

**MEMORANDUM OF UNDERSTANDING BETWEEN THE
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT
AND CALIFORNIA STATE UNIVERSITY OF CHANNEL ISLANDS
FOR CREATING A MENTAL HEALTH PEER WELLNESS CENTER**

I. BACKGROUND AND INTENT

This Memorandum of Understanding (MOU) is entered into between the Ventura County Behavioral Health Department (VCBH) and the California State University of Channel Islands (CSUCI).

WHEREAS, VCBH, a department of the Health Care Agency (HCA), will collaborate with CSUCI to develop behavioral health services and centers on the CSUCI campus.

WHEREAS, the sole purpose of this MOU is to confirm collaboration among the parties to develop and expand a peer services wellness center.

WHEREAS, VCBH will provide funding to support the CSUCI Counseling and Psychological Services (CAPS) Mental Health Peer Program (MHPP) to promote wellbeing, promote mental health services, and improve accessibility to CSUCI students.

WHEREAS, VCBH recognizes the importance of collaboration with CSUCI to develop peer services aimed at supporting mental health support on the campus.

WHEREAS, utilizing peers can increase awareness of, and access to, mental health services, addressing treatment barriers.

WHEREAS, peer services can support the destigmatization of mental health conditions, promoting treatment-seeking behavior and supporting early intervention efforts that can reduce the occurrence of serious mental health conditions.

WHEREAS, Mental health peers services act as an essential source of support, especially for young adults attending college where different challenges like loneliness and isolation can occur.

Therefore, VCBH and CSUCI agree that it is in the best interests of all concerned to enter this MOU.

II. DEFINITIONS

Peer services support: Initiatives, programs, events, or activities that utilize peers to support the goals of this project.

Awareness and Access: The promotion of knowledge about mental health services and the enhancement of opportunities for individuals to obtain and utilize these services effectively.

Destigmatization of Mental Health: The process of reducing societal stigma and discrimination associated with mental health conditions and seeking mental health treatment, through education, advocacy, and positive messaging.

Mental Health Conditions: Mental health conditions encompass a variety of disorders affecting mood, cognition, and behavior, requiring understanding, support, and often professional intervention for effective management and improved quality of life. These can include, but are not limited to bipolar disorder, depression, anxiety, post-traumatic stress disorder, schizophrenia, and substance use disorder.

Mental Health Initiatives: Efforts, programs, or interventions aimed at improving mental health outcomes, addressing mental health challenges, and supporting the wellbeing of individuals and communities.

Prevention and Early Intervention: Strategies and activities aimed at identifying and addressing mental health challenges at an early stage to prevent their escalation and reduce their impact on individuals and communities.

III. PROJECT PURPOSE, GOALS, AND DATA COLLECTION REQUIREMENTS

Overall purpose and goals of this project:

1. Prevention and early intervention (PEI): Utilize peer services to promote mental wellbeing and identify issues early, preventing more severe mental health conditions in the future.
2. Increase awareness and access: Outreach to college students via peer services to promote mental health services and improve accessibility.
3. Destigmatization of mental health conditions and seeking treatment: Use student peers to challenge stereotypes and encourage conversations about mental health, promoting help-seeking behavior and broader acceptance of mental health conditions.
4. Evaluate the outcomes of project elements and determine the effectiveness of achieving desired goals.

Learning Goals:

1. Improve student's subjective reports of enhanced mental health and well-being.
2. Increase Year 1 - Year 2 retention by focusing on outreach to first year students.
3. Provide focused outreach to students at higher risk for not graduating, including first generation college students, students with disabilities, students who identify with the lesbian, gay, bisexual, transgender, questioning (LGBTQ+) community, students of color, and immigrant students.

Methods of Data Collection:

1. CSUCI student identification card swipes for MHPP utilization.
2. Peer consultation questionnaire regarding presenting concerns.

3. Self-report questionnaires about well-being.
4. Satisfaction surveys regarding CAPS & MHPP.
5. Focus groups.

IV. ROLES AND RESPONSIBILITIES

It is understood that VCBH and CSUCI staff shall work together as a team to effectively meet the needs of this project. This level of collaboration will require thorough and timely communication among all parties.

A. VCBH Responsibilities:

- a. Determine the project parameters, requirements, and limitations, including, but not limited to, compliance with all Mental Health Services Act (MHSA) rules and regulations, Health Insurance Portability and Accountability Act (HIPAA), and the review and/or development of all evaluative materials to meet MHSA requirements.
- b. Monitoring the progress and performance of the project, including regular communication with CSUCI, site visits, progress reporting, and performance evaluation to ensure that the project is meeting its goals and objectives.

B. CSUCI Responsibilities:

- a. Develop and implement project aimed at supporting mental health initiatives in Ventura County through peer services and cultural practice at CSUCI, as approved by VCBH.
- b. Oversee all aspects of the project implementation, including coordinating project activities, procurement, managing project staff and contractors, and ensuring that all timelines and deliverables are met.
- c. Provide financial management of project, ensuring that the funds provided by VCBH are utilized effectively and efficiently to achieve project goals. CSUCI will follow all County policies and procedures, maintain accurate financial records, and adhere to reporting requirements.
- d. Ensure that project complies with all applicable laws, regulations, and funding requirements, including HIPAA regulations, if applicable.
- e. Work with VCBH to meet project reporting requirements.

V. FUNDING

VCBH will transfer payments up to \$200,000 to CSUCI by June 30, 2026 on a quarterly basis, as invoiced by CSUCI, and per the budgets specified in Exhibit “A” (Budget). These payments shall cover the cost of the following project costs:

1. Contracts with peer services and culture service providers
2. Marketing and outreach
3. Salaries and administration
4. Supplies, miscellaneous, and contingency costs

Payment shall be made upon the submission of approved invoices to VCBH, and in accordance with the operational budgets in Exhibit "A". CSUCI shall bill VCBH quarterly in arrears by using CSUCI's invoice form. All invoices submitted shall clearly reflect all required information regarding the services for which claims are made, in the form and with the content specified by VCBH. CSUCI shall submit appropriate documentation along with an invoice for reimbursement. Invoices for reimbursement shall be completed by CSUCI, dated, and forwarded to VCBH within ten (10) working days after the close of the quarter in which services were rendered. Incomplete or incorrect claims shall be returned to CSUCI for correction and re-submittal and will result in payment delay. Late invoices will also result in payment delay. Following receipt of a complete and correct monthly invoice and approval by VCBH, CSUCI shall then be paid within forty-five (45) business days of submission of a valid invoice to the VCBH.

If CSUCI responsibilities are not completed by June 30, 2026, funding will need to be returned to VCBH within sixty (60) days as the scope of the Mental Health Services Oversight and Accountability Commission (MHSOAC) agreement must be fulfilled or the funds may revert to the State.

VI. PRIVACY

VCBH and CSUCI will comply with all state and federal privacy laws including, but not limited to the California Welfare and Institutions Code, the Confidentiality of Medical Information Act, the HIPAA, patient confidentiality concerning substance use disorder treatment located at 42 CFR Part 2, and the Security Rule located at 45 CFR Part 160 and 164 Subpeer services A and C. Compliance will be achieved with the use of informed consent forms, which comply with all applicable state and federal law and/or by requiring that data sharing is unidirectional, such that no confidential and/or legally protected individually identifiable information will be shared with entities outside VCBH and CSUCI.

VII. GENERAL TERMS

Term. This MOU is effective from November 1, 2024 through June 30, 2026. This Agreement may be amended upon mutual agreement of the parties.

Termination. Either party may terminate this MOU at any time, with or without cause, by giving thirty (30) days written notice to the other party.

Severability. In the event any provision of this MOU shall be found to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect the validity, legality and enforceability of the remainder of the MOU.

Dispute Resolute. The parties agree that disputes between them related to this MOU shall be subject to the following procedures:

- A. The aggrieved party shall notify the other party (i.e., the responding party), in writing in sufficient detail to clearly identify the problem(s) giving rise to the dispute and the desired

solution. The written problem notification will be submitted to the assigned Administrator in the VCBH Provider Network Operations (PNO) Unit.

- B. The responding party shall respond to the written problem notification within fourteen (14) business days to resolve the issue quickly and appropriately. Should a meeting be needed to discuss and resolve the issue, additional time may be provided to coordinate the meeting and will be scheduled and coordinated by the assigned PNO Unit Administrator.
- C. In developing a solution to any dispute, each party agrees to work cooperatively together to find an appropriate and timely solution.

IN WITNESS WHEREOF, the parties have executed this MOU through their duly authorized representatives as of the dates written below.

Ventura County Behavioral Health
Loretta L. Denering, DrPH, MS, Director

Date

California State University Channel Islands
Bradly Olin, Vice President for Business and Financial Affairs

Date

**EXHIBIT “A”
BUDGETS**

A. FY 2024-25 Budget

ID	BUDGET LINE ITEM	FY 2024-25 BUDGET
I	DIRECT OPERATING EXPENSES SALARIES & BENEFITS	
a	Staff, see Salaries and Benefit Tab	\$0
	Salaries Sub Total	\$0
	Benefits	\$0
	Sub Total Salaries & Benefits	\$0
II	DIRECT OPERATING EXPENSES	
A	Create the CAPS Peer Support (BTE 1802) Well-Being Center	
a	Patch & Paint	\$2,000
b	Rug, pictures and sound proofing décor	\$5,000
c	Furniture	\$15,000
d	Lighting	\$1,000
e	Event equipment (canopy, tablecloths, etc.)	\$15,000
	Sub Total	\$38,000
B	Update Well-Being Group Support Room (BTE 1804)	
a	Patch & Paint	\$2,000
b	Rug, pictures and sound proofing décor	\$5,000
c	Furniture	\$20,000
d	Lighting	\$2,000
	Sub Total	\$29,000
C	Program Expense	
a	Events (e.g., Center Grand Opening; Greetings & Gratitude with Grace)	\$10,000
b	Integrated sound system for Well-Being Spaces	\$5,000
c	Promotional Items	\$18,000
	Sub Total Program Expense	\$33,000
	Sub Total Section II	\$100,000
	Direct Operating Expense Total	\$100,000

III	INDIRECT COSTS / ADMINISTRATION	
a		\$0
	Section III Subtotal	\$0
	Sub Total Indirect Costs	\$0
	FY 2024-25 Contract Maximum	\$100,000

B. FY 2025-26 Budget

ID	BUDGET LINE ITEM	FY 2025-26 BUDGET
I	DIRECT OPERATING EXPENSES SALARIES & BENEFITS	
a	Student Assistant Salary	\$15,000
	Salaries Sub Total	\$15,000
	Benefits	\$0
	Sub Total Salaries & Benefits	\$15,000
II	DIRECT OPERATING EXPENSES	
A	Re-design CAPS waiting room	
a	Rug, pictures and sound proofing décor	\$5,000
b	Furniture	\$10,000
c	Lighting	\$1,000
d	Paint	\$3,000
	Sub Total	\$19,000
B	Update Well-Being Group Support Room (BTE 1804)	
a		\$0
	Sub Total	\$0
C	Program Expense	
a	Promotional Items	\$15,000
b	Educational Brochures	\$7,000
c	Technology	\$4,000
d	Educational Apps	\$15,000
e	Lighting	\$1,000
f	Professional development	\$15,000
g	Self-help workbooks	\$5,000
h	Hallway Décor	\$4,000
	Sub Total Program Expense	\$66,000
	Sub Total Section II	\$85,000

	Direct Operating Expense Total	\$100,000
III	INDIRECT COSTS / ADMINISTRATION	
a		\$0
	Section III Subtotal	\$0
	Sub Total Indirect Costs	\$0
	FY 2025-26 Contract Maximum	\$100,000

C. Budgetary Line-Item Adjustments

Budgetary line-item adjustments must be pre-approved by the COUNTY. CONTRACTOR must provide advance notice to COUNTY of the need for a budgetary line-item adjustment and submit all documentation and information needed to evaluate and support the budgetary line-item adjustment. Upon approval from the COUNTY, adjustments to budgetary line items will be subject to any conditions imposed by COUNTY. Any approved increase to a budgetary line-item must identify a corresponding decrease to ensure that the total contract maximum, as set forth in this Agreement, is not exceeded. Budgetary line-item adjustments that exceed 10% will require an amendment.

D. Travel

Travel will be reimbursed according to COUNTY travel reimbursement policies. Mileage will be reimbursed at the IRS rate approved and in effect at the time of travel and following COUNTY travel policies.