

County of Los Angeles COMMUNITY AND SENIOR SERVICES

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Enriching Lives Through Effective And Caring Service



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September 20, 2016

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

24 September 20, 2016

LORI GLASGOW

AUTHORIZE COMMUNITY AND SENIOR SERVICES TO EXECUTE A NONCOMPETITIVE SOLE-SOURCE SUBAWARD WITH PARTNERS IN CARE FOUNDATION, INC. FOR THE PROVISION OF DISEASE PREVENTION AND HEALTH PROMOTION PROGRAM SERVICES (ALL SUPERVISORIAL DISTRICTS) (3-VOTES)

SUBJECT

The United States Department of Health and Human Services ("HHS") and the California Department of Aging ("CDA") require that the County of Los Angeles establish an Evidence-Based Program ("EBP") for older individuals (age 60 and older) through the Disease Prevention and Health Promotion ("DPHP") Program. DPHP services consist of an EBP that assists older individuals in the prevention of illness, the management of chronic physical conditions, the support of healthy lifestyles, and the promotion of healthy behaviors.

Community and Senior Services ("CSS") seeks delegated authority to: 1) execute a sole-source subaward to provide DPHP Services for a 9 month term (which shall include the current fiscal year of October 1, 2016 – June 30, 2017) with Partners In Care Foundation, Inc., a non-profit organization that is considered the statewide and national leader in EBPs; and 2) execute subaward amendments, as needed, with Partners In Care Foundation, Inc. within the subaward term.

IT IS RECOMMENDED THAT THE BOARD:

1. Authorize the CSS Director, or designee, to enter into a sole-source subaward with Partners In Care Foundation, Inc. in accordance with State regulations, outlined in Title 22 California Code of Regulations Section 7360 (Noncompetitive Awards), which allows for noncompetitive procurement of a service provider when the awarding agency ("CSS/County") allows for such actions, for the

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subaward 9 month term of October 1, 2016 – June 30, 2017 to provide DPHP Services for an estimated amount of \$343,584. The allocation to the subrecipient is subject to the availability of funding and is contingent upon the subrecipient's performance in meeting the goals of the DPHP Program as well as the subrecipient's adherence to its subaward terms. CSS will obtain County Counsel approval as to the form of the subaward prior to executing the subaward and CSS shall provide written confirmation to the CEO within thirty (30) days of completing this action.

2. Authorize the CSS Director, or designee, to execute amendments with the subrecipient, which serve the best interests of the County, during the subrecipient's subaward term as follows: 1) add new, relevant or updated Federal, State and/or County subaward terms; and 2) increase or decrease the subaward amount (including but not limited to baseline funds, one-time-only funds, and/or supplemental funds) in response to the availability of funding and/or based on subrecipient's performance provided that: (a) total allocation does not exceed available funding; (b) CSS obtains County Counsel approval as to the form of the amendment prior to the execution of any such amendment; and, (c) CSS provides written confirmation to your Board and the CEO within thirty (30) days of the execution of any amendment.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

The DPHP Program is funded through Title III-D of the Federal Older Americans Act. HHS and CDA mandate that Title III-D funded activities meet the highest-tier of evidence-based criteria (based on scientific evidence and demonstrated through rigorous evaluation to be effective in improving the health of older individuals). CSS has identified four (4) EBPs that meet highest tier criteria that also meet the mandated CDA requirements. The following four (4) programs will be offered effective October 1, 2016:

- 1) Chronic Disease Self-Management Program/Tomondo Control de su Salud. This program teaches participants the skills to manage their chronic conditions, including techniques to deal with frustration, fatigue, pain and isolation and exercises for maintaining and improving strength, flexibility, and endurance. It is also known to have a positive effect on participants with diabetes in their ability to self-manage. This program is provided in both an English and Spanish version;
- 2) Arthritis Foundation Exercise Program. This program consists of recreational exercise known to have a positive impact on participants with arthritis and other chronic conditions. Sessions cover a variety of range-of-motion and endurance-building activities, relaxation techniques to encourage gentle movements to increase joint flexibility, and muscle strengthening techniques;
- 3) A Matter of Balance. This program is designed to reduce the fear of falling and increase activity levels among older individuals. Participants receive instruction on how to view falls as controllable, set goals for increasing activity, make changes to reduce fall risk, and exercise to increase strength and balance; and
- 4) University of California Los Angeles Longevity Center Memory Training. This program provides participants with practical techniques for enhancing memory ability. It consists of group discussions, memory checks, and skill-building exercises to provide an innovative educational program that focuses on the four top memory challenges. The program is not intended for older individuals with Alzheimer's disease or other forms of dementia.

In order to meet Federal and CDA requirements, CSS seeks authorization to enter into a sole-source subaward with Partners In Care Foundation, Inc. for a subaward term of 9 months. Partners in Care

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Foundation, Inc. is a non-profit organization that holds licensure requirements for all four of these EBPs. In addition, Partners in Care Foundation, Inc. is the statewide and national leader in EBPs. These actions will ensure the retention and full expenditure of the DPHP funds, and are consistent with your Board's policy requiring review of each service provider's performance.

Implementation of Strategic Plan Goals

The recommended actions support the following Countywide Strategic Plan Goals: 1) Operational Effectiveness, 2) Fiscal Sustainability, and 3) Integrated Services Delivery.

FISCAL IMPACT/FINANCING

The DPHP Program is financed with Federal Title III-D funds (with no impact to the County General Fund). CSS was granted authority to accept Title III-D funds through FY 2017 from CDA through a board letter approved on April 24, 2013. The requested Board authority will allow CSS to allocate an estimated amount of \$343,584 during a period of 9 months to provide DPHP Program Services. A separate Board letter will be completed next FY accepting all CDA funds for the next 4-year contract cycle for all CDA grant-funded programs.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

As the County's Area Agency on Aging (AAA), CSS receives Title III-D funds from CDA to administer DPHP Program Services throughout Los Angeles County, excluding the City of Los Angeles. The City of Los Angeles is served through a separate AAA designated and funded by CDA. In accordance with Federal, State and County procurement standards, CSS released a competitive Request for Proposal solicitation in FY 2015-16 to obtain a subrecipient to provide the Program Services. However, CSS cancelled the RFP in order to implement recent guidance received from the CDA on the solicitation process. With your Board's approval, CSS will implement the DPHP Program Services by entering into a noncompetitive sole-source subaward beginning on October 1, 2016 – June 30, 2017 with Partners In Care Foundation, Inc. A new solicitation will be released, evaluated, scored, and a subrecipient will be selected prior to the termination of the sole-source subaward. The successful subrecipient will provide DPHP Program Services for a four (4) year subaward term.

CSS requests your Board's approval to enter into a sole-source subaward with Partners in Care Foundation, Inc., pursuant to State regulations governing the Title III-D funded program which are found in 22 CCR 7360 (Noncompetitive Awards) whereby CSS/County as the awarding agency (as defined in Title 45 Code of Federal Regulations Part 92.3) authorizes a noncompetitive procurement. In accordance with your Board's Policy Manual, Chapter 5.100 (Sole Source Contracts), CSS has completed a sole-source checklist and justification which has been approved by the CEO and is included herein as an Attachment.

CSS previously notified your Board about its intent to negotiate a noncompetitive sole-source subaward. The subrecipient, Partners In Care Foundation, Inc., is in compliance with all Board and County requirements. The DPHP subaward includes both standard County terms and conditions in addition to Federal and State terms and conditions that are required for CSS to administer/operate this DPHP Program. Further, the DPHP subaward is not subject to the requirements for Proposition A in which living wage laws would be applicable. CSS will obtain County Counsel approval as to the form of the subaward and/or amendment prior to their execution.

The Federal Title III-D funding is made available pursuant to the OAA and these funds have been

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assigned a Catalog of Federal Domestic Assistance ("CFDA") program number as follows:

• OAA Title III D funds: 93.043 (Special Programs for the Aging – Title III, Part D – Disease Prevention and Health Promotion Services (Title III-D).

CONTRACTING PROCESS

Upon your Board's approval, CSS will enter into a sole-source subaward with Partners in Care Foundation, Inc., for the term of October 1, 2016 through June 30, 2017. CSS will redesign and issue another competitive solicitation. The resulting subaward will be effective for a four (4) year subaward term. Upon completion of this procurement, CSS will notify and seek approval from your Board of the recommended subrecipient. The sole-source subaward will not be renewed beyond the start date of the newly procured subaward.

MONITORING REQUIREMENT

Administrative, programmatic and fiscal monitoring of the DPHP subrecipient will be conducted during the term of the subaward. Administrative and programmatic monitoring are completed by CSS' Contract Compliance Division. Fiscal monitoring is conducted by an approved vendor procured through the Los Angeles County Auditor-Controller's Master Agreement.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended actions will permit the provision of DPHP Program Services throughout Los Angeles County (excluding the City of Los Angeles) and it will afford CSS the opportunity to successfully complete a new redesigned procurement.

CONCLUSION

If you have questions, please contact Ms. JeNai Davis at (213) 738-4483 or jdavis@css.lacounty.gov.

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Respectfully submitted,

CYNTHIA D. BANKS

Director

CDB:OS:PG:CD:SI

R:JD

Enclosures

c: Chief Executive Officer

County Counsel

Executive Officer, Board of Supervisors

Cynthia D. Bronks

ATTACHMENT

SOLE-SOURCE CHECKLIST DISEASE PREVENTION AND HEALTH PROMOTION PROGRAM

Check	JUSTIFICATION FOR SOLE SOURCE CONTRACTS	
(√)	Identify applicable justification and provide documentation for each checked item.	
	Only one bona fide source for the service exists; performance and price competition are not available.	
√	Quick action is required (emergency situation).	
	Proposals have been solicited but no satisfactory proposals were received.	
	Additional services are needed to complete an ongoing task and it would be prohibitively costly in time and money to seek a new service provider.	
	Maintenance service agreements exist on equipment which must be serviced by the authorized manufacturer's service representatives.	
	It is most cost-effective to obtain services by exercising an option under an existing contract.	
√	➤ It is in the best interest of the County e.g., administrative cost savings, excessive learning curve for a new service provider, etc.	
√	Other reason. Please explain: Authority to enter into sole-source subaward is based on Federal and State regulations which govern the Program.	

Sidney Kikkaiwa	
Deputy Chief Executive Officer, CEO (Name)	
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s. Kebhawa	9 8 16
Deputy Chief Executive Officer, CEO (Signature)	Date

Attachment
Justification for Sole-Source Subaward – Disease Prevention and Health
Promotion Program
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Community and Senior Services ("CSS") as the County's designated Area Agency on Aging ("AAA") receives Older Americans Act ("OAA") and Older Californians Act ("OCA") Title III-D Disease Prevention funds from its funding source, California Department of Aging ("CDA") to administer Disease Prevention and Health Promotion ("DPHP") Program Services throughout Los Angeles County, excluding the City of Los Angeles. (The City of Los Angeles receives separate AAA funding from the CDA.) CSS seeks to administer a DPHP Program through a 9 month sole-source contract ("subaward") which shall include the current fiscal year of October 1, 2016 - June 30, 2017 with one contractor ("subrecipient" or "service provider") Partners In Care Foundation, Inc. ("PICF"), a non-profit organization that is considered the statewide and national leader in Evidence Based Programs (EBPs). The Federal government through the United States Department of Health and Human Services (HHS) and the CDA requires that DPHP services consist of an EBP that meets the highest-tier of evidence-based criteria (based on scientific evidence and demonstrated through rigorous evaluation to be effective in improving the health of older individuals) and that the qualified EBP be in place no later than the federal deadline of October 1, 2016, or risk losing this federal funding.

In accordance with Federal, State and County procurement standards, CSS released a competitive Request for Proposal solicitation in FY 2015-16 to obtain a subrecipient to provide the Program Services. However, CSS cancelled the RFP in order to implement recent guidance received from the CDA on the solicitation process. CSS continues to move forward with the redesign of the DPHP solicitation and this procurement is anticipated to be completed no later than June 30, 2017, resulting in a subaward effective for a four (4) year term.

State regulations governing Title III-D Disease Prevention funded programs, which are outlined in Title 22 California Code of Regulations Section 7360 (Noncompetitive Awards), allow an awarding agency (i.e., CSS/County), as defined in Title 45 Code of Federal Regulations Part 92.3, to engage in a subaward when the awarding agency (i.e., CSS/County) authorizes a noncompetitive proposal (i.e., sole-source award). Therefore, upon Board authorization, CSS will enter into a 9 month sole-source subaward with PICF while CSS redesigns and completes a new competitive solicitation.

In accordance with the Board's Policy Manual, Chapter 5.100 (Sole Source Contracts), CSS previously notified the Board about its intent to negotiate a noncompetitive sole-source subaward. Additionally, since CDA has required CSS to obtain its approval prior to engaging in certain actions, CSS has informed

Attachment
Justification for Sole-Source Subaward – Disease Prevention and Health
Promotion Program
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CDA about this approach to execute a sole-source subaward with PICF, pursuant to 22 CCR 7360 (Noncompetitive Awards).

It is in the best interests of the County to approve the execution of a sole-source subaward for the following reasons: 1) this quick action is necessary in order to meet the Federal and CDA mandate to have a qualified EBP in place by the federal deadline of October 1, 2016; 2) this action is in accordance with State regulations governing Title III-D Disease Prevention funded programs, and CSS/County has authority to enter into a noncompetitive agreement (i.e., a sole-source subaward); 3) the selected subrecipient has the established experience and knowledge in providing the highest-tier of evidence-based Services; 4) this action will allow CSS to effectively redesign the competitive procurement and award a new subaward for a four (4) year term; and 5) without the DPHP Services, many older individuals will lose the opportunity to learn effective techniques on reducing the incidence and prevalence of chronic and acute disease.