

Iowa

UNIFORM APPLICATION

FY 2020/2021 Community Mental Health Services Block Grant
Plan

COMMUNITY MENTAL HEALTH SERVICES
BLOCK GRANT

OMB - Approved 04/19/2019 - Expires 04/30/2022
(generated on 09/01/2020 10.33.07 AM)

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

State Information

State Information

Plan Year

Start Year 2021

End Year 2022

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

Zip Code 50319

II. Contact Person for the Grantee of the Block Grant

First Name Marissa

Last Name Eyanson

Agency Name Iowa Department of Human Services

Mailing Address 1305 E. Walnut Street, 5th Floor SE

City Des Moines

Zip Code 50319-0114

Telephone 515-256-4662

Fax

Email Address meyanso@dhs.state.ia.us

III. Third Party Administrator of Mental Health Services

Do you have a third party administrator? Yes No

First Name

Last Name

Agency Name

Mailing Address

City

Zip Code

Telephone

Fax

Email Address

IV. State Expenditure Period (Most recent State expenditure period that is closed out)

From

To

V. Date Submitted

Submission Date 9/1/2020 10:29:40 AM

Revision Date 9/1/2020 10:29:49 AM

VI. Contact Person Responsible for Application Submission

First Name Laura

Last Name Larkin

Telephone 5152425880

Fax

Email Address llarkin@dhs.state.ia.us

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

State Information

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

Fiscal Year 2021

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

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 Coastal 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.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

LIST of CERTIFICATIONS

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at <http://sam.gov>
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free work-place in accordance with 2 CFR Part 182by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about--
 1. The dangers of drug abuse in the workplace;
 2. The grantee's policy of maintaining a drug-free workplace;
 3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
 1. Abide by the terms of the statement; and
 2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
 1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

3. Certifications Regarding Lobbying

Per 45 CFR §75.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. 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.

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA) (31 U.S.C § 3801- 3812)

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 Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. 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, daycare, 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.

By signing the certification, the undersigned 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 subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health 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 PHS mission to protect and advance the physical and mental health of the American people.

HHS Assurances of Compliance (HHS 690)

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND SECTION 1557 OF THE AFFORDABLE CARE ACT

The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the U.S. Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
3. Title IX of the Education Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients in accordance with 45 CFR §§ 75.351-75.352, Subrecipient monitoring and management.

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: Kelly Garcia

Signature of CEO or Designee¹: _____

Title: Director

Date Signed: _____

mm/dd/yyyy

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

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:



KIM REYNOLDS
GOVERNOR

OFFICE OF THE GOVERNOR

ADAM GREGG
LT GOVERNOR

November 1, 2019

Substance Abuse and Mental Health Services Administration
Division of Grants Management
5600 Fishers Lane
Rockville, MD 20857

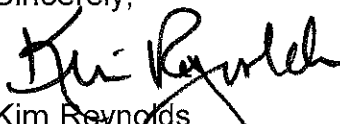
To Whom It May Concern:

This letter designates Kelly Garcia, Director of the Iowa Department of Human Services, to function as my designee for the following Substance Abuse and Mental Health Services Administration (SAMHSA) programs for as long as I remain Governor of the State of Iowa and Ms. Garcia remains Director of the Iowa Department of Human Services.

1. Kelly Garcia is authorized to function as my designee for all activities related to the SAMHSA Projects in Assistance in Transition from Homelessness (PATH) program.
2. Kelly Garcia is authorized to function as my designee for all activities related to the SAMHSA Community Mental Health Block Grant (MHBG) program.

Please contact my office if you have any questions.


Sincerely,


Kim Reynolds
Governor of Iowa

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: Kelly Garcia

Signature of CEO or Designee¹: 

Title: Director

Date Signed: 08/28/2020
mm/dd/yyyy

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

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

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:

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Footnotes:

Planning Tables

Table 2 State Agency Planned Expenditures

States must project how the SMHA will use available funds to provide authorized services for the planning period for state fiscal years 2020/2021.

Planning Period Start Date: 7/1/2020 Planning Period End Date: 6/30/2021

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. Primary Prevention							
a. Substance Abuse Primary Prevention							
b. Mental Health Primary Prevention*		\$0	\$0	\$0	\$0	\$0	\$0
3. Evidence-Based Practices for Early Serious Mental Illness including First Episode Psychosis (10 percent of total award MHBG)**		\$527,189	\$0	\$0	\$0	\$0	\$0
4. Tuberculosis Services							
5. Early Intervention Services for HIV							
6. State Hospital			\$0	\$0	\$0	\$0	\$0
7. Other 24 Hour Care		\$0	\$0	\$0	\$0	\$0	\$0
8. Ambulatory/Community Non-24 Hour Care		\$4,481,104	\$0	\$0	\$0	\$0	\$0
9. Administration (Excluding Program and Provider Level)***		\$263,594	\$0	\$0	\$0	\$0	\$0
10. Total	\$0	\$5,271,887	\$0	\$0	\$0	\$0	\$0

* While the state may use state or other funding for these services, the MHBG funds must be directed toward adults with SMI or children with SED

** Column 3B should include Early Serious Mental Illness programs funded through MHBG set aside

*** Per statute, Administrative expenditures cannot exceed 5% of the fiscal year award.

Footnotes:

Planning Tables

Table 6 Non-Direct Services/System Development

MHBG Planning Period Start Date: 07/01/2020 MHBG Planning Period End Date: 06/30/2021

Activity	FFY 2020 Block Grant	FFY 2021 Block Grant
1. Information Systems	\$0	\$0
2. Infrastructure Support	\$1,267,000	\$875,000
3. Partnerships, community outreach, and needs assessment	\$438,500	\$345,500
4. Planning Council Activities (MHBG required, SABG optional)	\$160,000	\$80,000
5. Quality Assurance and Improvement	\$0	
6. Research and Evaluation	\$0	
7. Training and Education	\$1,070,000	\$535,000
8. Total	\$2,935,500	\$1,835,500

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Footnotes:

Line 2-Five Points psychiatric bed tracking-\$25,000;
 Line 2 IDPH, 24 hour crisis line \$350,000;
 Line 2 Abbe Center, \$500,000 statewide warmline and peer support services
 Line 3 UI contract \$196,500
 Line 3 NAMI Office of Consumer Affairs \$149,000
 Line 4-staff support and expenses for MHPC \$80,000
 Line 7-UI Peer Support Training \$500,000
 Line 7-ESMI-NAVIGATE program training \$35,000

Environmental Factors and Plan

21. State Planning/Advisory Council and Input on the Mental Health/Substance Abuse Block Grant Application- Required for MHBG

Narrative Question

Each state is required to establish and maintain a state Mental Health Planning/Advisory Council to carry out the statutory functions as described in 42 U.S. C. 300x-3 for adults with SMI and children with SED. To meet the needs of states that are integrating services supported by MHBG and SABG, SAMHSA is recommending that states expand their Mental Health Advisory Council to include substance misuse prevention, SUD treatment, and recovery representation, referred to here as an Advisory/Planning Council (PC). SAMHSA encourages states to expand their required Council's comprehensive approach by designing and implementing regularly scheduled collaborations with an existing substance misuse prevention, SUD treatment, and recovery advisory council to ensure that the council reviews issues and services for persons with, or at risk, for substance misuse and SUDs. To assist with implementing a PC, SAMHSA has created [Best Practices for State Behavioral Health Planning Councils: The Road to Planning Council Integration](https://www.samhsa.gov/sites/default/files/manual-planning-council-best-practices-2014.pdf).⁶⁹

Planning Councils are required by statute to review state plans and implementation reports; and submit any recommended modifications to the state. Planning councils monitor, review, and evaluate, not less than once each year, the allocation and adequacy of mental health services within the state. They also serve as an advocate for individuals with M/SUD problems. 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.

⁶⁹ <https://www.samhsa.gov/sites/default/files/manual-planning-council-best-practices-2014.pdf>

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

1. How was the Council involved in the development and review of the state plan and report? Please attach supporting documentation (meeting minutes, letters of support, etc.) using the upload option at the bottom of this page.
 - a) What mechanism does the state use to plan and implement substance misuse prevention, SUD treatment and recovery services?

The SSA leads planning, and implementation of SUD prevention, treatment and recovery services. The MHPC includes representation from the SSA to encourage coordination and integration of mental health and SUD service systems. The SSA and SMHA regularly work together on issues of mutual concern.
 - b) Has the Council successfully integrated substance misuse prevention and treatment or co-occurring disorder issues, concerns, and activities into its work? Yes No
2. Is the membership representative of the service area population (e.g. ethnic, cultural, linguistic, rural, suburban, urban, older adults, families of young children)? Yes No
3. 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.

The duties and responsibilities of the Council are described in the most recent version of the Council's bylaws, which are attached. The Council works collaboratively with the SMHA and has two annual joint meetings with the state Mental Health and Disability Commission. Council members are also members of advocacy organizations such as NAMI, work and volunteer to provide peer support and family peer support, and advocate at all levels of government for individuals with an SMI or an SED. A member of the MHPC is an unpaid lobbyist to the Iowa Legislature for the MHPC. In regard to the FY21 mini-application, the mini-application was provided to the Planning Council chair on August 7, 2020 and was made available on the DHS website for public comment.

Public Comment:

Comment on the FY21 MHBG Application received from Teresa Bomhoff, chair of the MHPC on Aug. 19. 2020- Ms. Bomhoff requested corrections to the MHPC roster which are included in this document. 2 members were added to the roster and 3 members' type of membership was corrected.

Ms. Bomhoff requested that the the paragraph in this section referring to "annual joint meetings with the State Mental Health and Disability Commission" be changed to reflect that two joint meetings are held annually. This change has been made.

Ms. Bomhoff requested that the sentence referring to advocacy "at all levels of government for individuals with an SMI or an SED" include the information that a member of the MHPC functions as an unpaid lobbyist for the MHPC with the Iowa Legislature. This information has been added.

DHS received a comment from a member of the public, Todd Noack on Aug. 21, 2020. The comment is as follows:

"First i want to thank the department for all their work, i have tried to have several conversations with the department and have not had any response back, so i am responding here, i think we need to realize that we as a state of Iowa have three peer run

organizations, all who have contracts with the region but not 100%, it is my thought that if we as Iowa want to be a model like other leading states in our peer services that we be included in work through our department of human services and peer run organizations added like other states in the mental health block grant. I would love the opportunity to answer any questions as most of us have a recovery center we operate or other types of peer services, we are not asking nor believe the department should be a whole model of sustainability but play a part in it to honor those we serve. Here is another way that additional service could look as we (Life Connections) operate the only peer respite here in our state. I do appreciate your time and all your hard work for our communities." The comment also included draft legislative language to allocate state funds to peer support respite house services.

DHS response: DHS will take these comments under advisement for the next MHBG plan which will start development in spring 2021 for submission in Sept. 2021.

Please indicate areas of technical assistance needed related to this section.

none

Additionally, please complete the Advisory Council Members and Advisory Council Composition by Member Type forms.⁷⁰

⁷⁰There 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.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

Iowa Mental Health Planning and Advisory Council

Bylaws

Effective May 28, 2008 as amended July 23, 2010, March 21, 2012, March 21, 2018, and September 19, 2018

ARTICLE I – NAME

The name of this organization shall be the Iowa Mental Health Planning and Advisory Council.

ARTICLE II – DUTIES AND ACTIVITIES

The purposes of the Iowa Mental Health Planning and Advisory Council (the Council) shall be as set forth in federal law (42 USC 300x-3, Pub. Law 102-321, July 10, 1992, ADAMHA Reorganization Amendments, Public Health Service Act, 106 Stat. 382).

Section 1. Duties

- A. To participate in the development of and subsequently review mental health plans for Iowa provided to the Council pursuant to 42 USC 300X-4 (a) and to submit to the State of Iowa any recommendations of the Council for modifications to the plans;
- B. To serve as an advocate for adults with serious mental illness, children with a serious emotional disturbance, and other individuals with mental illnesses or emotional problems;
- C. To monitor, review, and evaluate, not less than once each year, the allocation and adequacy of mental health services within Iowa; and
- D. To affiliate, join, and collaborate with groups, organizations, and professional associations that the Council may designate or choose to advance its stated purposes under these bylaws and federal law; and, specifically, to join the National Association of Mental Health Planning and Advisory Councils.

Section 2. Activities

- A. To organize as a proactive and effectively working Council;
- B. To actively participate in the development of the State's Center for Mental Health Services (CMHS) Community Mental Health Block Grant Application;
- C. To provide recommendations on State goals according to the criteria of the CMHS Community Mental Health Block Grant;
- D. To advise on the allocation of monies received by the State Mental Health Authority through CMHS Community Mental Health Block Grant funding;
- E. To advise the State Mental Health Authority on matters that may affect the stated purposes of this Council;

- F. To review the annual submission of the CMHS Community Mental Health Block Grant Application and comment on it to the Director of the Center for Mental Health Services;
- G. To review the annual submission of a copy of the CMHS Community Mental Health Block Grant Application and comment on it to the Governor of the State of Iowa; and
- H. To perform other duties as required by federal regulations.

Section 3. Records

- A. The State Mental Health Authority shall maintain all official records of the Council in perpetuity.
- B. Copies of any records deemed necessary for Council activities shall be maintained by the State Mental Health Authority.

ARTICLE III – MEMBERSHIP

Section 1. General

To the extent feasible, the membership of the Council shall represent the diverse population of the State of Iowa.

Section 2. Requirements

The Iowa Mental Health Planning and Advisory Council shall abide by the following federal requirements:

- A. The ratio of parents of children with a serious emotional disturbance to other members of the Council shall be sufficient to provide adequate representation of children with SED in the deliberations of the Council; and
- B. Not less than 50 percent of the members of the Council shall be individuals who are not State employees or providers of mental health services.
 - (1) A provider of mental health services is an individual who receives money, from any source, to provide direct or indirect mental health services to consumers.
 - (2) Advocacy, educational, and training organizations, and their employees, shall not be considered providers of mental health services under these bylaws. (Unless they also receive funding for the provision of direct services)
 - (3) Volunteers and members of advisory and governing boards (of mental health provider organizations) shall not be considered providers solely because of such status.

Section 3. Membership Categories

Membership shall be the following:

- A. Seven (7) members representing the principal State agencies with primary responsibility for the following programs:
- Mental Health
 - Education
 - Vocational Rehabilitation
 - Criminal Justice
 - Housing
 - Social Services
 - Medical Services (Title XIX)
- (1) Individuals nominated by the principal State agencies shall be reviewed and elected or accepted by the Council. If the Council has concerns or feedback to provide to a principal State agency, through collaboration with the State Mental Health Authority, these concerns can be shared with that agency prior to election of the individual nominee.
- (2) Any individual employed by or contracting with the State Mental Health Authority who directly manages or supervises the CMHS Community Mental Health Block Grant may not become a voting member of the Council.
- B. Six (6) members representing public and private entities concerned with the need, planning, operation, funding, and use of mental health services and related support services statewide.
- C. Six (6) members who are adults with serious mental illness and current or past consumers of mental health services.
- D. Four (4) members (age 16 and over) who are family members of adults with serious mental illness.
- E. Six (6) members who are parents, guardians, or primary caretakers of children with serious emotional disturbance.
- F. Four (4) other individuals with an interest in supporting the needs of children with serious emotional disturbance and adults with serious mental illness. (There is an expectation for child advocacy representation provided by a representative knowledgeable about the juvenile justice system.) Iowa Code 225C.4 subsection 1 “t” (2010 General Assembly) provides for one (1) representative by a military veteran who is knowledgeable concerning the behavioral and mental health issues of veterans.
- G. Four (4) ex-officio members representing the Iowa General Assembly:
- One representative of Senate Democrats
 - One representative of Senate Republicans
 - One representative of House Democrats
 - One representative of House Republicans

- (1) Individuals representing the Iowa General Assembly will be nominated by the Majority and Minority leaders of their respective chambers and shall be accepted and confirmed by the Council. If the Council has concerns or feedback to provide to Majority or Minority leaders, these can be shared with that agency prior to election of the individual nominee.
- (2) Ex-officio members shall attend no less than biannually with at least one attendance coinciding with the fall session of the Assembly and at least one attendance coinciding with the spring Session of the Assembly.
- (3) If ex-officio is not able to meet this obligation, the member should notify the Majority or Minority Leader to nominate a new member.
- (4) The council shall notify Majority or Minority Leader if a ex-officio member is not meeting their obligation to allow for review of member appointment or make adjustments so that member can achieve this obligation.

Section 4. Nominations

- A. All new members will be subject to a written application process. Renewing members need to notify the nominating committee in writing of their desire to be re-appointed.
- B. To be considered, a designated recipient at the State Mental Health Authority must receive the written application for Council membership by the due date specified in the announcement for applications.

Section 5. Voting Rights

- A. Each Council member in attendance shall hold one vote.
- B. Members may attend meetings and vote by telephone, if technically possible at the meeting location and pre-arranged with staff.
- C. No proxy voting is allowed.
- D. Under General Ethical Principles Regarding Conflict of Interest in Iowa Code Chapter 68B (Conflicts of Interest), members of the Council shall recuse (abstain) themselves from voting when they have, or anticipate having, a direct financial stake in the outcome of a Council decision, related to, or independent of, their status as a provider of mental health services. (See Article VI – Conflict of Interest)
- E. If in the course of business should votes may arise that could directly impact the policies and operations of the entities for which they are employed or representing. If a member perceived that the matter would conflict with or require they feel further review or input from their governing bodies or executive management, members may recuse (abstain) themselves from a vote to allow time to seek further input from their entities.

Section 6. Vacancies

A. Council membership ends when:

- (1) A member resigns or dies; or
- (2) A member's term ends, and that member does not reapply for another term.
- (3) A member fails to meet the Council's minimum attendance policy as defined in Sec. 6(B); or
- (4) A majority of the Council terminates the member for just cause, as defined by that majority subject to the procedures required by Sec. 8; or (5) In the case of a principal State agency member, the member's term ends when a new individual is nominated by the principal State agency and confirmed by the Council.

B. All Council members will be held to an attendance policy, as follows: Members will, at a minimum, attend one-half of the regular meetings of the Council for each year. After three consecutive absences, a member shall be notified that his or her position will be considered vacant. Failure to notify the member does not constitute a waiver of the attendance requirements. A Council member will be contacted and the absence policy reviewed after a second consecutive absence.

C. Attendance may be accomplished in person or by telephone conference call.

D. The termination of an individual principal State agency member does not terminate the designated agency's representation on the Council as provided for in Article III, Section 3(A).

E. Resignations by Council members will be automatically accepted and their positions considered vacant immediately.

Section 7. Terms of Membership

A. The membership term of a Council member shall be three years.

B. Membership terms shall be staggered so that one-third of the total number expires each year.

C. To maintain the staggered term structure, each full membership term will begin with the first meeting after the annual meeting.

D. Members elected to fill an unexpired term will begin their term at the first meeting following their election.

E. All new members will be subject to a written application Process. Renewing members need to notify the nominating committee in writing of their desire to be re-appointed.

F. A members elected to fill an unexpired term who wants to continue as a Council member at the end of their term will notify the Nominating committee in writing of their desire to be re-appointed.

Section 8. Termination for Just Cause

- A. A Council member or members who feel just cause exists for another member of the Council to be terminated pursuant to Section 6(A)(5), must present a written statement of the reasons for the proposed termination to the Executive Committee.
- B. The Executive Committee shall review any such written statement and determine if the matter has merit to be presented to the full Council.
- C. Only the Executive Committee is empowered to present a motion for termination of a member for just cause before the full Council.
- D. A motion for termination for just cause must be accompanied by a written statement of the reasons for the proposed termination.
- E. The Council member who is the subject of the motion must be given an opportunity to respond to the written statement before the Council, prior to any action being taken.

ARTICLE IV – MEETINGS

Section 1. General

- A. Regular and special meetings of the Council shall be called by either:
 - (1) The Executive Committee; or
 - (2) Eight (8) or more Council members
- B. The Council shall meet no less than four (4) times a year.
- C. Council meetings shall be conducted according to the current version of “Roberts Rules of Order,” as periodically revised, and comply with the requirements of Iowa Code Chapter 21 (Open Meetings) and Iowa Code Chapter 22 (Open Records).
 - (1) A parliamentarian may be elected by majority vote of the Council to interpret and enforce procedural rules.
- D. Members shall be given at least two weeks advance notice of regular meetings. Special meetings may be called and noticed as necessary. Meeting notices must include place, date, and hour. Meeting agendas shall be posted as required by law.
- E. The Council’s Annual Meeting shall take place at the next regular meeting following the annual federal review of Iowa’s CMHS Block Grant Application [November].

Section 2. Quorum

- A. No less than two-thirds of the Council members eligible to vote will constitute a quorum. The number of members eligible to vote if all Council positions are filled is thirty-three (33).
- B. If, during the course of a meeting the number of members present is reduced below a quorum, the meeting may continue but no vote may be taken.

Section 3. Votes

- A. A Majority of the quorum is needed to accept any matter put to a vote
- B. The Council Chair casts a vote only in the event of a tie
- C. In the process of voting, if a member recuses themselves from a vote (abstain), it shall neither count for nor against the matter at vote. The vote may then be considered accepted by a majority vote of the remaining quorum of members.
- D. Should at any time the passing quorum vote falls below the majority number of the total active council membership number, the Council should consider a delay acceptance of the vote until such time a majority of the active council can be either present or able to affirm the matter of action.
- E. If a matter of action does pass with less than a majority number of the total active council, clarification and delineation of such should be made in the minutes of the meeting.

ARTICLE V – OFFICERS AND COMMITTEES

Section 1. Officers

- A. The officers of the Council shall be a Chairperson, a Vice-chairperson, and Secretary.
- B. The outgoing Chairperson may be retained in an ex-officio capacity at the will of the council.

Section 2. Nomination and Election

- A. Council Members interested in becoming an officer shall notify the Nominating Committee of their intention prior to the annual meeting. The nominating Committee shall bring the list of those interested forward to the full Council.
- B. Officers shall be elected annually for one-year terms.
- C. Election of officers shall normally take place at the Council's Annual Meeting, but may be called at another date at the discretion of the Executive Committee, if necessary.
- D. A quorum of Council members shall elect the officers by majority vote.

Section 3. Terms of Office

- A. Officers shall be elected for a one-year term. There shall be no limit to the number of terms an individual member may be elected to office.

Section 4. Duties

- A. The Chairperson shall:
 - (1) Notify members of meetings;
 - (2) Preside at Council meetings.
 - (3) Does not participate in voting as Chairperson unless called upon in case of tie (Article IV, Section 3 (B))
- B. The Chairperson, in cooperation with the Executive Committee, shall:
 - (1) Establish and publish the agenda for Council meetings;
 - (2) Establish and publish an annual calendar for Council meetings;
 - (3) Report to the federal government (CHMS), the Governor of Iowa, and designated persons or organizations;
 - (4) Serve as liaison between the Council and other groups and organizations, including the State Mental Health Authority;
 - (5) Communicate with and regularly report to the Council;
 - (6) Designate ad hoc committee membership and monitor such committee's areas of focus; and
 - (6) Perform other miscellaneous functions, as determined or designated by the Council.
- C. The Vice-Chairperson shall:
 - (1) Assume the Chairperson's duties for any period of time that the Chairperson is unable to do so;
 - (2) In the event that the Chairperson is unable to complete his or her term, act as Temporary Chairperson until the Council elects a new Chairperson;
 - (3) In the absence of the Secretary in a meeting, serve as Secretary,
 - (4) Serve as a voting member of the Executive Committee and

(5) Guide the mentoring process for new members and/or youth members.

D. The Secretary shall:

- (1) Serve as a voting member of the Executive Committee
- (2) Monitor the maintenance of minutes and records of the Council's business and ensure that minutes and records are compiled and maintained by the State Mental Health Authority to be preserved in perpetuity;
- (3) Assume the Chairperson's duties for any period of time that both the Chairperson and Vice-Chairperson are unable to do so; at the will of the Council, staff shall take the minutes of all Council meetings and shall make minutes available for review and feedback by the Secretary and Executive Committee prior to presentation to the full Council; and
- (4) If the staff person cannot be present or designate a replacement, the Chairperson shall appoint a council member to take minutes

Section 5. Standing Committees or Workgroups in General

- A. Standing committee members shall be elected annually by a majority vote of the Council at the meeting following the annual meeting.
- B. Standing committee/workgroup chairs shall be elected by majority vote of the committee/workgroup members.
- C. In electing standing committee members or appointing workgroup members, efforts will be made to reflect the diversity of the Council membership categories.
- D. Three (3) standing committees are authorized by these bylaws:
 - (a) Nominations Committee;
 - (b) Executive Committee;
 - (c) Monitoring and Oversight Committee.

Section 6. Nominations Committee

- A. The Nominations Committee shall consist of five (5) Council members.
- B. The Nominations Committee shall conduct outreach to diverse communities.
- C. The Nominations Committee shall nominate persons for the offices of Chairperson, Vice-chairperson, and Secretary for consideration by the entire Council.
- D. The Nominations Committee shall be responsible for soliciting and reviewing applications for Council membership, and making recommendations to the Council. A Council vote accepts or does not accept the application for membership.

Section 7. Executive Committee

- A. The Executive Committee shall consist of: the Chairperson, the Vice-Chairperson, the Secretary, and the Chairs of the Standing Committees. At the will of the Council, the past Chairperson can be an ex-officio member.
- B. The Executive Committee shall review Conflict of Interest Disclosures and make recommendations to the full Council on Conflict of Interest issues.
- C. The Executive Committee shall establish ad hoc committees and work groups as needed.
- D. The Executive Committee shall:
 - (1) Establish the agenda for Council meetings;
 - (2) Establish an annual calendar for Council meetings;
 - (3) Report, on behalf of the Council, to the federal government (CMHS), the Governor of the State of Iowa, and designated persons or organizations;
 - (4) Serve as liaison between the Council and other groups and organizations, including the State Mental Health Authority;
 - (5) Communicate with and regularly report to the Council;
 - (6) Monitor the maintenance of records of Council business, and deliver any official records to the Mental Health Authority to be maintained in perpetuity.
 - (7) Perform other miscellaneous functions, as developed or designated by the Council.

Section 8. Monitoring and Oversight Committee

- A. The Monitoring and Oversight Committee shall consist of five (5) Council members.
- B. The Monitoring and Oversight Committee shall, at their discretion, or on the recommendation of the Council:
 - (1) Review and comment on work plans submitted by contractors;
 - (2) Review and comment on budget expenditures made pursuant to the CMHS Block Grant;
 - (3) Review and comment on procedural issues connected with the CMHS Block Grant;
 - (4) Monitor and comment on the state of the mental health system in Iowa; and report or make recommendations for action to the full Council.

Section 9. Workgroups

- A. The Executive Committee shall create and appoint workgroups committees to carry out any necessary Council business or activities that are not expressly provided for in these bylaws.

ARTICLE VI – CONFLICT OF INTEREST

Section 1. Conflict of Interest Policy

- A. The Mental Health Planning and Advisory Council (hereinafter, “the Council”) respects the rights of all members in their activities outside of their association with the Council, should such activities not conflict with or adversely reflect upon the Council. It is Council policy to place trust in each member’s integrity, judgment, and dedication. It is also important to

avoid even the perception of a conflict of interest. Accordingly, the policy set forth below has been adopted:

- (1) All Council members are expected to declare any financial or personal affiliations that could interfere with their effectiveness in representing the interests of individuals with serious mental illness or serious emotional disturbance on the Council, or on their effectiveness in representing the Council to the public.
- (2) All Council members shall complete a Conflict of Interest Disclosure Statement, including information on any of the following situations:
 - (a) Holding a financial interest in a company, organization, or agency that provides services to individuals with serious mental illness or serious emotional disturbance.
 - (b) Receiving federal CMHS Block Grant funding as a contractor, sub-contractor, employee, provider, or in another capacity.
 - (c) Membership on other councils, boards, commissions, or public bodies that may have interests conflicting with those of the Council.
- (3) In the course of Council business, members will be expected to identify instances when a conflict or the appearance of a conflict of interest exists and voluntarily abstain from voting in those situations.
- (4) Each member shall sign and place on file with the Council a Conflict of Interest Disclosure Statement annually. (See Appendix A).
- (5) Any Conflict of Interest Issues that come to the attention of the Council shall be reviewed by the Executive Committee.

ARTICLE VII – BYLAWS

Section 1. Revision

- A. These bylaws may be altered, amended, or repealed, by a majority vote of the Council members at any regular or special meeting of the Council, following a reading, provided that:
 - (1) The proposed amendments have been given a first reading at a prior meeting, and
 - (2) That the amendments were submitted to the membership in writing at least two weeks in advance of the meeting where the vote will take place.
- B. A bylaws workgroup shall be created by the Executive Committee when necessary for the consideration and development of amendments proposed by Council members or by the officers.

First reading: May 28, 2008

Second reading: Waived May 28, 2008

Adopted: These By-laws are accepted and adopted by vote of the Iowa Mental Health Planning and Advisory Council on May 28, 2008.

Amended: By majority vote of the Council on July 23, 2010, Art. III, Sect. 3F Membership.
By majority vote of the Council on March 21, 2012, Art. III, Sec. 6B Vacancies; Art. V, Sec. 4B Duties.

Appendix A:

Conflict of Interest Disclosure Statement

I, _____, have read the Mental Health Planning and Advisory Council Conflict of Interest Policy (as outlined in Article VI of the Bylaws) and state by my signature below that I am in compliance with it and will continue to observe this policy carefully throughout my association with the Council. In addition, I am disclosing possible conflicts of interest or the potential for the appearance of conflicts of interest, as follows:

Signed: _____

Date: _____

The information in this Conflict of Interest Disclosure Statement will be reviewed by the Executive Committee of the Mental Health Planning and Advisory Council and maintained as part of the official record of the Council by the State Mental Health Authority. If any actual or potential conflict requires attention, the Executive Committee will attempt to resolve the perceived conflict(s).

Ethical Considerations of Council Membership:

Individual Council members have no authority apart from the full Council and cannot act on their own or take action on behalf of the Council without being authorized to do so by the bylaws or the official act of the Council. All Council members are expected to support the decisions of the Council. Council members are discouraged from taking personal action to discredit the dignity and integrity of the Council, staff, or individual members.

Environmental Factors and Plan

Advisory Council Members

For the Mental Health Block Grant, there are specific agency representation requirements for the State representatives. States MUST identify the individuals who are representing these state agencies.

State Education Agency
 State Vocational Rehabilitation Agency
 State Criminal Justice Agency
 State Housing Agency
 State Social Services Agency
 State Health (MH) Agency.

Start Year: 2021 End Year: 2022

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 SW 42nd St. Des Moines IA, 50312	tbomhoff@mchsi.com
Ken Briggs	Others (Advocates who are not State employees or providers)		1701 Campus Drive Clive IA, 50325	revkbriggsacc@msn.com
Rachel Cecil	Others (Advocates who are not State employees or providers)		2003 N. Lincoln St. Knoxville IA, 50138	Rachel.cecil@crossmhds.org
Jim Cornick	Others (Advocates who are not State employees or providers)		624 Glenview Drive Des Moines IA, 50312	jcornick65@gmail.com
Jim Donoghue	State Employees	Iowa Department of Education	400 E. 14th St. Des Moines IA, 50319	jim.donoghue@iowa.gov
Jacqueline Easley-McGhee	Family Members of Individuals in Recovery (to include family members of adults with SMI)		3113 Southern Hills Drive Des Moines IA, 50321	
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
Kyra Hawley	State Employees	Iowa Department on Aging	510 E. 12th St. Des Moines IA, 50319	kyra.hawley1@iowa.gov
Vienna Huong	State Employees	Vocational Rehabilitation	510 E. 12th St. Des Moines IA, 50319	Vienna.hoang@iowa.gov
Julie Kalambokidis	Parents of children with SED/SUD		18 1/2 N. Walnut St. Glenwood IA, 51534	JKalambokidis@EmbracelowaInc.com
Michael Kauffman	State Employees	Iowa Department of Human Services	Independence MHI Independence IA, 50644	MKaufma@dhs.state.ia.us
Dawn Kekstadt	State Employees	Iowa Department of Human Services	1305 E. Walnut St. Des Moines IA, 50319	dkeksta@hs.state.ia.us
Earl Kelly	Others (Advocates who are not State employees or providers)		2919 Druid Hill Drive Des Moines IA, 50315	earlpkelly@gmail.com

Anna Killpack	Family Members of Individuals in Recovery (to include family members of adults with SMI)		32356 270th St. Neola IA, 51559	annakillpack@yahoo.com
Todd Lange	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		225 W. 6th St. Dubuque IA, 52001	Tjlange1@yahoo.com
Mathhea Little-Smith	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		926 Oakridge Drive 404-22 Des Moines IA, 50314	matthea.little.smith@gmail.com
Hannah Olson	State Employees	Iowa DHS, Iowa Medicaid Enterprise	611 5th Ave. Des Moines IA, 50309	holson1@dhs.state.ia.us
Donna Richard-Langer	Others (Advocates who are not State employees or providers)		4105 Belair Drive Urbandale IA, 50323	drlckl@msn.com
Brad Richardson	Others (Advocates who are not State employees or providers)		UI School of Social Work Iowa City IA, 52242- 5000	Brad-richardson@uiowa.edu
James Rixner	Family Members of Individuals in Recovery (to include family members of adults with SMI)		114 Midvale Avenue Sioux City IA, 51104	jwrx@aol.com
Jennifer Robbins	Others (Advocates who are not State employees or providers)		102 E. Main St. Box 217 Ottumwa IA, 52501	jennifer.robbins@scbhr.net
Melissa Schwery	Parents of children with SED/SUD		1302 Hawkeye Ave. Harlan IA, 51537	bmschwery3@gmail.com
Dennis Sharp	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)		1104 River Drive South Apt. 10 Sioux City IA, 51104	dennissharp2007@gmail.com
Shaad Swim	State Employees	Iowa Department of Corrections	420 Mill Street Mitchellville IA, 50169	shaad.swim@iowa.gov
Heather Thomas	Providers	Eyerly Ball Community Mental Health Center		HeatherT@eyerlyball.org
Michele Tilotta	Persons in recovery from or providing treatment for or advocating for SUD services	Iowa Department of Health		michele.tilotta@idph.iowa.gov
Heather Wellman	Parents of children with SED/SUD		46 Oak Drive Fort Madison IA, 52627	heather@wellman.fm
Brook Whitney	State Employees	Iowa Finance Authority	State Housing Authority	Brook.Whitney@IowaFinance.com

*Council members should be listed only once by type of membership and Agency/organization represented.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

Environmental Factors and Plan

Advisory Council Composition by Member Type

Start Year: 2021 End Year: 2022

Type of Membership	Number	Percentage of Total Membership
Total Membership	33	
Individuals in Recovery* (to include adults with SMI who are receiving, or have received, mental health services)	4	
Family Members of Individuals in Recovery* (to include family members of adults with SMI)	4	
Parents of children with SED/SUD*	3	
Vacancies (Individuals and Family Members)	5	
Others (Advocates who are not State employees or providers)	7	
Persons in recovery from or providing treatment for or advocating for SUD services	1	
Representatives from Federally Recognized Tribes	0	
Total Individuals in Recovery, Family Members & Others	24	72.73%
State Employees	8	
Providers	1	
Vacancies	0	
Total State Employees & Providers	9	27.27%
Individuals/Family Members from Diverse Racial, Ethnic, and LGBTQ Populations	3	
Providers from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Total Individuals and Providers from Diverse Racial, Ethnic, and LGBTQ Populations	3	
Youth/adolescent representative (or member from an organization serving young people)	0	

* States are encouraged to select these representatives from state Family/Consumer organizations or include individuals with substance misuse prevention, SUD treatment, and recovery expertise in their Councils.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes: