



MHSOAC Triage Grant Recipient Web Information Survey

In an effort to highlight the programs that are funded by the SB82 grants awarded by the Mental Health Services Oversight and Accountability Commission (MHSOAC), we are asking the recipients of these grants to assist us in creating an accurate profile of their grant-funded programs for our website. It is our goal to create a page for each county, but we wish to keep these pages as uniform as possible. Please use the following form to provide the information. If grant funds are used for more than one program, please fill out a separate form for each.

County/Counties Acting Jointly/City Mental Health Department:

Name of Program:

Brief Program Description (please limit to a single paragraph):

Populations Served (TAY, Homeless, Older Adults, Etc.):

Program Access Points (please include specific addresses, where applicable):

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

Program Contact Information:

Title and/ or Name:	
Phone:	
Email:	
Website:	
County Emergency Services Line:	

Did your county also receive a grant from California Health Facilities Financing Authority (CHFFA)?

Yes

No

Please email your completed form(s) to cody.scott@mhsoc.ca.gov with the subject “[CountyName]_webinfo”

-or-