MHSOAC

Mental Health Services
Oversight & Accountability Commission

Mental Health Triage Personnel Grant

Process Information Report

Date of Report: 9/26/14

County Name: Riverside

Name of Contact: Maria I. Marquez **Phone Number:** 951-955-1523

Email: mimarquez@rcmhd.org

1. **Total number of Triage Personnel Hired to Date**
   (Identify in Full-time Equivalents FTEs)

   a. **County Staff Total** 1 **FTEs**

   b. **Contract Staff Total** N/A **FTEs**

2. **Total Number for each type of Personnel Hired**
   (Identify in Full-time Equivalents FTEs. If the staff hired do not fit the categories below- please specify in the "other" category)

   a. **County Staff**

      i. **Case Managers** **FTEs**

      ii. **Social Workers** **FTEs**

      iii. **Nurses** N/A **FTEs**

      iv. **Clinicians** **FTEs**

v. **Mental Health Workers** FTEs

vi. **Peer Providers** FTEs

vii. **Outreach Workers** N/A FTEs

viii. **Psychiatrists** N/A FTEs

ix. **Other**

FTEs

FTEs

FTEs

FTEs

FTEs

b. <u>Contract Staff</u>

i. **Case Managers** FTEs

ii. **Social Workers** FTEs

iii. **Nurses** FTEs

iv. **Clinicians** FTEs

v. **Mental Health Workers** FTEs

vi. **Peer Providers** FTEs

vii. **Outreach Workers** FTEs

viii. **Psychiatrists** FTEs

ix. **Other**

FTEs

		FTEs
		FTEs
		FTEs
		FTEs

3. **Identify Triage Locations for Service and Points of Access Currently Available with Staff Already Hired**
   (i.e hospital emergency rooms, homeless shelters, mobile team, etc.)

1405 Spruce St, Ste A, Riverside	

4. Comments

Conditional Job Offers (in hiring process) made for following with current start date 10/16/14. Office Assis

If you have questions, contact Cody Scott.

Email: Cody.Scott@mhsoac.ca.gov

Phone Number: (916) 445-8692

Please Email this document to:
mhsoac@mhsoac.ca.gov