo counties will also benefit by being able to secure nearby beds and being able to provide better linkage to their home communities. Counties statewide will benefit when beds currently utilized by Monterey residents become available for nearby residents and reduce the long waiting lists for patients needing a secure treatment bed.

16. Licensing and Certifications

List any behavioral health licensing, certifications, and/or accreditations required at the federal, state or local level to operate the planned program services. More lines will appear as needed (max 10):

(Please only include organizational level information - do not provide individual provider numbers)

	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
1.	Mental Health Rehabilitation Center	No	Planned Future	State

	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
2.				

	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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	Name of License/Certification	Currently Held?	Current Status	Federal, State or Local?
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17. State Priorities

Identify each of the State Priorities your project is targeting (RFA Section 1.1) and describe how the project will meet these priorities. Check all that apply:

		Description
Invest in behavioral health and community care options that advance racial equity	✓	<p>A regional MHRC will provide a higher level of service, where that specific type of services doesn't exist for people having severe mental illness. The proposed project will provide the only MHRC in three adjoining counties on the central coast: Monterey, San Benito, and San Luis Obispo. The population historically served is predominantly Hispanic/Latino, covered by Medi-Cal and Medicare, who are placed out-of- county, away from the support of their loved ones and friends. SMI clients who are impoverished – as indicated by receiving Medi- Cal – generally suffer greater stress and depression than residents who have living wages and private health insurance. We therefor assume that while people of color are over-represented among our clients, it is also likely that their mental health needs are not being met.</p>
Seek geographic equity of behavioral health and community care options	✓	<p>The proposed project will provide the only MHRC in three adjoining counties on the central coast: Monterey, San Benito, and San Luis Obispo. Our adjoining counties have provided letters of support stating, "The client's natural support system will support the client's recovery and transition into unlocked levels of care" by drastically reducing the distance needed to serve SMI clients on California's central coast. Continuing into the future without a</p>

		<p>regional MHRC to serve the central coast will perpetuate service inequities for people of color and low socio-economic status.</p>
<p>Address urgent gaps in the care continuum for people with behavioral health conditions, including seniors, adults with disabilities, and children and youth</p>	<p>✓</p>	<p>The Regional MHRC will fill a huge gap in infrastructure and services that has existed far too long. We anticipate the length of client stay in locked facilities will decrease. Seriously mentally ill clients will receive uninterrupted care and no extended emergency department stays. Families from traditionally underserved and impoverished ethnic groups will remain connected to their loved one under treatment locally, rather than many hours away in a different part of the state. With a local treatment option, these families and individuals will be able to maintain connection without adverse economic impacts. Clients will not need to wait days or weeks for an appropriate treatment bed.</p>
<p>Increase options across the life span that serve as an alternative to incarceration, hospitalization, homelessness, and institutionalization</p>	<p>✓</p>	<p>This project will divert people with SMI to a Regional MHRC with appropriate levels of care, thereby decreasing impacts on hospital, jail, justice, and public safety institutions. A Regional MHRC is an appropriate starting point to connect chronically homeless individuals with SMI age 18+ to needed mental, SUD, physical, and human services systems of care. Per our 2022 Homeless Census, 66% of our homeless population are considered chronically homeless, and 84% had been homeless for one or more years. A residential MHRC will allow clinicians and other health professionals the opportunity to provide the intensive, coordinated</p>

		<p>services needed to break and re-route cyclical client behaviors leading to homelessness, hospitalization, and incarceration.</p>
<p>Meet the needs of vulnerable populations with the greatest barriers to access, including people experiencing homelessness and justice involvement</p>	<p>✓</p>	<p>The most vulnerable Monterey County residents are Spanish- only speakers with mental health, SUD, chronic health conditions, and physical health disabilities. Per our 2022 Homeless Census, 61% survey respondents reported having at least one disabling condition. According to the Prison Policy Institute, the latest available data indicate the representation of Hispanic/Latino incarcerated people in Monterey County is .82 (under-represented), and the representation of Black incarcerated people is 10.29 (over-represented). U.S. prisons and jails incarcerate a disproportionate amount of people who have a current or past mental health problem, and facilities are not meeting the demand for treatment (2023, Prison Policy Institute). It is clear that people experiencing homelessness and justice involvement have the greatest barriers to mental health access. A residential MHRC will allow clinicians and other health professionals the opportunity to provide the intensive, coordinated services needed to break and re-route cyclical client behaviors leading to homelessness, hospitalization, and incarceration.</p>
<p>Ensure care can be provided in the least restrictive settings to support community integration, choice, and autonomy</p>	<p>✓</p>	<p>Continuing without a Regional MHRC is highly restrictive, as SMI clients needing MHRC services are held in hospital emergency departments and acute inpatient units or jail while waiting for an available out-of-county placement,</p>

		<p>and then are placed an average 219 miles away from family.</p> <p>A local MHRC will provide a substantially less restrictive setting and greater access to integrated care with local mental health, physical health, SUD, and social services providers.</p>
<p>Leverage county and Medi-Cal investments to support ongoing sustainability</p>	<p>✓</p>	<p>We expect nearly 100% of clients served by the Regional MHRC to be covered by Medi-Cal, as 97% of our 2021 out-of-county placements were Medi-Cal clients. An MHRC in Monterey County would allow us to serve our SMI Medi-Cal clients in their county of residence. SMI Medi-Cal clients in San Benito and San Luis Obispo counties will be able to place their clients much closer to home.</p>
<p>Leverage the historic state investments in housing and homelessness</p>	<p>✓</p>	<p>Our proposed 100-bed Regional MHRC will have adequate beds to fill a gap in services for three counties on the central coast.</p> <p>This plan will optimize state homelessness investments. Monterey County's homeless population report that 57% suffer depression, 49% SUD, 43% PTSD, 30% chronic health conditions, 28% psychiatric conditions, and 27% physical disabilities. We presume that percentages in San Benito and San Luis Obispo counties are similar. A Monterey County investment of \$25 million against a state BHIC investment of \$20 million to serve the central coast region is an excellent example of demonstrating the leveraging of state homelessness funds with local financial commitment.</p>

18. Is this a multi-county collaboration? If yes, select all counties that apply.

No

19. Previous Applications

Has the applicant applied for one or more prior BHCIP rounds (1-4)? Please indicate the round(s) below, identify where funds were awarded and provide a description of how funds requested in Round 5 will be used for separate and distinct purpose of further expansion of behavioral health services for the target population.

	Applied	Awarded	Round 5 Funding Distinct Purpose
Round 1: Crisis Care Mobile Units (CCMU)	✓	Yes	\$999,117 received for development of infrastructure to support expansion of mobile crisis response and the crisis continuum of care by developing a centralized Mobile Crisis Call Center to take crisis calls from the community 24 hours a day 7 days a week, and the expansion of Mobile Crisis Field Operations.
Round 2: County and Tribal Planning	✓	Yes	\$150,000 for Regional MHRC pre-development planning. Monterey County matched the state investment with \$200,000 to fund existing building assessments and begin schematic drawings.
Round 3: Launch Ready	✓	No	\$20 million request to partially fund a \$40 million Regional MHRC.
Round 4: Children and Youth	✓	No	\$1 million to complete a children and youth clinic in an underserved area in the county.

20. Services Payors

Describe how the behavioral health services to be delivered at this project site will be paid for and sustained once project construction is complete.

Services will be provided through a combination of Medi-Cal billing, FFP, Realignment funds, and MHSA funds. Approximately 97% of our SMI clients served in out-of-county MHRC placements are Medi-Cal, Medicare, or Medi-Medi insured. We will serve our clients in the same manner as we have traditionally done, but cost savings will be realized at the state and local levels as clients will be served at an in-county location. Cost efficiencies will be realized as staff will not have to travel to multiple sites outside of the county to see MHRC clients. Beyond saving staff time, vehicle maintenance, gas, and insurance costs will be realized. Additionally, keeping our clients local makes it much easier for clinicians to build and maintain relationships with the entire treatment team and provide the essential support needed to help maintain clients in placement.

21. Cost Overrun

Grantees who are awarded BHCIP funds shall be solely responsible for any costs to complete the project in excess of the program funds award amount. Neither DHCS nor AHP will be responsible for any cost overruns. Please describe contingency plans for any cost overruns for the project.

The proposed budget is conservative, and reflects contingencies in the amount of \$3,291,608. Should the project overrun the contingency amount, additional funds will be provided through MHSA funds of approximately \$3,000,000 annually.

22. Percentages of Funds by Payors

Please include anticipated percentages of funds by payor. Enter whole numbers only. Enter 0 if a payor category does not apply. The total should equal 100%.

	Anticipated Percentage
Insurance	3
Medi-Cal	97
Private pay	0
Other	0
Total	100.0

Please explain other category:

(No response)

23. Diversity, Equity and Inclusion

Are you serving or do you plan to service justice-involved population(s)?

Yes

If yes, please choose the best match of the population(s) projected to serve:

Local/County Probation

24. Describe how the project will advance racial equity and meet the needs of individuals from diverse backgrounds. Applicants must affirm they will not exclude certain populations, such as those who are justice involved or in foster care.

The very essence of the Regional MHRC project is to eliminate economic and cultural burdens placed on those with SMI who require residential treatment. The local MHRC will eliminate long distance travel for families and loved ones who wish to remain in contact with our clients. In most cases, travel for low-income families and loved ones is practically prohibitive due to transportation and loss of income costs. In that 97% of our clients are covered by Medi-Cal, 86% are people of color, and nearly all of our out-of-county clients are of low-income status, this project will provide needed services for vulnerable and disenfranchised clients who are not currently served within the region. Clients suffer from out-of-county placements as they are cut off from their family and natural support groups.

Further, 51% of Monterey County Behavioral Health permanent staff are Spanish speakers, which facilitates the recovery of our Spanish-only speaking clients. It cannot be assured that Spanish-speaking clients who are placed out-of-county can receive the same services in their native Spanish language.

25. Project Readiness

Has the proposed project met **ALL** the minimum threshold for project readiness (as outlined in RFA Section 3.2)?

Please note, this is a minimum requirement for all applications.

Yes

25a. Confirm Readiness

Please confirm site readiness by confirming the below project minimum thresholds, referenced in the [RFA section 3.2](#).

Site control, defined as ownership with clear title, an executed Purchase and Sale Agreement (PSA), an executed Letter of Intent (LOI), or an executed Exclusive Negotiation Agreement (ENA)	Confirm
A sustainable business plan with (pro forma) projections of future objectives and strategies for achieving them	Confirm
A conceptual site plan with a forecast of the developmental potential of the property	Confirm
Stakeholder support as demonstrated by letters of support from internal boards of directors and professional/community partners	Confirm
Demonstration of county and Medi-Cal investments to support ongoing sustainability of the behavioral health program	Confirm
An identified match amount	Confirm
An initial budget - one for each phase and a total budget for acquisition and construction	Confirm

26. Development Phase

Which phase of development describes the current status of the project ([see RFA Section 3.2](#))? Select only one.

Phase 2: Design development

27. Development Phase Description

Describe the phase selected above and how your project fits within that phase.

Our Architectural/Engineer team is currently producing schematic drawings, which should be complete by approximately March 15, 2023. The development summaries will be complete by April 1, 2023, and the full schematic drawing set review is expected to be complete by May 1, 2023. We expect construction drawings to be substantially complete by fall, 2023.

The recently completed facility assessment and fit study summarizes "In conclusion, based on our visual observation and review of existing drawings, we think it is feasible to retrofit the existing facility into a new behavioral health facility" (the study has been uploaded to with project application).

Our next tasks include the development of construction drawings and permitting, and solicitation of construction bids.

28. Construction Type by Facility

Choose all construction types planned for your proposed project, and enter the square footage associated with each project type. Multiple selections are allowed.

Separate out the square footage for each type that applies; values should equal total project square footage.

Enter values as numbers only; for example, 1,354 square feet should be entered as "1354."

Facility Type	Mental Health Rehabilitation Center (MHRC)
Construction Type	Rehabilitation of an existing facility that expands service capacity at current site
Square Footage	40000

28a. Construction Type by Facility

Choose all construction types planned for your proposed project, and enter the square footage associated with each project type. Multiple selections are allowed.

Separate out the square footage for each type that applies; values should equal total project square footage.

Enter values as numbers only; for example, 1,354 square feet should be entered as "1354."

Facility Type	(No response)
Construction Type	(No response)
Square Footage	(No response)

29. Permits and Approvals

List all construction approvals and permits for each facility type referenced previously within this application that will be required to complete the project and describe your strategy for obtaining them within 6 months.

Our preliminary project timeline allocates 60 days to apply for and obtain construction permits, which we expect to have by early February 2024. A routine building construction permit will be issued by the County of Monterey and construction is bound by Monterey County building codes. This project falls under routine construction and renovation building and permit codes. We anticipate obtaining a Certificate of Occupancy by mid-2026, considering current supply chain delays and labor shortages.

30. Types of Services

Please describe the types of service(s) that will be offered as a result of this project.

Monterey County has recently vacated a county-owned, free-standing facility that is located on the campus where the County safety-net hospital, the County Health Department, and the Behavioral Health Bureau are located. Preliminary assessments have confirmed that this facility can feasibly be converted to a Regional adult mental health rehabilitation center of approximately 100 beds. The facility will have a wing dedicated to serve Transition Aged Youth (age 18-25), with flexibility to dedicate other wings for special populations such as elder adults or justice involved. The building's seven long wings are 40' wide having central corridors lined with private bedrooms, with windows, on either side. Each wing has toilet and shower facilities. The short entry wing consists of reception and private staff offices; medications will be locked in this area. One wing will be outfitted for kitchen and dining. Initially, laundry will be done offsite.

The facility will operate 24/7, and staffing will include a Psychiatrist, Licensed Clinical Social Workers, and support and administrative staff. The Regional MHRC will be operated by a competitively sourced contracted entity. Services will include individual treatment plans and counseling, case management, medication management, life skills coaching, and preliminary linkage to social and human services providers. We will issue an RFP to solicit an operator, and depending on the successful contractor, operations may include patient advocacy, family reunification, or substance use disorder treatment.

31. Narrative Description

Provide a detailed narrative description of the proposed project's construction and design (limit: 1500 words).

- Describe any preliminary site plans, design drawings, and/or construction plans for the proposed project. This may include cost estimates with valid budgetary numbers from an architect, engineer, or licensed general contractor.
- If no construction plan is yet in place, please submit a valid rough order of magnitude (ROM) cost estimate from an architect, engineer, or licensed general contractor.
- Describe any site amenities (examples: community and common areas, laundry, gated access, security, recreational areas, community garden, etc.) and sustainable and green building elements.
- Please describe any site mitigation requirements and complex or costly structural or site/topographical requirements.
- Include an explanation of any required demolition and off-site improvements

The existing facility to be renovated is designed as an octagon hub with 7 long radiating wings. The facility will have a wing dedicated to serve Transition Aged Youth (age 18-25), with flexibility to dedicate other wings for special populations such as elder adults or justice involved clients. Note: One wing will be set aside for a 23-hour walk-in out-patient crisis center that is NOT INCLUDED IN THIS FUNDING PROPOSAL and will be developed entirely with County funds.

Each of the facility wings have a central corridor and adjoining bedrooms. All bedrooms consist of either one or two beds and all have windows. Depending on their exact sizes, wings will accommodate 20-26 beds each. One wing will be exclusively dedicated Transition Aged Youth, including Foster Care and formerly Foster Care youth ages 18-25. Other wings will be exclusively dedicated to adults and special adult populations such as elder adults or justice involved adults. One wing is dedicated to the kitchen and dining/common area.

Staff offices, locked medications, and private counseling rooms will be contained in the central octagon. The facility is in a gated area with 24/7 security. The site is flat and landscaped. Initially, laundry will be done offsite, but a permanent laundry may be added in the future.

The preliminary cost estimate (ROM) and milestone schedule was developed by Health Department Facilities staff with input from our Architect/Engineer and is informed by recent health facility renovations. We have added contingencies to help address unknowns such as harmful substance remediation and possible system retrofits. Paul Davis Partnership, with whom we have contracted for design and engineering, has provided a feasibility and fit study, and site programming. Schematic drawings and space planning is underway.

A summary of specific facility renovation tasks of note are:

- Install a new roof with a 30-year warranty.
- Install new roof insulation.
- Replace exterior caulking.
- Remove existing corridor to adjacent jail.
- Replace the existing windows with new energy efficient windows.
- Replace main entry door assembly.
- Paint exterior solid concrete walls. Seal the tilt-up wall panels.
- Extensive demolition of interior walls, ceilings and flooring for new space planning.
- Extensive demolition of existing equipment, mechanical, electrical and plumbing systems
- Trenching of concrete floors for new plumbing.
- New interior construction of a new floor plan with new finishes and ceilings. .
- Improve interior path of travel for accessibility.

Schematics of the existing facility, preliminary new bed placement plan, and additional site plans and satellite map have been uploaded with this BHCIP funding application.

32. Match Requirements

Please identify the source(s) and amounts of funds or real property contributions fulfilling the match requirement (see RFA Section 3.4). If identifying a real property contribution, please provide a certified appraisal and a bank loan document. The match values listed here should align with the match values listed in Form 2: Budget Template. Check all that apply.

Match requirements are set according to applicant type. See section [3.4 of the RFA](#) for more information.

Match Requirements:

- Tribal entities = 5% match
- Counties, cities, and nonprofit providers = 10% match
- For-profit providers and/or private organizations = 25% match

For-profit providers who partner with tribes, counties, cities, or nonprofit providers will be eligible for the lower match. For example, an organization operating a CTF that has partnered with a county will have a match requirement of 10%.

		Funds/Contribution Amount	Funding Source Detail Notes
American Rescue Plan Act (ARPA) funds granted to counties and cities	✘		
Local funding	✔	20,000,000	Source is more-than-adequate County departmental discretionary funds.
Mental Health Services Act (MHSA) funds in the 3-year plan (considered "other local")	✔	3,000,000 annually	\$3 million in MHSA annual funds will be used for loan debt service.
Foundation/philanthropic support	✘		
Opioid settlement funds for SUD facilities	✘		
Loans or investments	✘		

Cash on hand	<input checked="" type="checkbox"/>	5,000,000	Sourced from annual MHPA funding.
Incentive payments from managed care plans	<input type="checkbox"/>		
Land trust	<input type="checkbox"/>		
Unused government and tribal buildings	<input checked="" type="checkbox"/>	\$8,000,000	Valued at \$8 million by County real estate and facility staff. The facility is owned out-right. A certified appraisal is pending.
Buildings originally intended for another purpose	<input type="checkbox"/>		
Surplus land	<input type="checkbox"/>		
Government and tribal property	<input type="checkbox"/>		
Other source	<input type="checkbox"/>		

If other source selected, please identify below:

(No response)

33. Medi-Cal Beneficiaries Served

Please provide the following figures, based on the proposed facility type(s):

- A. Current number of unduplicated clients served annually (unduplicated = number of unique clients served annually)
- B. Expected number of additional unduplicated clients to be served annually (not including current capacity)
- C. Expected total number of unduplicated clients to be served annually (current + expected increase)
- D. Current number of unduplicated Medi-Cal beneficiaries served annually
- E. Expected number of additional unduplicated Medi-Cal beneficiaries to be served annually (not including current capacity)
- F. Expected total number of unduplicated Medi-Cal beneficiaries to be served annually (current + expected increase)

All client counts should be unduplicated. Unduplicated means each client is counted only once, no matter how many times they may have received the same service during the year.

To calculate total for expected clients served annually, please use the formula $A+B=C$

To calculate total for expected Medi-Cal beneficiaries served annually, please use the formula $D+E=F$

	Count
A) Current total number of clients served annually	13137
B) Added number of clients to be served annually through expansion	1200
C) Total number of clients served annually	14337
D) Current number of Medi-Cal beneficiaries served annually	12743
E) Added number of clients who are Medi-Cal	1200

beneficiaries to be served annually through expansion	
F) Total number of Medi-Cal beneficiaries to be served annually	13943

34. Required documents

Please be prepared to upload the corresponding files below for each topic. ***You will be prompted to upload these files after completion of this application.***

Limit each file to 20MB. Label files as follows: Form Name_Project Title_Date. An example would be: Form 8_Wildflower Rehab_060122 or Drawings_Wildflower Rehab_060122.

- Form 2: Budget Template
- Form 3: Development Team Information
- Form 4: Design, Acquisition, and Construction Milestone Schedule
- Form 5: Applicant's Certification of Prevailing Wage
- Form 6: Applicant's Certification of Funding Terms
- Form 7: Community Engagement Tracking
- Form 8: Schematic Design Checklist
- Drawings: preliminary site plans, design drawings, or construction drawings for the proposed project—these may include schematic designs, architectural drawings, construction blueprints, other renderings
- Resumes: Resumes of the development team that developed the design/construction plans
- Contracts: A copy of all executed contracts for hire related to your project's development team (lawyer, construction manager, development manager, architect, consultants, contractor, etc.)

35. Letters of Support

Upload all letters of support in the appropriate category below.

Label all letters of support as follows: LOS_Project Title_Agency or Role of Author. An example would be: LOS_Wildflower Rehab_Kern County BH Department. Abbreviations are acceptable.

Please list the name, title, and affiliation of all authors of letters of support included with this application in the text box that will appear after you upload each file.

If you have requested any letters of support that are still being written, please provide those details below, along with the expected date each letter will be submitted.

36. County board of supervisors or county executive

[LOS_RegionalMHRC_MontereyCoCAO.pdf](#)

The Chief Administrative Officer of the County of Monterey supports the development of a tri-county Regional Regional MHRC that will avoid and mitigate involuntary hospitalizations, psychiatric emergency room visits, homelessness, and incarcerations.

Filename: LOS_RegionalMHRC_MontereyCoCAO.pdf **Size:** 340.5 kB

37. County behavioral health agency

[LOS_RegionalMHRC_SB-County.pdf](#)

San Benito County Behavioral Health Department supports the Regional MHRC as no MHRC exists in the county. The Regional MHRC will have enough beds to accommodate San Benito County clients, allowing them to be located closer to home.

Filename: LOS_RegionalMHRC_SB-County.pdf **Size:** 64.0 kB

[LOS_RegionalMHRC_SLO-County.pdf](#)

San Luis Obispo County Behavioral Health supports the Regional MHRC as no MHRC exists in the county. The Regional MHRC will have enough beds to accommodate San Luis Obispo County clients, allowing them to be located closer to home.

Filename: LOS_RegionalMHRC_SLO-County.pdf **Size:** 1.3 MB

[LOS_RegionalMHRC_BH-Director.pdf](#)

Monterey County Behavioral Health serves more than 13,000 clients annually through five systems of care and 30+ community partners. Behavioral Health clinics are located throughout the county's 437,000+ residents. 84% of clients are people of color.

Filename: LOS_RegionalMHRC_BH-Director.pdf **Size:** 350.6 kB

[LOS_RegionalMHRC_SC-County.pdf](#)

Santa Cruz County Behavioral Health supports the Regional MHRC as it has the ability to accept overflow clients from their own MHRC.

Filename: LOS_RegionalMHRC_SC-County.pdf **Size:** 345.1 kB

38. City council

[LOS_RegionalMHRC_SalinasMayor.pdf](#)

The City of Salinas is the largest city in the county, location of the county seat, and location of the proposed Regional MHRC. County Behavioral Health Bureau and the city collaborate on multiple mental health and human services efforts.

Filename: LOS_RegionalMHRC_SalinasMayor.pdf **Size:** 1.5 MB

39. Tribal council (i.e., tribal council resolution)

If the applicant is a Tribal Entity, this is a required form.

[LOS_RegionalMHRC_Tribal.docx](#)

Please know that no Tribal entity, council, or board exists in Monterey County.

Filename: LOS_RegionalMHRC_Tribal.docx **Size:** 936.3 kB

40. Community stakeholders and/or other community-based organizations

[LOS_RegionalMHRC_NAMI.pdf](#)

NAMI Monterey County offers hope and reduction of stigma associated with mental illness through education, advocacy, service access, and support for families and their loved ones living with a mental illness.

Filename: LOS_RegionalMHRC_NAMI.pdf **Size:** 568.2 kB

[LOS_RegionalMHRC_AllianceOnAging.pdf](#)

The Alliance on Aging was established in 1970 to help seniors remain safely in their own homes for as long as possible. Programs include Medicare Counseling & Education, Senior Peer Counseling, Nursing Home Information & Advocacy, and Tax Counseling.

Filename: LOS_RegionalMHRC_AllianceOnAging.pdf **Size:** 312.4 kB

[LOS_RegionalMHRC_BH_Commission.pdf](#)

The Behavioral Health Commission reviews and evaluates the community's mental health needs, services, facilities, and special problems, and advises the local Behavioral Health Director on any aspect of the local mental health program.

Filename: LOS_RegionalMHRC_BH_Commission.pdf **Size:** 464.8 kB

[LOS_RegionalMHRC_CountyProbation.pdf](#)

The Monterey County Probation Department serves all of the criminal courts of Monterey County, California. Probation Officers supervise approximately 5,500 adult and 900 juvenile offenders granted probation by the courts.

Filename: LOS_RegionalMHRC_CountyProbation.pdf **Size:** 282.8 kB

[LOS_RegionalMHRC_NatividadHospital.pdf](#)

Natividad Hospital provides therapeutics & diagnostics, surgeries (orthopedics, otolaryngology, neurosurgery, urology, vascular, and gynecology), intensive care, mental health, & patient support services (case management, pharmacy, and palliative care).

Filename: LOS_RegionalMHRC_NatividadHospital.pdf **Size:** 65.1 kB

41. Elected or appointed officials

[LOS_RegionalMHRC_PubGuardian.pdf](#)

The Monterey County Public Administrator/Guardian/Conservator Office ensures the physical and financial safety of county residents who are unable to do so on their own, or who are deceased.

Filename: LOS_RegionalMHRC_PubGuardian.pdf **Size:** 564.6 kB

[LOS_RegionalMHRC_Sheriff.pdf](#)

Monterey County Sheriff's Office, "Keeping the peace since 1850," strongly supports the funding application to develop a tri-county regional MHRC in Monterey County.

Filename: LOS_RegionalMHRC_Sheriff.pdf **Size:** 313.1 kB

42. Applicant's CEO and/or board

[LOS_RegionalMHRC_MontereyCoCAO.pdf](#)

The Chief Administrative Officer of the County of Monterey supports the development of a tri-county Regional Regional MHRC that will avoid and mitigate involuntary hospitalizations, psychiatric emergency room visits, homelessness, and incarcerations.

Filename: LOS_RegionalMHRC_MontereyCoCAO.pdf **Size:** 340.5 kB

43. Tribal board

If the applicant is a Tribal Entity, this is a required form.

44. Letters of support still being written and expected date of submission. Please write "N/A" if this does not apply

N/A

Section Heading

45. Please provide a high-quality proposal abstract summarizing the project in no more than 250 words. If you are awarded BHCIP funds, this abstract may appear in public materials. Please include the following information:

- Name of organization
- Project title
- List the BHCIP round of funding.
- Type(s) of construction (i.e., new ground-up construction; addition to an existing structure; rehabilitation of an existing facility; acquisition and adaptive reuse of an existing property; and/or acquisition of existing facility/building, ready for turnkey operations)
- Describe expanded service capacity as a result of this project
- Geographic area(s) (county, city)—identify if multi-county collaboration
- Phase of project development (planning and pre-development, design development, shovel ready, construction, or acquisition) and projected timeline for completion
- Organization’s experience serving target population
- Priority population(s) to be served by the facility, such as justice-involved persons, individuals experiencing homelessness, and/or youth in foster care
- Co-applicants or partners involved in the project, if any
- Priority considerations or unmet needs addressed by the proposed project; please refer to state or local needs assessments as applicable

EXAMPLE: The Omega Organization is requesting funding for its ABC Project, which will repurpose a grocery store to become a Community Mental Health Clinic that will expand behavioral health capacity for children and youth. This project is in the design development phase, and we anticipate completion of the project by August 2024. The Omega Organization has over 50 years of experience working with children and youth and will partner with Westvale Behavioral Health to build a clinic that will expand behavioral health services for children, youth, and their families. ABC Project will address the high need for children and youth behavioral health services in the northern region of Inyo county and will specifically serve youth who are justice-involved and/or in foster care. As identified in the state’s needs assessment, at present there are no community mental health centers designed to serve children and youth in this area.

The County of Monterey's Regional Mental Health Rehabilitation Center (MHRC) will serve Monterey, San Benito, and San Luis Obispo counties. As identified in California's recent mental health needs assessment, there are no residential MHRCs in the tri-county area. Clients and conservatees in the region who need treatment for serious mental illness must wait for several weeks or months for a MHRC bed elsewhere in the state.

Local data indicates that clients needing residential services are placed an average of 219 miles away (range 36 to 446 miles), causing excessive burden on clients and their families, especially affecting traditionally underserved, low income, or impoverished ethnic groups with limited or no means of long- distance transportation and accommodations.

The Regional MHRC will provide the most appropriate and least restrictive treatment setting to support community reintegration, choice, autonomy, and family connections to help clients transition to unlocked levels of care more quickly. The length of client stay in secure locked facilities is expected decrease, and treatment costs for counties and the state will also decrease.

The project is in the design development phase with completion and occupancy expected by the summer of 2026. The 100-bed MHRC will operate 24/7 with a wing dedicated to Transition Aged and foster care youth (age 18-25) and other wings for special populations such as elder adults and justice-involved individuals. Facility services are intended to avoid and mitigate involuntary hospitalizations, psychiatric emergency room visits, homelessness, and incarcerations.

After completing the application form, you will be prompted to upload any related documents. You must upload all required documents before submitting the final application. Once you have uploaded documents and confirmed the application is complete, click the "Complete" button to submit the entire application package.

Document Upload: Form 2: Budget Template

Completed - Feb 2 2023

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could

be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

[R5 Form2 Budget MC Regional MHRC Project 0601](#)

Filename: R5_Form2_Budget_MC_Regional_MHRC_Project_0601.xlsx Size: 39.5 kB

Document Upload: Form 3: Development Team Information

Completed - Feb 2 2023

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

[Form-3 DevTeam-MontereyCountyRegionalMHRC-01](#)

Filename: Form-3_DevTeam-MontereyCountyRegionalMH_Pp8YOps.docx Size: 72.0 kB

Document Upload: Form 4: Design, Acquisition, and Construction Milestone Schedule

Completed - Feb 13 2023

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

Template: [Design, Acquisition, and Construction Milestone Schedule](#)

Template (excel format): [Design, Acquisition, and Construction Milestone Schedule](#)

[Form 4 MilestoneSchedule MCRegionalMHRC 02](#)

Filename: Form_4_MilestoneSchedule_MCRegionalMHRC_02.13.23.pdf Size: 207.5 kB

Document Upload: Form 5: Applicant's Certification of Prevailing Wage

Completed - Feb 13 2023

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

Template: [Design, Acquisition, and Construction Milestone Schedule](#)

Template (excel format): [Design, Acquisition, and Construction Milestone Schedule](#)

[Form 5 PrevailWageCert-MCRegionalMHRC-02](#)

Filename: Form_5_PrevailWageCert-MCRegionalMHRC-02_kSGAssW.pdf Size: 586.8 kB

Document Upload: Form 6: Applicant's Certification of Funding Terms

Completed - Feb 13 2023

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

[Form 6 CertificationFunding_MCRegionalMHRC 02](#)

Filename: Form_6_CertificationFunding_MCRegionalMH_BZMRpdH.pdf Size: 570.4 kB

Document Upload: Form 7: Community Engagement Tracking

Completed - Feb 2 2023

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

[Form 7 CommunityEngagementTracking MCRegionalMHRC 2-2-23](#)

Filename: Form_7_CommunityEngagementTracking_MCRe_EdcvSAR.docx Size: 42.0 kB

Document Upload: Form 8: Schematic Design Checklist

Completed - Feb 13 2023

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

[Form 8-SchematicDesignChecklist-MCRegionalMHRC-1](#)

Filename: Form_8-SchematicDesignChecklist-MCRegion_gStnLDd.pdf Size: 334.7 kB

Document Upload: Drawings: Preliminary Site Plans, Design Drawings, or Construction Drawings

Completed - Feb 2 2023

Preliminary site plans, design drawings, or construction drawings for the proposed project— these may include schematic designs, architectural drawings, construction blueprints, other renderings.

Please label all files for upload as follows: *Document Title_Project Title_Date*. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as *Form 2 Budget_Sunny Acres Project_0601*.

Do not upload a password protected file.

[SitePlan MCRegionalMHRC 01](#)

Filename: SitePlan_MCRegionalMHRC_01.18.23.PDF Size: 2.6 MB

[SiteDetail-MCRegionalMHRC 01](#)

Filename: SiteDetail-MCRegionalMHRC_01.18.23.PDF Size: 1.8 MB

[ExtRendering MCRegionalMHRC 01](#)

Filename: ExtRendering_MCRegionalMHRC_01.18.23.pdf Size: 1.6 MB

[FloorPlan_MCRegionalMHRC_01](#)

Filename: FloorPlan_MCRegionalMHRC_01.18.23.pdf Size: 137.6 kB

[BedLayoutPlan_MCRegionalMHRC_01](#)

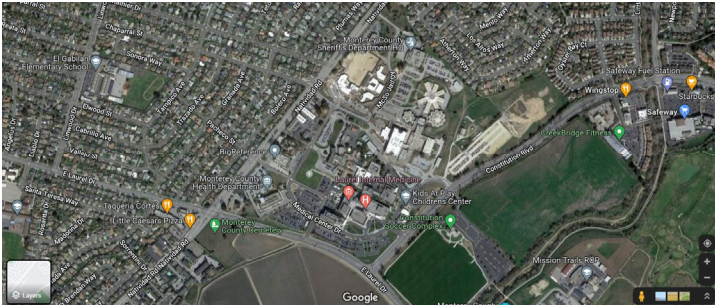
Filename: BedLayoutPlan_MCRegionalMHRC_01.18.23.pdf Size: 182.5 kB

[SiteMapClose_MCRegionalMHRC_01](#)



Filename: SiteMapClose_MCRegionalMHRC_01.18.23.PNG Size: 4.0 MB

[SiteMapExpndMCRegionalMHRC_01](#)



Filename: SiteMapExpndMCRegionalMHRC_01.18.23.PNG Size: 3.9 MB

[ArchEngBldgAssess_MCRegionalMHRC_01](#)

Filename: ArchEngBldgAssess_MCRegionalMHRC_01.19.23.pdf Size: 2.5 MB

[Bed](#)

Filename: Bed.Client.Count_MCRegionalMHRC_01.19.23.docx Size: 17.0 kB

Document Upload: Resumes: Development Team That Developed Design/Construction Plans

Completed - Feb 2 2023

Please label all files for upload as follows: Document Title_Project Title_Date. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as Form 2 Budget_Sunny Acres Project_0601.

Do not upload a password protected file.

[DevTeamResume-MCRegionalMHRC_01](#)

Filename: DevTeamResume-MCRegionalMHRC_01.18.23.pdf Size: 27.5 kB

Document Upload: Contracts

Completed - Feb 2 2023

A copy of all executed contracts for hire related to your project's development team (lawyer, construction manager, development manager, architect, consultants, contractor, etc.)

Please label all files for upload as follows: Document Title_Project Title_Date. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as Form 2 Budget_Sunny Acres Project_0601.

Do not upload a password protected file.

[ArchEngContract-MCRegionalMHRC_01](#)

Filename: ArchEngContract-MCRegionalMHRC_01.19.23.pdf Size: 1.3 MB

Document Upload: Site Readiness Documents

Completed - Feb 2 2023

Please label all files for upload as follows: Document Title_Project Title_Date. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as Form 2 Budget_Sunny Acres Project_0601.

Do not upload a password protected file.

[SiteReadiness-MCRegionalMHRC01](#)

Filename: SiteReadiness-MCRegionalMHRC01.18.23.pdf Size: 686.0 kB

Document Upload: Operating Agreement

Incomplete

Please label all files for upload as follows: Document Title_Project Title_Date. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as Form 2 Budget_Sunny Acres Project_0601.

Do not upload a password protected file.

Document Upload: Collaboration Documents

Incomplete

Please label all files for upload as follows: Document Title_Project Title_Date. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as Form 2 Budget_Sunny Acres Project_0601.

Do not upload a password protected file.

Document Upload: Documents of Incorporation

Completed - Feb 7 2023

Please label all files for upload as follows: Document Title_Project Title_Date. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as Form 2 Budget_Sunny Acres Project_0601.

Do not upload a password protected file.

[ArticlesOfIncorporation_MCRegionalMHRC_2](#)

Filename: ArticlesOfIncorporation_MCRegionalMHRC_2.7.23.docx Size: 12.7 kB

Document Upload: Plan to Obtain Site Control

Incomplete

Please label all files for upload as follows: Document Title_Project Title_Date. Keep file names short – abbreviations are acceptable. Consistency is appreciated by the review team. Using this example, Form 2: Budget Template could be uploaded as Form 2 Budget_Sunny Acres Project_0601.

Do not upload a password protected file.

Form 4: Design, Acquisition, and Construction Milestone Schedule

Name of Entity Applying:	County of Monterey
Lead Authorized Representative Name or Project Director Name:	Kathryn Eckert

Behavioral Health Continuum Infrastructure Program Round 5: Crisis and Behavioral Health Continuum

Instructions: Please provide the best estimates for completion dates for each of the below milestones. Please consult your professional development team to establish milestone completion dates. These milestones will create the basis for your project's payment schedule.

Estimated Milestones

PHASE	MILESTONE	ESTIMATED COMPLETION DATE (or N/A)
Phase I: Planning & Pre-Development	Development Team Identified	4/18/22
Phase I: Planning & Pre-Development	Business Plan	5/1/22
Phase I: Planning & Pre-Development	Feasibility Study	4/18/22
Phase I: Planning & Pre-Development	Real Estate Attorney Hired	N/A
Phase I: Planning & Pre-Development	Architect Hired	1/27/22
Phase I: Planning & Pre-Development	Site Programming	4/18/22
Phase I: Planning & Pre-Development	Fit Study	9/23/22
Phase I: Planning & Pre-Development	Stakeholder Support	5/1/22
Phase II: Design Development	Schematic Drawings (SDs) Start	1/15/23
Phase II: Design Development	Construction Manager Hired	9/1/23
Phase II: Design Development	Engineering Teams Hired (Civil/Structural/MEP)	1/27/22
Phase II: Design Development	Schematic Drawings (SDs) Complete	3/15/23
Phase II: Design Development	Preliminary Plan Review at Planning Dept.	4/1/23
Phase II: Design Development	Design Drawings (DDs) Start	6/1/23
Phase II: Design Development	Design Drawings (DDs) Complete	7/1/23
Phase III: Shovel Ready	Construction Drawings (CDs) Start	11/1/23
Phase III: Shovel Ready	General Contractor RFP Start	2/2/24
Phase III: Shovel Ready	General Contractor Selected	6/6/24
Phase III: Shovel Ready	Construction Contract (GMAX) executed	7/8/24
Phase III: Shovel Ready	Construction Drawings (CDs) 85% complete	11/13/23
Phase III: Shovel Ready	CDs submitted for Building Permit	11/13/23
Phase III: Shovel Ready	Building Permit Issued	2/2/24
Phase III: Shovel Ready/Acquisition	Acquisition Team Hired	N/A
Phase III: Shovel Ready/Acquisition	Properties Identified	N/A
Phase III: Shovel Ready/Acquisition	LOI Delivered	N/A
Phase III: Shovel Ready/Acquisition	PSA Delivered	N/A
Phase III: Shovel Ready/Acquisition	PSA Executed	N/A
Phase III: Shovel Ready/Acquisition	Physical Needs Assessment	N/A
Phase III: Shovel Ready/Acquisition	Community Support Approvals	N/A
Phase III: Shovel Ready/Acquisition	Legal Review of Title/PSA/Due Diligence	N/A
Phase III: Shovel Ready/Acquisition	Will Serve Letters Received Approvals	N/A
Phase III: Shovel Ready/Acquisition	Due Diligence Ends	N/A
Phase III: Shovel Ready/Acquisition	Non-Refundable Deposit Delivered	N/A
Phase III: Shovel Ready/Acquisition	Land Closing/Encumbered (Post Building Permit)	N/A
Final Phase: Construction	Break Ground/Start Construction	6/24/24
Final Phase: Construction	Foundations Complete	5/16/25
Final Phase: Construction	Exterior Envelope Complete	9/25/25
Final Phase: Construction	Finish Construction	6/25/26
Final Phase: Construction	Fixtures & Equipment Delivery	6/15/26
Final Phase: Construction	Walk Thru/Sign Off	6/25/26
Final Phase: Construction	All Liens Lifted/Final Payments	6/30/26
Final Phase: Construction	Temporary Certificate of Occupancy Issued	6/24/24
Project Completion	Interiors & Operating Systems Finalized	6/26/26
Project Completion	Start Operations	6/29/26



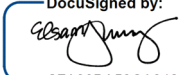
Form 5: Applicant’s Certification of Prevailing Wage

I, **Elsa M. Jimenez**, as Lead Authorized Representative of **County of Monterey, Health Department Director**, certify that:

1. The information and statements set forth below are, to the best of my knowledge and belief, true and correct.
2. I possess the legal authority to submit this certification on behalf of the Applicant.
3. I am providing this information in conjunction with an application for funding from the State of California pursuant to the Department of Health Care Services’ (DHCS’) Behavioral Health Continuum Infrastructure Program (BHCIIP) and acknowledge that the State and Advocates for Human Potential, Inc. (AHP), the administrative entity for BHCIIP, are relying on this information in awarding grant funds.
4. As part of the application, Applicant has submitted a construction budget for **Monterey County Regional MHRC**. The construction budget was prepared with the assistance of a licensed contractor, architect, or experienced construction manager, and specifically adheres to the compliance requirements that all construction work will be performed by skilled workers being paid current prevailing wages for the Project’s region, pursuant to California Labor Code Section 1720 et seq. I further certify that Applicant shall, in constructing the Project, meet the prevailing wage requirements for construction projects in the State of California (Lab. Code, Sec. 1720 et seq.). **Applicant shall, prior to commencing construction of the Project, provide a certification of compliance with California’s prevailing wage law, registration with the California Department of Industrial Relations (DIR), as well as compliance with all applicable federal prevailing wage law. The certification shall (a) verify that prevailing wages have been or will be paid, (b) verify that labor records will be maintained and made available to any enforcement agency upon request, (c) verify that Applicant’s contractor is registered with DHCS, and (d) be signed by the general contractor(s) and the Applicant.**

The Applicant shall defend, indemnify, and hold harmless DHCS, the State of California, and all officers, trustees, agents, and employees of the same, as well as AHP, from and against any and all claims, losses, costs, damages, or liabilities of any kind or nature, including attorneys’ fees, whether direct or indirect, arising from or relating to the Grant or Project.

I certify that the above information is true and correct and that Applicant will comply with all requirements set forth above as a condition of receiving the grant funds.

DocuSigned by:

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 Signature of Lead Authorized Representative

2/13/2023 | 9:08 AM PST

Date

Elsa M. Jimenez

Director, Monterey County Health Department

Typed Name of Signatory

Title of Signatory



Form 6: Applicant's Certification of Funding Terms

I, Elsa M. Jimenez, as Lead Authorized Representative of County of Monterey, Health Department, certify that:

1. The information, statements, and attachments included in this application are, to the best of my knowledge and belief, true and correct.
2. I possess the legal authority to submit this application on behalf of the entity identified as the applicant for funding.
3. The following is a complete disclosure of all identities of interest—of all persons or entities, including affiliates, that will provide goods or services to the Department of Health Care Services' (DHCS) Behavioral Health Continuum Infrastructure Program (BHCIP) project ("Project") either (a) in one or more capacity or (b) that qualify as a "Related Party" to any person or entity that will provide goods or services to the Project. "Related Party" is defined in Section 10302 of Title 4 of the California Code of Regulations (CTCAC Regulations). (List all identities of interest in the box below.)

County of Monterey, Health Department, and Behavioral Health Bureau.

4. As of the date of the application, the Project, or the real property on which the Project is proposed ("Property"), is not party to or the subject of any claim or action at the state or federal appellate level.
5. Grantees shall promptly notify DHCS of any proposed changes to project's physical location/address, Scope of Work (SOW), and/or timeline for completion of the project following initial submission of application. Any changes to the original project application may result in withdrawal of the conditional award.
6. Grantees are responsible for ensuring that their project is on schedule and on budget. Grantees who are awarded BHCIP funds shall be solely responsible for any costs to complete the project in excess of the program funds award amount. Neither DHCS nor Advocates for Human Potential, Inc. (AHP) will be responsible for any cost overruns.
7. I have disclosed and described below any claim or action undertaken that affects or potentially affects the feasibility of the Project. In addition, I acknowledge that all information in this application and attachments is public and may be disclosed by the State.

8. I understand and agree that DHCS will require Eligible Applicants to submit a complete application with all required documents. Further, I understand and agree that DHCS reserves the right to request clarification of unclear or ambiguous statements made in an application and other supporting documents.

9. I understand and agree with DHCS that funds awarded pursuant to the program must be used to supplement, and not supplant, other funding available from existing local, state, or federal programs or from grants with similar purposes. Funding may not be used for "reimbursement." Only those costs that can be associated with completing the project would be eligible costs, per the Welfare and Institutions Code, Section 5960.15.


10. I further warrant and certify that Applicant will comply with the following guidelines as a condition of receiving this funding:

- a. Applicant shall not impose unnecessary barriers to entry for justice-involved populations, to the extent possible and consistent with state law.
- b. Applicant shall serve the targeted population(s) when and as described within the application.
- c. Applicant commits to the provision of services and building use restrictions (property title shall be legally encumbered for required term) for 30 years after the expansion project is placed in service.
- d. Applicant shall use professionally licensed and insured contractors to carry out the work required for the Project.
- e. Applicant shall comply with all applicable federal, state, and local relocation laws and shall have an approved relocation plan prior to proceeding with any phase of the Project that will result in the displacement of persons or businesses, if the proposed project requires relocation of any current residents.
- f. Applicant shall adhere to the accessibility requirements set forth in California Building Code Chapter 11A and Chapter 11B and the Americans with Disabilities Act, Title II.
- g. Applicant shall meet the prevailing wage requirements for construction projects in the State of California (Lab. Code, Sec. 1720 et seq.). Applicant shall provide a certification of compliance with California's prevailing wage law, as well as all applicable federal prevailing wage law. The certification shall (a) verify that prevailing wages have been or will be paid, (b) verify that labor records will be maintained and made available to any enforcement agency upon request, and (c) be signed by the general contractor(s) and the Applicant.
- h. Applicant shall collect and report data to DHCS as required.

The Applicant shall defend, indemnify, and hold harmless the Authority and the State of California, and all officers, trustees, agents, and employees of the same, as well as Advocates for Human Potential, Inc. (AHP), the BHCIP third-party administrator, from and against any and all claims, losses, costs, damages, or liabilities of any kind or nature, including attorneys' fees, whether direct or indirect, arising from or relating to the Grant or Project.

I certify that [insert Applicant name] will receive, expend, and administer all funds received under this initiative pursuant to the terms outlined above and understand this is a condition of receiving such funds.

The information provided within the form and attached is true and correct.

DocuSigned by:

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2/13/2023 | 9:08 AM PST

Signature of Lead Authorized Representative

Date

Elsa M. Jimenez

Director of Health, County of Monterey

Form 8: Schematic Design Checklist				
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Agency Name:	County of Monterey
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Lead Authorized Representative or Project Director: Kathryn Eckert
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Behavioral Health Continuum Infrastructure Program Round 5: Crisis and Behavioral Health Continuum

Instructions: Please complete this form with as much information as possible. Fill in yellow cells.
 Utilize your development team to fill in dates. Ideally, your schematic design (SD) drawings will include all the below architectural and engineering technical information to determine if your project is "Project Ready" or beyond.

*Please provide total square feet of finished new construction at your project:	40,000 sq ft
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Architectural/Int Sections	Sub-sections	Date Started	Date Completed
Civil Engineering			
	Site Dimension Control	2/15/2023	3/15/2023
	Off-Site Utilities	2/15/2023	3/15/2023
	On-Site Utilities	2/15/2023	3/15/2023
	Grading and Drainage	NA	NA
Structural Engineering			
	Foundation Design	NA	NA
	Garage Design	NA	NA
	Building Frame	NA	NA
Architectural/Interiors			
	Building and Site Plan	1/15/2023	3/15/2023
	Unit Plans and Finish Program	1/15/2023	3/15/2023
	Amenity Space Layout	1/15/2023	3/15/2023
	Area Tabulations	1/15/2023	3/15/2023
	Roof Design	NA	NA
	Exterior Elevations	1/15/2023	3/15/2023
	Exterior Materials	1/15/2023	3/15/2023
	Elevator Quality and Speed	NA	NA
MEP Engineering			
	HVAC Systems Design	1/15/2023	3/15/2023
	Electrical Systems	1/15/2023	3/15/2023
	Plumbing Systems	1/15/2023	3/15/2023
	Energy Conservation Concepts	1/15/2023	3/15/2023
Landscape Architecture			
	Landscape Design Concepts	1/15/2023	3/15/2023
	Hardscape Design Concepts	1/15/2023	3/15/2023
	Softscape Design Concepts	1/15/2023	3/15/2023
Development			
	Schedule Summary	1/15/2023	4/1/2023
	Soft Cost Summary	1/15/2023	4/1/2023
	Consultant Proposal Summary	1/15/2023	4/1/2023
	Building Tabulations Summary	1/15/2023	4/1/2023

Full SD Drawing Set Review	4/1/2023	5/1/2023
Building Elevations Review	4/1/2023	5/1/2023
Building Core Spaces and Systems	4/1/2023	5/1/2023
Unit Plan Review	4/1/2023	5/1/2023
Site and Landcape Design Review	4/1/2023	5/1/2023
Lighting Exterior Concepts Review	4/1/2023	5/1/2023
Construction		
Hard Cost Budget Summary	4/1/2023	5/1/2023

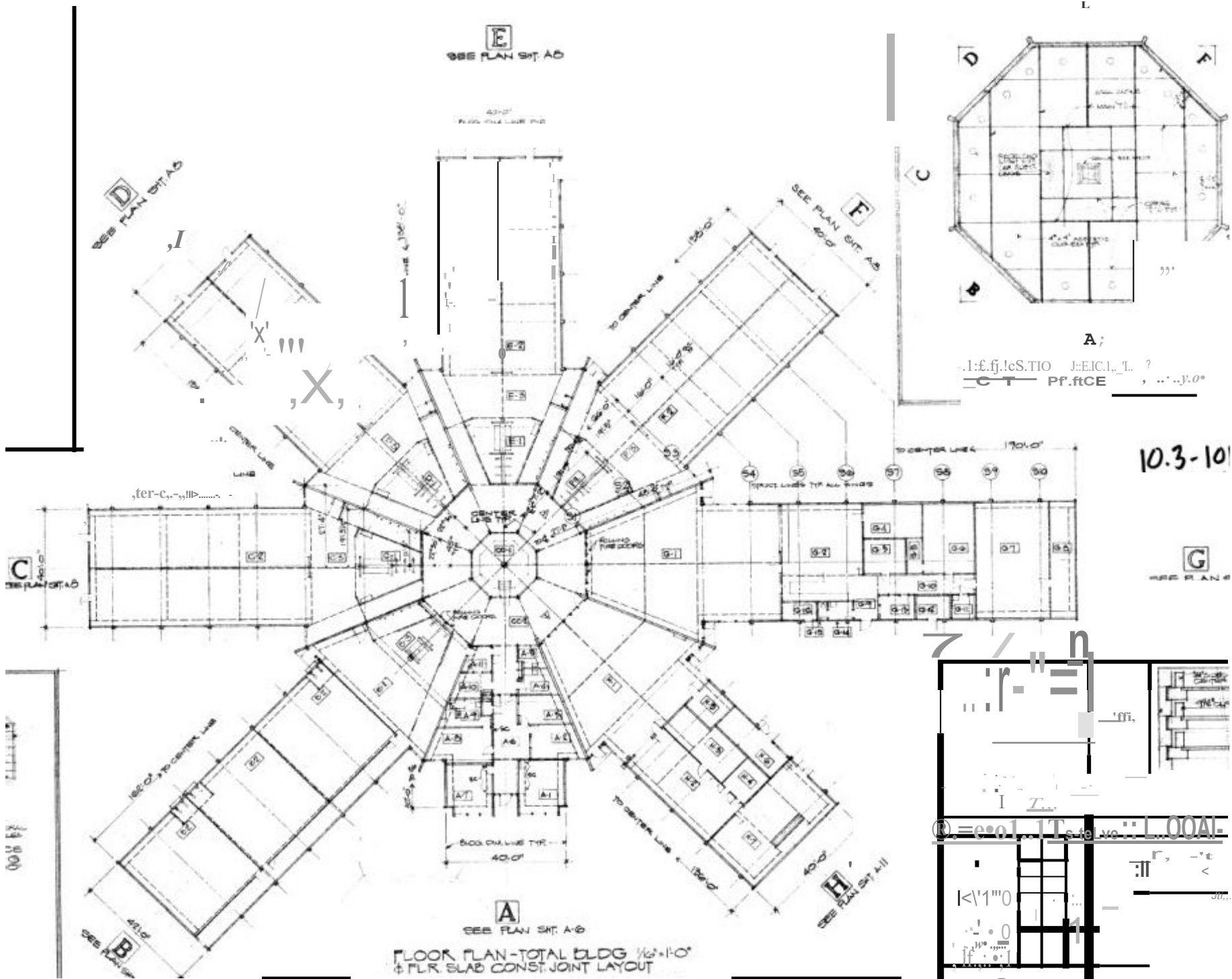


MONTEREY COUNTY REHABILITATION FACILITY

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FORM



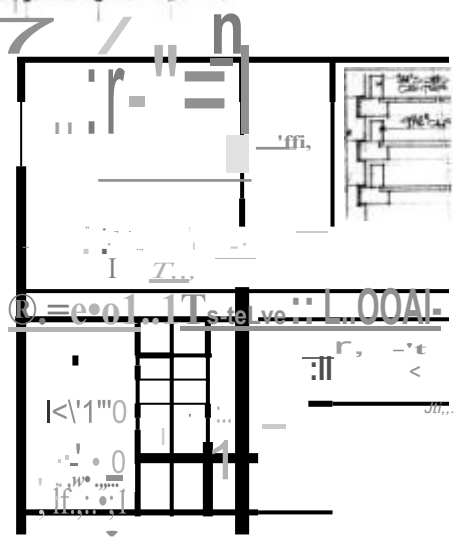


FLOOR PLAN-TOTAL BLDG 1/8"=1'-0"
 & FLR. SLAB CONST. JOINT LAYOUT



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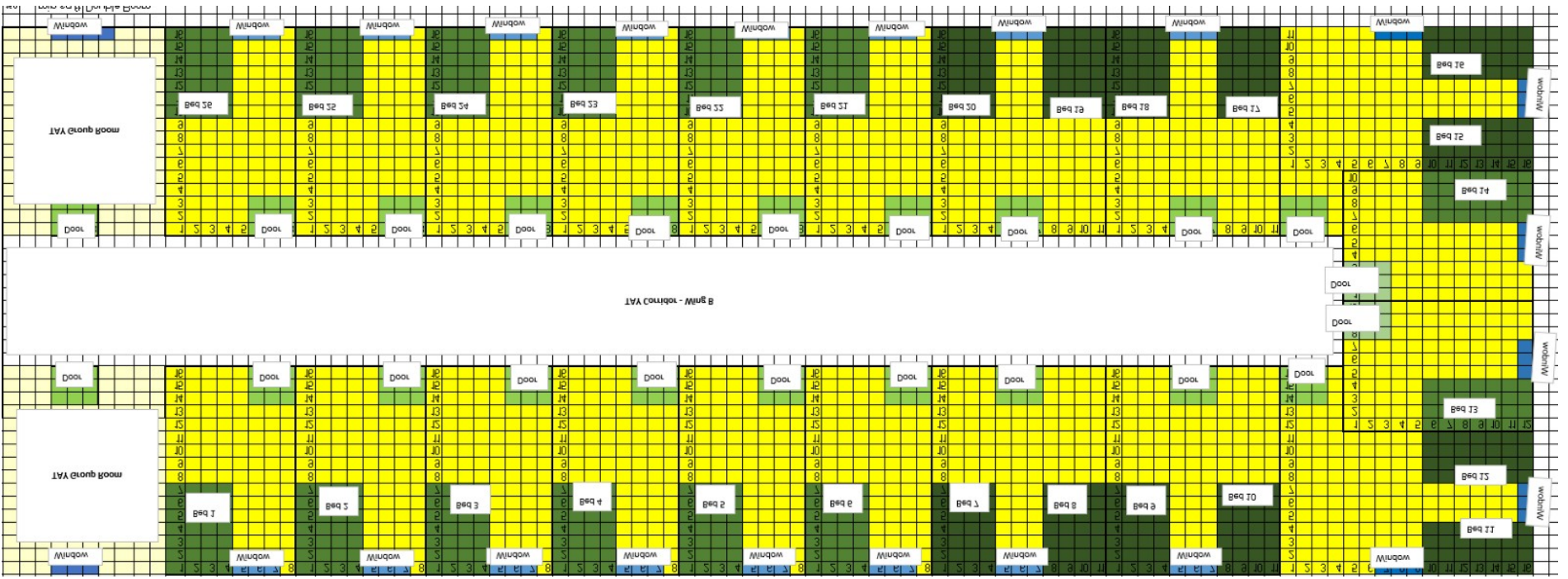
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**THE
PAUL DAVIS
PARTNERSHIP**

ARCHITECTS & PLANNERS



**County of Monterey Sheriff's Department
Rehabilitation Facility
1410 Natividad Road
Salinas**

**BUILDING ASSESSMENT STUDY
November 23, 2022**

**For
County of Monterey Health Department**



Overview

The Monterey County Rehabilitation Facility a one-story, 36,800 square foot building originally constructed in 1970 with several minor remodels over time. The building is currently empty with inmates recently moved to the adjacent main jail facility. The building is a part of the Monterey County Sheriff's campus that includes the Sheriff's office building, the County Jail and the Youth Center.

Building Summary

The building has an octagonal core with eight wings extending out of varying lengths.

- Wing A has 2,050 sq. ft. and is used for administrative offices.
- Wing B has a total square footage of 4,760 sq. ft., with a 1,450 sq. ft. common area and a 3,300 sq. ft. dwelling area.
- Wing C – F each have a total square footage of 4,250 sq. ft., with a 1,450 sq. ft. common area and a 2,800 sq. ft. dwelling area.
- Wing G has 6,250 sq. ft. and was originally constructed to operate as a kitchen with food storage and refrigeration spaces.
- Wing H has 4,100 sq. ft. and contains the existing laundry room and boiler room for the Sheriff's Department.
- The central core (hub) has a total square footage of 2,640 sq. ft.

Building Assessment

The Monterey County Behavioral Health Department has requested our office to assess the Monterey County Rehabilitation Facility and site. The study will evaluate the building and assess its current physical state and the potential upgrades required for use by the Behavioral Department as secured behavioral health facility for those required to be in secured housing in single bed dorm rooms with associated offices and programmed areas. We have used the following engineers to evaluate the observed condition of the building's structure and mechanical/electrical systems:

Mechanical/Plumbing Engineer
Electrical Engineer
Structural Engineer

Axiom Engineers, Inc.
Aurum Consulting Engineers
Howard Carter Associates Inc.

Site



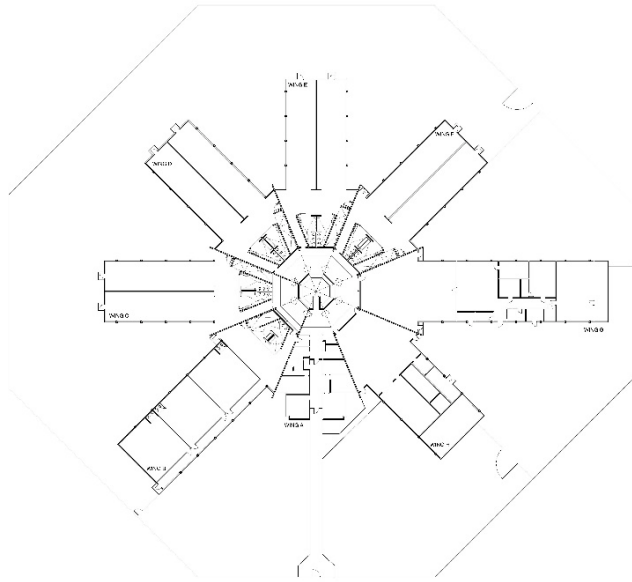
The building is situated between to the Monterey County Jail to the south and the Sheriff's office building to the north. The site is within a secured fence perimeter. There is an exterior secured entry from the large parking lot to west. Once in the grounds, then building is surrounded by open space and walk to the main building entrance. There are exterior fenced paved recreation areas adjacent to Wings B-F.

There are existing underground utilities that serve the project and are part of the overall Sheriff's complex. Parking for the building is located in the large adjacent lot that serves the larger County Sherriff's Compass.

Required work includes:

- Verify a Path of Travel exists from Natividad Rd. Improvements may be necessary to upgrade the existing path of travel.
- Accessible parking spaces may be required close to the exterior entry point.
- Study parking requirement to determine if existing lots provide required parking.
- Evaluate the existing security fencing based on programmatic needs and requirements.
- Evaluate the existing paved exterior recreational area based on programmatic needs and requirements. Some pavement sections are worn and there are minimal recreational opportunities.
- Modify and replace landscaped areas with new water efficient landscaping system.
- Evaluate power, water, sewer and stormwater utilities to mains on Natividad Road.

Building



Structural

The structure is primarily a concrete and pre-cast concrete wall structure, concrete slab floors and a wood framed roof structure with low sloping roofs and overhang.

One of the main objectives of this project will be to add rooms to wings B through H. The floors of these wings are 4" thick concrete slabs with welded wire reinforcing. The room walls will ideally be constructed to allow deflection of the roof beams without loading the walls. This way the walls will not put new loads onto the slab. Some of the new room walls will be designed as shear walls to help reinforce the lateral resistance of the buildings.

The tilt up wall panels along the long sides of the wings have windows at the top of them that may become the windows in the new rooms. Replacing these with new windows will have no structural effect on the building. If the openings are to be modified for taller windows or a door opening, further analysis will be needed. If a significant portion of the wall will be removed, it's possible to remove the entire wall panel and rebuild the wall segment with either wood or cold-formed steel studs. The last tilt up wall panel, farthest away from the central hub, does not have any openings in it. This last panel provides lateral resistance for the wing and cannot have any openings cut into it.

The roof beams in the wings were previously repaired around 2003. Beam repairs undertaken at this time include trimming the cantilevered ends of the beams, removing damaged wood, injecting clear penetrating epoxy sealer, lag bolting delaminated area, and rebuilding the fascia. The 2003 drawings specify for each glulam the amount of damage to it and the repairs to be done. We recommend that another extensive review be made of the beams, roofing, soffits, and the fascia to determine if there is damage and the extent of any damage.

It is likely that the roof will need to be replaced in some locations, which will provide the opportunity to more closely examine the roof framing. We expect additional loads on the wing

roofs due to new solar panels and HVAC equipment. The weights and locations of the solar panels and equipment would need to be known to complete the vertical and seismic analysis of the facility.

The central hub segments currently contain open showers that will be removed so the rooms can be repurposed. The beams in the central hub bear on the concrete divider walls in custom made steel hangers. The beams and the ceilings in the shower areas show signs of being in a damp environment, as expected. We recommend that a closer inspection be done of the surfaces and components for signs of damage. The central hub beams meet at the mid-point of the hub in a custom eight-sided hanger. This connection will need to be re-evaluated if the equipment loads on the inner low roof are increased.

While visiting the existing facility, we also looked for lateral force resisting elements to understand the ability of the building to withstand seismic forces. At the wings, the last wall panels, the panels without any openings, serve as the lateral elements for the long sides of the wings. The end wall also serves as a shear wall in the perpendicular direction. However, there is not a shear wall at the transition between the hub section and the wing. The hub section radial divider walls also function as shear walls, but the walls around the perimeter of the hub are so short and typically have openings in them, so they provide little lateral resistance. We recommend further investigation of the as-built conditions to see if shear transfer connections were made and the capacity of the existing connections. It will be easier to accomplish this if the roofs or ceilings are replaced.

Conclusions

The exposed wood framing of the Monterey County Rehabilitation Facility shows minimal signs of damage. We would expect to see more weathering in a building over fifty years old, but probably do not, in this case, due to the restoration performed in 2003. We recommend that further evaluation of the framing and the vertical and lateral connections be done during demolition if this project moves forward.

Repurposing the facility will probably not alter the vertical load paths but may increase the loading. We will need to know the final equipment loads and locations to check the structural members and connections. If any of the members turn out to be inadequate due to increased loading or loss of integrity, we may be able to take some of the loads to the new interior walls or reinforce the framing. At this time, we do not have a proposed floor plan for the new behavioral health facility so we cannot speak to the feasibility of this option. Any change in the loading may require new foundations in certain locations.

The part of the building that most likely would need strengthening is the lateral force resisting system. One area of observed lateral weakness is where the main hub connects to the wings. We envision adding some shear wall or lateral element there. Also, to strengthen the wing sections, some of the interior walls for the new rooms will allow us the opportunity to add shear walls. The seismic analysis cannot be accurately completed until we have the equipment weights, equipment locations and connection information. Adding shear walls or new lateral elements will most likely require new or upgraded foundations.

In conclusion, based on our visual observation and review of existing drawings, we think it is feasible to retrofit the existing facility into a new behavioral health facility.

Required work includes:

- We recommend that another extensive review be made of the beams, roofing, soffits, and the fascia to determine if there is damage and the extent of any damage.
- When the existing roof is removed, an assessment will be made of any water damage and necessary structural repairs.
- Once interior finishes are removed, a closer examination of framing conditions and connections may result in some upgrades.
- Additional seismic upgrades may be required at the main hub

Roof

The roof has sections of sloped and low-sloping roofs with a spray foam roof installed in 2009. Based on the investment in a remodeled facility with the mechanical equipment and roof top solar, the roof should be replaced. The roof is accessed through a roof hatch located in Wing A and has surface mounted mechanical equipment and ductwork. Roof drainage is to roof drains that need to be evaluated for age and corrosion.

Required work includes:

- Install a new roof with a 30-year warranty.
- Install new roof insulation.
- Observe drainage patterns of existing roof to see if additional drains are required.
- Recondition existing drains and add overflow drains as required.
- A Hazardous Materials investigation to test the existing roofing material is currently underway.

Building Exterior

The exterior walls are a combination poured in place concrete columns with poured in place concrete or decorative concrete tilt up walls. They walls are in good condition with some cosmetic repairs required.

Required work includes:

- Replace exterior caulking.
- Remove existing corridor to adjacent jail.
- Replace the existing windows with new energy efficient windows.
- Replace the main entry door assembly and evaluate the rest of the exterior doors to determine if some replacement is required.
- Paint exterior solid concrete walls. Seal the tilt-up wall panels.
- A Hazardous Materials investigation to test existing caulking and painted surfaces is currently underway.
- Modifications of exterior walls may be required once a Building Program is developed.

Building Interior

The interior of the building has a combination of wood-framed and concrete walls. Wood framed walls and ceiling are painted gypsum wallboard. Most of the floors are concrete. Doors and windows are over 50 years old.

Required work includes:

- Extensive demolition of interior walls, ceilings and flooring for new space planning.
- Extensive demolition of existing equipment, mechanical, electrical and plumbing systems
- Trenching of concrete floors for new plumbing.
- A Hazardous Materials investigation to test existing caulking and painted surfaces is currently underway.
- New interior construction of a new floor plan with new finishes and ceilings. Some existing walls may be reused as the space plan is developed.
- Improve interior path of travel for accessibility.
- Provide new accessible restrooms for staff and patients.
- Provide new showers for patients.
- Evaluate existing doors and windows to determine if any can be re-used.

Mechanical/Plumbing

HVAC Overview

In 2005, gas fired rooftop furnaces and bathroom exhaust fans were replaced with new gas fired furnaces serving the wings and gas electric units serving the guard area. There are two rooftop units per wing, and a rooftop exhaust fan drawing air from the wing, through the toilet/shower area and exhausted. There is minimal supply ductwork, only a single supply drop at each wing rooftop unit.

Significant exhaust ductwork exists at each toilet/shower area.

Plumbing Overview

The plumbing system, consisting of domestic hot water, recirculated and cold water are original. Repairs have been made as required, but piping is mostly original. Plumbing fixtures are all institutional type, stainless steel in gang type showers, toilet, and lavatories, located in each wing, near the hub. Fixtures are in very poor shape.

The domestic water service enters the building at the boiler room, water line is 4" diameter.

Waste piping is below the slab on grade, assumed cast iron. Sewer line extends on-site to Natividad Road. Sewer line in the building is assumed to be at the end of its service life.

Natural gas enters the building at the boiler room. Gas is distributed to the boilers, gas fired dryers, and gas fired rooftop heating units. Gas lines are in good condition.

Boiler Plant Overview

The boiler plant has been replaced two times, most recently about five years ago when the boilers were replaced. The majority of piping in the boiler room has been replaced, some valves and pumps appear to be in poor condition.

The existing boiler room contains two RBI Futera II 1000 MBH boilers discharging water at 180 °F with a 1,000 gallon Hanson hot water storage tank. The hot water is tempered for domestic use, with a setpoint at 120 °F. High temperature hot water is distributed to the laundry room to allow sanitizing of laundry.

The boiler room also contains a water softener. The water softener is an ion exchange type, using sodium chloride salt. The water softener provides soft water to both the hot and cold-water feeds to the building.

Required work includes:

HVAC

- Given the proposed client population, the heating only system should be replaced with a heating and cooling system to improve year-round comfort.
 - If private bedrooms are provided, air distribution will need to extend into each room.
 - If toilets are provided in each bedroom, then exhaust needs to be provided.
 - Exhaust at common area shower rooms needs to be provided.
- Core area needs new mechanical equipment.
- All ductwork, grilles and components need to be routed to be inaccessible and anti-ligature.

Plumbing

- All plumbing systems need to be replaced, complete. It is recommended to replace underslab sewer piping.
- All site waste lines need to be inspected and replaced as required.
- Gas piping can be reused.
- All plumbing fixtures to be penal type, anti-ligature.

Boiler Plant

- Boiler plant can be reused; piping, valves and pumps need to be replaced.
- Water softener can remain. We recommend only softening hot water to minimize adding sodium to drinking water.

Electrical and Lighting systems

Electrical Service

The existing building's electrical service rating is 277/480V, 3-phase, 400 Amp. The main electrical service switchboard is assumed to be fed by a county owned substation located on Chaparral Street. The electrical service is installed in a mechanical room in Wing 'C' and the equipment is beyond its rated life. The main electrical service switchboard includes a built-in automatic transfer switch with is fed from both utility and generator (i.e. the entire facility is backed-up with an emergency generator). The main electrical service switchboard feeds transformers, branch circuit panels and HVAC equipment. It is recommended that the electrical service switchboard, transformers and panelboards be replaced to meet the requirements of the building's new use and addition of air conditioning.

Emergency Power

The emergency power system is serviced by a 500KW (625KVA), 277/480V, 3-Phase, 4-Wire generator which services both the women's and men's correctional facility buildings. The emergency feed to the building is rated at 400Amps. The existing generator and 400 Amp feed to the building appears to be recently installed and appears to be in good working condition. An evaluation on the capacity of the emergency feed require and evaluation once loads required on emergency and stand-by are established.

Electrical Car Charging Station

The project will require provisions for electric vehicle charging stations per 2019 California Green Building Standards Code requirements.

Solar Ready

The project will require provisions for the building being solar ready per 2019 California Green Building Standards Code requirements.

Exterior Lighting

The exterior building lighting is comprised of surface mounted HID light fixtures. The exterior lighting system will require upgrades to provide required egress and emergency egress requirements. The required exterior exit landings emergency fixtures are not installed and are required to meet current code emergency lighting requirements. The parking lot has several HID flood pole lights. It is recommended that the parking lot lighting be lit by LED Pole lights with full cutoff optics to bring the light levels up to the IES recommendations all the way to the public right of way. A new astronomical time clock and re-circuiting will be required to control the new outdoor light fixtures to meet 2019 California Energy Efficiency Code.

Indoor Lighting

The indoor lighting consists of surface mount fluorescent light fixtures which will be demolished to accommodate the construction and use of the facility. It is recommended that the new light fixtures throughout the building remodel will use energy efficient LED (Light-emitting diode) light engines to help outperform 2019 California Energy Code (Title

24) requirements and meet anti-ligature requirement. The LED light fixtures will provide long lasting and efficient performance. WattStopper DLM (or equal) controllers will be capable of 100% to 10% dimming and daylight harvesting in locations where required by code, as well as required auto-off functionality in each required space.

Fire Alarm System

There did not appear to be an existing fire alarm system within the facility. A new fire alarm system shall include the following types of components:

- Addressable detectors (area smoke, duct smoke and thermal).
- Manual fire alarm pull-stations at non-patient locations.
- Private mode ADA audio/visual alarm signaling devices.
- Monitoring of the Fire Sprinkler System.

Automatic smoke detection where required, will be activated by duct detectors and area smoke detectors.

The general fire alarm signal will be activated by any of the following:

- Manual Pull station.
- Smoke or thermal detector.
- Fire sprinkler activation.

Telephone/Data Communication Systems

The remodel will require installation of all new cable pathways for Telephone, Data and Nurse Call Systems. Telephone, data and nurse call communication conduits, boxes, cables, racks and control panels shall be installed to meet the minimum of the Monterey County Telecommunication Standards.

Required work includes:

- Upgrade the existing building's main electrical switchboard.
- Install an emergency distribution panel board to feed two automatic transfer switches. One automatic transfer switch to service required emergency electrical loads and a second automatic transfer switch to service desired stand-by electrical loads (required emergency and optional stand-by loads are not allowed on the same automatic transfer switch)
- Replace all surface mount conduits such that they are installed to be ran in furred walls to prevent ligature concerns.
- Replace all light fixtures with vandal resistant and anti-ligature light fixtures.
- Replace all surface mount receptacles such that they are installed in furred walls to prevent vandalization.
- Replace all tele/data outlets such that they are installed in furred walls to prevent vandalization.
- Evaluate the existing electrical system out to P G & E connection.
- Install a new addressable fire alarm system.

EXHIBIT A

**Structural Assessment Report
for
The Monterey County Rehabilitation Facility**

1422 Natividad Road
Salinas, California



March 31, 2022

Prepared By:
Howard Carter Associates, Inc.
9600 Blue Larkspur Lane, #202
Monterey, CA 93940

Introduction

The existing Monterey County Adult Rehabilitation Facility at 1422 Natividad Road in Salinas, California is being considered for repurposing into a new behavioral health facility. The original building was designed in 1970 and has undergone multiple additions and renovations since it was built. This new potential project will primarily consist of constructing individual rooms, updating the electrical and mechanical systems, and reconfiguring the common areas. Howard Carter Associates, Inc. was retained to provide a structural assessment of the facility with the goal of determining the feasibility of repurposing the facility. Based on our visual observation and review of existing drawings, we will document any obvious structural issues or inadequacies and make recommendations for areas that need repair, strengthening or further investigation.

Description of the Existing Facility

The Monterey County Rehabilitation Facility consists of an octagon shaped central hub with eight wings of varying lengths radiating outward from the hub. The wings are labelled with the letters A-H, as shown in the figure below.

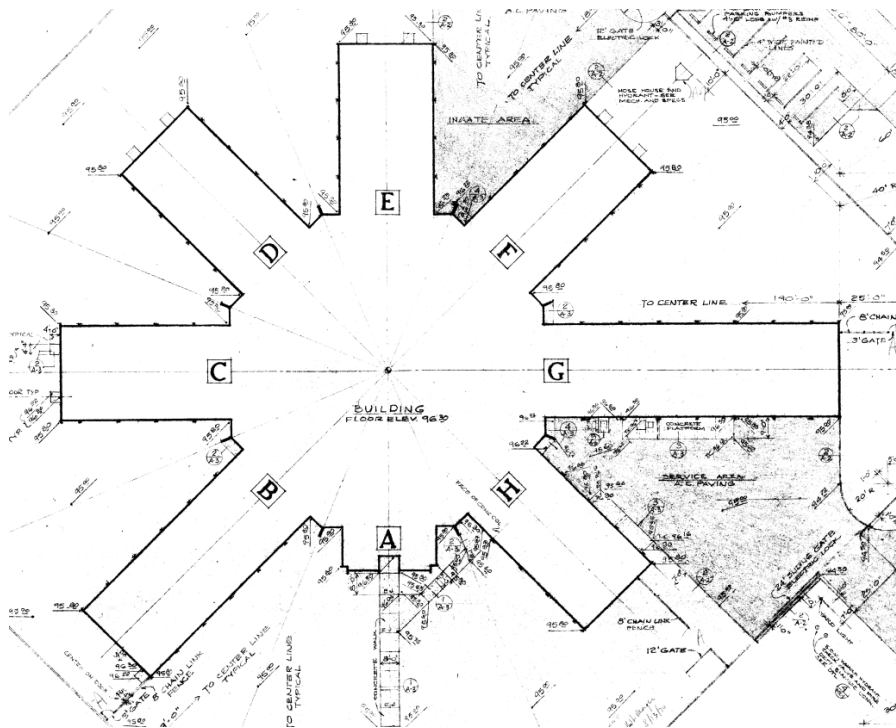


Figure 1 – Plan of building footprint from original drawings

The facility entrance is at wing A and the five wings being considered for adding rooms are wings C through G. The final configuration of the space in wings B and H is not known at this time, but will consist of offices, kitchen, laundry, etc.

The central hub is divided into eight equal segments by radial concrete walls that are 7" thick. These divider walls extend approximately 3' beyond the outside of the hub and do not extend fully to the center point. The walls also extend up above the roof.

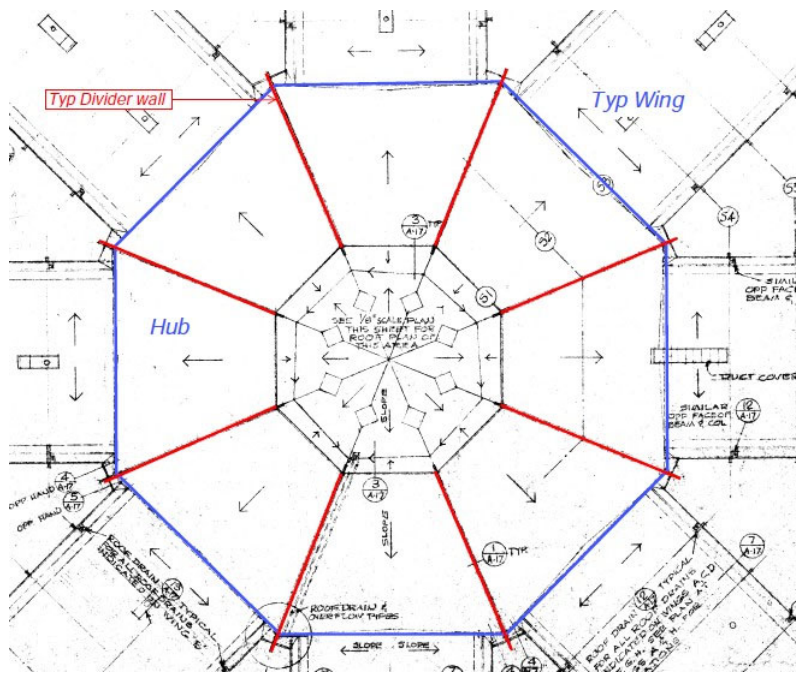


Figure 2 – Hub geometry

The radial hub divider walls do not intersect the long side walls of the wings. As shown in the figure below, there are short wall segments that connect the divider walls and the wing side walls.

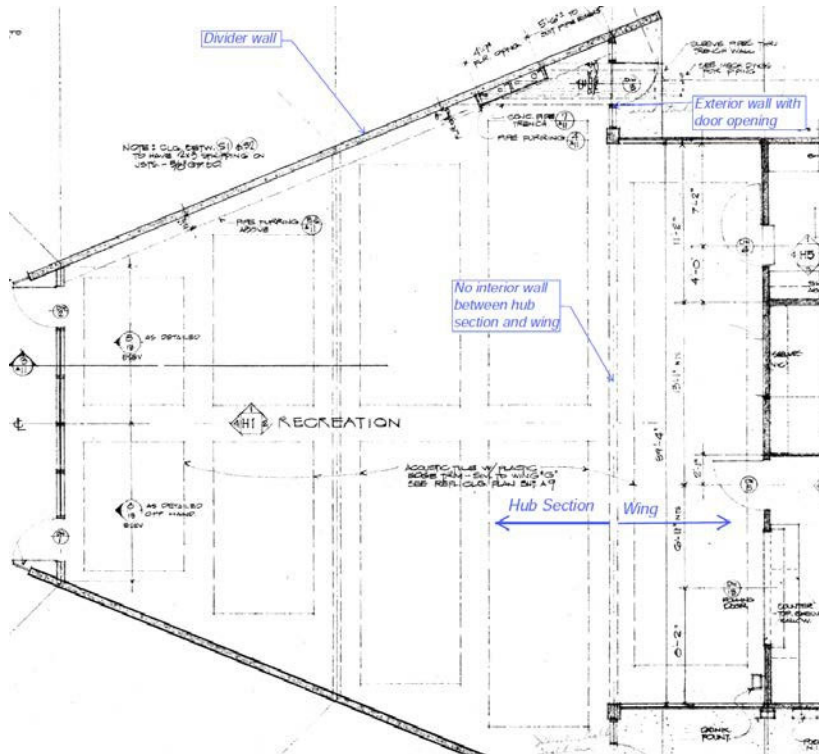


Figure 3 – Plan of hub section and transition to wing

The roof segments of the central hub are higher towards the center and slope downward towards the wings. The hub has an inner region with a lower roof where mechanical equipment is mounted so that the equipment will be hidden from view.

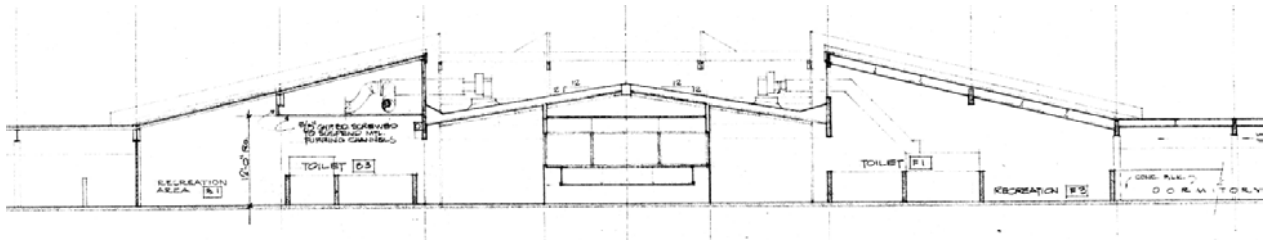


Figure 4 – Building section showing roof slopes

The roof framing for the outer part of the hub consists of 7"x26" glulams spanning from divider wall to divider wall and filled in with 2x12 roof joists at 24" spacing. The inner part of the hub has 5¼"x18" glulams radiating from the center point to each of the divider walls.

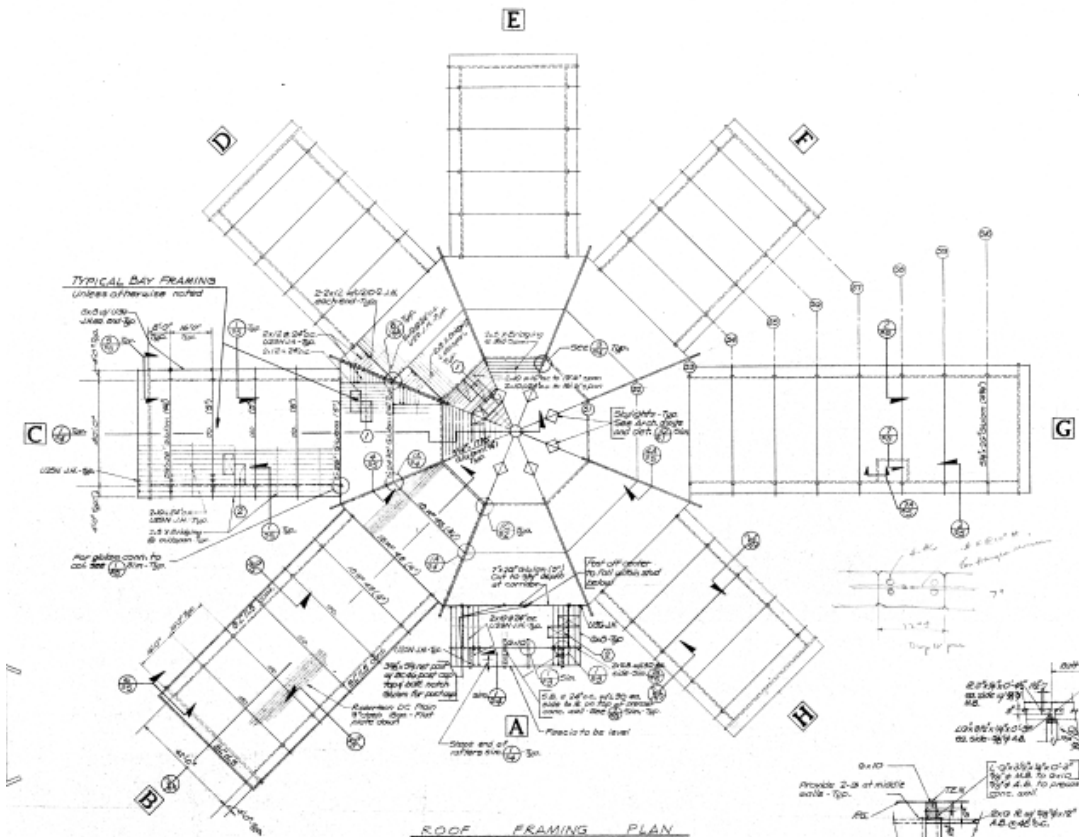


Figure 5 – Roof framing plan

The wings of the building consist of exterior concrete walls with wood roof framing. The walls are 4" thick tilt-up panels that span between concrete columns. The wall panels have a rough aggregate finish on the exterior and typically have window openings at the top of the panel. The primary roof framing members are 7"x26" glulams that bear on the columns in the exterior walls. The glulams are cambered approximately 5" and overhang at the exterior wall. The camber of the glulams causes the wing roof to have a crown so the roof drains to the long sides of the wings.



Figure 6 – Typical exterior wall of the wing section with windows full length of wall panel

Existing Documentation

The following sets of drawings were provided to us for reference:

1. 1970 Original construction drawings
2. 1988 Partial electrical upgrade
3. 1994 New shelter building
4. 2000 Renovation of showers and toilets in dormitories
5. 2003 Structural framing restoration
6. 2008 Fencing upgrade
7. 2009 Foam roof restoration

It is our understanding that there have been no revisions to the facility in addition to those listed above. The above listed drawings are not included in this report but may be a useful reference while reading this report.

Observations and Recommendations

One of the main objectives of this project will be to add rooms to wings B through H. The floors of these wings are 4" thick concrete slabs with welded wire reinforcing. The room walls will ideally be constructed to allow deflection of the roof beams without loading the walls. This way the walls will not put new loads onto the slab. We expect that some of the new room walls will be designed as shear walls to help reinforce the lateral resistance of the buildings.

The tilt up wall panels along the long sides of the wings have windows at the top of them that may become the windows in the new rooms; see Figure 6. Replacing these windows will have no structural effect on the building. If the openings are to be modified for taller windows or a door opening, further analysis will be needed. If a significant portion of the wall will be removed, it's possible to remove the entire wall panel and rebuild the wall segment with either wood or cold-formed steel studs. The last tilt up wall panel, the one farthest away from the central hub, does not have any openings in it. This last panel provides lateral resistance for the wing and cannot have any openings cut into it.

The roof beams in the wings were previously repaired, see the 2003 drawings by Wald, Rhunke & Dost Architects, LLP. Beam repairs undertaken at this time include trimming the cantilevered ends of the beams, removing damaged wood, injecting clear penetrating epoxy sealer, lag bolting delaminated area, and rebuilding the fascia. The 2003 drawings specify for each glulam the amount of damage to it and the repairs to be done. We recommend that another extensive review be made of the beams, roofing, soffits, and the fascia to determine if there is damage and the extent of any damage.



Figure 7 – Slight damage to beam overhang and soffit

It is likely that the roof will need to be replaced in some locations, which will provide the opportunity to more closely examine the roof framing. We expect additional loads on the wing roofs due to new solar panels and HVAC equipment. The weights and locations of the solar panels and equipment would need to be known to complete the vertical and seismic analysis of the facility.

The central hub segments currently contain open showers that will be removed so the rooms can be repurposed. The beams in the central hub bear on the concrete divider walls in custom made steel hangers. The beams and the ceilings in the shower areas show signs of being in a damp environment, as expected. We recommend that a closer inspection be done of the surfaces and components for signs of damage. The central hub beams meet at the mid-point of the hub in a custom eight-sided hanger. This connection will need to be re-evaluated if the equipment loads on the inner low roof are increased.

While visiting the existing facility, we also looked for lateral force resisting elements to understand the ability of the building to withstand seismic forces. At the wings, the last wall panels, the panels without any openings, serve as the lateral elements for the long sides of the wings. The end wall also serves as a shear wall in the perpendicular direction. However, there is not a shear wall at the transition between the hub section and the wing. The hub section radial divider walls also function as shear walls, but the walls around the perimeter of the hub are so short and typically have openings in them, so they provide

little lateral resistance. We recommend further investigation of the as-built conditions to see if shear transfer connections were made and the capacity of the existing connections. It will be easier to accomplish this if the roofs or ceilings are replaced.

Conclusions

The exposed wood framing of the Monterey County Rehabilitation Facility shows minimal signs of damage. We would expect to see more weathering in a building over fifty years old, but probably do not, in this case, due to the restoration performed in 2003. We recommend that further evaluation of the framing and the vertical and lateral connections be done during demolition if this project moves forward.

Repurposing the facility will probably not alter the vertical load paths but may increase the loading. We will need to know the final equipment loads and locations to check the structural members and connections. If any of the members turn out to be inadequate due to increased loading or loss of integrity, we may be able to take some of the loads to the new interior walls or reinforce the framing. At this time, we do not have a proposed floor plan for the new behavioral health facility so we cannot speak to the feasibility of this option. Any change in the loading may require new foundations in certain locations.

The part of the building that most likely would need strengthening is the lateral force resisting system. One area of observed lateral weakness is where the main hub connects to the wings, see Figure 3. We envision adding some shear wall or lateral element there. Also, to strengthen the wing sections, some of the interior walls for the new rooms will allow us the opportunity to add shear walls. The seismic analysis cannot be accurately completed until we have the equipment weights, equipment locations and connection information. Adding shear walls or new lateral elements will most likely require new or upgraded foundations.

In conclusion, based on our visual observation and review of existing drawings, we think it is feasible to retrofit the existing facility into a new behavioral health facility.

EXHIBIT B

Background

Axiom Engineers visited the site on March 9th, 2022, to assess the conditions of the existing mechanical and plumbing systems. The study summarizes the condition and makes recommendations for improved equipment, comfort, and reliability.

Building Overview

The 36,800 sq. ft. building contains 8 wings (Wings A-G) with a central core.

- Wing A has 2,050 sq. ft. and is used for administrative offices.
- Wing B has a total square footage of 4,760 sq. ft., with a 1,450 sq. ft. common area and a 3,300 sq. ft. dwelling area.
- Wing C – F each have a total square footage of 4,250 sq. ft., with a 1,450 sq. ft. common area and a 2,800 sq. ft. dwelling area.
- Wing G has 6,250 sq. ft. and was originally constructed to operate as a kitchen with food storage and refrigeration spaces.
- Wing H has 4,100 sq. ft. and contains the existing laundry room and boiler room.
- The central core has a total square footage of 2,640 sq. ft.

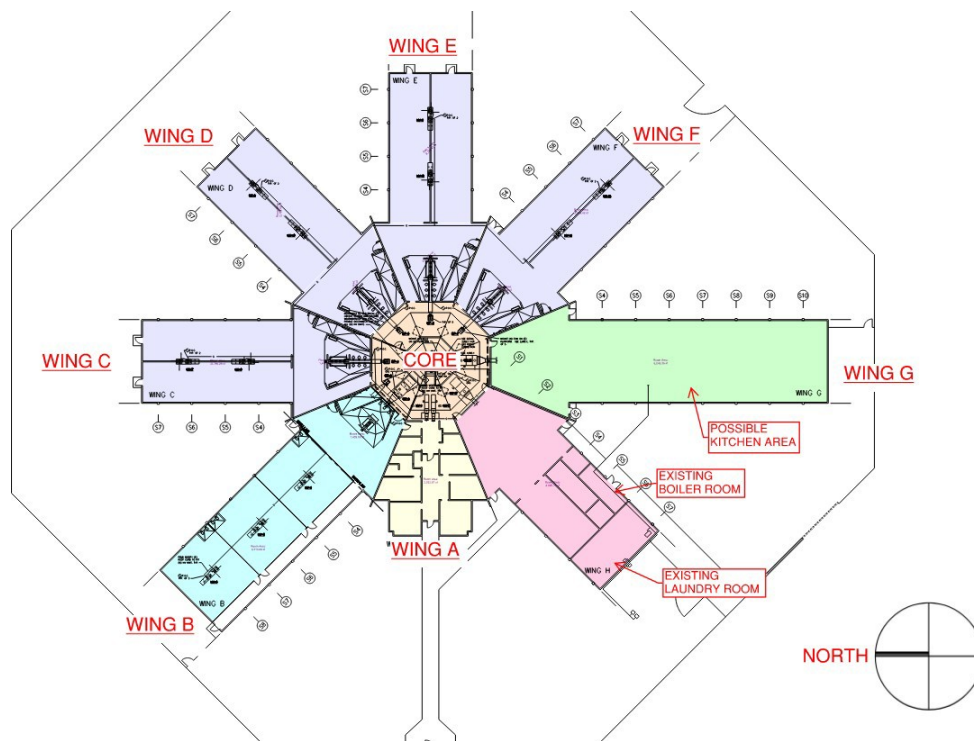


Figure 1. Rehabilitation Building Existing Floor Plan

The building was built in 1971. The envelope is original, except for the addition of a spray foam roof insulation intended to insulate and seal the roof.

HVAC Overview

In 2005, gas fired rooftop furnaces and bathroom exhaust fans were replaced with new gas fired furnaces serving the wings and gas electric units serving the guard area. There are two rooftop units per wing, and a rooftop exhaust fan drawing air from the wing, through the toilet/shower area and exhausted. There is minimal supply ductwork, only a single supply drop at each wing rooftop unit. Significant exhaust ductwork exists at each toilet/shower area.



Figure 2. Typical Existing Dwelling Area in a Wing



Figure 3. Typical Wing Rooftop Furnaces



Figure 4. Typical Community Bathroom Exhaust Fan

Plumbing Overview

The plumbing system, consisting of domestic hot water, recirculated and cold water are original. Repairs have been made as required, but piping is mostly original. Plumbing fixtures are all institutional type, stainless steel in gang type showers, toilet, and lavatories, located in each wing, near the hub. Fixtures are in very poor shape.

The domestic water service enters the building at the boiler room, water line is 4" diameter.

Waste piping is below the slab on grade, assumed cast iron. Sewer line extends on-site to Natividad Road. Sewer line in the building is assumed to be at the end of its service life.

Natural gas enters the building at the boiler room. Gas is distributed to the boilers, gas fired dryers, and gas fired rooftop heating units. Gas lines are in good condition.



Figure 5. Typical Community Bathroom Showers



Figure 6. Typical Community Bathroom Water Closet



Figure 7. Typical Community Bathroom Lavatory

The existing laundry room has 4 Milnor washing machines and 4 Milnor dryers.



Figure 8. Laundry Machines



Figure 9. Dryer Machines

Boiler Plant Overview

The boiler plant has been replaced two times, most recently about five years ago when the boilers were replaced. The majority of piping in the boiler room has been replaced, some valves and pumps appear to be in poor condition.

The existing boiler room contains two RBI Futera II 1000 MBH boilers discharging water at 180 °F with a 1000 gallon Hanson hot water storage tank. The hot water is tempered for domestic use, with a setpoint at 120 °F. High temperature hot water is distributed to the laundry room to allow sanitizing of laundry.

The boiler room also contains a water softener. The water softener is an ion exchange type, using sodium chloride salt. The water softener provides soft water to both the hot and cold water feeds to the building.



Figure 10. Existing Boilers



Figure 11. Existing Hot Water Storage



Figure 12. Existing Circulation Pumps

Recommendations

HVAC

- Given the proposed client population, the heating only system should be replaced with a heating and cooling system to improve year round comfort.
 - If private bedrooms are provided, air distribution will need to extend into each room.
 - If toilets are provided in each bedroom, then exhaust needs to be provided.
 - Exhaust at common area shower rooms needs to be provided.
- Core area needs new mechanical equipment.
- All ductwork, grilles and components need to be routed to be inaccessible and anti-ligature.

Plumbing

- All plumbing systems need to be replaced, complete.
All site waste lines need to be inspected and replaced as required.
- Gas piping can be reused.
- All plumbing fixtures to be penal type, anti-ligature.

Boiler Plant

- Boiler plant can be reused; piping, valves and pumps need to be replaced.
- Water softener can remain. We recommend only softening hot water to minimize adding sodium to drinking water.

Electrical Field Observation and Assessment

Of

**1410 Natividad Road
Salinas, California 93901**

for

Monterey County Rehabilitation Facility

April 1, 2022

Prepared by:

Aurum Consulting Engineers

Monterey Bay Inc.

404 W. Franklin Street, Suite 100

Monterey, California 93940

Telephone: (831) 646-3330

Fax: (831) 646-3336

ACEMB Project #: 21-602.00

INTRODUCTION

The purpose of this report is to present the findings from our field visit where we observed the electrical systems installed at the 1410 Natividad Road property located in Salinas, CA. The building area is approximately 47,000 square feet. Monterey County is pursuing a conversion of the building into an Adult Rehabilitation Facility.

The findings are based on visual observations of the electrical systems at the site. Infrared screening of connections, testing conductor insulation, checking loads or testing circuit breakers for proper function was not in our scope of work and was not done. Electrical Plans of the existing building were furnished to Aurum Engineers prior to the site visit.

Electrical Service

The existing building's electrical service rating is 277/480V, 3-phase, 400 Amp. The main electrical service switchboard is assumed to be fed by a county owned substation located on Chaparral Street. The electrical service is installed in a mechanical room in Wing 'C' and the equipment is beyond its rated life. The main electrical service switchboard includes a built-in automatic transfer switch which is fed from both utility and generator (i.e. the entire facility is backed-up with an emergency generator). The main electrical service switchboard feeds transformers, branch circuit panels and HVAC equipment. It is recommended that the electrical service switchboard, transformers and panelboards be replaced to meet the requirements of the building's new use and addition of air conditioning.

Emergency Power

The emergency power system is serviced by a 500KW (625KVA), 277/480V, 3-Phase, 4-Wire generator which services both the women's and men's correctional facility buildings. The emergency feed to the building is rated at 400Amps. The existing generator and 400 Amp feed to the building appears to be recently installed and appears to be in good working condition. An evaluation on the capacity of the

emergency feed require and evaluation once loads required on emergency and stand-by are established.

Electrical Car Charging Station

The project will require provisions for electric vehicle charging stations per 2019 California Green Building Standards Code requirements.

Solar Ready

The project will require provisions for the building being solar ready per 2019 California Green Building Standards Code requirements.

Exterior Lighting

The exterior building lighting is comprised of surface mounted HID light fixtures. The exterior lighting system will require upgrades to provide required egress and emergency egress requirements. The required exterior exit landings emergency fixtures are not installed and are required to meet current code emergency lighting requirements. The parking lot has several HID flood pole lights. It is recommended that the parking lot lighting be lit by LED Pole lights with full cutoff optics to bring the light levels up to the IES recommendations all the way to the public right of way. A new astronomical time clock and re-circuiting will be required to control the new outdoor light fixtures to meet 2019 California Energy Efficiency Code.

Indoor Lighting

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Fire Alarm System

There did not appear to be an existing fire alarm system within the facility.

A new fire alarm system shall include the following types of components:

- Addressable detectors (area smoke, duct smoke and thermal).
- Manual fire alarm pull-stations at non-patient locations.
- Private mode ADA audio/visual alarm signaling devices.
- Monitoring of the Fire Sprinkler System.

Automatic smoke detection where required, will be activated by duct detectors and area smoke detectors.

The general fire alarm signal will be activated by any of the following:

- Manual Pull station.
- Smoke or thermal detector.
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Telephone/Data Communication Systems

The remodel will require installation of all new cable pathways for Telephone, Data and Nurse Call Systems. Telephone, data and nurse call communication conduits, boxes, cables, racks and control panels shall be installed to meet the minimum of the Monterey County Telecommunication Standards.

High-Level Scope of Work:

- Upgrade the existing building's main electrical switchboard.
- Install an emergency distribution panel board to feed two automatic transfer switches. One automatic transfer switch to service required emergency electrical loads and a second automatic transfer switch to service desired stand-by electrical loads (required emergency and

optional stand-by loads are not allowed on the same automatic transfer switch)

- Replace all surface mount conduits such that they are installed to be ran in furred walls to prevent ligature concerns.
- Replace all light fixtures with vandal resistant and anti-ligature light fixtures.
- Replace all surface mount receptacles such that they are installed in furred walls to prevent vandalization.
- Replace all tele/data outlets such that they are installed in furred walls to prevent vandalization.
- Install a new addressable fire alarm system.

Eldridge O. Bell, P.E.

PAUL W. DAVIS, AIA Architect	Licensed Architect C-15182 California	1984
	Bachelor of Architecture California Polytechnic State University, San Luis Obispo	1982
	The Paul Davis Partnership Managing Partner/Principal Architect	1987-present
PROFESSIONAL EXPERIENCE	Davis, Jacoubowsky, Hawkins & Walker Associates, Inc. Project Architect	1982-1987
	California State University Monterey Bay Consulting Campus Architect	2002-present
	American Institute of Architects, Monterey Bay Chapter Director President Vice President Treasurer Secretary MBAIA Honor Awards Chairman	1988-present 1993 1992 1991 1990 1989 1988
PROFESSIONAL AFFILIATIONS	California Council, American Institute of Architects Board Member	1991-1993
	U.S. Green Building Council Member	2006-present
	Construction Specification Institute Member	 current
	International Conference of Building Officials Professional Member	current
BOARDS/COMMISSIONS	Planning Commission, City of Monterey Chair	2002-2017 2004-2005 2011-2012
	Vice Chair	2003-2004 2010-2011
	Historic Preservation Commission, City of Monterey Served as Chair & Vice Chair	1992-2002
	General Plan Update Committee, City of Monterey	2002-2004
	Old Monterey Business Association, Board of Directors	1999-2017
	Architectural Review Board, Sand City Chair	1998-present current
	Architectural Review Committee, City of Marina	1990-1998
CIVIC/GOVERNMENTAL/ COMMUNITY SERVICE	Leadership Monterey Peninsula Director, Alumni Association President, Alumni Association	1982 1987-1988 1983-1984
	Monterey Peninsula Jaycees Chairman of the Board President Management Development Vice President Membership Director	1983-1993 1987-1988 1986-1987 1985-1986 1984-1985
	Mariposa Hall, Inc. Member, Board of Directors President	1988-1992 1991-1992

Old Monterey Foundation Member	2019 - present
Pacific Grove Museum of Natural History Board Member	2013 to 2019
Monte Vista Elementary School – Site Council Chair	1995-1999
Monterey Peninsula School District Regional Occupational Program Construction Advisory Committee	
Monterey Academy of Oceanographic Sciences, Monterey High School Board Member – Friends of MAOS	2004- 2007
Mayflower Presbyterian Church , City of Pacific Grove Elder	1962-present 2017-present 1995 - 2001
Chairman, Stewardship Committee	1989-2001
Sunday School Coordinator	1985-1987
Cypress Coast Bank , Board of Directors	1994-1996
Family Service Agency , Board of Directors President	1995-1997, 1984-1990 1987-1988
Vice President	1986-1987
United Way Campaign Volunteer	1984-1996
Member, Board of Directors	1988-1994
Campaign Chairperson	1989
Assistant Campaign Chairperson	1988

PROJECT AWARDS

Castroville Castro Plaza and Library 2008 Public/Private Economic Development Partnership Award Monterey County Business Council	
Sherwood Village Affordable Seniors Community, Salinas for CHISPA 2009 HAHB Best of 50+ Housing Award Finalist	
286 El Dorado Street The Paul Davis Partnership Office & Residence 2002 Award of Merit, Mixed-Use Category	
Beach House Inn , Half Moon Bay 1998 Gold Nugget Best in the West, Award of Merit – Best Specialty Project	
Watsonville Youth Center - Watsonville 1994 Award of Merit from The Santa Cruz Organization for Progress and Euthenics	
Fort Ord Reuse Plan and Environmental Impact Report 1997 Outstanding Planning Award, American Planning Association	
Greenfield Downtown Improvement Program -2001-02 Ahwahnee Award, Certificate of Merit presented by the Local Government Commission -2002 California Downtown Association "Crystal Eagle" Award presented to the Greenfield Redevelopment Agency, honoring achievement in physical improvement	
Monterey Regional Waste Management District New materials recovery facility (MRF) 1996 "Steel Building of the Year Award" by Systems Builders Association	

The Hotel Pacific - Monterey
1988 Award of Merit from the American Institute of Architects
Monterey Bay Chapter

**PROFESSIONAL
AWARDS**

Outstanding Young Citizen of the Year 1988
Monterey Peninsula Jaycees

Key Member of the Year 1987-1988
Monterey Peninsula Jaycees

The Robert Stanton Award 2018
AIA Monterey Bay Chapter

PROFESSIONAL

EXPERIENCE

Paul W. Davis has been a licensed architect for 37 years, first as a Project Architect for Davis, Jacobowsky, Hawkins and Walker Associates, Inc. and now as the managing partner in his own firm. His experience with projects includes commercial, office, hotel/motel, industrial, institutional buildings, custom and multi-family residential. With his background in all facets of design and construction on a variety of projects, he is capable of offering skills from Conceptual Development through Construction Administration.

**AGREEMENT BETWEEN COUNTY OF MONTEREY AND
THE PAUL DAVIS PARTNERSHIP, LLP.**

This AGREEMENT is made and entered into by and between the County of Monterey, a political subdivision of the State of California, hereinafter referred to as "County", and **THE PAUL DAVIS PARTNERSHIP, LLP.** hereinafter referred to as "CONTRACTOR."

RECITALS

WHEREAS, County has invited proposals through the Request for Qualifications RFQ# 10456 for to provide **"ON-CALL" SERVICES OVER \$100,000 FOR ARCHITECTURAL AND ENGINEERING DESIGN SERVICES FOR VARIOUS PROJECTS LOCATED IN MONTEREY COUNTY, CALIFORNIA,** in accordance with the specifications set forth in this AGREEMENT; and

WHEREAS, CONTRACTOR has submitted a responsive and responsible proposal to perform such services; and

WHEREAS, CONTRACTOR has the expertise and capabilities necessary to provide the services requested.

NOW THEREFORE, County and CONTRACTOR, for the consideration hereinafter named, agree as follows:

1.0 PERFORMANCE OF THE AGREEMENT

I.I After consideration and evaluation of the CONTRACTOR'S proposal, the County hereby engages CONTRACTOR to provide the services set forth **in** RFQ # I 0456 and in this AGREEMENT on the terms and conditions contained herein and in RFQ #10456. The intent of this AGREEMENT is to summarize the contractual obligations of the parties. The component parts of this AGREEMENT include the following:

(t This AGREEMENT with Attachment **K:** Fee Schedule/Pricing Sheet
Initial The following documents are on file with the Office of Contracts/Purchasing:
RFQ #10456 plus all associated Addenda
CONTRACTOR's Qualifications Package dated January 9, 2014
Certificate of Insurance
Additional Insured Endorsements

1.2 All of the above-referenced contract documents are intended to be complementary. Work required by one of the above-referenced contract documents and not by others shall be done as if required by all. In the event of a conflict between or among component parts of the contract, the contract documents shall be construed **in** the following order: plus RFQ Addenda #1, 2, 3 & 4, CONTRACTOR's Qualifications Package, Certificate of Insurance and Additional Insured Endorsements.

- 1.3 CONTRACTOR warrants that CONTRACTOR and CONTRACTOR's agents, employees, and subcontractors performing services under this AGREEMENT are specially trained, experienced, competent, and appropriately licensed to perform the work and deliver the services required under this AGREEMENT and are not employees of the County, or immediate family of an employee of the County.
- 1.4 CONTRACTOR, *its* agents, employees, and subcontractors shall perform all work in a safe and skillful manner and in compliance with all applicable laws and regulations. *All* work performed under *this* AGREEMENT that is required by law to be performed or supervised by licensed personnel shall be performed in accordance with such licensing requirements.
- 1.4.1 CONTRACTOR must maintain all licenses throughout the term of the AGREEMENT.
- 1.5 CONTRACTOR shall furnish, at *its* own expense, all materials, equipment, and personnel necessary to carry out the terms of this AGREEMENT, except as otherwise specified in this AGREEMENT. CONTRACTOR shall not use County premises, property (including equipment, instruments, or supplies) or personnel for any purpose other than in the performance of its obligations under *this* AGREEMENT.

2.0 SCOPE OF SERVICE

- 2.1 The SCOPE OF WORK includes but is not limited to the following:

The scope of work shall include, in general, the full range of professional architectural or engineering pre-planning and design services including services of all types of sub-consultant design disciplines typically required for architectural projects in the public sector. Tasks may include but are not limited to the following architectural or engineering design tasks:

- Program Development to Program Validation including Concept Development and Spatial Programming Studies
- Feasibility Studies/Project Definition
- Bid Scoping Documents
- All Phases of Project Design and Disciplines
- Specifications
- Design Reviews
- Cost Estimating
- Value Engineering
- Constructability Reviews
- Building Evaluations
- Troubleshooting
- Construction Support Services
- BIM/CADD/Drafting Work
- General Engineering Services

2.2 Specific requirements include but are not limited to the following:

2.2.1 Services will be provided on an on-call basis. The process will consist of the County contacting the CONTRACTOR(S) and requesting services related to an individual project. CONTRACTOR(S) will then prepare a detailed scope and cost.

2.2.2 The County is implementing a Job Order Contracting (JOC) construction delivery method. Not all construction projects will use the JOC program. For those projects that elect to use the JOC program, CONTRACTOR(S) must become familiar with the quality and workmanship required by the applicable Construction Task Catalogs (CTC) and coordinate and adjust specifications and details produced by the JOC contractor.

2.3 CONTRACTOR will advocate for the County and ensure the project produced is in the best interest of the County. CONTRACTOR is expected to deliver products on or ahead of the required schedule and within budget.

2.4 All work shall be done in conformance with all applicable County, State and Federal laws, County Design Manuals, County Standard Plans, all Caltrans manuals, policies, State Standard Plans and Specifications, Manual of Uniform Control Devices, Uniform Building Code, (Fire, Electrical), Americans with Disabilities Act (ADA), California Green Building Standards Code (Part 11, Title 24, California Code of Regulations); and as revised and amended by County ordinance.

3.0 TERM OF AGREEMENT

3.1 The initial term shall commence with the signing of this AGREEMENT for a period of 3 year(s) with the option to extend the AGREEMENT for two (2) additional one (1) year period(s).

3.2 CONTRACTOR shall commence negotiations for any desired fee changes a minimum of sixty days (90) prior to the expiration of this AGREEMENT in order to be considered.

3.2.1 Both parties shall agree upon changes to fees in writing.

3.3 County reserves the right to cancel this AGREEMENT, or any extension of this AGREEMENT, without cause, with a thirty day (30) written notice, or immediately with cause.

4.0 COMPENSATION AND PAYMENTS

- 4.1 It is mutually understood and agreed by both parties that CONTRACTOR shall be compensated under *this* AGREEMENT in accordance with the pricing sheet attached hereto (Attachment K). The total aggregate amount payable to the CONTRACTOR under this AGREEMENT shall not exceed the sum of \$5,000,000.
- 4.2 Prices shall remain firm for the initial term of this AGREEMENT and, thereafter, may be adjusted annually as provided in this paragraph. County does not guarantee any minimum or maximum amount of dollars to be spent under this AGREEMENT.
- 4.3 Any discount offered by the CONTRACTOR must allow for payment after receipt and acceptance of services, material or equipment and correct invoice, whichever is later. In no case will a discount be considered that requires payment in less than 30 days.
- 4.4 CONTRACTOR shall levy no additional fees or surcharges of any kind during the term of this AGREEMENT without first obtaining approval from County in writing.
- 4.5 Tax:
- 4.5.1 Pricing as per *this* AGREEMENT is inclusive of all applicable taxes.
- 4.5.2 County is registered with the Internal Revenue Service, San Francisco office, and registration number 94-6000524. The County is exempt from Federal Transportation Tax; an exemption certificate is not required where shipping documents show Monterey County as consignee.

5.0 INVOICES AND PURCHASE ORDERS

- 5.1 Invoices for all services rendered per this AGREEMENT shall be billed directly to the Resource Management Agency at the following address:
- County of Monterey
Resource Management Agency - Department of Public Works
Attn: Finance Division
168 West Alisal Street, 2nd Floor
Salinas, CA. 93901
- 5.2 CONTRACTOR shall reference RFQ #10456 on all invoices submitted to County. CONTRACTOR shall submit such invoices periodically or at the completion of services, but in any event, not later than 30 days after completion of services. The invoice shall set forth the amounts claimed by CONTRACTOR for the previous period, together with an itemized basis for the amounts claimed, and such other information pertinent to the invoice. County shall certify the invoice, either in the requested amount or in such other amount as County approves in conformity with *this* AGREEMENT, and shall promptly submit such invoice to County Auditor-Controller for payment. County Auditor-Controller shall pay the amount certified within 30 days of receiving the certified invoice.

- 5.3 All County of Monterey Purchase Orders issued for the AGREEMENT are valid only during the fiscal year in which they are issued (the fiscal year is defined as July 1 through June 30).
- 5.4 Unauthorized Surcharges or Fees: Invoices containing unauthorized surcharges or unauthorized fees of any kind shall be rejected by County. Surcharges and additional fees not included in the AGREEMENT must be approved by County in writing via an Amendment.
- 5.5 In addition to any information and documentation otherwise required, invoices shall contain information and documentation satisfactory to County and Grantor (if project is grant funded) to facilitate expeditious reimbursement to County by Grantor for project expenses, and for Grantor project auditing purposes.

6.0 DESIGN PROFESSIONAL INDEMNIFICATION

- 6.1 For purposes of the following indemnification provisions ("Indemnification Agreement"), "design professional" has the same meaning as set forth in California Civil Code section 2782.8. If any term, provision or application of this Indemnification Agreement is found to be invalid, in violation of public policy or unenforceable to any extent, such finding shall not invalidate any other term or provision of this Indemnification Agreement and such other terms and provisions shall continue in full force and effect. If there is any conflict between the terms, provisions or application of this Indemnification Agreement and the provisions of California Civil Code Sections 2782 or 2782.8, the broadest indemnity protection for County under this Indemnity Agreement that is permitted by law shall be provided by CONTRACTOR.
- 6.2 Indemnification for Design Professional Services Claims:
CONTRACTOR shall indemnify, defend and hold harmless County, its governing board, directors, officers, employees, and agents against any claims that arise out of, or pertain to, or relate to the negligence, recklessness, or willful misconduct of CONTRACTOR, its employees, subcontractors, and agents in the performance of design professional services under this AGREEMENT, excepting only liability arising from the sole negligence, active negligence or willful misconduct of County, or defect in a design furnished by County.
- 6.3 Indemnification for All Other Claims or Loss:
For any claim, loss, injury, damage, or expense or liability other than claims arising out of CONTRACTOR's performance of design professional services under this AGREEMENT, CONTRACTOR shall indemnify, defend and hold harmless County, its governing board, directors, officers, employees, and agents against any claim for loss, injury, damage, expense or liability resulting from or alleging injury to or death of any person or loss of use of or damage to property, arising from or related to the performance of services under this AGREEMENT by CONTRACTOR, its employees, subcontractors or agents, excepting only liability arising from the sole negligence, active negligence or willful misconduct of County, or defect in a design furnished by County.

7.0 INSURANCE REQUIREMENTS

7.1 Evidence of Coverage:

7.1.1 Prior to commencement of this AGREEMENT, CONTRACTOR shall provide a "Certificate of Insurance" certifying that coverage as required herein has been obtained. Individual endorsements executed by the insurance carrier shall accompany the certificate. In addition, CONTRACTOR, upon request, shall provide a certified copy of the policy or policies.

7.1.2 This verification of coverage shall be sent to the County's Contracts/Purchasing Department, unless otherwise directed. CONTRACTOR shall not receive a "Notice to Proceed" with the work under this AGREEMENT until it has obtained all insurance required and such, insurance has been approved by County. This approval of insurance shall neither relieve nor decrease the liability of CONTRACTOR.

7.2 Qualifying Insurers: All coverages, except surety, shall be issued by companies which hold a current policy holder's alphabetic and financial size category rating of not less than A- VII, according to the current Best's Key Rating Guide or a company of equal financial stability that is approved by County's Purchasing Officer.

7.3 Insurance Coverage Requirements:

7.3.1 Without limiting CONTRACTOR's duty to indemnify, CONTRACTOR shall maintain in effect throughout the term of this AGREEMENT a policy or policies of insurance with the following minimum limits of liability:

7.3.1.1 Commercial general liability insurance, including but not limited to premises and operations, including coverage for Bodily Injury and Property Damage, Personal Injury, Contractual Liability, Broadform Property Damage, Independent Contractors, Products and Completed Operations, with a combined single limit for Bodily Injury and Property Damage of not less than \$1,000,000 per occurrence.

7.3.2 Business automobile liability insurance, covering all motor vehicles, including owned, leased, non-owned, and hired vehicles, used in providing services under this AGREEMENT, with a combined single limit for Bodily Injury and Property Damage of not less than \$1,000,000 per occurrence

7.3.3 Workers' Compensation Insurance, if CONTRACTOR employs others in the performance of this AGREEMENT, in accordance with California Labor Code section 3700 and with Employer's Liability limits not less than \$1,000,000 each person, \$1,000,000 each accident and \$1,000,000 each disease.

7.3.4 Professional Jiability insurance, if required for the professional services being provided, (e.g., those persons authorized by a license to engage in a business or profession regulated by the California Business and Professions Code), in the amount of not less than \$1,000,000 per claim and \$2,000,000 in the aggregate, to cover liability for malpractice or errors or omissions made in the course of rendering professional services. If professional liability insurance is written on a "claims-made" basis rather than an occurrence basis, CONTRACTOR shall, upon the expiration or earlier termination of this AGREEMENT, obtain extended reporting coverage ("tail coverage") with the same liability limits. Any such tail coverage shall continue for at least three years following the expiration or earlier termination of this AGREEMENT.

7.4 Other Insurance Requirements:

7.4.1 All insurance required by this AGREEMENT shall be with a company acceptable to County and issued and executed by an admitted insurer authorized to transact Insurance business in the State of California. Unless otherwise specified by this AGREEMENT, all such insurance shall be written on an occurrence basis, or, if the policy is not written on an occurrence basis, such policy with the coverage reqlllfed herein shall continue in effect for a period of three years following the date CONTRACTOR completes its performance of services under this AGREEMENT.

7.4.2 Each liability policy shall provide that County shall be given notice in writing at least thirty days in advance of any endorsed reduction in coverage or limit, cancellation, or intended non-renewal thereof Each policy shall provide coverage for CONTRACTOR and additional insureds with respect to claims arising from each subcontractor, *if any*, performing work under this AGREEMENT, or be accompanied by a certificate of insurance from each subcontractor showing each subcontractor has identical insurance coverage to the above requirements.

7.4.3 Commercial rreneral liability and automobile liability policies shall z,rovide an endorsement naming the Count., of Monterey. its offi.cers. agents. and employees as Additional Insureds with respect to liability arising out of the CONTRACTOR'S work. including ongoing and completed oz.erations and shall further provide that such insurance is primary insurance to any insurance or self. insurance maintained by the County and that the insurance of the Additional Insurem. shall not -be called upon to contribute to a loss covered by the CONTRACTOR'S insurance. T7ie required endorsement form for Commercial General Liability Additional Insured is ISO Form CG 20 10 11-85 or CG 20 10 JO OJ in tandem with CG 20 37 JO OJ (2000). The required endorsement form for Automobile Additional Insured endorsement is ISO Form CA 20 48 02 99

7.4.4 Prior to the execution of this AGREEMENT by County, CONTRACTOR shall file certificates of insurance with County's contract administrator and County's Contracts/Purchasing Division, showing that CONTRACTOR has in effect the insurance required by this AGREEMENT. CONTRACTOR shall file a new or

amended certificate of insurance within five calendar days after any change is made in any insurance policy, which would alter the information on the certificate then on file. Acceptance or approval of insurance shall in no way modify or change the indemnification clause in this AGREEMENT, which shall continue in full force and effect.

- 7.4.5 CONTRACTOR shall at all times during the term of this AGREEMENT maintain in force the insurance coverage required under this AGREEMENT and shall send, without demand by County, annual certificates to County's Contract Administrator and County's Contracts/Purchasing Division. If the certificate is not received by the expiration date, County shall notify CONTRACTOR and CONTRACTOR shall have five calendar days to send in the certificate, evidencing no lapse in coverage during the interim. Failure by CONTRACTOR to maintain such insurance is a default of this AGREEMENT, which entitles County, at its sole discretion, to terminate this AGREEMENT immediately.

8.0 RECORDS AND CONFIDENTIALITY

- 8.1 Confidentiality: CONTRACTOR and its officers, employees, agents, and subcontractors shall comply with any and all federal, state, and local laws, which provide for the confidentiality of records and other information. CONTRACTOR shall not disclose any confidential records or other confidential information received from the County or prepared in connection with the performance of this AGREEMENT, unless County specifically permits CONTRACTOR to disclose such records or information. CONTRACTOR shall promptly transmit to County any and all requests for disclosure of any such confidential records or information. CONTRACTOR shall not use any confidential information gained by CONTRACTOR in the performance of this AGREEMENT except for the sole purpose of carrying out CONTRACTOR's obligations under this AGREEMENT.
- 8.2 County Records: When this AGREEMENT expires or terminates, CONTRACTOR shall return to County any County records which CONTRACTOR used or received from County to perform services under this AGREEMENT.
- 8.3 Maintenance of Records: CONTRACTOR shall prepare, maintain, and preserve all reports and records that may be required by federal, state, and County rules and regulations related to services performed under this AGREEMENT.
- 8.4 Access to and Audit of Records: County shall have the right to examine, monitor and audit all records, documents, conditions, and activities of CONTRACTOR and its subcontractors related to services provided under this AGREEMENT. The parties to this AGREEMENT may be subject, at the request of County or as part of any audit of County, to the examination and audit of the State Auditor pertaining to matters connected with the performance of this AGREEMENT for a period of three years after final payment under the AGREEMENT.

85 CONTRACTOR agrees that any information, whether proprietary or not, made known to or discovered by it during the performance of or in connection with this AGREEMENT for County will be kept confidential and not be disclosed to any other person. CONTRACTOR agrees to immediately notify County in accordance with the Notices Section of this AGREEMENT, if it is requested to disclose any information made known to or discovered by it during the performance; of or in connection with this AGREEMENT. These conflict of interest and future service provisions and limitations shall remain fully effective five (5) years after termination of services to County hereunder.

9.0 NON-DISCRIMINATION

- 9.1 During the performance of this contract, CONTRACTOR shall not unlawfully discriminate against any employee or applicant for employment because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age (over 40), sex, or sexual orientation. CONTRACTOR shall ensure that the evaluation and treatment of its employees and applicants for employment are free of such discrimination.
- 9.2 The applicable regulations of the Fair Employment and Housing Commission implementing Government Code, §12900, et seq., set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations are incorporated into this AGREEMENT by reference and made a part hereof as if set forth in full.
- 9.3 CONTRACTOR shall include the non-discrimination and compliance provisions of the clause in all agreements with subcontractors to perform work under the contract.

10.0 OVERRIDING CONTRACTOR PERFORMANCE REQUIREMENTS

- 10.1 Independent Contractor: CONTRACTOR shall be an independent contractor and shall not be an employee of Monterey County, nor immediate family of an employee of County. CONTRACTOR shall be responsible for all insurance (General Liability, Automobile, Workers' Compensation, unemployment, etc.) and all payroll-related taxes. CONTRACTOR shall not be entitled to any employee benefits. CONTRACTOR shall control the manner and means of accomplishing the result contracted for herein.
- 10.2 Minimum Work Performance Percentage: CONTRACTOR shall perform with its own organization contract work amounting to not less than 50 percent of the original total AGREEMENT amount, except that any designated 'Specialty Items' may be performed by subcontract and the amount of any such 'Specialty Items' so performed may be deducted from the original total AGREEMENT amount before computing the amount of work required to be performed by CONTRACTOR with its own organization or per a consortium.

- 10.3 Non-Assignment: CONTRACTOR shall not assign this contract or the work required herein without the prior written consent of County.
- 10.4 Any subcontractor shall comply with all of County of Monterey requirements, including insurance and indemnification requirements as detailed in AGREEMENT.

11.0 CONFLICT OF INTEREST

- 11.1 CONTRACTOR covenants that it presently has no interest, and shall not have any interest, direct or indirect, which would conflict in any manner with the performance of services required under this AGREEMENT. Without limitation, CONTRACTOR represents to and agrees with County that CONTRACTOR has no present, and will have no future, conflict of interest between providing County services hereunder and any other person or entity (including but not limited to any federal or state environmental or regulatory agency) which has any interest adverse or potentially adverse to County, as determined in the reasonable judgment of the Board of Supervisors of County.

12.0 COMPLIANCE WITH APPLICABLE LAWS

- 12.1 CONTRACTOR shall keep itself informed of and in compliance with all federal, state and local laws, ordinances, regulations, and orders, including but not limited to all state and federal tax laws that may affect in any manner the Project or the performance of the Services or those engaged to perform services under this AGREEMENT. CONTRACTOR shall procure all permits and licenses, pay all charges and fees, and give all notices required by law in the performance of the Services.
- 12.2 CONTRACTOR shall report immediately to County's Contracts/Purchasing Officer, in writing, any discrepancy or inconsistency it discovers in the laws, ordinances, regulations, orders, and/or guidelines in relation to the Project of the performance of the Services.
- 12.3 All documentation prepared by CONTRACTOR shall provide for a completed project that conforms to all applicable codes, rules, regulations and guidelines that are in force at the time such documentation is prepared.
- 12.4 **COMPLIANCE WITH TERMS OF STATE OR FEDERAL GRANT.** If this Agreement has been or will be funded with monies received by the County pursuant to a contract with the state or federal government in which the County is the grantee, CONTRACTOR will comply with all the provisions of said contract, to the extent applicable to CONTRACTOR as a subgrantee under said contract, and said provisions shall be deemed a part of this AGREEMENT, as though fully set forth herein. Upon request, County will deliver a copy of said contract to CONTRACTOR, at no cost to CONTRACTOR.

13.0 PREVAILING WAGE

13.1 CONTRACTOR shall comply with Section 1720, et. seq., of the Labor Code, regarding the general prevailing wage rates of per diem, holiday, and overtime wages for each craft, classification, or type of worker needed to execute the AGREEMENT where applicable.

14.0 DRUG-FREE WORKPLACE

14.1 CONTRACTOR and CONTRACTOR'S employees shall comply with the County's policy of maintaining a drug free workplace. Neither CONTRACTOR nor CONTRACTOR'S employees shall unlawfully manufacture, distribute, dispense, possess or use controlled substances, as defined in 21 U.S. Code § 812, including, but not limited to, marijuana, heroin, cocaine, and amphetamines, at any County facility or work site. If CONTRACTOR or any employee of CONTRACTOR is convicted or pleads no contest to a criminal drug statute violation occurring at a County facility or work site, the CONTRACTOR shall, within five days thereafter notify the head of the County department/agency for which the AGREEMENT services are performed. Violation of this provision shall constitute a material breach of this AGREEMENT.

15.0 TIME OF ESSENCE

15.1 Time is of the essence in respect to all provisions of this AGREEMENT that specify a time for performance; provided, however, that the foregoing shall not be construed to limit or deprive a party of the benefits of any grace or use period allowed in this AGREEMENT.

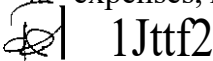
16.0 PERFORMANCE ASSURANCE AND WAIVER OF BREACH

16.1 Assurance of Performance: If at any time County believes CONTRACTOR may not be adequately performing its obligations under this AGREEMENT or that CONTRACTOR may fail to complete the Services as required by this AGREEMENT, County may request from CONTRACTOR prompt written assurances of performance and a written plan acceptable to County, to correct the observed deficiencies in CONTRACTOR'S performance. CONTRACTOR shall provide such written assurances and written plan within ten (10) calendar days of its receipt of County's request and shall thereafter diligently commence and fully perform such written plan. CONTRACTOR acknowledges and agrees that any failure to provide such written assurances and written plan within the required time is a material breach under this AGREEMENT. If County accepts the plan it shall issue a signed waiver.

16.1.1 Waiver: No waiver of a breach, failure of any condition, or any right or remedy contained in or granted by the provisions of this AGREEMENT shall be effective unless it is in writing and signed by the party waiving the breach, failure, right or remedy. No waiver of any breach, failure, right or remedy shall be deemed a waiver of any other breach, failure, right or remedy, whether or not similar, nor shall any waiver constitute a continuing waiver unless the writing so specifies.

17.0 TRAVEL REIMBURSEMENT

- 17.1 If travel expenses are to be reimbursed, they must be approved in writing in advance.
- 17.2 If County approves travel, lodging and meal reimbursement, CONTRACTOR shall receive compensation for travel expenses as per the "Monterey County Travel and Business Expense Reimbursement Policy". A copy of the policy is available online at: http://www.co.monterey.ca.us/auditor/pdfs/County_Travel_Business_Expense_Policy_12-5-12.pdf. To receive reimbursement, CONTRACTOR must provide a detailed breakdown of their expenses, identifying what was expended and when.


(Contractor's Initials)

1/17/12
(Date)

18.0 EMERGENCY SITUATIONS

- 18.1 CONTRACTOR shall provide the name and contact information of a representative who shall be available 24 hours a day, 7 days a week, in the event of an emergency. During the emergency, CONTRACTOR shall provide County with all available supplies, materials, equipment and/or services on a priority basis.
- 18.2 County expects emergency deliveries to occur within 4 hours of order placement and may be required during evenings, weekends, and holidays. Time is of the essence for delivery during emergency situations. Delivery location(s) and estimated arrival will be mutually agreed upon, by County and CONTRACTOR, at time of order and will be determined based on need and existing conditions. It is understood that current conditions, such as power outages, road closures, and damages to CONTRACTOR's facility and/or equipment, will be taken into consideration.

19.0 NON-APPROPRIATIONS CLAUSE

- 19.1 Notwithstanding anything contained in this AGREEMENT to the contrary, if insufficient funds are appropriated, or funds are otherwise unavailable in the budget for County for any reason whatsoever in any fiscal year, for payments due under this AGREEMENT, County will immediately notify CONTRACTOR of such occurrence, and this AGREEMENT shall terminate after the last day during the fiscal year for which appropriations shall have been budgeted for County or are otherwise available for payments.

20.0 WARRANTY BY CONTRACTOR

- 20.1 CONTRACTOR shall perform all services and provide all drawing and documents in accordance with applicable codes and regulations, and shall be fully responsible for the content of all design documents prepared or provided under this AGREEMENT. Time is of the essence of this AGREEMENT.

21.0 NOTICES

- 21.1 Notices required to be given to the respective parties under this AGREEMENT shall be deemed given by any of the following means: (1) when personally delivered to County's contract administrator or to CONTRACTOR'S responsible officer; (2) when personally delivered to the party's principle place of business during normal business hours, by leaving notice with any person apparently in charge of the office and advising such person of the import and contents of the notice; (3) 24 hours after the notice is transmitted by FAX machine to the other party, at the party's FAX number specified pursuant to this AGREEMENT, provided that the party giving notice by FAX must promptly confirm receipt of the FAX by telephone to the receiving party's office; or, (4) three (3) days after the notice is deposited in the U. S. mail with first class or better postage fully prepaid, addressed to the party as indicated below.
- 21.2 Notices mailed or faxed to the parties shall be addressed as follows:

TO COUNTY:

Contracts/Purchasing Officer
County of Monterey, Contracts/Purchasing
168 W. Alisa! Street, 3rd Floor
Salinas, CA 93901-2439
Tel. No.: (831)755-4990
FAX No.: (831) 755-4969
[derm\(a\).co.monterey.ca.us](mailto:derm(a).co.monterey.ca.us)

TO CONTRACTOR:

Name: The Paul Davis Partnership, LLP
Address: 286 Eldorado Street
Monterey, CA. 93940

Tel.No.(831)373-2784
FAX No (831)373-7459
--Email: info@.pauldavispartnership.com

22.0 LEGAL DISPUTES

- 22.1 CONTRACTOR agrees that this AGREEMENT and any dispute arising from the relationship between the parties to this AGREEMENT, shall be governed and interpreted by the laws of the State of California, excluding any laws that direct the application of another jurisdiction's laws.
- 22.2 Any dispute that arises under or relates to this AGREEMENT (whether contract, tort, or both) shall be resolved in the Superior Court of California in Monterey County, California.
- 22.3 CONTRACTOR shall continue to perform under this AGREEMENT during any dispute.
- 22.4 The parties agree to waive their separate rights to a trial by jury. This waiver means that the trial will be before a judge.

IN WITNESS WHEREOF, the County and CONTRACTOR execute this AGREEMENT as follows:

MONTEREY COUNTY

Contracts/Purchasing Director
Debra Bayard, MS
Purchasing Agent
County of Monterey

Dated: 8/5 to 8/15 /14

Approved as to Fiscal Provisions:

Deputy Auditor/Controller

Dated: 8/14

Approved as to Liability Provisions:

Risk Management

Dated:

Approved as to Form:

Deputy County Counsel

Dated: 8/5 /14

CONTRACTOR

By: Paul W. Davis
Signature of Chair, President, or
Vice-President

PAUL W. DAVIS PARTNER
Printed Name and Title

Dated: 8/14 /14

By: [Signature]
(Signature of Secretary, Asst. Secretary, CFO,
Treasurer)*

Paul W. Davis
Printed Name and Title

Dated: 8/14 /14

County Board of Supervisors' Agreement Number: _____

*INSTRUCTIONS: If CONTRACTOR is a corporation, including limited liability and non-profit corporations, the full legal name of the corporation shall be set forth above together with the signatures of two specified officers. If CONTRACTOR is a partnership, the name of the partnership shall be set forth above together with the signature of a partner who has authority to execute this Agreement on behalf of the partnership. If CONTRACTOR is contracting in an individual capacity, the individual shall set forth the name of the business, if any, and shall personally sign the Agreement.

Attachment n.-: r ee cneoule

The undersigned, having read and understood all proposal information, hereby submits hourly rates. It is understood that the basic design of each particular type of facility can be duplicated as the situation permits. It is also understood that the Fee Schedule will be used by the County as a criteria to select the firm(s) for possible interviews by the selection Committee, but that a final fee may be negotiated with the qualified firm(s) for the required services.

Position/Title (Indicate Below)	Hourly Rate (Indicate changes per year if any)	
	2013/2014	2014/2015
Princinal/Owner	\$185	\$195
Project Mana◇"er	\$135	\$140
Project Architect	\$135	\$140
Proiect Desilmer	\$125	\$135
CADD Technician	\$95	\$95
Snecification Writer	\$135	\$145
Cost Estimator		
Clerical	\$40	\$45

Reimbursable Items to be Billed (please list)	Estimated Cost Bills (Markup not to exceed 10%)	
	Total Cost (if applicable at the time of RFQ)	% of Markup Calculated
MILEAGE per current IRS rate	.565	
ADD SERVICE - REPRODUCTION PRINTING:		
8.5 xi I blk/wht per page	.10	
11 x 17 blk/wht ner nao:e	.15	
8.5 xi I color per page	.75	
11 x 17 color ner nao:e	1.00	
12 x 18 per sheet	.75	
15 x 21 oer sheet	1.10	
17 x 22 oer sheet	1.30	
24 x 36 per sheet	3.00	
20 x 42 ner sheet	4.50 30 x42	
Outside Renroduction as invoiced by Printing Firm	Cost	+ 10%
ADD SERVICE - MEDIA:		
24"X 36" Foam Core	7.50	
30" x 42" Foam Core	9.00	
CD	5.00	
DVD	7.50	
POSTAGE/FREIGHT/DELIVERY SERVICE:	Cost	

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.Q_ 1.
- or's Initials)

2/19/14 2/19/14
(Date)



AURUM CONSULTING ENGINEERS MONTEREY BAY, INC.

· 2014 HOURLY RATE SCHEDULE

<u>ENGINEERING DIRECTOR</u>	\$158/hr
Eldridge O. Bell	
<u>SENIOR PROJECT MANAGER</u>	\$149/hr
Charles W. Denley	
PROJECT MANAGER	\$145/hr
Martin H. Perez Frank S. Pinedo Steve R. Cate Najib Anwary	
<u>ELECTRICAL DESIGNER</u>	\$136/hr
CADD MANAGER	\$116/hr
Elias Cosio	
DRAFTER	\$101/hr
Stephanie Gross Gliberto Perez	
BOOKKEEPER	\$73/hr
- Silvia Magan.a	
<u>ADMINISTRATIVE ASSISTANT</u>	\$63/hr
Vianey Garcia	



2014 RATE SHEET

PRINCIPAL	\$	19000
DEPARTMENT MANAGER (Bill E., Melin S.)	\$	180.00
ASSOCIATE	\$	175.00
SENIOR PROJECT ENGINEER	\$	165.00
COMMISSIONING AGENT II	\$	165.00
COMMISSIONING AGENT I	\$	145.00
SENIOR ENGINEER	\$	160.00
PROJECT ENGINEER (Scott S.)	\$	150.00
PROJECT MANAGER (Frank S., Mario P.)	\$	150.00
LIFE SAFETY SPECIALIST	\$	150.00
ENGINEER III (Kate C.)	\$	140.00
ENGINEER II	\$	130.00
ENGINEER I	\$	125.00
SENIOR DESIGNER	\$	135.00
COMMISSIONING TECHNICIAN	\$	130.00
DESIGNER III	\$	130.00
DESIGNER II	\$	122.00
DESIGNER I	\$	115.00
ENGINEERING TECHNICIAN	\$	110.00
GADD III	\$	105.00
GADD II	\$	100.00
CADD I	\$	95.00
ADMINISTRATION	\$	95.00

EXPIRES 12/31/2014

Standard Schedule of Compensation

May 2013



GENERAL

The following list of **fees** and reimbursable expense items shall be used in providing services within our agreement and may be annually adjusted, upon issuance of an updated Standard Schedule of Compensation;

Principal	\$195/hour
Associate Principal	\$175/hour
Associate	\$165/hour
Landscape Architect	\$135/hour
Designer	\$115/hour
Assistant Designer	\$95/hour
Design/Graphics Intern	\$40/hour
Word Processor/Clerical	\$75/hour

ADDITIONAL SERVICES

Any additional presentations, drawings or documents not identified in the Scope of Services will be considered additional services. Additional services are provided only with prior authorization and on an hourly basis unless otherwise approved.

REIMBURSABLE EXPENSES

All costs for photography, printing and plotting, special delivery, insurance certificate charges, local business licenses, sales tax, assessments, fees, mileage, CADD and visual simulation ancillary costs, such as data transfers, tapes and outside services, consultants, and all other costs directly related to the project will be accounted as a reimbursable expense at our cost plus a fifteen percent administration charge.



HOWARD CARTER ASSOCIATES, INC. STRUCTURAL ENGINEERS
9300 Blue Larkspur Lane, Monterey, CA 93941, (831) 373-3113, FAX (831) 373-5872

HOWARD CARTER ASSOCIATES, INC.

Fee Schedule Effective January 1, 2014

Unless otherwise covered by previous or separate agreement, the following rates shall apply to all professional services rendered. Each staff member's hourly billing rate falls within one of the categories listed below.

<i>Principal Engineer:</i>	<i>\$160.00 per hour</i>
<i>Senior Project Engineer:</i>	<i>\$120.00 per hour</i>
<i>Project Engineer;</i>	<i>\$ 100.00 per hour</i>
<i>Staff Engineer:</i>	<i>\$ 85.00 per hour</i>
<i>Structural/CAD Designer:</i>	<i>\$ 70.00 per hour</i>
<i>Computer Draftsperson:</i>	<i>\$ 60.00 per hour</i>
<i>Research or Technical:</i>	<i>\$ 42.00 per hour</i>

ME \\¹HITSON 'ENGINEERS

9699 Blue Larkspur Lane • Suite 105 • Monterey, CA 93940
831 649-5225 • Fax 831 373-5065

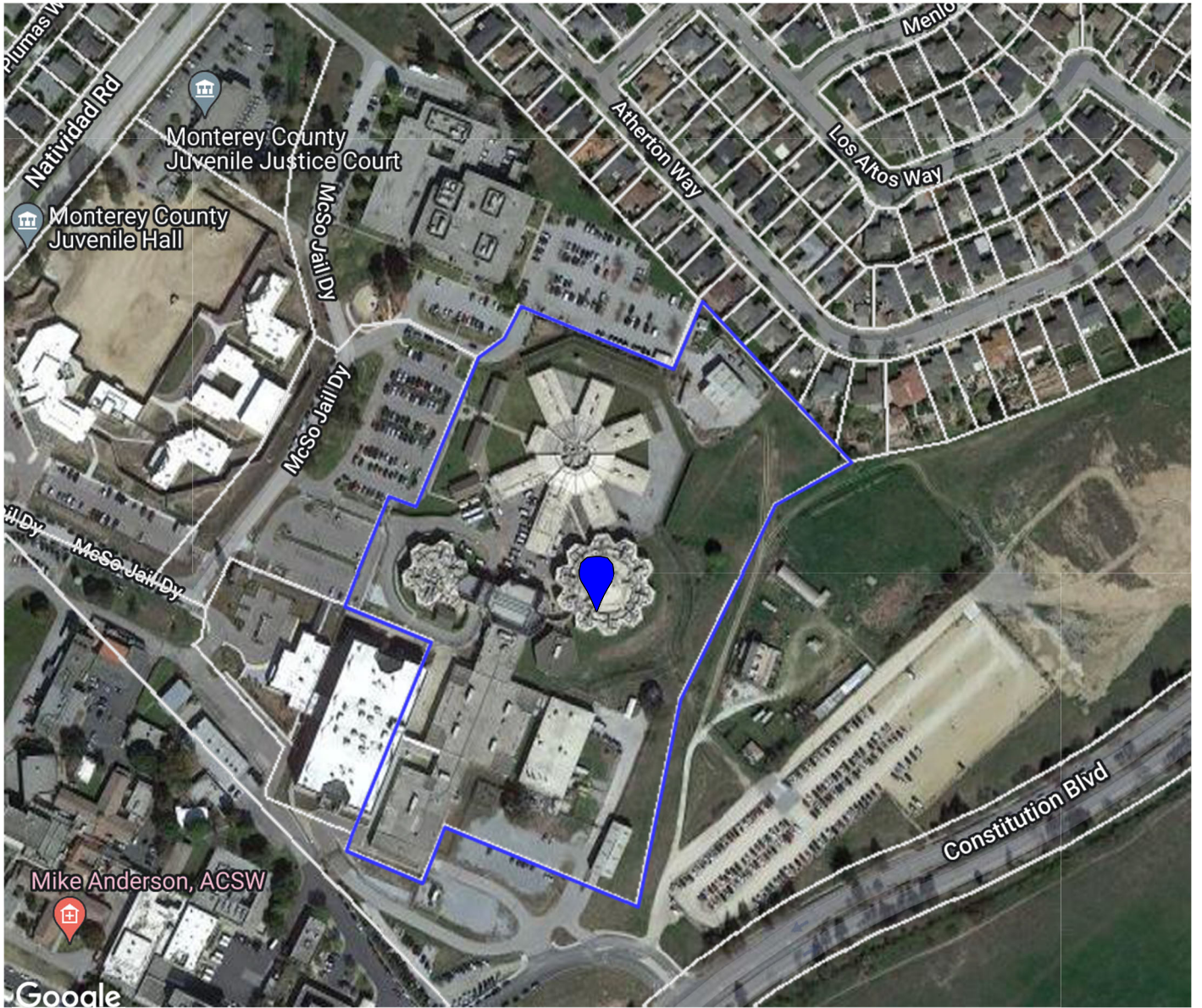
FEE SCHEDULE

<u>Category</u>	<u>Hourly Rate</u>
Principal Engineer	\$ 210.00
Senior Civil Engineer	\$ 175.00
Civil Engineer	\$ 155.00
Land Surveyor	\$ 155.00
Associate Engineer / Surveyor	\$ 135.00
Assistant Engineer/ Surveyor	\$ 115.00
Senior Engineering/ Survey Technician	\$ 110.00
Engineering/ Survey Technician	\$ 105.00
Administrative Support	\$ 70.00
Engineering Aide	\$ 65.00
Expert Witness / Court Hearing	\$ 275.00
Field Surveying*	
One Person Survey Crew (Prevailing Wage)	\$ T70_G0
Two Person Survey Crew (Prevailing Woge)	\$ 260.00
Three Person Survey Crew (PrevaHing Wage)	\$ 350.00
Field SWPPP Monitoring	
Assistant Engineer (SWPPP Inspector)	\$.85.00
All Other Categories	same as Office Rates
Reimbursobles	
Professional Services By Others	Cost Plus 10%
InwHouse Lorge Format Plotting/ Copies (Block & White)	\$0.50 / S.F.
In-House Plots, Prints, Copies (Color/Special Media)	Rates vary, available upon request
In-House Prints/ Copies (Black & White)	\$0.10/sheet for 8.5x11, \$0.50/sheet for 11x17
Materials, Postage, Reproduction, Telephone	Cost Plus 10%
Mileage	Per Current Federal Rate

*Survey Crew raies are Prevailing Wage

#35

Rotes effective July 1, 2012





LIST 1
DETAIL

1 Property Address:

Ownership

County: **MONTEREY, CA**
Assessor: **STEVE VAGNINI, ASSESSOR**
Parcel # (APN): **003-851-035-000**
Parcel Status: **ACTIVE**
Owner Name: **COUNTY OF MONTEREY**
Mailing Address: **1441 SCHILLING PL SOUTH BUILDING, 2ND FLR SALINAS CA 93901**
Legal Description:

Assessment

Total Value:	Use Code: 7A	Use Type: TAX EXEMPTS
Land Value:	Tax Rate Area: 005-004	County Zoning:
Impr Value:	Year Assd: 2021	Census Tract: 106.08/2
Other Value:	Property Tax: \$135.90	Price/SqFt:
% Improved: 0%	Delinquent Yr:	
Exempt Amt:	HO Exempt: N	

Sale History

	Sale 1	Sale 2	Sale 3	Transfer
Document Date:				05/31/2013
Document Number:				2013IS053113
Document Type:				
Transfer Amount:				
Seller (Grantor):				

Property Characteristics

Bedrooms:	Fireplace:	Units:
Baths (Full):	A/C:	Stories:
Baths (Half):	Heating:	Quality:
Total Rooms:	Pool:	Building Class:
Bldg/Liv Area:	Park Type:	Condition:
Lot Acres: 2.590	Spaces:	Site Influence:
Lot SqFt: 112,820	Garage SqFt:	Timber Preserve:
Year Built:		Ag Preserve:
Effective Year:		

t, - , Monterey County

March 22, 2022

Dear Chief Eckert,

We appreciate your time and your presentation about the proposed Monterey County Mental Health Rehabilitation Center on March 8, 2022. Please know that NAMI Monterey County's Board of Directors supports the proposal.

We believe that wait times for beds can and have exacerbated mental health conditions for individuals, and that much damage can be done while people are not getting the care they need. People with mental illness who are in crisis simply cannot wait up to a year for help for their treatment, no more than a patient with cancer can. The MHRC, with over 100 psychiatric beds, will significantly reduce this problem.

The Monterey County population has outgrown the psychiatric beds and services at both Natividad Hospital and Community Hospital of the Monterey Peninsula.

We know that frequent and consistent support from nearby family and friends greatly improves the rehabilitation process for individuals with a mental health condition. But many Monterey County residents with mental health conditions are sent to counties far and wide - even out of state. The existing situation makes it almost impossible for families with limited means to visit their loved ones. This proposed facility will achieve more equitable opportunities within the diverse population of Monterey County.

Additionally, we find it refreshing that a treatment center will replace the old jail, a perfect symbol for a more humane way of treating people with mental illness. We believe that the additional local treatment will keep more people out of jails and prisons, and will reduce self-harm. NAMI Monterey County applauds the efforts envisioned in the MCBH proposal. We support the application of funding.

Thank

11

President
NAMI Monterey County Board of Directors



BOARD OF DIRECTORS

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(HICAP)

Nursing Home Information &

Advocacy (OMBUDSMAN)

Senior Peer Counseling

Tax Counseling for the Elderly

Benefits Checkup

Katy Eckert, Chief of Behavioral Health

1270 Natividad Road Salinas, CA 93906

March 29, 2022

Dear Chief Eckert,

On behalf of the Alliance on Aging, I am writing this letter to support building a Mental Health Rehabilitation Center (MHRC) in Monterey County.

For decades there has been a need for a locked in-patient residential facility for the severely mentally ill in Monterey County. With no local options, these residents have often been placed in long-term care facilities with dependent and vulnerable older adults and cared for by staff who are not qualified to treat the mentally ill. Others are transferred out-of-county for treatment away from their families and support. Statewide there are insufficient beds providing this level of service. In state hospitals and other facilities, there is high demand to secure a patient bed and consequently there are long waiting lists. For the approximately fifty Monterey County residents currently placed in facilities all over the state, a local MHRC would allow them to be brought home from distant Institutes of Mental Disease.

An appropriate treatment center within Monterey County, will enhance patients' links to their families and local support systems. A local MRHC will also improve a patient's ability to safely re-integrate into their home communities. The goal is to help patients move towards living more independently, provide local rehabilitation services and step down to unlocked levels of care when possible. Building a MRHC in Monterey County is a strategic investment. The proposed facility aligns with local and state shared goals towards achieving equity for behavioral health and community care options. Opening an MHRC within Monterey County would mean closing an urgent service gap for a very vulnerable population.

Teresa Sullivan⁴

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q(/ ire

Alliance on Aging

280 Dickman Avenue
Monterey, CA 93940
831-646-1458 Phone

247 Main Street
Salinas, CA 93901
831-655-1334 or 831-758-4011 Phone
831-655-8781 Fax

Spirals Consignment
& Benefit Shop
570 Lighthouse Avenue
Pacific Grove, CA 93950
831-383-5030 Phone

AllianceOnAging.org

MONTEREY COUNTY



BEHAVIORAL HEALTH COMMISSION

1270 Natividad Road, Salinas, CA 93906
(831) 755-4509

January 26, 2023
Monterey County Health Department
1270 Natividad Rd
Salinas, CA 93906

SUBJECT: LETTER OF SUPPORT FOR BEHAVIORAL HEALTH CONTINUUM INFRASTRUCTURE PROGRAM FUNDING APPLICATION

To whom it may concern,

The Monterey County Behavioral Health Commission would like to express its support for the Monterey County Health Department's California Department of Health Care Services' Behavioral Health Continuum Infrastructure Program funding application. This application will enable the County to develop a regional Lanterman-Petris-Short (LPS) Mental Health Rehabilitation Center.

Neither Monterey, San Benito, nor San Luis Obispo counties have a residential Mental Health Rehabilitation Center (MHRC) for sub-acute mental health care causing regional resident to be transferred out of county to receive appropriate care. A lack of MHRC beds in our region creates high demand and long waiting lists for people who have serious mental illnesses. Our data indicate that clients are placed an average of 219 miles away (range 36 to 446 miles), which places an excessive burden on inpatient care clients and their loved ones, especially our low income and/or disenfranchised residents with no means of long-distance transportation. Families from traditionally underserved and impoverished ethnic groups are significantly less able to remain connected to their loved one who is under treatment many hours away in a different part of the state, based on admittance to an appropriate treatment bed.

Currently, most Monterey County LPS clients and conservatees must wait for several weeks, and sometimes several months, for a bed an available bed at the MHRC level of care. This means clients and conservatees must either stay in an acute hospital bed or in jail (for persons referred for conservatorship from the criminal courts), while they are on a waiting list for placement. Many of these individuals may continue to cycle in and out of mental health care, hospitals, and the criminal justice system. If there is a an LPS Conserved patient in a psychiatric bed in a hospital awaiting placement, that hospital cannot serve another needy patient. At any given time, an average of 50 Monterey County residents are placed in facilities all over the state due to the lack of local infrastructure and the need to secure an appropriate treatment bed.

The proposed facility is sorely needed on the central coast to serve Monterey, San Benito, and San Luis

Obispo counties, and to accept overflow clients from Santa Cruz County, who otherwise are subject to out-of-county placements to receive intensive sub-acute treatment for serious mental illness. A central coast regional MHRC will provide the most appropriate and least restrictive treatment setting for supporting community integration, choice, autonomy, maintaining connection with family and natural supports, and helping individuals step down to unlocked levels of care as soon as possible. The client's natural support system will support the client's recovery and transitioning into unlocked levels of care. With a regional MHRC, families and individuals will be able to their maintain connection, the length of client stay in locked facilities is expected decrease, and treatment costs for counties and the state will decrease.

The proposed regional LPS MHRC will provide integrated crisis continuum and behavioral health continuum services under one roof with close proximity to mental health unit beds in a safety-net acute care hospital. The 24-hour BHUC will provide walk-in outpatient services including screening, assessment, crisis intervention, referral, and short-term treatment for traditional-age youth over age 18 and adults. The 75-80 bed LPS-MHRC will operate 24/7 with psychiatric, LCSW, and support/admin staff. A wing will be dedicated to Transition Aged Youth (age 18-25) and other wings for special populations such as elder adults or justice involved. The capacity will accommodate approximately 50-60 Monterey County clients with 25-30 overflow beds to serve neighboring counties. The proposed facility will also house Monterey County's mobile crisis and Crisis Call Center operations. The entire facility is designed to avoid involuntary hospitalization, psychiatric emergency room visits, homelessness, and incarceration.

Monterey County Health Department's funding application will help the Department of Health Care Services achieve their goal by:

- Investing in behavioral health and community care options that advance racial equity by providing a higher level of service for severe mental illness with the only MHRC in three adjoining counties on the central coast.
- Seeking geographic equity of behavioral health and community care options by drastically reducing the distance needed to serve seriously mentally ill clients on California's central coast.
- Addressing urgent gaps in the care continuum for people with behavioral health conditions, including seniors, adults with disabilities, children, and youth by allowing them uninterrupted care among their peers, and in their community.
- Increasing options across the life span that serve as an alternative to incarceration, hospitalization, homelessness, and institutionalization by diverting people with seriously mentally illness to a MHRC with appropriate levels of care.
- Meeting the needs of vulnerable clients with the greatest barriers to access, including people experiencing homelessness and justice involvement by diverting them into appropriate levels of care.
- Ensuring care can be provided in the least restrictive settings to support community integration, choice, and autonomy with a low-barrier, integrated MHRC on a campus that includes a county hospital and multiple behavioral health clinics.
- Leveraging county and Medi-Cal investments to support ongoing sustainability by reducing local and state costs associated with out-of-county care.
- Leveraging the historic state investments in housing and homelessness with an MHRC that can

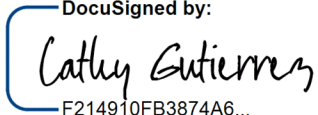
support seriously mentally ill clients in the central coast region.

A central coast regional MHRC would greatly benefit the people we serve, their families, and the operations of the Behavioral Health, Sheriff, Probation, and Public Guardian departments, and our local hospitals. San Benito and San Luis Obispo counties will further benefit by being able to secure beds near their home communities. Counties statewide will benefit when beds currently utilized by Monterey County residents become readily available.

MRHCs will improve a patient's ability to safely re-integrate into their home communities. Our goal is to help patients move towards living more independently, provide local rehabilitation services, and facilitate step-down to unlocked levels of care when possible. For these and all the reasons described above, we respectfully ask for your letter supporting the central Coast urge DHCS to sincerely consider this proposal for regional central coast MHRC funding.

Thank you,

DocuSigned by:

A blue DocuSign signature box containing a handwritten signature in black ink that reads "Cathy Gutierrez".

F214910FB3874A6...

Dr. Cathy Gutierrez, LCSW, PsyD

Chairperson, Monterey County Behavioral Health Commission



MONTEREY COUNTY

PROBATION DEPARTMENT

Office of the Chief

Todd Keating
Chief Probation Officer

Jose Ramirez
Assistant Chief Probation Officer

January 31, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

SUBJECT: Monterey County Regional MHRC Letter of Support

To whom it may concern:

On behalf of Monterey County Probation Department, I am pleased to write a letter in support of building a Mental Health Rehabilitation Center (MHRC) in Monterey County. A Regional MHRC facility in Monterey County would provide the following benefits:

A Regional MHRC will provide bed space for Monterey, San Benito, and San Luis Obispo County patients. Patients will be rehabilitated in Monterey County, rather than being transferred to other areas of the state. Patients will receive more timely access to treatment. (Current wait times to secure a patient bed providing this level of service is many months and, in some instances, more than a year.)

Patients will better connect to their families and local support bases and improve their ability to safely re-integrate into their home communities.

A Regional MHRC will help advance equity for behavioral health and community care options. It is currently a hardship for many historically underserved, ethnically and racially diverse families to travel to other parts of the state to visit and support their loved one.

The Monterey County Probation Department supports building a Regional MHRC in Monterey County and the application of funding to serve this purpose. We look forward to entering into this collaborative effort with Monterey County Behavioral Health and our community partners and providing the space for this much needed resource.

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Todd Keating
Chief Probation Officer

February 3, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

SUBJECT: Regional Monterey County MHRC Letter of support

To whom it may concern:

On behalf of Natividad, I am pleased to write a letter in support of building a Mental Health Rehabilitation Center (MHRC) in Monterey County. A Regional MHRC facility in Monterey County would provide the following benefits:

- A Regional MHRC will provide bed space for Monterey, San Benito, and San Luis Obispo county patients.
- Patients will be rehabilitated in Monterey County, rather than being transferred to other areas of the state.
- Patients will receive more timely access to treatment. (Current wait times to secure a patient bed providing this level of service is many months and, in some instances, more than a year.)
- Patients will better connect to their families and local support bases and improve their ability to safely re-integrate into their home communities.

A Regional MHRC will help advance equity for behavioral health and community care options. It is currently a hardship for many historically underserved, ethnically and racially diverse families to travel to other parts of the state to visit and support their loved one.

Natividad supports building a Regional MHRC in Monterey County and the application of funding to serve this purpose. We look forward to entering into this collaborative effort with Monterey County Behavioral Health and our community partners and providing the space for this much needed resource.

Sincerely,



Charles R. Harris, MD
Chief Executive Officer



**SAN BENITO COUNTY
BEHAVIORAL HEALTH DEPARTMENT**

ALAN YAMAMOTO, LCSW
Director

Mental Health • Substance Abuse
1131 Community Parkway • Hollister, CA 95023
Phone: 831-636-4020 Toll Free: 1-888-636-4020 Fax: 831-636-4025

March 30, 2022

Katy Eckert, Behavioral Health Bureau Chief
1270 Natividad Road
Salinas, CA 93906

Dear Ms. Eckert,

On behalf of San Benito County Behavioral Health, we are pleased to write a letter in support of building a Mental Health Rehabilitation Center (MHRC) in Monterey County.

Currently, San Benito County does not have a locked in-patient residential facility for the severely mentally ill and as a neighboring county, we believe this initiative would bring a great resource close to home for some of our clients. The Central Coast Region would also benefit significantly from this effort as many counties experience insufficient beds for clients, statewide. In state hospitals and other facilities, there is high demand to secure a patient bed and consequently there are long waiting lists.

An appropriate treatment center within Monterey County, will enhance resources for regional patients, and provide them links to their families and local support systems. A local MHRC will also improve a patient's ability to safely re-integrate into their home communities.

In our efforts to transition clients to the least restrictive setting in their recovery, a local MHRC would be beneficial to San Benito County since we tend to share a lot of the same clients with our surrounding county neighbors, including Monterey County.

San Benito County Behavioral Health would like to endorse building a MHRC in Monterey County and supports the application of funding to serve this purpose.

Thank you,

(Lj)

A blue ink signature of Alan Yamamoto, consisting of stylized initials and a surname.

Alan Yamamoto, LCSW

Director



COUNTY OF SAN LUIS OBISPO HEALTH AGENCY
BEHAVIORAL HEALTH DEPARTMENT

Anne Robin, LMFT Behavioral Health Director

To whom it may concern:

The County of San Luis Obispo's Behavioral Health Department/Health Agency, supports Monterey County Health Department's California Department of Health Care Services' Behavioral Health Continuum Infrastructure Program funding application that will enable the County to develop a regional Lanterman-Petris-Shoemaker (LPS) Mental Health Rehabilitation Center/Behavioral Health Urgent Care crisis continuum facility.

Neither Monterey, San Benito, nor San Luis Obispo counties have a residential Mental Health Rehabilitation Center (MHRC) for sub-acute mental health care causing regional residents to be transferred out of county to receive appropriate care. A lack of MHRC beds in our region creates high demand and long waiting lists for people who have serious mental illnesses. Our data indicate that clients are placed an average of 219 miles away (range 36 to 446 miles), which places an excessive burden on inpatient care clients and their loved ones, especially our low income and/or disenfranchised residents with no means of long-distance transportation. Families from traditionally underserved and impoverished ethnic groups are significantly less able to remain connected to their loved one who is under treatment many hours away in a different part of the state, based on admittance to an appropriate treatment bed.

Currently, San Luis Obispo County LPS conservatees must wait for several weeks, and sometimes several months, for a bed in an available bed at the MHRC level of care. This means LPS conservatees must either stay in an acute hospital bed or in jail (for persons referred for conservatorship from the criminal courts), while they are on a waiting list for placement. Many of these individuals may continue to cycle in and out of mental health care, hospitals, and the criminal justice system. If there is an LPS Conservated patient in a psychiatric bed in a hospital awaiting placement, that hospital cannot serve another needy patient. At any given time, an average of 75 San Luis Obispo County residents are placed in facilities all over the state due to the lack of local infrastructure and the need to secure an appropriate treatment bed.

The proposed facility is sorely needed on the central coast to serve Monterey, San Benito, and San Luis Obispo counties, and to accept overflow clients from Santa Cruz County, who otherwise are subject to out-of-county placements to receive intensive sub-acute treatment for serious mental illness. A central coast regional MHRC will provide the most appropriate and least restrictive treatment setting for supporting community integration, choice, autonomy, maintaining connection with family and natural supports, and helping individuals step down to unlocked levels of care as soon as possible. The client's natural support system will support the client's recovery and transitioning into unlocked levels of care. With a regional MHRC, families and individuals will be able to maintain connection, the length of client stay in locked facilities is expected to decrease, and treatment costs for counties and the state will decrease.

The proposed regional LPS MHRC will provide integrated crisis continuum and behavioral health continuum services under one roof with close proximity to mental health unit beds in a safety-net acute care hospital. The 24-hour BHUC will provide walk-in outpatient services including screening, assessment, crisis intervention, referral, and short-term treatment for traditional-age youth over age 18 and adults. The 75-80 bed LPS-MHRC will operate 24/7 with psychiatric, LCSW, and support/admin staff. A wing will be dedicated to Transition Aged Youth (age 18-25) and other wings for special populations such as elder adults or justice involved. The capacity will accommodate approximately 50-60 Monterey County clients with 25-30 overflow beds to serve neighboring

The Health Agency complies with Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex or any other protected class

County of San Luis Obispo Health Agency

2180 Johnson Avenue | San Luis Obispo, CA 93401 | (P) 805-781-4719 | (F) 805-781-1273
slobehavioralhealth.org

counties. The proposed facility will also house Monterey County's mobile crisis and Crisis Call Center operations. The entire facility is designed to avoid involuntary hospitalization, psychiatric emergency room visits, homelessness, and incarceration.

Our funding application will help to achieve the Department of Health Care Services achieve their goal by:

- Investing in behavioral health and community care options that advance racial equity by providing a higher level of service for severe mental illness with the only MHRC in three adjoining counties on the central coast.
- Seeking geographic equity of behavioral health and community care options by drastically reducing the distance needed to serve seriously mentally ill clients on California's central coast.
- Addressing urgent gaps in the care continuum for people with behavioral health conditions, including seniors, adults with disabilities, children, and youth by allowing them uninterrupted care among their peers, and in their community.
- Increasing options across the life span that serve as an alternative to incarceration, hospitalization, homelessness, and institutionalization by diverting people with seriously mentally illness to a MHRC with appropriate levels of care.
- Meeting the needs of vulnerable clients with the greatest barriers to access, including people experiencing homelessness and justice involvement by diverting them into appropriate levels of care.
- Ensuring care can be provided in the least restrictive settings to support community integration, choice, and autonomy with a low-barrier, integrated MHRC on a campus that includes a county hospital and multiple behavioral health clinics.
- Leveraging county and Medi-Cal investments to support ongoing sustainability by reducing local and state costs associated with out-of-county care.
- Leveraging the historic state investments in housing and homelessness with an MHRC that can support seriously mentally ill clients in the central coast region.

A central coast regional MHRC would greatly benefit the people we serve, their families, and the operations of the Behavioral Health, Sheriff, Probation, and Public Guardian departments, and our local hospitals. San Benito and San Luis Obispo counties will further benefit by being able to secure beds near their home communities. Counties statewide will benefit when beds currently utilized by central coast county residents can be placed closer to their home.

MHRCs will improve a patient's ability to safely re-integrate into their home communities. Our goal is to help patients move towards living more independently, provide local rehabilitation services, and facilitate step-down to unlocked levels of care when possible.

The County of San Luis Obispo is fully in support of this project.



Anne Robin, LMFT
Director, San Luis Obispo Behavioral Health



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Mendoza Jimenez, Director of Health

Administration Animal Services Behavioral Health Clinic Services
Emergency Medical Services Environmental Health Public Administrator/Public Guardian Public Health

January 24, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Monterey County application for partial Regional Mental Health Rehabilitation Center
Funding BHCIP Round 5

Monterey County is applying for \$15 million in Behavioral Health Continuum Infrastructure Program (BHCIP) funds to assist in the development of a \$40 million Regional Mental Health Rehabilitation Center (MHRC) to serve Monterey, San Benito, and San Luis Obispo counties.

Neither Monterey, San Benito, nor San Luis Obispo counties have a residential MHRC for sub-acute mental health conditions, causing regional resident to be transferred out-of-county to receive appropriate care. The lack of MHRC beds in our region creates high demand and long waiting lists for people needing residential treatment for serious mental illness. Local data indicate that clients are placed an average of 219 miles away from Monterey County (range 36 to 446 miles), which causes excessive burden on inpatient care clients and their families, especially affecting low income and/or disenfranchised residents with no means of long-distance transportation. Families from traditionally underserved and impoverished ethnic groups are significantly less able to remain connected to loved ones who are under treatment many hours away. in a different part of the state.

Currently, most Monterey, San Benito, and San Luis Obispo county clients and conservatees needing residential treatment must wait for several weeks, or sometimes several months, for a MHRC bed. This means clients and conservatees must either stay in an acute care hospital bed or in jail (for persons referred for conservatorship from the criminal courts), while they are on a waiting list for placement. At any given time, an average of 50 Monterey County residents are placed in facilities all over the state due to the lack of local MHRC infrastructure.

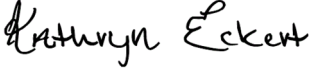
A central coast Regional MHRC will provide the most appropriate and least restrictive treatment setting for supporting community integration, choice, autonomy, and maintaining connection with family and natural supports, which helps individuals step down to unlocked levels of care as soon as possible. With a regional MHRC, the length of client stay in locked facilities is expected decrease, and treatment costs for counties and the state will decrease.

The proposed regional MHRC will provide integrated crisis continuum and behavioral health continuum services under one roof with close proximity to mental health unit beds in a safety-net acute care hospital. The 100-bed MHRC will operate 24/7 with psychiatric, licensed clinical social worker, and support/administration staff. A wing will be dedicated to Transition Aged

Kathryn Eckert, Behavioral Health, Behavioral Health Bureau Chief
1270 Natividad Road, Salinas, CA 93906 (831) 755-4580

Youth (age 18-25) and other wings for special populations such as elder adults and justice-involved clients. The capacity will accommodate approximately 60-75 Monterey County clients with 25-40 overflow beds to serve San Benito and San Luis Obispo counties. Facility services are intended to avoid involuntary hospitalizations, psychiatric emergency room visits, homelessness, and incarcerations.

A central coast Regional MHRC would greatly benefit the people we serve, their families, and the operations of the County Behavioral Health Bureau, Sheriff, Probation, and Public Guardian departments, city police departments, and our local hospitals. San Benito and San Luis Obispo counties will further benefit by being able to secure beds near their home communities. For these and all the reasons described above, we provide our support for Monterey County's request to develop a central coast Regional MHRC using BHCIP Round 5 funds.

DocuSigned by:

28307108AAD946F...

Kathryn Eckert
Behavioral Health Bureau Chief, Monterey County Behavioral Health Bureau



County of Santa Cruz

**HEALTH SERVICES AGENCY
BEHAVIORAL HEALTH**
1400 EMELINE AVENUE Santa Cruz, CA 95060
(831) 454-4170 FAX: (831) 454-4663 TDD:(800) 523-1786

February 6, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

SUBJECT: Monterey County MHRC Letter of support

To whom it may concern:

On behalf of the Santa Cruz County Health Services Agency, I am pleased to write this letter in support of building a Regional Mental Health Rehabilitation Center (MHRC) in Monterey County. A Regional MHRC facility in Monterey County would provide the following benefits:

- Adequate bed space for Monterey, San Benito, San Luis Obispo, and Santa Cruz County patients.
- Assisting in the rehabilitation of patients near their county of origin, rather than being transferred to other areas of the state.
- Allowing patients to receive more timely access to treatment. (Current wait times to secure a MHRC patient bed is many months, and in some instances, more than a year.)
- Improved connections between patients and their families and local support networks, which will improve patient's abilities to safely re-integrate into their home communities.
- Advanced equity for behavioral health and community care options. It is currently a hardship for many historically underserved, ethnically and racially diverse families to travel to other parts of the state to visit and support their loved one.

Santa Cruz County Health Services Agency supports building a Regional MHRC in Monterey County and the application of funding to serve this purpose. We look forward to entering into this collaborative effort with Monterey County Behavioral Health and other community partners in support of this much needed resource.

Sincerely,

DocuSigned by:
Tiffany Cantrell-Warren
89088AE6B9B64AF...

Tiffany Cantrell-Warren, MBA
Assistant Director
Interim Behavioral Health Director

MONTEREY COUNTY



COUNTY ADMINISTRATIVE OFFICE

SONIA M. DE LA ROSA
COUNTY ADMINISTRATIVE OFFICER

January 25, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

To whom it may concern:

The County of Monterey (the County) is seeking \$15 million in BHCIP funds to develop a \$40 million MHRC to serve Monterey, San Benito, and San Luis Obispo counties, none of which have a residential MHRC for sub-acute mental health conditions, causing the region's residents to be transferred out-of-county to receive appropriate care. The lack of these beds in our region creates high demand and long waitlists for individuals needing residential treatment for serious mental illness.

Local data indicates that individuals needing residential services are placed an average of 219 miles away from the County (range 36 to 446 miles), which causes excessive burden on the inpatient care clients and their families, especially affecting low income and/or disenfranchised residents with limited or no means of long-distance transportation and accommodations. Families in our region that are from traditionally underserved and impoverished ethnic groups are unable to remain connected to support the wellness of their loved ones who are receiving treatment in facilities many hours away.

Currently, most region clients and conservatees needing residential treatment must wait for several weeks or months for a MHRC bed. This results in having them stay in an acute care hospital bed or in custody (for persons referred for conservatorship from the criminal courts), while they are on a waitlist for the appropriate level of placement. At any given time, an average of 50 County residents are placed in facilities throughout the state due to the lack of regional MHRC infrastructure.

A central coast Regional MHRC, estimated at \$40 million, will provide the most appropriate and least restrictive treatment setting to support community reintegration, choice, autonomy, and to maintain connection with family and natural supports, which will help individuals receiving services transition to unlocked levels of care as soon as possible. With a regional MHRC, the length of client stay in secure locked facilities is expected decrease, and treatment costs for counties and the state will decrease.

The proposed regional MHRC will provide integrated crisis and behavioral health continuum services with proximity to mental health unit beds in a safety-net acute care hospital. The 100-bed MHRC will operate 24/7 with psychiatric, licensed clinical social worker, and support/administration staff. A wing will be dedicated to Transition Aged Youth (age 18-25) and other wings for special populations such as elder adults and justice-involved individuals. The capacity will accommodate approximately 60-75 County clients with 25-40 overflow beds to serve San Benito and San Luis Obispo counties. Facility services are intended to avoid and mitigate involuntary hospitalizations, psychiatric emergency room visits, homelessness, and incarcerations.

A central coast Regional MHRC would greatly benefit the people served, their families and natural supports, and the operations of the County Behavioral Health Bureau, Sheriff, Probation, and Public Guardian departments, city police departments, and local hospitals. San Benito and San Luis Obispo counties will benefit by securing beds near their home communities.

For these and all the reasons described above, we support the County's request to develop a central coast Regional MHRC using BHCIP Round 5 funds.

Sincerely,

A handwritten signature in blue ink, appearing to read "Sonia M. De La Rosa". The signature is fluid and cursive, with a large initial "S" and "M".

Sonia M. De La Rosa
County Administrative Officer

MONTEREY COUNTY



COUNTY ADMINISTRATIVE OFFICE

SONIA M. DE LA ROSA
COUNTY ADMINISTRATIVE OFFICER

January 25, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

To whom it may concern:

The County of Monterey (the County) is seeking \$15 million in BHCIP funds to develop a \$40 million MHRC to serve Monterey, San Benito, and San Luis Obispo counties, none of which have a residential MHRC for sub-acute mental health conditions, causing the region's residents to be transferred out-of-county to receive appropriate care. The lack of these beds in our region creates high demand and long waitlists for individuals needing residential treatment for serious mental illness.

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Sincerely,

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Sonia M. De La Rosa
County Administrative Officer



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration
Behavioral Health

Clinic Services
Emergency Medical Services
Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Nationally Accredited for Providing Quality Health Services

February 1, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

SUBJECT: Monterey County MHRC Letter of support

To Whom it May Concern:

On behalf of Monterey County's Public Administrator/Guardian/Conservator Office, I am pleased to write this letter in support of building a Regional Mental Health Rehabilitation Center (MHRC) in Monterey County. A Regional MHRC facility in Monterey County would provide the following benefits:

- Adequate bed space for Monterey, San Benito, and San Luis Obispo County patients.
- Assisting in the rehabilitation of patients in Monterey County, rather than being transferred to other areas of the state.
- Allowing patients to receive more timely access to treatment. (Current wait times to secure a MHRC patient bed is many months, and in some instances, more than a year.)
- Improved connections between patients and their families and local support networks, which will improve patient's abilities to safely re-integrate into their home communities.
- Advanced equity for behavioral health and community care options. It is currently a hardship for many historically underserved, ethnically and racially diverse families to travel to other parts of the state to visit and support their loved one.

Monterey County's Public Administrator/Guardian/Conservator Office supports building a Regional MHRC in Monterey County and the application of funding to serve this purpose. We look forward to entering into this collaborative effort with Monterey County Behavioral Health and other community partners in support of this much needed resource.

Sincerely,

A handwritten signature in blue ink, appearing to read "Sarah Solano".

Sarah Solano, Chief Deputy
Monterey County Public Administrator/Public Guardian/Public Conservator
1441 Schilling Place, Salinas, CA 93901 - Phone (831) 883-7585 FAX (831) 775-8075



MONTEREY COUNTY, CALIFORNIA
SHERIFF'S OFFICE

Keeping the peace since 1850

Tina M. Nieto
Sheriff-Coroner

February 2, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

SUBJECT: Monterey County MHRC Letter of Support

To Whom It May Concern:

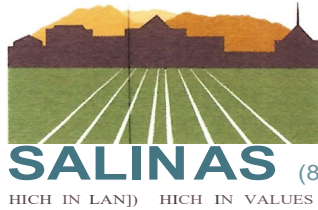
On behalf of the Monterey County Sheriffs Office, I am pleased to write a letter in support of building a Mental Health Rehabilitation Center (MHRC) in Monterey County. A Regional MHRC facility in Monterey County would provide the following benefits:

- A Regional MHRC will provide bed space for Monterey, San Benito, and San Luis Obispo County patients.
- Patients will be rehabilitated in Monterey County, rather than being transferred to other areas of the state.
- Patients will receive more timely access to treatment. (Current wait times to secure a patient bed providing this level of service is many months and, in some instances, more than a year.)
- Patients will better connect to their families and local support bases and improve their ability to safely re-integrate into their home communities.
- A Regional MHRC will help advance equity for behavioral health and community care options. It is currently a hardship for many historically underserved, ethnically and racially diverse families to travel to other parts of the state to visit and support their loved one.

The Monterey County Sheriffs Office supports building a Regional MHRC in Monterey County and the application of funding to serve this purpose. We look forward to entering into this collaborative effort with Monterey County Behavioral Health and our community partners in an effort to provide the space for this much needed resource.

Sincerely,

Tina M. Nieto
Sheriff-Coroner



City of Salinas

OFFICE OF THE MAYOR • 200 Lincoln Ave • Salinas, California 93901

(831) 758-7201 • (831) 758-7368 (Fax) • www.ci.salinas.ca.us

January 31, 2023

California Department of Health Care Services
1501 Capitol Avenue
Sacramento, CA 95814

Re: Application for Partial Regional Mental Health Rehabilitation Center (MHRC) Funding
Behavioral Health Continuum Infrastructure Program (BHCIP) Round 5

SUBJECT: Monterey County MHRC Letter of Support

To whom it may concern:

On behalf of the City of Salinas, I am pleased to write this letter in support of building a Regional Mental Health Rehabilitation Center (MHRC) in Monterey County. A Regional MHRC facility in Monterey County would provide the following benefits:

A Regional MHRC will provide bed space for Monterey, San Benito, and San Luis Obispo County patients.

Patients will be rehabilitated in Monterey County, rather than being transferred to other areas of the state.

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Patients will better connect to their families and local support bases and improve their ability to safely re-integrate into their home communities.

A Regional MHRC will help advance equity for behavioral health and community care options. It is currently a hardship for many historically underserved, ethnically and racially diverse families to travel to other parts of the state to visit and support their loved one.

The City of Salinas supports building a Regional MHRC in Monterey County and the application of funding to serve this purpose. We look forward to entering into this collaborative effort with Monterey County Behavioral Health and our community partners in support of this much needed resource.

Sincerely,

Kimbley Craig
Mayor of Salinas