COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

BOARD OF SUPERVISORS

GLORIA MOLINA
MARK RIDLEY-THOMAS
ZEV YAROSLAVSKY
DON KNABE
MICHAEL D. ANTONOVICH

DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.gov

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Reply To: (213) 738-4601
Fax: (213) 386-1297

February 15, 2011

ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

#21 FEBRUARY 15, 2011

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

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:

APPROVAL TO ACCEPT A GRANT AWARD FROM THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
AND
APPROVAL OF AN APPROPRIATION ADJUSTMENT
FOR FISCAL YEAR 2010-11
(ALL SUPERVISORIAL DISTRICTS)
(4 VOTES)

SUBJECT

Request approval to accept a six-year grant award from the Substance Abuse and Mental Health Services Administration to implement a Child Mental Health Initiative entitled Project ABC Family Wellness Network to serve children birth to five-year-olds and approval of an appropriation adjustment.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and authorize the acceptance of a Substance Abuse and Mental Health Services Administration (SAMHSA) grant award, a copy of which is attached as Attachment I, of up to $9,000,000, over a six-year period commencing on September 30, 2010 and ending on September 29, 2016, to implement a Child Mental Health Initiative entitled Project ABC Family Wellness Network (Project ABC FWN). The Year One award is $1,000,000. Future awards are subject to availability of federal funds, and satisfactory progress of the project.

2. Delegate authority to the Director of Mental Health, or his designee, to accept additional funding awards under the same SAMHSA grant in subsequent years, provided that the in-kind match requirements can continue to be met for the provision of mental health services to young children

ages birth to five years, and their families. Appropriate advance notification of acceptance of such future SAMHSA funding awards, including DMH's report on its ongoing plan to meet the match requirements for the grant award, will be provided to your Board and the Chief Executive Officer (CEO).

3. Authorize DMH to fill two full-time equivalent (FTE) ordinance positions as detailed in Attachment II, pursuant to Section 6.06.020 of the County Code and subject to allocation by the CEO. The positions will be funded through the federal SAMHSA grant award.

4. Approve and authorize the Director of Mental Health, or his designee, to prepare, sign, and execute retroactive sole source amendments, effective September 30, 2010, substantially similar to Attachment III, to three existing DMH Legal Entity (LE) Agreements with Children's Institute, Inc. (CII), For the Child, Inc. (FTC), and Pacific Asian Counseling Services (PACS), for FY 2010-11. These amendments, funded by the Project ABC FWN grant, will increase the Maximum Contract Amounts (MCA) of these three LE Agreements, as follows: 1) $427,509 for CII, with a revised MCA of $20,567,177; 2) $66,955 for FTC, with a revised MCA of $1,626,705; and 3) $76,744 for PACS, with a revised MCA of $2,541,096.

5. Delegate authority to the Director, or his designee, to prepare, sign, and execute future Amendments to these LE Agreements and establish as a new MCA, the aggregate of the original Agreement and all Amendments through and including these Amendments, provided that: 1) the County's total payments to each contract provider for each fiscal year will not exceed an increase of 20 percent from the last Board approved MCA; 2) any such increase will be used to provide additional services or to reflect program and/or policy changes; 3) your Board has appropriated sufficient funds for all changes; 4) approval of County Counsel, or designee, is obtained prior to any such Amendment; 5) County and contract providers may, by written Amendment, reduce programs or services without reference to the 20 percent limitation and revise the applicable MCA; and 6) the Director notifies your Board and the CEO of Agreement changes in writing within 30 days after execution of each Amendment.

6. Approve an appropriation adjustment (Attachment IV) for Fiscal Year (FY) 2010-11 in the amount of $674,000 consisting of $59,000 for Salaries and Employee Benefits (S&EB), and $615,000 in Services and Supplies (S&S) to provide spending authority for the implementation of Project ABC FWN, fully funded by the federal SAMHSA grant award.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Board approval of the recommended actions will allow DMH to accept a federal SAMHSA grant award totaling $9,000,000 over a six-year period and, consequently, increase DMH's spending authority by $674,000 for FY 2010-11 to implement Year One of the Project ABC FWN program.

On August 30, 2010, the United States Department of Health and Human Services, Public Health Service, notified DMH of the SAMHSA grant award as the outcome of a competitive application solicitation process. This SAMHSA award is retroactive to September 30, 2010. The Board actions are consistent with your Board's policy on timely submission for Board approval, as noted in the Chief Administrative Office's memo dated September 7, 2000, to your Board, under paragraph heading Overall Policies, Circumstances No. 2, "The County is receiving funds (normally from a higher level of government)."

No services have been delivered at this point in time. It is DMH's intent, with your Board's approval, to make the amendments for CII, FTC, and PACS effective September 30, 2010, consistent with the effective date of the SAMHSA grant award, in order to enable the contractors to claim costs involved for the planning process.

Implementation of Strategic Plan Goals

The recommended actions are consistent with County's Strategic Plan Goal 4, Health and Mental Health.

FISCAL IMPACT/FINANCING

There is no net County cost.

The appropriation adjustment will increase S&EB, $59,000, and S&S, $615,000, for a total of $674,000 for the implementation of Year One of the Project ABC FWN, fully funded by the federal SAMHSA grant award. The appropriation adjustment will provide spending authority for two full-time equivalent (FTE) ordinance positions and associated operating costs.

The appropriation adjustment will also increase the MCA of three DMH Legal Entity contractors, as follows: 1) $427,509 for CII, with a revised MCA of $20,567,177; 2) $66,955 for FTC, with a revised MCA of $1,626,705; and 3) $76,744 for PACS, with a revised MCA of $2,541,096.

There is a grant requirement for the increasing ratio of non-federal matching dollars to federal dollars for the term of the grant. The in-kind match will be provided by DMH, the Department of Children and Family Services (DCFS), CII, FTC, and PACS, among other Service Planning Area (SPA) 8 providers. SAMHSA funding and the in-kind match for the six year term of the grant totals $17,578,792.

SAMHSA funding for subsequent fiscal years will be subject to renewal requirements and will be included in DMH's annual budget process. Upon completion of the project, the FTE ordinance positions will be eliminated from the budget and terminated unless another funding source can be identified.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On August 30, 2010, the DMH received notification from the Department of Health and Human Services of the SAMHSA grant Project ABC FWN Year One award of $1,000,000. This award is renewable for up to five years and is subject to the availability of federal funds, as well as the satisfactory progress of the program. Proposed funding for Year One through Year Six is $1,000,000, $1,500,000, $2,000,000, $2,000,000, $1,500,000 and $1,000,000, respectively. The required Grant Management Statement is attached (Attachment V) for your reference.

DMH, in collaboration with DCFS, CII, FTC, and PACS, will provide comprehensive, family-centered, culturally-competent mental health services to young children ages birth to five years who are either involved with, or at risk of entry into, the child welfare system, who have a serious emotional or behavioral problem, and who reside in Service Planning Area (SPA) 8. SPA 8 was specifically

chosen for this program due to the high concentration of children ages birth to five years who require mental health intervention and services.

This program represents an innovative and important step in addressing the significant lack of expertise among mental health clinicians with regard to the mental health assessment and treatment of children ages birth to five years. In order to improve access to services, reduce stigma associated with emotional and behavioral problems in children, develop evidence-based treatments and translate research findings into community practice, identification and treatment of these problems in very young children must occur and barriers must be reduced. These challenges will be addressed by this program and replication of the successes will be promoted in other SPAs through training and technical assistance provided by program staff and through other resources, including the Mental Health Services Act (MHSA). Approximately 500 young children and families residing in SPA 8 will be enrolled during the six-year period of the grant, which represents a 73 percent increase in the number of birth to five-year-old children served.

The goals of this project align fiscally and philosophically with SAMHSA priorities, the California statewide child welfare improvement effort, and the goals of Los Angeles County to establish new mental health prevention and early intervention services. This program has the potential to efficiently coordinate funding streams in order to sustain this service network beyond the six-year term of the SAMHSA grant award.

This project, by statutory mandate, requires an increasing ratio of non-federal matching dollars to federal dollars in the amount of $8,578,792 during the term of this grant. All of the involved mental health agencies, DMH, CII, FTC, and PACS, as well as, DCFS and other SPA 8 providers, will provide in-kind matching funds throughout the six-year period of the grant. In-kind matching resources for FY 2010-11 and FY 2011-12 primarily consist of identified salary and consultant costs related to the coordination, planning, and implementation of this program. Increasing in-kind matching resources for the remaining fiscal years will include identified salary and consultant costs, as well as, potential State and local funds that support a variety of services offered by this program, including, but not limited to, substance abuse treatment, special education services, State-funded child care, Partnerships for Families services, Healthy Families services, MHSA-funded Children's Full Service Partnerships, DCFS Alternative Response services, health services, and Regional Center (for developmentally disabled children) services.

The acceptance of this grant will not obligate DMH to continue this program if the existing in-kind match requirements cannot be met. In this event, DMH could scale down the program to a level that would ensure that it could still continue to meet the corresponding in-kind match requirements.

The amendment format for contract amendments with CII, FTC, and PACS has been reviewed and approved by County Counsel as to form.

CONTRACTING PROCESS

To comply with your Board's contracting policy requirements for sole source contracts, DMH notified your Board on January 13, 2011, (Attachment VI) of its intent to negotiate sole source contract amendments with CII, FTC, and PACS for the new SAMHSA grant-funded program. In addition, attached is the required Sole Source Contract Checklist (Attachment VII), identifying and justifying the need for a sole source contract amendment that has been approved by the CEO

Subsequent to Board approval of these actions, DMH, in collaboration with CII, FTC, and PACS, will develop and coordinate the delivery of comprehensive, family-centered, and culturally-competent mental health services specifically targeted to young children ages birth to five years, and their families. These agencies have a history of extensive service provision to culturally-diverse populations, particularly monolingual communities, in SPA 8.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Acceptance of SAMHSA grant funds for the Project ABC Family Wellness Network will ensure that specifically integrated and comprehensive services will be provided to very young children who have severe emotional or behavioral problems and their families. The special focus of this program, tailored to meet the needs of this very vulnerable population in SPA 8, will greatly benefit the lives of these children and their families by providing effective case management, as well as, greater access to and coordination of needed services.

Respectfully Submitted,

MARVIN J. SOUTHARD, D.S.W.
Director of Mental Health

MJS:WA:LW:pjf

Enclosures

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors
Chairperson, Mental Health Commission

Notice of Award

Child Mental Health Initiative (CMHI) Issue Date: 08/30/2010
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Grant Number: 1U79SM059940-01

Program Director:
William Arroyo

Project Title: Project ABC Family Wellness Network

Grantee Address	Business Address
LOS ANGELES CNTY DEPT OF MENTAL HEALTH William Arroyo Director of Mental Health 550 South Vermont Avenue Los Angeles, CA 90020	Marvin Southard Director of Mental Health LA Cnty Dept of Mental Health 550 South Vermont Avenue Los Angeles, CA 90020

Budget Period: 09/30/2010 – 09/29/2011
Project Period: 09/30/2010 – 09/29/2016

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $1,000,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to LOS ANGELES CNTY DEPT OF MENTAL HEALTH in support of the above referenced project. This award is pursuant to the authority of Section 561 of the Public Health Service Act As Amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,

Kathleen Sample
Grants Management Officer
Division of Grants Management, OPS
Substance Abuse and Mental Health Services Administration

See additional information below

SECTION I – AWARD DATA – 1U79SM059940-01

Award Calculation (U.S. Dollars)	
Salaries and Wages	$272,845
Fringe Benefits	$115,621
Personnel Costs (Subtotal)	$388,466
Consortium/Contractual Cost	$561,787
Travel Costs	$19,000
Direct Cost	$969,253
Indirect Cost	$30,747
Approved Budget	$1,000,000
Federal Share	$1,000,000
Cumulative Prior Awards for this Budget Period	$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$1,000,000

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	$1,000,000
2	$1,500,000
3	$2,000,000
4	$2,000,000
5	$1,500,000
6	$1,000,000

* Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number:	93.243
EIN:	1956000927C7
Document Number:	10SM59940A
Fiscal Year:	2010

IC	CAN	Amount
SM	C96C133	$1,000,000

SM Administrative Data:
PCC: CMHI / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1U79SM059940-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1U79SM059940-01

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

a. The grant program legislation and program regulation cited in this Notice of Award.
b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
d. The HHS Grants Policy Statement.
e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:
Additional Costs

SECTION IV – SM Special Terms and Condition – 1U79SM059940-01

REMARKS:

This cooperative agreement funds and sets out the terms and conditions governing a collaborative effort between the grantee and the Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA).

While the responsibility for conducting these activities lies primarily with the grantee organization, Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA), through its designated representatives shall provide continuing technical assistance, consultation, and coordination in the conduct of the project during the period of this agreement. In addition to these terms and conditions and the applicable statutes and regulations, grantees are bound by the HHS Grants Policy Statement and all requirements in the Request for Applications (RFA) document.

Role of Grantees:

Grantees must:
(1) Comply with terms and conditions of the cooperative agreement award.
(2) Collaborate with CMHS staff in project implementation and monitoring.

Role of Federal Project Officer:

The Project Officer (PO) will have overall responsibility for monitoring the conduct and progress of Grantee Sites, including conducting site visits. The PO will provide substantial input, in collaboration with the grantees, both in the planning and implementation of the program and in evaluation activities, and will make recommendations regarding program continuance. Likewise, POs will participate in the publication of results and packaging and dissemination of products and materials in order to make the findings available to the field. CSAT/CSAP/CMHS/SAMHSA staff will receive authorship/co-authorship credit on all publications to which they have made substantial contributions.

Role of the Grants Management Officer:

The Grants Management Officer (GMO) is responsible for all business management aspects of negotiation, award, and financial and administrative aspects of the cooperative agreement. The GMO utilizes information from site visits, reviews of expenditure and audit reports, and other appropriate means to assure that the project is operated in compliance with all applicable Federal laws, regulations, guidelines, and the terms and conditions of award. Questions concerning the applicability of regulations and policies to this cooperative agreement, and all requests for required prior approvals such as requests for permission to expend funds for certain items should be directed to the GMO. Required approvals must be provided in writing and the GMO is the only person, except for the SAMHSA Administrator, who may grant such required approvals. Written approvals granted by other officials are not binding on the government. All changes in the terms of the cooperative agreement award must be issued in writing by the GMO.

STANDARD TERMS OF AWARD:

1) This grant is subject to the terms and conditions, included directly, or incorporated by reference on the Notice of Award (NoA). Refer to the order of precedence in Section III (Terms and Conditions) on the NoA.

2) The grantee organization is legally and financially responsible for all aspects of this grant, including funds provided to sub-recipients.

3) Grant funds cannot be used to supplant current funding of existing activities. Under the HHS Grants Policy Directives, 1.02 General – Definition: Supplant is to replace funding of a recipient's existing program with funds from a Federal grant.

4) The recommended future support as indicated on the NoA reflects TOTAL costs (direct plus indirect). Funding is subject to the availability of Federal funds, and that matching funds, (if applicable), is verifiable, progress of the grant is documented and acceptable.

5) By law, none of the funds awarded can be used to pay the salary of an individual at a rate in excess of the Executive Level I, which is $199,700 annually.

6) "Confidentiality of Alcohol and Drug Abuse Patient Records" regulations (42 CFR 2) are applicable to any information about alcohol and other drug abuse patients obtained by a "program" (42 CFR 2.11), if the program is federally assisted in any manner (42 CFR 2.12b).

Accordingly, all project patient records are confidential and may be disclosed and used only in accordance with (42 CFR 2). The grantee is responsible for assuring compliance with these regulations and principles, including responsibility for assuring the security and confidentiality of all electronically transmitted patient material.

7) Accounting Records and Disclosure - Awardees and sub-recipients must maintain records which adequately identify the source and application of funds provided for financially assisted activities. These records must contain information pertaining to grant or subgrant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and income. The awardee, and all its sub-recipients, should expect that SAMHSA, or its designee, may conduct a financial compliance audit and on-site program review of grants with significant amounts of Federal funding.

8) Per (45 CFR 74.36 and 45 CFR 92.34) and the HHS Grants Policy Statement, any copyrighted or copyrightable works developed under this cooperative agreement/grant shall be subject to a royalty-free, nonexclusive and irrevocable license to the government to reproduce, publish, or otherwise use them and to authorize others to do so for Federal Government purposes. Income earned from any copyrightable work developed under this grant must be used a program income.

9) A notice in response to the President's Welfare-to-Work Initiative was published in the Federal Register on May 16, 1997. This initiative is designed to facilitate and encourage grantees and their sub-recipients to hire welfare recipients and to provide additional needed training and/or mentoring as needed. The text of the notice is available electronically on the OMB home page at http://www.whitehouse.gov/omb/fedreg/omb-not.html.

10) Program income accrued under the award must be accounted for in accordance with (45 CFR 74.24) or (45 CFR 92.25) as applicable. Program income must be reported on the Financial Status Report, Standard Form 269 (long form).

Program income accrued under this award may be used in accordance with the additional costs alternative described in (45 CFR 74.24(b)(1)) or (45 CFR 92.25(g)(2)) as applicable. Program income must be used to further the grant objectives and shall only be used for allowable costs as set forth in the applicable OMB Circulars A-102 ("Grants and Cooperative Agreements with State and Local Governments") and A-110 ("Uniform Administrative Requirements for Grants and Agreements With Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations").

11) Actions that require prior approval must be submitted in writing to the Grants Management Officer (GMO), SAMHSA. The request must bear the signature of an authorized business official of the grantee organization as well as the project director. Approval of the request may only be granted by the GMO and will be in writing. No other written or oral approval should be accepted and will not be binding on SAMHSA.

12) Any replacement of, or substantial reduction in effort of the Program Director (PD) or other key staff of the grantee or any of the sub-recipients requires the written prior approval of the GMO. The GMO must approve the selection of the PD or other key personnel, if the individual being nominated for the position had not been named in the approved application, or if a replacement is needed should the incumbent step down or be unable to execute the position's responsibilities. A resume for the individual(s) being nominated must be included with the request. Key staff (or key staff positions, if staff has not been selected) are listed below:

William Arroyo, Medical Director @ 20% level of effort

13) Refer to the NoA under Section II (Payment/Hotline Information) regarding the Payment Management System and the HHS Inspector General's Hotline concerning fraud, waste or abuse.

14) As the grantee organization, you acknowledge acceptance of the grant terms and conditions by drawing or otherwise obtaining funds from the Payment Management System. In doing so, your organization must ensure that you exercise prudent stewardship over Federal funds and that all costs are allowable, allocable and reasonable.

15) No HHS funds may be paid as profit (fees) per (45 CFR Parts 74.81 and 92.22(2)).

16) RESTRICTIONS ON GRANTEE LOBBYING (Appropriations Act Section 503).

(a) No part of any appropriation contained in this Act shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, radio, television, or video presentation designed to support or defeat legislation pending before the Congress, except in presentation to the Congress itself or any State legislature.

(b) No part of any appropriation contained in this Act shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence legislation or appropriations pending before the Congress or any State legislature.

17) Where a conference is funded by a grant or cooperative agreement the recipient must include the following statement on all conference materials (including promotional materials, agenda, and Internet sites):

Funding for this conference was made possible (in part) by (insert grant or cooperative agreement award number) from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

18)This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to http://samhsa.gov/grants/trafficking.aspx.

19) Grantees must comply with the requirements of the National Historical Preservation Act and EO 13287, Preserve America. The HHS Grants Policy Statement provides clarification and uniform guidance regarding preservation issues and requirements (pages I-20, "Preservation of Cultural and Historical Resources"). Questions concerning historical preservation, please contact, Mike Daniels, SAMHSA Federal Preservation Coordinator, SAMHSA at mike.daniels@samhsa.hhs.gov or 240-276-0759.

20) Executive Order 13410: Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs promotes efficient delivery of quality health care through the use of health information technology, transparency regarding health care quality and price, and incentives to promote the widespread adoption of health information technology and quality of care. Accordingly, all grantees that electronically exchange patient level health information to external entities where national standards exist must:

A) Use recognized health information interoperability standards at the time of any HIT system update, acquisition, or implementation, in all relevant information technology systems supported, in whole or in part, through this agreement/contract. Please consult http://www.hhs.gov/healthit for more information, and

B) Use HIT products (such as electronic health records, personalized health records, and the network components through which they operate and share information) that are certified by the Certification Commission for Healthcare Information Technology (CCHIT) or other recognized certification board, to ensure a minimum level of interoperability or compatibility of health IT products(http://www.cchit.org/). For additional information contact: Jim Kretz (CMHS) at 240-276-1755 or jim.kretz@samhsa.hhs.gov; Richard Thoreson (CSAT) at 240-276-2827 or richard.thoreson@samhsa.hhs.gov; or Sarah Wattenberg (OPPB) at 240-276-2975 or sarah.wattenberg@samhsa.hhs.gov.

21) If federal funds are used by the grantee to attend a meeting, conference, etc. and meal(s) are provided as part of the program, then the per diem applied to the Federal travel costs (M&IE allowance) must be reduced by the allotted meal cost(s).

22) By signing the application (PHS-5161-1) face page in Item #21, the Authorized Representative (AR) certifies (1) to the statements contained in the list of certifications* and (2) provides the required assurances* and checking the "I AGREE" box provides SAMHSA with the AR's agreement of compliance. It is not necessary to submit signed copies of these documents, but should be retained for your records.

*The documents are available on the SAMHSA website at http:\\www.samhsa.gov/Grants/new.aspx or contained within the Request for Applications (RFA).

REPORTING REQUIREMENTS:

1) Financial Status Report (FSR), Standard Form 269 (long form) is required on an annual basis and must be submitted for each budget period no later than 90 days after the close of the budget period. The FSR 269 is required for each 12 month period, regardless of the overall length of the approved extension period authorized by SAMHSA. In addition, a final FSR 269 is due within 90 days after the end of the extension. If applicable, include the required match on this form under Transactions (#10 a-d), Recipient's share of net outlays (#10 e-i) and Program Income (q-t) in order for SAMHSA to determine whether matching is being provided and the rate of expenditure is appropriate. Adjustments to the award amount, if necessary, will be made if the grantee fails to meet the match. The FSR must be prepared on a cumulative basis and all program income must be reported. Disbursements reported on the FSR must equal/or agree with the Final Payment Management System Report (PSC-272). The FSR may be accessed from the following website at http://www.whitehouse.gov/omb/grants/sf269.pdf and the data can be entered directly on the form and the system will calculate the figures and then print and mail to this office.

2) The grantee must provide bi-annual reports (April 30, 2011 and September 30, 2011), and final progress reports due by December 31, 2011. The final progress report must summarize information from the annual reports, which describes the accomplishments of the project and describe next steps for implementing plans developed during the grant period.

3) The grantee must comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the RFA or by the Project Officer. This information is needed in order to comply with PL 102-62 which requires that SAMHSA report evaluation data to ensure the effectiveness and efficiency of its programs.

4) Submission of audit reports in accordance with the procedures established in OMB Circular

A-133 is required by the Single Audit Act Amendments of 1966 (P.L. 104-156). An audit is required for all entities which expend $500,000 or more of Federal funds in each fiscal year and is due to the Clearinghouse within 30 days of receipt from the auditor or within nine (9) months of the fiscal year, whichever occurs first, to the following address:

Federal Audit Clearinghouse
Bureau of the Census
1201 E. 10th Street
Jeffersonville, IN 47132

Failure to comply with the above stated terms and conditions may result in suspension, classification as High Risk status, termination of this award or denial of funding in the future.

INDIRECT COSTS:

If the grantee chooses to establish an indirect cost rate agreement, it is required to submit an indirect cost rate proposal to the appropriate office within 90 days from the start date of the project period. For additional information, please refer to HHS Grants Policy Statement Section I, pages 23-24.

SAMHSA will not accept a research indirect cost rate. The grantee must use other-sponsored program rate or lowest rate available.

Please contact the appropriate office of the Division of Cost Allocation to begin the process for establishing an indirect cost rate. To find a list of HHS Division of Cost Allocation Regional Offices, go to the SAMHSA website www.samhsa.gov, then click on "grants"; then click on "important offices".

All responses to special terms and conditions of award and postaward requests must be mailed to the Division of Grants Management, OPS, SAMHSA below:

For Regular Delivery:
Division of Grants Management,
OFR, SAMHSA
1 Choke Cherry Road,Room 7-1091
Rockville, MD 20857

For Overnight or Direct Delivery:
Division of Grants Management,
OFR, SAMHSA
1 Choke Cherry Road, Room 7-1091
Rockville, MD 20850

CONTACTS:

Gwendolyn Simpson, Grants Specialist
Phone: 240-276-1408 Email: gwendolyn.simpson@samhsa.hhs.gov Fax: 240-276-1430

ATTACHMENT II

COUNTY OF LOS ANGELES DEPARTMENT OF MENTAL HEALTH
PROJECT ABC FAMILY WELLNESS NETWORK

ITEM NO. & SUB LETTER	TITLE OF POSITION	ORDINANCE POSITIONS	FTE'S
8697A	CLINICAL PSYCHOLOGIST II	1	1.00
0907 A	STAFF ASSISTANT I	1	1.00
		TOTAL	2.00

2/3/2011

ATTACHMENT III

CONTRACT NO. _____

AMENDMENT NO. _____

THIS AMENDMENT is made and entered into this ____ day of _____, 2011, by and between the COUNTY OF LOS ANGELES (hereafter "County") and _____ _____ (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated _____, identified as County Agreement No._____, and any subsequent amendments, (if applicable) (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Year (FY) 2010-11 only, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS the Substance Abuse and Mental Health Services Administration (SAMHSA), awarded a grant to County in the amount of $1,000,000 for Project ABC Family Wellness Network for a budget period from September 30, 2010 to September 29, 2011, and for a project period from September 30, 2010 to September 29, 2016 to provide comprehensive, family-centered, culturally-competent mental health services to young children, ages birth to five years, and their families; and

WHEREAS, County is collaborating with a number of services providers for Project ABC – Family Wellness Network, including Contractor; and

WHEREAS, effective **September 30, 2010**, County and Contractor intend to amend the Agreement to add SAMHSA – Family Wellness Network grant funds in the amount of $_____to be used by Contractor to cover SAMHSA grant Project ABC Family Wellness Network start-up costs; and

WHEREAS, anticipated SAMHSA allowable start-up costs are identified in Attachment V, "SAMHSA – Family Service Network" service exhibit, which represents County's best effort to identify allowable start-up costs; and

WHEREAS, if contractor terminates its Agreement within 24 months of the effective date of this Amendment, any and all of SAMHSA allowable start-up costs received by Contractor from County may be due by Contractor to County at the sole discretion of Director; and

WHEREAS, Contractor shall comply with all statues, regulations, and directives pertaining to SAMHSA allowable start-up costs as they currently exist or as they may later be modified by Federal, State, and/or County authorities, and in no event shall County be obligated to pay contractor for start up costs not claimable to SAMHSA.

WHEREAS, for FY(s) 2010-11, 2011-12, and 2012-13 (if applicable) the revised the Maximum Contract Amount (MCAs) will be $_____, $_____, and $_____, respectively.

NOW, THEREFORE, County and Contractor agree that Agreement shall be amended effective September 30, 2010, only as follows:

1. For FY 2010-11, Paragraph 2 (Termination Without Cause), SAMHSA termination language shall be added as follows:

   "If contractor terminates its Agreement within 24 months of the effective date of this Amendment, any and all of SAMHSA allowable start-up costs received by Contractor from County may be due by Contractor to County at the sole discretion of Director.

   SAMHSA Family Wellness Network grant funds are subject to the terms and conditions of the SAMHSA Family Wellness Network grant, which are

incorporated herein by reference, and to the terms and conditions, included directly, or incorporated by reference on the Notice of Award, which are incorporated herein by reference. Reimbursement of allowable cost and expenses is subject to the terms and conditions of the SMASH grant, which are incorporated herein by reference, and to the terms and conditions, included directly, or incorporated by reference on the Notice of Award, which are incorporated herein by reference."

2. Financial Exhibit A (FINANCIAL PROVISIONS), Attachment II, Paragraph B (LIMITATIONS ON MAXIMUM REIMBURSEMENT), SAMHSA compliance language shall be added as follows:

"(6) Contractor shall comply with all statues, regulations, and directives pertaining to SAMHSA allowable start-up costs as they currently exist or as they may later be modified by Federal, State, and/or County authorities, and in no event shall County be obligated to pay contractor for start up costs not claimable to SAMHSA. "

3. Financial Exhibit A (FINANCIAL PROVISIONS), Attachment II, Paragraphs C (Reimbursement for Initial Period) and D (1) (Reimbursement If Agreement is Automatically Renewed) shall be deleted in their entirety and the following substituted therefore:

"C. <u>REIMBURSEMENT FOR INITIAL PERIOD</u>

(1) The Maximum Contract Amount for the Initial Period of this Agreement as described in Paragraph 1 (TERM) of the Legal Entity Agreement shall not exceed _____ DOLLARS ($_____) and shall consist of Funded Programs as shown on the Financial Summary.

D. REIMBURSEMENT IF AGREEMENT IS AUTOMATICALLY RENEWED

(1) Reimbursement For First Automatic Renewal Period: The Maximum Contract Amount for the First Automatic Renewal Period of this Agreement as described in Paragraph 1 (TERM) of the DMH Legal Entity Agreement shall not exceed _____ DOLLARS ($_____) and shall consist of Funded Programs as shown on the Financial Summary.

(2) Reimbursement For Second Automatic Renewal Period: The Maximum Contract Amount for the First Automatic Renewal Period of this Agreement as described in Paragraph 1 (TERM) of the DMH Legal Entity Agreement shall not exceed _____ DOLLARS ($_____) and shall consist of Funded Programs as shown on the Financial Summary.

4. Financial Summary - _ for FY 2010-11 shall be deleted in its entirety and replaced with Financial Summary - _ for FY 2010-11 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - _ for FY 2010-11 shall be deemed amended to state "Financial Summary - _ for FY 2010-11."

5. Financial Summary - _ for FY 2011-12 (if applicable) shall be deleted in its entirety and replaced with Financial Summary - _ for FY 2011-12 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - _ for FY 2011-12 shall be deemed amended to state "Financial Summary - _ for FY 2011-12."

6. Financial Summary - _ for FY 2012-13 (if applicable) shall be deleted in its entirety and replaced with Financial Summary - _ for FY 2012-13 attached hereto and incorporated herein by reference. All references in Agreement to Financial

Summary - _ for FY 2012-13 shall be deemed amended to state "Financial Summary - _ for FY 2012-13."

7. Attachment V, Service Exhibits, shall be deleted in its entirety and replaced with the revised Attachment V, Service Exhibits - __. All referenced in Agreement to Attachment V, Service Exhibits shall be deemed amended to state Attachment V, Service Exhibits - __.

8. A Service Exhibit for "SAMHSA – Family Wellness Network" shall be added to this Agreement.

9. Contractor shall provide services in accordance with Contractor's FY _____ Negotiation Package for this Agreement and any addenda thereto approved in writing by director.

10. Except as provided in this Amendment, all other terms and conditions of the Agreement shall remain in full force and effect.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by County's Director of Mental Health or his designee, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By_____
MARVIN J. SOUTHARD, D.S.W.
Director of Mental Health

_____
CONTRACTOR

By _____

Name_____

Title _____
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____
Chief, Contracts Development
and Administration Division

ATTACHMENT III

Contractor Name:
Legal Entity Number:
Agreement Period:
Fiscal Year:

DMH Legal Entity Agreement
Attachment III
The Financial Summary -
Amendment Number

	Funded Program	Max. Program Amount — Non-Medi-Cal/ Indigent	Max. Program Amount — Medi-Cal/ Healthy Families	Combined Max. Program Amount
101	Family Preservation Program			$ -
102	Child Abuse Prevention Intervention and Treatment (AB2994)			$ -
103	Special Education Pupil (SEP)			$ -
104	Specialized Foster Care - Child Welfare Services			$ -
105	Comprehensive SOC Prog (SAMHSA, CFDA #93.958)			$ -
106	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)			$ -
107	Juvenile Justice Program (STOP)			$ -
108	Juvenile Justice Program (JJCPA)			$ -
109	Juvenile Justice Program (Co-occurring Disorder)			$ -
110	Path McKinney, CFDA #93.150			$ -
111	Homeless Services (NCC)			$ -
112	Juvenile Justice Program (Functional Family Therapy)			$ -
113	CalWORKs			$ -
114	Homeless - Family Project			$ -
115	GROW			$ -
116	Family Wellness Network (SAMHSA, CFDA #93.243)			$ -
201	Other Mental Health Services (CGF Funded Programs)			$ -
	MHSA:			
301	Full Service Partnership (FSP) - Child			$ -
302	FSP - TAY			$ -
303	FSP - Adult			$ -
304	FSP - Older Adult			$ -
305	Field Capable Clinical Services (FCCS)			$ -
306	Probation Camps			$ -
307	Urgent Care Centers/Crisis Resolution Services			$ -
308	Wellness/Client-Run Centers			$ -
309	Institutions for Mental Disease (IMD) Step Down			$ -
310	Enriched Residential Services			$ -
311	Jail Transition and Linkage Services			$ -
312	POE (Outreach & Engagement)			$ -
313	Prevention and Early Intervention (PEI)			$ -
	Unique/Other:			
401	DCFS Medical Hubs (VIP)			$ -
402	DCFS Starview LS PHF			$ -
403	DCFS Independent Living (Hillview & HFLF)			$ -
404	DCFS THP (HFLF)			$ -
405	DHS Social Model			$ -
406	DHS LAMP			$ -
407	DHS Dual Diagnosis (BHS)			$ -
408	Other Employment Services (SSG)			$ -
409	In Jail Treatment & Linkage (SSG)			$ -
410	CGF - IMD Step Down			$ -
411	Juvenile Justice Program (Title IV-E - MST)			$ -
501	One-time PEI Training Funding			$ -

Maximum Contract Amount $ -

1/31/2011

PINK (1)

BA FORM 09/09

BOARD OF SUPERVISORS OFFICIAL COPY

COUNTY OF LOS ANGELES

REQUEST FOR APPROPRIATION ADJUSTMENT

DEPT'S. NO. 435

DEPARTMENT OF MENTAL HEALTH

January 31, 2011

AUDITOR-CONTROLLER:

THE FOLLOWING APPROPRIATION ADJUSTMENT IS DEEMED NECESSARY BY THIS DEPARTMENT. PLEASE CONFIRM THE ACCOUNTING ENTRIES AND AVAILABLE BALANCES AND FORWARD TO THE CHIEF EXECUTIVE OFFICER FOR HIS RECOMMENDATION OR ACTION.

ADJUSTMENT REQUESTED AND REASONS THEREFOR

FY 2010-11

4 - VOTES

SOURCES	USES
BA DETAIL - SEE ATTACHMENT (PAGE 1)	BA DETAIL - SEE ATTACHMENT (PAGE 1)

SOURCES TOTAL: $ 674,000

USES TOTAL: $ 674,000

JUSTIFICATION

This adjustment is requested to increase appropriation for Salary & Employee Benefits and Services & Supplies to provide hiring and spending authority to further implement the new Child Mental Health Initiative - Project ABC Family Wellness Network. This appropriation increase is fully funded by the Federal SAMHSA Grant. There is no impact on net County cost.

ADOPTED
BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

21 FEB 15 2011

BOARD OF SUPERVISOR'S APPROVAL (AS REQUESTED/REVISED)

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

Margo Morales

AUTHORIZED SIGNATURE Margo Morales, Administrative Deputy

REFERRED TO THE CHIEF EXECUTIVE OFFICER FOR ---

☐ ACTION

☑ RECOMMENDATION

AUDITOR-CONTROLLER BY Karen Shikuma

Feb 3 2011

B.A. NO. 098

☑ APPROVED AS REQUESTED

☐ APPROVED AS REVISED

CHIEF EXECUTIVE OFFICER BY

Feb. 3, 2011

SEND 6 COPIES TO THE AUDITOR-CONTROLLER

REQUEST FOR APPROPRIATION ADJUSTMENT
DEPARTMENT OF MENTAL HEALTH

FY 2010-11
4 - VOTES

Source	Use
Mental Health A01-MH-90-9001-20500 Federal Other $674,000 Increase Revenue	Mental Health A01-MH-1000-20500 Salary & Employee Benefits $59,000 Increase Appropriation Mental Health A01-MH-2000-20500 Services & Supplies $615,000 Increase Appropriation
Total Source: $674,000	Total Use: $674,000

Justification:
This adjustment is requested to increase approrpiation for Salary & Employee Benefits and Services & Supplies to provide hiring and spending authority to implement the new Child Mental Health Initiative - Project ABC Family Wellness Network. This will be fully funded by the Federal SAMHSA Grant. There is no impact to Net County Cost.

BA# 098 K Shikuma 2/3/11

ATTACHMENT V

COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

BOARD OF SUPERVISORS
GLORIA MOLINA
MARK RIDLEY-THOMAS
ZEV YAROSLAVSKY
DON KNABE
MICHAEL D. ANTONOVICH

DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.gov

Reply To: (213) 738-4601
Fax (213) 388-1297

January 20, 2011

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director of Mental Health

SUBJECT: **GRANT MANAGEMENT STATEMENT FOR THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION AWARD FOR THE CHILD MENTAL HEALTH INITIATIVE - PROJECT ABC FAMILY WELLNESS NETWORK FOR FEDERAL FISCAL YEAR 2010-11**

Enclosed is the Grant Management Statement for the Substance Abuse and Mental Health Services Administration (SAMHSA) Award for the Child Mental Health Initiative (CMHI) - Project ABC Family Wellness Network for Federal Fiscal Year 2010-11. The Initial Allocation amount is $1,000,000. This award is renewable for up to five years and is subject to the availability of funds and satisfactory progress of the program.

The purpose of the SAMHSA CMHI grant is to develop integrated home and community-based services and supports for children and youth with serious emotional disturbances and their families by encouraging the development and expansion of effective and enduring systems of care.

MJS:RK:rc

Enclosure

c: Health Deputies
Chief Executive Officer
Executive Officer, Board of Supervisors
County Counsel
Sheila Shima, CEO
Robin Kay, Ph.D.
Margo Morales
Cathy Warner, L.C.S.W.
Kimberly Nall
William Arroyo, M.D.
Richard Kushi
Lisa Wicker

ATTACHMENT V

Los Angeles County Chief Executive Office

Grant Management Statement for Grants $100,000 or More

Department: Mental Health

Grant Project Title and Description: Substance Abuse and Mental Health Services Administration (SAMHSA) Child Mental Health Initiative (CMHI) Grant – Project ABC Family Wellness Network

The purpose of CMHI grants is to develop integrated home and community-based services and supports for children and youth with serious emotional disturbances and their families by encouraging the development and expansion of effective and enduring systems of care.

Funding Agency	Program (Fed. Grant #/State Bill or Code #)	Grant Acceptance Deadline
SAMHSA	SAMHSA Grant No. 1U79 SM059940-01	Board notification of Grant acceptance. Deadline not applicable.

Total Amount of Grant Funding: $1,000,000 ($750,000 pro-rated for County FY 2010-11)	**County Match:** N/A	
Grant Period: FY 2010-11	**Begin Date:** 09/30/2010	**End Date:** 06/30/2011
Number of Personnel Hired Under This Grant:	**Full Time:** 2 FTE	**Part Time:** N/A

Obligations Imposed on the County When the Grant Expires

Will all personnel hired for this program be informed this is a grant-funded program?	Yes X	No
Will all personnel hired for this program be placed on temporary ("N") items?	Yes X	No
Is the County obligated to continue this program after the grant expires?	Yes	No X
If the County is not obligated to continue this program after the grant expires, the Department will:		
a.) Absorb the program cost without reducing other services	Yes	No X
b.) Identify other revenue sources (describe below) The Department will explore all sources of potential or new funding if there are no existing funds available.	Yes X	No
c.) Eliminate or reduce, as appropriate, positions/program costs funded by the grant.	Yes X	No

Impact of additional personnel on existing space:

Two FTE's requested will be housed at existing facility.

Other requirements not mentioned above:

Department Head Signature: _____

Date: 1/21/2011

ATTACHMENT VI

COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

BOARD OF SUPERVISORS
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DON KNABE
MICHAEL D. ANTONOVICH

DEPARTMENT OF MENTAL HEALTH

http://dmh.lacounty.gov

Reply To: (213) 738-4801
Fax: (213) 386-1297

January 13, 2011

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director of Mental Health

SUBJECT: **ADVANCE NOTIFICATION OF INTENT TO ENTER INTO SOLE SOURCE CONTRACT AMENDMENTS WITH CHILDREN'S INSTITUTE, INC.; FOR THE CHILD, INC.; AND PACIFIC ASIAN COUNSELING SERVICES**

This memo is to comply with the Board of Supervisors Policy Manual, Section 5.100 Sole Source Contracts. It is the Los Angeles County Department of Mental Health's (DMH) intent to enter into sole source contract amendments with the following three (3) DMH Legal Entity providers in the amounts specified:

1) Children's Institute, Inc. (CII), located at 711 South New Hampshire Avenue, Los Angeles, CA 90005, in the amount of $423,318, with a revised Maximum Contract Amount (MCA) of $19,532,126.
2) For the Child, Inc. (FTC), located at 4565 California Avenue, Long Beach, CA 90807, in the amount of $66,955, with a revised MCA of $1,626,705.
3) Pacific Asian Counseling Services (PACS), located at 8616 La Tijera Boulevard, Suite 200, Los Angeles, CA 90045, in the amount of $76,744, with a revised MCA of $2,541,096.

These three (3) providers will work in collaboration with DMH on a newly-awarded Substance Abuse and Mental Health Services Administration (SAMHSA) Child Mental Health Initiative Grant in Service Area 8 entitled Project ABC Family Wellness Network (Project ABC-Wellness). The $9,000,000 grant covers a period of six (6) years and was awarded to the County of Los Angeles on behalf of DMH as a result of a successful competitive application solicitation process. DMH accepted the Fiscal Year (FY) 2010-11 award totaling $1,000,000, effective September 30, 2010, for the implementation of the new program and will request the authority to expend this amount during the FY 2010-11 budget process.

Project ABC-Wellness will work to establish a system of care for children ages birth to five (5) years old who are either involved with, or at risk of involvement with, the Department of Children and Family Services (DCFS) in Service Area 8. A system of care is an organizational philosophy and framework that involves collaboration across agencies, families, and youth for the purpose of improving access and expanding the array of coordinated community-based, culturally- and linguistically-competent services and supports for children and youth with a serious emotional disturbance and their families. Research has demonstrated that systems of care have a positive effect on the structure, organization, and availability of services for children and youth with serious mental health needs. This project will build upon and expand the accomplishments of Project ABC-About Building Connections in Service Area 4, a system of care grant led by DMH and in place since 2005.

The three (3) providers specified as DMH partners in the grant, CII, FTC and PACS, are each uniquely qualified to provide services under Project ABC-Wellness. All three (3) providers were selected to receive contract dollars in Service Area 8 to provide specialized assessment services for children newly-detained by DCFS specifically due to their experience serving children aged zero to five (5) years. They are all very active in the service area Birth to Five Collaborative and have considerable experience providing training that, through this project, could be directed toward early childhood workforce development. There is currently a limited capacity for trained family advocates in early childhood service systems as most existing family organizations are focused on older children or non-mental health issues. FTC and CII have strong, committed parent programs and have been working successfully in the community for years. These providers will serve as core leaders to strengthen the project's crucial family advocacy component.

In addition to their common qualifications, each provider has a distinctive contribution to the four (4) primary components of the grant, including: Clinical Expertise, Social Media and Marketing Expertise, Cultural and Linguistic Competency, and Training. CII brings a wealth of knowledge and experience from its successful implementation of Project ABC-About Building Connections in Service Area 4. It has been heavily involved in the application and establishment of the current grant and will continue to transfer knowledge from its previous experience. It will spearhead the Social Media and Marketing component of the grant, while contributing significant clinical expertise and extensive cultural competency serving Latino and African-American families. CII has a long history of expertise in providing services to young children and is both a foster family and Family Preservation agency.

FTC will be significantly involved in the Clinical component of the grant. It has a significant history of, and experience with, providing services specifically targeting children from birth to five (5) years old and their families. FTC has specialized programs for children traumatized by physical and sexual abuse, serious neglect and exposure to family and community violence, as well as a Child Abuse Response Team that responds to relevant 911 calls and works in partnership with the Long Beach Police Department and the Los Angeles County Sheriff's Department. It has been a leader in developing, implementing, and consulting to early care and education programs. FTC was responsible for initiating, hosting, and co-facilitating the successful Birth to Five Collaborative in Service Area 8, which has been an invaluable resource for local providers and will play a key role in developing, implementing and sustaining Project ABC-Wellness.

PACS will contribute substantially to the Cultural and Linguistic Competency component of the grant and brings unparalleled expertise working with Asian-American and Pacific-Islander populations, the community least served by County mental health services. It also has extensive experience in providing services to African-American and Latino populations. In addition to its array of services for young children and their families, PACS has been committed to advocating for the needs of the Asian/Pacific-Islander communities. It participates in a variety of collaborations and networks to continue to identify and serve the populations' priority needs. The Cultural and Linguistic Competence Coordinator for Project ABC-Wellness will be hired by PACS and will lead the Cultural and Linguistic Competency Committee, whose task will be to ensure that services to all cultural and ethnic populations will be linguistically-appropriate, sensitive to cultural differences, in harmony with cultural values and able to build upon culture-specific strengths and resources.

Sole source contract amendments with these three (3) providers will allow DMH to:

- Provide comprehensive, family-centered, culturally-competent mental health services to young children ages birth to five (5) years and their families.
- Enroll approximately 500 young children and their families residing in Service Area 8 during the six (6) year period of the grant; this represents a 73 percent increase over the number of children served in 2007 in the same age range.
- Identify and coordinate a broad palette of community-based services, including primary care, nutrition, early education, child care, family support, family mental health, and alcohol and drug treatment services.
- Develop an Interagency Care Team, comprised of staff from DMH, DCFS, Regional Center, CII, FTC and PACS, to develop services in true collaboration

with families to ensure integrated and coordinated care utilizing promising and evidence-based practices.

- Coordinate the birth to five (5) system of care and funding streams in order to sustain the service network beyond the six (6) year term of the grant award.
- Replicate the successes of the program in other service areas through training and technical assistance to improve the quality of early childhood mental health services throughout the entire County.

Unless otherwise instructed by a Board office, DMH will proceed with negotiating sole source contract amendments with CII, FTC, and PACS within two (2) weeks. DMH will work closely with both the Office of the County Counsel and the Chief Executive Office in preparing the amendments.

MJS:RK:CW:LW:lh

c: Health Deputies
Chief Executive Officer
Executive Officer, Board of Supervisors
County Counsel
Sheila Shima, CEO
Robin Kay, Ph.D.
Margo Morales
Cathy Warner, L.C.S.W.
William Arroyo, M.D.
Richard Kushi
Lisa Wicker
Raymond Chow

SOLE SOURCE CHECKLIST

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 more 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: Please see additional information.

Sheila Shima,
Deputy Chief Executive Officer

2/3/11
Date

SOLE SOURCE CHECKLIST

CII, FTC, and PACS are each uniquely qualified to provide services under Project ABC-FWN due to the combination of clinical, cultural, and community engagement expertise and experience they contribute to the project.

Please note the following:

- All three providers have been leaders in initiating and contributing to the success of the Birth to Five Collaborative in Service Area 8, which will play a key role in developing, implementing and sustaining Project ABC-FWC.

- Both CII and FTC bring highly significant experience providing specialized services to the project's targeted birth-to-five population, specifically children involved with the child welfare system. They have been leaders in developing, implementing, training and consulting to early care and education programs. Both programs have strong, committed parent programs and have been working successfully in the community for years. These providers will serve as core leaders to strengthen the project's crucial clinical and family advocacy components.

- FTC has specialized programs for young children traumatized by physical and sexual abuse, serious neglect, and exposure to family and community violence. FTC will be a leader in the clinical component of the grant.

- CII brings a wealth of knowledge and experience from their successful implementation of Project ABC in Service Area 4.

- CII has been heavily involved in the application and establishment of the current grant and will continue to transfer knowledge from their previous experience. They will spearhead the Social Media and Marketing component of the grant.

- PACS will contribute substantially to the Cultural and Linguistic Competency component of the grant and brings unparalleled expertise working with Asian-American and Pacific Islander populations, the community least served by County mental health services.

- PACS participates in a variety of trainings, collaborations and networks to continue to identify and serve the populations' priority needs. In addition, they bring critical experience providing an array of services to young children and their families.

- PACS will hire the Cultural and Linguistic Competence Coordinator for Project ABC-FWN. This position will lead the Cultural and Linguistic Competency Committee.