

September 27, 2022

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

ADOPTED

42 September 27, 2022

Los Angeles County Board of Supervisors

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> Sheila Kuehl Third District

Janice Hahn Fourth District

Kathryn Barger Fifth District 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:

CELIA ZAVALA EXECUTIVE OFFICER

DELEGATE AUTHORITY TO THE DEPARTMENTS OF HEALTH SERVICES, MENTAL HEALTH, AND PUBLIC HEALTH TO ACCEPT BEHAVIORAL HEALTH CONTINUUM INFRASTRUCTURE PROGRAM GRANT FUNDING AND TO EXECUTE RELATED GRANT AND SERVICE CONTRACTS (ALL SUPERVISORIAL DISTRICTS)

(3 VOTES)

Jaclyn Baucum Chief Operating Officer Alliance for Health Integration

Christina R. Ghaly, M.D.

Director, Department of Health Services

Lisa H. Wong, Psy.D.Acting Director, Department of Mental Health

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313 N. Figueroa Street, Suite 1014 Los Angeles, CA 90012

SUBJECT

Los Angeles County (County) Departments of Mental Health (DMH), Health Services (DHS), and Public Health (DPH), together referred to as Health Departments, are seeking authority to accept Behavioral Health Continuum Infrastructure Program (BHCIP) grant funding and to execute, amend, and terminate grant subcontract agreements (Contract) from the California Department of Health Care Services (DHCS) via Advocates for Human Potential (AHP), the State's grant and fiscal administrator.

IT IS RECOMMENDED THAT THE BOARD:

- Delegate authority to the Acting Director of DMH and Director of DPH, or their designees, to each negotiate and execute a Contract to expand regional planning efforts for the acquisition and expansion of behavioral health infrastructure in the County through Round 2 BHCIP grant funds in the amount of \$150,000 for each department, subject to review and approval as to form by County Counsel.
- Delegate authority to the Acting Director of DMH and the Director of DHS, or their designees, to accept BHCIP grant funds awarded to the County by AHP for BHCIP Round 3 Launch Ready Grant and each negotiate and execute a Contract to support investment

"To improve the health and wellbeing of Los Angeles County residents by aligning and efficiently implementing Board-approved prevention, treatment, and healing initiatives that require the collaborative contributions of the three health departments."



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in the expansion of the County behavioral health system at an anticipated amount of \$39,611,397 to DHS for LAC-USC Adult and Adolescent Acute Psychiatric Inpatient project and \$5,518,214 to DMH for MLK Jacqueline Avant Children and Family Center Pediatric Outpatient Clinic and Crisis Stabilization Unit projects, subject to review and approval as to form by County Counsel.

- 3. Delegate authority to the Acting Director of DMH, and the Directors of DHS and DPH (Directors), or their designees, to accept BHCIP grant funds awarded to the County by AHP for each future funding round (Rounds 4, 5, and 6), if awarded, through the entirety of the BHCIP, and negotiate and execute Contracts with AHP for BHCIP Rounds 4, 5, and 6 funding to construct, acquire, and expand properties, and invest in expansion of the County behavioral health system, subject to review and approval as to form by County Counsel with notification to the Board and Chief Executive Office (CEO).
- 4. Delegate authority to the Directors, or their designees, to amend the Contracts described in recommendations 1, 2, and 3 as needed, including extending the term; adding, deleting, modifying, or replacing Statements of Work; modifying the grant amount; and/or rolling over unspent funds, subject to prior review and approval by County Counsel with notification to the Board and CEO.
- 5. Delegate authority to the Directors, or their designees, to terminate the Contracts or funded programs in existing Contracts described in Recommendation 4, in accordance with the termination provisions. The Directors, or their designees, will notify the Board and CEO, in writing, of such termination action.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

As a result of the January 22, 2019, Board motion entitled, "Addressing the Shortage of Mental Health Hospital Beds," the Health Departments, Alliance for Health Integration (AHI), and CEO, including Alternatives to Incarceration (ATI) and Capital Programs, partnered to form the BHCIP Workgroup, which created a County and system-wide strategy to pursue DHCS BHCIP State grant funding.

DHCS released the BHCIP Request for Applications (RFA), which included six rounds of funding with release dates between July 2021 and December 2022. This effort aims to reduce homelessness, incarceration, unnecessary hospitalizations, inpatient days, and improve outcomes for people with behavioral health conditions by expanding capacity to short-term crisis stabilization, acute and sub-acute care, crisis residential treatment, community-based mental health residential treatment, substance use disorder (SUD) residential treatment, peer respite, mobile crisis, community and outpatient behavioral health services, and other clinically enriched longer-term treatment and rehabilitation opportunities. BHCIP represents the largest such provision of resources for infrastructure in the State's history, and provides an unprecedented opportunity to effect meaningful,

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sustainable change in the behavioral health and long-term care continuums in California and the County.

The recommendations included in this Board Letter allow the Health Departments to accept BHCIP grant funds allocated to the County for each funding round through the entirety of the BHCIP and negotiate and execute Contracts with AHP for BHCIP Rounds, amend Contracts, and execute the authority to terminate the Contract or funded program in existing Contracts. In the event the County is awarded a BHCIP grant for any of the subsequent funding rounds, the Board will be notified by Board memorandum when the County exercises the authority to accept grant funds.

IMPLEMENTATION OF STRATEGIC PLAN GOALS

The recommended actions are consistent with the County's Strategic Plan Goal I, Make Investments that Transform Lives, Strategy I.1 – Increase Our Focus on Prevention Initiatives, Strategy I.2 – Enhance Our Delivery of Comprehensive Interventions, Strategy I.3 – Reform Service Delivery Within Our Justice Systems; Goal II, Foster Vibrant and Resilient Communities, Strategy II.2 – Support the Wellness of our Communities; and Goal III, Realize Tomorrow's Government Today, Strategy III.2.3 – Prioritize and Implement Technology Initiatives That Enhance Service Delivery and Increase Efficiency, and Strategy III.3 – Pursue Operational Effectiveness, Fiscal Responsibility, and Accountability.

FISCAL IMPACT/FINANCING

The Health Departments anticipate no increase in net County cost as a result of the recommended actions. Grants awarded to each Health Department may fully or partially contribute to the cost of various projects and programs and will be included in each department's Operating Budget or Capital Project Budget through the annual budget process or a budget adjustment, as appropriate.

Operational funding for future fiscal years will be included in the Health Departments' annual budget request process and funded with existing resources from the impacted departments for a zero net County cost impact.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

BHCIP grants and Contracts will be administered by AHP, the DHCS administrative entity.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Securing these funding investments will ensure that care can be provided in the least restrictive settings by creating a wide range of options including, but not limited to, outpatient alternatives, urgent care, peer respite, wellness centers, and social

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rehabilitation models. A variety of care placements can provide a vital off-ramp from intensive behavioral health service settings and transition individuals (including the most vulnerable and those experiencing or at risk of homelessness) to safe, sustainable community living. BHCIP is designed to address the following State Priorities:

- Invest in behavioral health and community care options that advance racial equity
- Seek geographic equity of behavioral health and community care options
- Address urgent gaps in the care continuum for people with behavioral health conditions, including seniors, adults with disabilities, and children and youth
- Increase options across the life span that serve as an alternative to incarceration, hospitalization, homelessness, and institutionalization
- Meet the needs of vulnerable populations with the greatest barriers to access, including people experiencing homelessness and justice involvement
- Ensure care can be provided in the least restrictive settings to support community integration, choice, and autonomy
- Leverage County and Medi-Cal investments to support ongoing sustainability
- Leverage the historic State investments in housing and homelessness

CONCLUSION

Any questions regarding this Board Letter may be directed to Jaclyn Baucum, AHI Chief Operating Officer, at jbaucum@ahi.lacounty.gov.

Respectfully submitted,

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Director

Department of Health Services

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