

Iowa

UNIFORM APPLICATION

FY 2016/2017 - STATE BEHAVIORAL HEALTH ASSESSMENT
AND PLAN

COMMUNITY MENTAL HEALTH SERVICES
BLOCK GRANT

OMB - Approved 06/12/2015 - Expires 06/30/2018
(generated on 08/31/2016 5.24.44 PM)

Center for Mental Health Services
Division of State and Community Systems Development

State Information

State Information

Plan Year

Start Year 2017

End Year 2018

State DUNS Number

Number 137348624

Expiration Date

I. State Agency to be the Grantee for the Block Grant

Agency Name Iowa Department of Human Services

Organizational Unit Division of Mental Health and Disability Services

Mailing Address 1305 E. Walnut

City Des Moines, IA

Zip Code 50319

II. Contact Person for the Grantee of the Block Grant

First Name Charles

Last Name Palmer

Agency Name Iowa Department of Human Services

Mailing Address 1305 E. Walnut

City Des Moines

Zip Code 50319

Telephone 515-281-5452

Fax

Email Address cpalmer1@dhs.state.ia.us

III. Expenditure Period

State Expenditure Period

From

To

IV. Date Submitted

Submission Date 8/31/2016 5:24:31 PM

Revision Date

V. Contact Person Responsible for Application Submission

First Name Laura

Last Name Larkin

Telephone 5152425880

Fax 5152426036

Email Address llarkin@dhs.state.ia.us

Footnotes:



State Information

Chief Executive Officer's Funding Agreement - Certifications and Assurances / Letter Designating Signatory Authority

Fiscal Year 2017

U.S. Department of Health and Human Services
 Substance Abuse and Mental Health Services Administrations
 Funding Agreements
 as required by
 Community Mental Health Services Block Grant Program
 as authorized by
 Title XIX, Part B, Subpart II and Subpart III of the Public Health Service Act
 and
 Title 42, Chapter 6A, Subchapter XVII of the United States Code

Title XIX, Part B, Subpart II of the Public Health Service Act		
Section	Title	Chapter
Section 1911	Formula Grants to States	42 USC § 300x
Section 1912	State Plan for Comprehensive Community Mental Health Services for Certain Individuals	42 USC § 300x-1
Section 1913	Certain Agreements	42 USC § 300x-2
Section 1914	State Mental Health Planning Council	42 USC § 300x-3
Section 1915	Additional Provisions	42 USC § 300x-4
Section 1916	Restrictions on Use of Payments	42 USC § 300x-5
Section 1917	Application for Grant	42 USC § 300x-6
Title XIX, Part B, Subpart III of the Public Health Service Act		
Section 1941	Opportunity for Public Comment on State Plans	42 USC § 300x-51
Section 1942	Requirement of Reports and Audits by States	42 USC § 300x-52
Section 1943	Additional Requirements	42 USC § 300x-53
Section 1946	Prohibition Regarding Receipt of Funds	42 USC § 300x-56
Section 1947	Nondiscrimination	42 USC § 300x-57
Section 1953	Continuation of Certain Programs	42 USC § 300x-63
Section 1955	Services Provided by Nongovernmental Organizations	42 USC § 300x-65
Section 1956	Services for Individuals with Co-Occurring Disorders	42 USC § 300x-66

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685- 1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non- discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327- 333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Costal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g)

protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§ 469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
16. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
17. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

LIST of CERTIFICATIONS

1. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93). By signing and submitting this application, the applicant is providing certification set out in Appendix A to 45 CFR Part 93.

2. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Department of Health and Human Services terms and conditions of award if a grant is awarded as a result of this application.

3. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the applicant organization certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children's services and that all sub-recipients shall certify accordingly.

The Department of Health and Human Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the DHHS mission to protect and advance the physical and mental health of the American people.

I hereby certify that the state or territory will comply with Title XIX, Part B, Subpart II and Subpart III of the Public Health Service (PHS) Act, as amended, and summarized above, except for those sections in the PHS Act that do not apply or for which a waiver has been granted or may be granted by the Secretary for the period covered by this agreement.

I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Charles M. Palmer

Signature of CEO or Designee¹: _____

Title: Director, Iowa Department of Human Services

Date Signed: _____

mm/dd/yyyy

¹If the agreement is signed by an authorized designee, a copy of the designation must be attached.

Footnotes:



TERRY E. BRANSTAD
GOVERNOR

OFFICE OF THE GOVERNOR

KIM REYNOLDS
LT. GOVERNOR

May 17, 2011

Barbara Orlando
Grants Management Officer, Division of Grants Management
Substance Abuse and Mental Health Services Administration
One Choke Cherry Road
Room 7-1091
Rockville, MD 20857

Dear Ms. Orlando:

This letter designates Charles M. Palmer, Director of the Iowa Department of Human Services, to function as my designee for the following programs for as long as I remain Governor of the State of Iowa and Mr. Palmer remains Director of the Iowa Department of Human Services.

1. Charles M. Palmer is authorized to function as my designee for all activities related to the Substance Abuse and Mental Health Services Administration (SAMHSA) Community Mental Health Block Grant.
2. Charles M. Palmer is authorized to function as my designee for all activities related to the SAMHSA Projects for Assistance in Transition from Homelessness (PATH).

Please contact my office if you have any questions.

Sincerely,

Terry E. Branstad
Governor of Iowa

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2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
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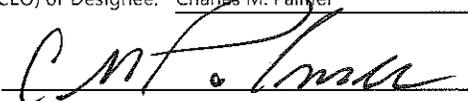
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I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Charles M. Palmer

Signature of CEO or Designee¹: 

Title: Director, Iowa Department of Human Services

Date Signed: 8-29-16

mm/dd/yyyy

¹If the agreement is signed by an authorized designee, a copy of the designation must be attached.

State Information

Disclosure of Lobbying Activities

To View Standard Form LLL, Click the link below (This form is OPTIONAL)

[Standard Form LLL \(click here\)](#)

Name

Title

Organization

Signature: _____ Date: _____

Footnotes:

Planning Tables

Table 2 State Agency Planned Expenditures

Planning Period Start Date: 7/1/2016 Planning Period End Date: 6/30/2017

Activity (See instructions for using Row 1.)	A.Substance Abuse Block Grant	B.Mental Health Block Grant	C.Medicaid (Federal, State, and Local)	D.Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E.State Funds	F.Local Funds (excluding local Medicaid)	G.Other
1. Substance Abuse Prevention* and Treatment							
a. Pregnant Women and Women with Dependent Children*							
b. All Other							
2. Substance Abuse Primary Prevention							
3. Tuberculosis Services							
4. HIV Early Intervention Services							
5. State Hospital			\$0	\$0	\$0	\$0	\$0
6. Other 24 Hour Care		\$0	\$0	\$0	\$0	\$0	\$0
7. Ambulatory/Community Non-24 Hour Care		\$3,443,518	\$0	\$0	\$0	\$0	\$0
8. Mental Health Primary Prevention**		\$0	\$0	\$0	\$0	\$0	\$0
9. Evidenced Based Practices for First Episode Psychosis (10% of the state's total MHBG award)		\$405,119	\$0	\$0	\$0	\$0	\$0
10. Administration (Excluding Program and Provider Level)		\$202,559	\$0	\$0	\$0	\$0	\$0
11. Total	\$0	\$4,051,196	\$0	\$0	\$0	\$0	\$0

* Prevention other than primary prevention

** It is important to note that while a state may use state or other funding for these services, the MHBG funds must be directed toward adults with SMI or children with SED.

Footnotes:

This is an estimate based on the estimated FY17 allotment.

Planning Tables

Table 6b MHBG Non-Direct Service Activities Planned Expenditures

Planning Period Start Date: 7/1/2016 Planning Period End Date: 6/30/2017

Service	Block Grant
MHA Technical Assistance Activities	
MHA Planning Council Activities	
MHA Administration	
MHA Data Collection/Reporting	
MHA Activities Other Than Those Above	
Total Non-Direct Services	\$0
Comments on Data: <input data-bbox="100 911 1521 940" type="text"/>	
Footnotes:	

Environmental Factors and Plan

22. State Behavioral Health Planning/Advisory Council and Input on the Mental Health/Substance Abuse Block Grant Application

Narrative Question:

Each state is required to establish and maintain a state Mental Health Planning/Advisory Council for adults with SMI or children with SED. To meet the needs of states that are integrating mental health and substance abuse agencies, SAMHSA is recommending that states expand their Mental Health Advisory Council to include substance abuse, referred to here as a Behavioral Health Advisory/Planning Council (BHPC). SAMHSA encourages states to expand their required Council's comprehensive approach by designing and implementing regularly scheduled collaborations with an existing substance abuse prevention and treatment advisory council to ensure that the council reviews issues and services for persons with, or at risk for, substance abuse and substance use disorders. To assist with implementing a BHPC, SAMHSA has created [Best Practices for State Behavioral Health Planning Councils: The Road to Planning Council Integration](#).⁹⁷

Additionally, [Title XIX, Subpart III, section 1941 of the PHS Act \(42 U.S.C. 300x-51\)](#) applicable to the SABG and the MHBG, requires that, as a condition of the funding agreement for the grant, states will provide an opportunity for the public to comment on the state block grant plan. States should make the plan public in such a manner as to facilitate comment from any person (including federal, tribal, or other public agencies) both during the development of the plan (including any revisions) and after the submission of the plan to SAMHSA.

For SABG only - describe the steps the state took to make the public aware of the plan and allow for public comment.

For MHBG and integrated BHPC: States must include documentation that they shared their application and implementation report with the Planning Council; please also describe the steps the state took to make the public aware of the plan and allow for public comment.

SAMHSA requests that any recommendations for modifications to the application or comments to the implementation report that were received from the Planning Council be submitted to SAMHSA, regardless of whether the state has accepted the recommendations. The documentation, preferably a letter signed by the Chair of the Planning Council, should state that the Planning Council reviewed the application and implementation report and should be transmitted as attachments by the state.

Please consider the following items as a guide when preparing the description of the state's system:

1. How was the Council actively involved in the state plan? Attach supporting documentation (e.g., meeting minutes, letters of support, etc.).
2. What mechanism does the state use to plan and implement substance abuse services?
3. Has the Council successfully integrated substance abuse prevention and treatment or co-occurring disorder issues, concerns, and activities into its work?
4. Is the membership representative of the service area population (e.g., ethnic, cultural, linguistic, rural, suburban, urban, older adults, families of young children)?
5. Please describe the duties and responsibilities of the Council, including how it gathers meaningful input from people in recovery, families and other important stakeholders, and how it has advocated for individuals with SMI or SED.

*Additionally, please complete the Behavioral Health Advisory Council Members and Behavioral Health Advisory Council Composition by Member Type forms.*⁹⁸

⁹⁷<http://beta.samhsa.gov/grants/block-grants/resources>

⁹⁸There are strict state Council membership guidelines. States must demonstrate: (1) the involvement of people in recovery and their family members; (2) the ratio of parents of children with SED to other Council members is sufficient to provide adequate representation of that constituency in deliberations on the Council; and (3) no less than 50 percent of the members of the Council are individuals who are not state employees or providers of mental health services.

Please use the box below to indicate areas of technical assistance needed related to this section:

Footnotes:

Environmental Factors and Plan

Behavioral Health Advisory Council Members

Start Year: 2017 End Year: 2018

Name	Type of Membership	Agency or Organization Represented	Address,Phone, and Fax	Email(if available)
Teresa Bomhoff	Family Members of Individuals in Recovery (to include family members of adults with SMI)		200 S.W. 42nd Street Des Moines IA, 50312 PH: 515-274-6876	tbomhoff@mchsi.com
Kenneth Briggs, Jr.	Family Members of Individuals in Recovery (to include family members of adults with SMI)		1701 Campus Drive Clive IA, 50324 PH: 515-221-4560	kebriggs@earthlink.net
Jim Chesnik	State Employees	Iowa Department of Human Services	Hoover State Office Bldg., 5th Floor Des Moines IA, 50319 PH: 515-281-9368	jchesni@dhs.state.ia.us
Jim Cornick	Others (Not State employees or providers)		624 Glenview Drive Des Moines IA, 50312 PH: 515-255-4932	jcornick@mchsi.com
Jim Donoghue	State Employees	Iowa Department of Education	Grimes Bldg Des Moines IA, 50319 PH: 515-281-8505	Jim.donoghue@iowa.gov
Julie Gfeller	Others (Not State employees or providers)		5912 Lincoln Way Ames IA, 50014 PH: 641-751-5608	julieabaird@gmail.com
Kathleen Goines	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		129 West High Street Villisca IA, 50864	Kathleen@waubonsiemhc.com
Kris Graves	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		2631 Lakeside Drive #1 Iowa City IA, 52404 PH: 319-354-3155	kgraves@live.com
Dr. Jerome Greenfield	State Employees	Iowa Department of Corrections	Iowa Medical and Classification Center Oakdale IA, 52319 PH: 515-725-5289	jerome.greenfield@iowa.gov
Julie Kalambokidis	Parents of children with SED		6 North Hazel Glenwood IA, 51534 PH: 712-527-4188	Embracellc@yahoo.com
Michael Kaufmann	State Employees		Independence Mental Health Institute Independence IA, 50644 PH: 319-334-2583	MKaufma@dhs.state.ia.us
Anna Killpack	Parents of children with SED		32356 270th St. Neola IA, 51559	

Sharon Lambert	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		719 13th Ave Coralville IA, 52441 PH: 563-499-3502	Lambertsha@gmail.com
Todd Lange	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		225 West 6th Street Dubuque IA, 52001 PH: 563-564-2933	tjlange1@yahoo.com
Amber Lewis	State Employees	Iowa Finance Authority	2015 Grand Ave. Des Moines IA, 50312 PH: 515-725-4900	Amber.lewis@iowa.gov
Craig Matzke	Providers	Iowa Law Enforcement Academy	3514 SW 34th St. Des Moines IA, 50321	
LeeAnn Moskowitz	State Employees		Iowa Medicaid Enterprise Des Moines IA, 50315 PH: 515-256-4653	lmoskow@dhs.state.ia.us
Todd Noack	Parents of children with SED		414 6th Street DeWitt IA, 52742 PH: 563-256-4653	noacktodd@gmail.com
Tammy Nyden	Parents of children with SED	NAMI	2512 Princeton Road Iowa City IA, 52245	namiiowacmhc@mediacombb.net
Donna Richard-Langer	Providers		4105 Bel Air Drive Urbandale IA, 50323 PH: 515-278-7010	drldkl@msn.com
Brad Richardson	State Employees	University of Iowa School of Social Work	Research Park, W206 Oakdale Hall Iowa City IA, 52242 PH: 515-953-1990	Brad-richardson@uiowa.edu
James W. Rixner	Family Members of Individuals in Recovery (to include family members of adults with SMI)		114 Midvale Avenue Sioux City IA, 51104 PH: 712-258-7855	jrwx@aol.com
Lee Ann Russo	State Employees	Iowa Vocational Rehabilitation Services		Leeann.russo@iowa.gov
Christina Scharck	Providers		110 East Main Street Ottumwa IA, 52501 PH: 641-682-8772	simhc@lisco.com
Dennis Sharp	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		1106 4th Street Sioux City IA, 51101 PH: 712-899-2809	Dennissharp2007@yahoo.com
Rhonda Shouse	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		530 Bentley Drive. #2 Marion IA, 52302	Rhonda_shouse@yahoo.com
D.J Swope	State Employees	Iowa Department on Aging	Des Moines IA,	djswope@iowa.gov
Michele Tilotta	State Employees	Iowa Department of Public Health, Division of Behavioral Health	321 E. 12th Street Des Moines IA, 50319 PH: 515-371-1564	Michele.tilotta@idph.iowa.gov

Jennifer Vitko	Others (Not State employees or providers)	South Central Iowa Behavioral Health Region	Ottumwa IA, 52501	jvitko@wapellocounty.org
Tracy White	Parents of children with SED		901 W. Tarkio St. Clarinda IA, 51632 PH: 712-542-7492	712tracy@gmail.com
Kimberly Wilson	Others (Not State employees or providers)		2510 320th StreetSpencer IA, 51301 PH: 712-262-9438	kwilson@co.clay.ia.us

Footnotes:

Environmental Factors and Plan

Behavioral Health Council Composition by Member Type

Start Year: 2017 End Year: 2018

Type of Membership	Number	Percentage
Total Membership	33	
Individuals in Recovery* (to include adults with SMI who are receiving, or have received, mental health services)	6	
Family Members of Individuals in Recovery* (to include family members of adults with SMI)	3	
Parents of children with SED*	5	
Vacancies (Individuals and Family Members)	2	
Others (Not State employees or providers)	4	
Total Individuals in Recovery, Family Members & Others	20	60.61%
State Employees	10	
Providers	3	
Federally Recognized Tribe Representatives	0	
Vacancies	0	
Total State Employees & Providers	13	39.39%
Individuals/Family Members from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Providers from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Total Individuals and Providers from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Persons in recovery from or providing treatment for or advocating for substance abuse services	1	

* States are encouraged to select these representatives from state Family/Consumer organizations.

Indicate how the Planning Council was involved in the review of the application. Did the Planning Council make any recommendations to modify the application?

The planning council is involved in ongoing oversight of the MHBG through its Monitoring and Oversight Committee. The Monitoring and Oversight Committee reviews DHS contracts for MHBG expenditures regularly. The MHPC is also provided regular updates on DHS activities.

Footnotes: