

# Los Angeles County DEPARTMENT OF MENTAL HEALTH



BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

31 June 19, 2018

CELIA ZAVALA ACTING EXECUTIVE OFFICER

June 19, 2018

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 ENTER INTO TWO GRANT AGREEMENTS WITH THE STATE OF CALIFORNIA, MENTAL HEALTH SERVICES OVERSIGHT AND ACCOUNTABILITY COMMISSION FOR MENTAL HEALTH WELLNESS ACT OF 2013 ROUND 2 ADULT AND CHILD TRIAGE GRANT AWARDS FOR FISCAL YEARS 2018-19 THROUGH 2020-21 (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

#### SUBJECT

Approval to enter into two grant agreements with the State of California, Mental Health Services Oversight and Accountability Commission for the Senate Bill 82 Investment in Mental Health Wellness Act of 2013 Round 2 Adult and Child Triage Grant awards.

#### IT IS RECOMMENDED THAT THE BOARD:

1. Authorize and direct the Director of Mental Health (Director), or his designee, to prepare, sign, and execute an Agreement, substantially similar to Attachment I, with the State of California (State), Mental Health Services Oversight and Accountability Commission (MHSOAC) for the Investment in Mental Health Wellness Act of 2013 Round 2 Adult Triage grant award, Agreement No. 17MHSOAC041, in the amount of \$24,877,879. The term of the Agreement is upon execution by June 30, 2018, through June 30, 2021.

2. Authorize and direct the Director, or his designee, to prepare, sign, and execute an Agreement, substantially similar to Attachment II, with the State MHSOAC for the Investment in Mental Health Wellness Act of 2013 Round 2 Child Triage grant award, Agreement No. 17MHSOAC061, in the amount of \$19,489,116. The term of the Agreement is upon execution by June 30, 2018, through

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June 30, 2021.

3. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to the Adult Triage Grant, Agreement No. 17MHSOAC041, and the Child Triage Grant, Agreement No. 17MHSOAC061, to: 1) reflect revisions required by the State or non-material revisions requested by either party to the award's terms and conditions; 2) allow for the rollover of unspent funds; 3) extend the term of the award agreement after the expiration of its original term; and 4) provide for an increase in funding, subject to review and approval as to form by County Counsel and notification to your Board and the CEO after execution of each amendment.

#### PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

On March 27, 2018, the MHSOAC approved a Triage Grant award for DMH. Execution of this Agreement with State MHSOAC will support the implementation of Adult Outreach Triage Teams (OTT) in each Service Area (SA) that will provide support and linkage to appropriate levels of care and proactively work with clients and families to avoid the need for inpatient psychiatric hospitalization.

On April 26, 2018, the MHSOAC approved a second Triage Grant award for DMH that focuses on children. Execution of this Agreement with State MHSOAC will support the implementation of Child Outreach Triage Teams (COTT) in each SA. The field-based teams will provide support and linkage to children and their families in an effort to intervene as quickly as possible to potential crisis situations. The COTT teams will take action to address client and family needs aimed at averting emergent crises and involuntary psychiatric hospitalizations.

Board approval of Recommendation 1 will allow DMH to enter into an agreement with the State MHSOAC for \$24,877,879 to implement the Adult Triage Grant award.

Board approval of Recommendation 2 will allow DMH to enter into an agreement with the State MHSOAC for \$19,489,116 to implement the Child Triage Grant award.

Board approval of Recommendation 3 will allow DMH to amend both the Adult Triage Grant, Agreement No. 17MHSOAC041, and Child Triage Grant, Agreement No. 17MHSOAC061, to reflect revisions requested by either party, allow for the rollover of funds, adjust the term and allow for increased funding.

Board approval of Recommendations 1 through 3 will allow DMH to enter into and amend the Triage Grant Agreements. DMH will return to your Board at a later date to further describe staffing, and outline the implementation of each of these grants.

#### **Implementation of Strategic Plan Goals**

The recommended actions are consistent with the County's Strategic Plan Goal I, Make Investments That Transform Lives, specifically, Strategy I2 Enhance Our Delivery of Comprehensive Interventions.

#### FISCAL IMPACT/FINANCING

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The total MHSOAC Adult Triage Grant award is \$24,877,879 for a grant cycle that covers three fiscal years with funds allocated annually at the beginning of each fiscal year. The required Grant Management Statement is attached (Attachment III).

The total MHSOAC Child Triage Grant award is \$19,489,116 for a grant cycle that covers three fiscal years with funds allocated annually at the beginning of each fiscal year. The required Grant Management Statement is attached (Attachment IV).

DMH will return to your Board at a later date to outline spending plans for current and future fiscal years.

There is no net County cost impact associated with the recommended action.

#### FACTS AND PROVISIONS/LEGAL REQUIREMENTS

DMH has received notification from the MHSOAC of an Adult Triage Grant award in the amount of \$24,877,879 effective upon execution and ending June 30, 2021 for the implementation of OTT.

DMH has received notification from the MHSOAC of a Child Triage Grant award in the amount of \$19,489,116 effective upon execution and ending June 30, 2021 for the implementation of COTT.

The MHSOAC Adult Triage Grant agreement services will be directed to transition age youth starting at age eighteen (18), and adults. The OTT will work countywide with Urgent Care Centers, Psychiatric Emergency Departments, LAUSD high schools, Department of Public Social Services offices, law enforcement agencies, System Leadership Teams, and Peer Resource Centers, where teams can work with individual clients, and set up in-service and informational community meetings. Specifically, the clients experiencing urgent need and not necessarily emergent need will be referred to OTT. The OTT team will visit and remain engaged with the client until a face to face conference takes place with the new clinical team to assure linkage to the appropriate services. It is estimated that there will be 200 or more initial contacts per week, with three (3) mobile teams per SA, completing at least two (2) calls per day, five (5) days a week, resulting in more than ten thousand (10,000) initial contacts annually.

The MHSOAC Child Triage Grant agreement services will be primarily focused on children under the age of eighteen (18), however clients who enter this program as minors may receive services through age twenty-one (21). The COTT will be similar in structure to the OTT, with two (2) mobile teams per SA designed to engage referred children who are in crisis, but do not presently meet criteria for hospitalization, or may be facing potential placement disruption. Additionally, there will be a dedicated line at the ACCESS Center staffed by a team that will triage calls and make referrals to the SA teams. The ACCESS Center operates 24 hours per day, 7 days a week as the entry point for mental health services in Los Angeles County. Services provided by the ACCESS Center also include: deployment of crisis evaluation teams; information and referrals; gatekeeping of acute inpatient psychiatric beds; interpreter services; and arrangement of patient transport.

COTT will connect children to services and supports aimed at averting hospitalizations, and placement disruption, including children and youth in foster care, or at risk of foster care placement. At any given time, the teams will be connected to between fifty and one hundred children or youth for ongoing linkage and supportive services. The COTT intervention would typically last up to fifty-nine days, until a face-to-face connection is made to a mental health team to provide ongoing services to these individuals.

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These grant Agreements contain standard State terms and conditions. There is no mutual indemnification provision. The County is responsible to indemnify and defend the State, its officers, agents, and employees from all claims and losses resulting from the performance of these Agreements.

#### **IMPACT ON CURRENT SERVICES (OR PROJECTS)**

Board approval of the recommended actions will enable DMH to expand its current Adult and Child Outreach and Triage Programs and greatly improve its ability to provide services designed to diminish clients' need for inpatient hospitalization or placement disruption.

Respectfully submitted,

ASSC

JONATHAN E. SHERIN, M.D., Ph.D. Director

JES:GP:MB:SK:pd

Enclosures

c: Executive Office, Board of Supervisors Chief Executive Office County Counsel Chairperson, Mental Health Commission STATE OF CALIFORNIA STANDARD AGREEMENT

STD 213 (Rev 06/03)			AGREEMENT NUMBER
			17MHSOAC041
			REGISTRATION NUMBER
1.	This Agreement is entere	d into between the State Agency and t	the Contractor named below:
	STATE AGENCY'S NAME		
	Mental Health Service	s Oversight and Accountability Con	nmission
	CONTRACTOR'S NAME		
	Los Angeles County D	epartment of Mental Health	
2		· · · · · · · · · · · · · · · · · · ·	June 30, 2021
۷.	Agreement is:	opon execution intrough	Julie 30, 2021
	Agreement is.		
3.		\$ 24,877,879.00	
	of this Agreement is:	Twenty Four Million Eight Hundred Seve	enty Seven Thousand Eight Hundred Seventy Nine &no cen
4.	The parties agree to com part of the Agreement.	ply with the terms and conditions of the	e following exhibits, which are by this reference made a
	Exhibit A – Scope of W	ork	3 pages
		- Program Implementation Plan Timeli	
	Exhibit B – Budget Deta	il and Payment Provisions	2 pages
Attachment B.1 - Grant Award Claim Form			1 page
	Attachment B.2 - Budget Worksheet		2 pages
		erms and Conditions (GTC)	z pages

RFA MHSOAC\_Triage\_002\_Addendum 2 and Grantee's application are hereby incorporated by reference and made part of this agreement

Items shown with an Asterisk (\*), are hereby incorporated by reference and made part of this agreement as if attached hereto. These documents can be viewed at www.ols.dgs.ca.gov/Standard+Language

#### IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		artment of General s Use Only	
CONTRACTOR'S NAME (if other than an individual, state whether a corporation, parti		· · · · · · · · · · · · · · · · · · ·	
Los Angeles County Department of Mental Health			
BY (Authorized Signature)	DATE SIGNED(Do not type)		
بھ			
PRINTED NAME AND TITLE OF PERSON SIGNING			
Jonathan E. Sherin, M.D., Ph.D., Director			
ADDRESS			
550 S. Vermont Avenue, 12th Floor, Los Angeles, CA S	0020		
STATE OF CALIFORNIA			
AGENCY NAME			
Mental Health Services Oversight and Accountability C			
BY (Authorized Signature)	DATE SIGNED (Do not type)		
_£			
PRINTED NAME AND TITLE OF PERSON SIGNING	Exempt per:	W & I 5897(f)	
Toby Ewing, Executive Director			
ADDRESS			
1325 J Street, Suite 1700, Sacramento, CA 95814			
MHSOAC	ing 📋 State	Controller	

State of California Mental Health Services Oversight and Accountability Commission (Commission)

#### Exhibit A

#### Scope of Work

 COUNTY OF LOS ANGELES, DEPARTMENT MENTAL HEALTH, hereafter referred to as Grantee, agrees to hire mental health triage personnel to provide a range of triage services to persons with mental illness requiring crisis intervention. As indicated in the Mental Health Wellness Act of 2013 triage personnel may provide targeted case management services face to face, by telephone, or by tele-health. The scope of work for this contract is contained in the Grant Application submitted by Grantee in response to the MHSOAC's Request for Applications SB 82\_Triage\_002\_Addendum 2 (hereinafter, "RFA"). Grantee's Application is incorporated by reference and made part of this contract as if attached hereto.

#### 2. Grantee Implementation Plan

Grantee shall implement the triage program described in Grantee's Triage Grant Application Attachment 7 Program Implementation Plan which is attached to this Exhibit A as "Attachment A.1".

#### 3. Contacts

The representatives during the term of this agreement will be:

Direct all Triage Grant inquiries to:

State Agency: Mental Health Services Oversight & Accountability Commission	Grantee: Los Angeles County Department of Mental Health		
Name, Title: Cody Scott, Associate Governmental Program Analyst	Name, Title: Debbie Innes-Gomberg, Ph.D., Deputy Director		
Phone: (916) 445-8743	Phone: 213-738-2756		
<b>Fax:</b> (916) 445-4927	Fax:		
Email: cody.scott@mhsoac.ca.gov	Email: DIGomberg@dmh.lacounty.gov		

Direct all administrative inquiries to:

State Agency: Mental Health Services Oversight & Accountability Commission	Grantee: COUNTY OF LOS ANGELES, DEPARTMENT MENTAL HEALTH		
Section/Unit: Administrative Services	Section/Unit: Admin		
Attention: Richard Thut	Attention: Miriam Brown, Deputy Director		
Address:1325 J Street, Suite 1700 Sacramento, CA 95814	Address: 550 S. Vermont Avenue, 10th Floor, Los Angeles, CA 90020		
Phone: (916) 445-8798	Phone: 213-738-3412		

<b>Fax:</b> (916) 445-4927	Fax:
Email: richard.thut@mhsoac.ca.gov	Email: MBrown@dmh.lacounty.gov

Project representatives may be changed by written notice to the other party. Such notice shall be given within 30 days of the change.

#### **1. Grant Cycle** (See *RFA*, *Section IV.C.*)

This grant is approved for a three-year grant cycle, with funds allocated in quarterly installments.

Contract funding is based on the Grantee's compliance with the RFA requirements as submitted through Grantee's Application, which is incorporated by reference and made a part of this contract as if attached.

The Commission may withhold funds from Grantee if the Grantee fails to meet the reporting requirements, falls behind schedule, has unexpended funds, or modifies the scope of the program. If Grantee finds itself in this position, the Grantee shall immediately contact the Commission and provide a mitigation plan to address the contractual program deficiency. The Commission may withhold funds until an agreed upon mitigation plan is presented and accepted by the Commission.

#### **2.** Reporting (See *RFA*, *Section V.F.*)

Grantee shall provide information to the Commission on a quarterly basis within 30 days after the end of each reporting period. Quarterly reporting periods are hereby defined as July 1 – September 30, October 1 – December 31, January 1 – March 31, and April 1 – June 30.

The following reports are required to be submitted:

- a. Triage Hiring Report (See RFA, Section V.F.1.), quarterly.
- b. Statewide Evaluation Data (See RFA, Section V.F.2.)
  - i. Grantee shall provide data based on the specifications and timelines defined by and agreed to by the Statewide Evaluation Contractor and the Commission.
- c. Expenditure Information (See RFA, Section V.F.3.)
  - i. Grantee shall report all Grant expenditure information in the Annual Fiscal Report within 30 days of the end of the program year. Annually Grantee is required to remit unexpended grant funds back to the Commission.

ii.

#### 3. Allowable Costs\_(See RFA, Section IV.E.)

Grant funds must be used as proposed in the grant Application approved by the Commission as follows:

- a. Allowable costs include triage personnel and administration;
  - i. The amount budgeted for administration shall not exceed 15% of the total budget. This includes any administrative costs associated with contracted personnel.
- b. Grant funds may be used to supplement existing programs but may not be used to supplant existing financial and resource commitments of the grantee;
- c. Grant funds cannot be transferred to any other program account for specific purposes other than the stated purpose of this grant

#### 4. County Triage Webpage (See RFA, Section V.C.4.b.)

Grantee shall have a link on its home page that connects users to a County Triage Webpage. The link shall be named, "County Mental Health Triage Services". Information on the webpage shall include:

- a. The title of each triage grant program;
- b. A short description of each triage grant program;
- c. Direct contact information for each triage grant program, including phone number, email, and access point location addresses. If available, include walk-in assistance information.

#### 5. Statewide Evaluation\_(See RFA, Section V.E.)

Grantee shall fully cooperate with the Commission's statewide evaluation contractor (hereinafter, "Evaluation Contractor") and ensure Grantee's collaborative partners also cooperate. Grantee shall collect relevant individual-level data, including but not limited to, encounter data. Grantee shall grant the Evaluation Contractor access to all relevant individual-level data collected and maintained by Grantee. Grantee shall ensure that its collaborative partners grant access to the Evaluation Contractor to all relevant individual-level data.

#### 6. Amendments

This contract may be amended upon mutual consent of the parties. All amendments must be in writing and fully executed by authorized representatives of each party.

State of California Mental Health Services Oversight and Accountability Commission (Commission) Timeline

#### ATTACHMENT A.1

#### PROGRAM IMPLEMENTATION PLAN TIMELINE

#### ATTACHMENT 7: PROGRAM IMPLEMENTATION PLAN Program Implementation Plan Timeline

Program Implementation Plan Timeline

V. C.1.1.			Program Implementation Plan Timeline Provide a Program Implementation Timeline for the requirements detailed in the ogram Implementation Plan Narrative. The Timeline should agree with the Narrative and contain activities and milestones to ensure success of the Program Implementation Plan				
	Pr						
		ii.	List all employee classifications individually.	Est. Hire Date	Peer		
			nclude estimated hiring dates		(Yes/No)		
			1 Employee classification: Mental Health Clinical Program Head I	07/01/2018	UTA/ encouraged		
			2 Employee classification:	08/01/2018	UTA/		
			Mental Health Clinical Supervisor		encouraged		
V. C.1.1. (Continued)			3 Employee classification: Mental Health Counselor, RN	08/01/2018	UTA/ encouraged		
			4 Employee classification: Mental Health Clinician II	08/01/2018	UTA/ encouraged		
		-	5 Employee classification: Mental Health Services Coordinator II	08/01/2018	UTA/ encouraged		
			Employee classification: Medical Caseworker II	08/01/2018	UTA/ encouraged		
			7 Employee classification: Community Worker	08/01/2018	Yes		
			3 Employee classification: Secretary III	08/01/2018	UTA/ encouraged		
			<ul> <li>Employee classification:</li> <li>Intermediate Typist Clerk</li> </ul>	08/01/2018	UTA/ encouraged		
			10 Employee classification: Mental Health Psychiatrist	08/01/2018	UTA/ encouraged		
			List all Contractor positions/classifications individually. Include estimated hiring dates	Est. Hire Date	Peer (Yes/No)		
			1 Contractor position/classification:	N/A	N/A		

#### EXHIBIT B

#### BUDGET DETAIL AND PAYMENT PROVISIONS

#### 1. INVOICING AND PAYMENT

- A. The amount payable by the Commission to the Grantee is specified in Section 5, Payment Schedule.
- B. Grant Award Claim Form (Attachment B.1) shall be submitted no later than the first week after each quarterly reporting period and is subject to the Commission's review and approval before being paid.

#### 2. INSTRUCTION TO THE GRANTEE

A. To expedite the processing of the Grant Award Claim Form submitted to the Commission for fund distribution, Grantee shall submit one original and two copies of each Grant Award Claim Form to the Commission Grant Manager at the following address:

Mental Health Services Oversight and Accountability Commission 1325 J Street, Suite 1700 Sacramento, CA, 95814

#### 3. BUDGET CONTINGENCY CLAUSE

- A. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall no longer be in full force and effect. In this event, the State shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to perform any provisions of this Agreement.
- B. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, the State shall have the option to either cancel this Agreement with no liability occurring to the State, or offer an agreement amendment to Grantee to reflect the reduced amount.
- C. If this contract overlaps federal and State fiscal years, should funds not be appropriated by or approved by the Legislature for the fiscal year(s) following that during which this grant was executed, the State may exercise its option to cancel this grant.

D. In addition, this grant is subject to any additional restrictions, limitations, or conditions enacted by the Legislature which may affect the provisions or terms of funding of this grant in any manner.

#### 4. BUDGET DETAIL

The total amount of this Agreement shall not exceed \$24,877,879.00. Payment shall be made in accordance with the payment schedule below. The funds used for this Agreement may be used without regard to fiscal year.

#### 5. PAYMENT SCHEDULE

Grantee was approved for a grant cycle that covers three fiscal years (See Attachment B.2 – Budget Worksheet for approved funding amounts), with funds allocated annually at the beginning of each fiscal year. Payments will be made quarterly and the total amount of payments made in any fiscal year is to not exceed the amounts stated below. For each grant year Grantee may not exceed the total funds allocated for that grant year.

Grant Year Disbursement	Grant Funding
Grant Year 1	\$7,763,261.00
Grant Year 2	\$8,557,309.00
Grant Year 3	\$8,557,309.00
Grant Total	\$24,877,879.00

State of California Mental Health Services Oversight and Accountability Commission (Commission)

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#### **ATTACHMENT B.1**

nvestment in Mental Health Wellness Act of 2013 (Adult/TAY)
GRANT AWARD CLAIM FORM

To: Mental Health Serv Oversight and Account 1325 J Street, Suite 176 Sacramento, CA 95814 Attn: <u>Accounting Office</u>	ability Commission 00			CheckiOne Year 1 Year 2 Year 3	Quarter 1 🗆 Quarter 2 🗆	
From:			Contract No			
Mailing Address:						
Costs	A	В	С	D		
	Budget Amount	Beginning Balance	Adjustments	Current Expense	Ending Balance	
Personnel						
Administration						
Total Allowable Costs \$	· · · · ·					
I hereby certify that all	MHSOAC USE ONLY			FOR GRANTEE'S USE – Please use blue ink I CERTIFY that I am a duly appointed and acting officer of		
received pursuant to th	•	reports have been		the herein named county/lead agency: that the costs being		
				claimed are in all respects true, correct, and in accordance		
X Signature Program Co-	ordinator	DATE		with the grant provisions, and that the funds were expended or obligated during the project year.		
	orunator	BATE				
			X	X Signature of Mental Health/Behavioral DATE		
Name of Signatory				Health Director or designee/Grant Lead		
				<b>.</b> .		
Phone		Name of Sig	Name of Signatory			
			iteme er olg	1.1.1.1		
			 Title			
			Inde			
	FOR MHSOAC ACCOU			GRANTEE'S CONT	ACT INFORMATION	
SFY:		FY 2013-14 D FY	2017-18 🗆			
		FY 2014-15 🗆 FY	2018-19 🗖			
Grant Title: MHSOAC T MHSA Grant	riage Grant	FY 2015-16 🗖 FY		Contact Person (Print)		
Award:		FY 2016-17 🗖 FY	2020-21 🗖			
PCA: 30118 INDEX: 130	0 OBJECT CODE: 701			Phone		

State of California Mental Health Services Oversight and Accountability Commission (Commission)

ATTACHMENT 11 - Budget Worksheet

#### ATTACHMENT B.2 BUDGET WORKSHEET

#### 1. Grantee's Application Budget Worksheet (Attachment 11)

MHSOAC

Mental Health Triage Personnel RFA

**ATTACHMENT 11** BUDGET WORKSHEET County/Applicant: LOS ANGELES (1) Hire Triage Staff (list individual (2) Hiring (3) FY 1 (4) FY 2 (5) FY 3 (6) Total All FYs role/classification) (add rows as needed) Month 1,343,336 Mental Health Psychiatrist (2) Aug 1 422,192 460,572 460,572 Mental Health Clinical Supervisor (8) Aug 1 618,406 674,624 674,624 1,967,654 Mental Health Counselor RN (8) Aug 1 806,246 879,540 879,540 2,565,326 Psychiatric Social Worker II (16) 1,106,985 1,207,619 1,207,619 3,522,223 Aug 1 438,249 Medical Case Worker II (8) Aug 1 401,729 438,249 1,278,227 Mental Health Peer Advocate (40) 1,326,204 1,446,767 1,446,767 4,219,738 Aug 1 Mental Health Clinical Program Mgr I (2) 700,261 Jul 1 233,421 233,420 233,420 Mental Health Services Coordinator I (2) 130,745 142,630 142,630 416,005 Aug 1 Secretary II Aug 1 81,640 89,061 89,061 259,762 Intermediate Typist Clerk (8) Aug 1 271,747 296,450 296,450 864,647 5,868,932 5,868,932 17,137,180 Subtotal - (7) Personal Services Salaries 5.399.316 Add: (8) Personal Services Benefits 2.360.694 2,566,020 2,566,020 7,492,735 (9) Total Personal Services 7,760,010 8,434,952 8,434,952 24,629,915 (2) Hiring (10) Hire Triage Contractors (If applicable, list (11) FY1 (12) FY2 (13) FY3 (6) Total All FYs Month individual role/classificaion) (Add rows as needed) (14) Total Contracted Services . (15) Total Personal/Contracted Services 7,760,010 8,434,952 8,434,952 24,629,915 (16) Administration (includes indirect costs, overhead) 1,369,409 1,488,516 1,488,516 4,346,441 (17) Total Proposed Program Costs 9,129,419 9,923,468 9,923,468 28,976,356 (18) Reimbursements, Offsets, Other Funding Sources County Budget Funds Medi-Cal Reimbursements 1,366,159 1,366,159 1,366,159 4,098,477 Private Matching Funds Other (list) (19) Total Reimbursements, Offsets, Other **Funding Sources** 1,366,159 1,366,159 1,366,159 4,098,477 (20) Total Grant Funding Requested 7,763,261 8,557,309 8,557,309 24,877,879

#### EXHIBIT C

#### GENERAL TERMS AND CONDITIONS (GTC) 04/2017

- 1. <u>APPROVAL</u>: This Agreement is of no force or effect until signed by both parties and approved by the Department of General Services, if required. Contractor may not commence performance until such approval has been obtained.
- 2. <u>AMENDMENT</u>: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or Agreement not incorporated in the Agreement is binding on any of the parties.
- 3. <u>ASSIGNMENT</u>: This Agreement is not assignable by the Contractor, either in whole or in part, without the consent of the State in the form of a formal written amendment.
- 4. <u>AUDIT</u>: Contractor agrees that the awarding department, the Department of General Services, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Contractor agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. Contractor agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Contractor agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., CCR Title 2, Section 1896).
- 5. <u>INDEMNIFICATION</u>: Contractor agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this Agreement, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Contractor in the performance of this Agreement.
- 6. <u>DISPUTES</u>: Contractor shall continue with the responsibilities under this Agreement during any dispute.
- 7. <u>TERMINATION FOR CAUSE</u>: The State may terminate this Agreement and be relieved of any payments should the Contractor fail to perform the requirements of this Agreement at the time and in the manner herein provided. In the event of such termination the State may proceed with the work in any manner deemed proper by the State. All costs to the State shall be deducted from any sum due the Contractor under this Agreement and the balance, if any, shall be paid to the Contractor upon demand.
- 8. <u>INDEPENDENT CONTRACTOR</u>: Contractor, and the agents and employees of Contractor, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.

- 9. <u>RECYCLING CERTIFICATION</u>: The Contractor shall certify in writing under penalty of perjury, the minimum, if not exact, percentage of post consumer material as defined in the Public Contract Code Section 12200, in products, materials, goods, or supplies offered or sold to the State regardless of whether the product meets the requirements of Public Contract Code Section 12209. With respect to printer or duplication cartridges that comply with the requirements of Section 12156(e), the certification required by this subdivision shall specify that the cartridges so comply (Pub. Contract Code §12205).
- 10. NON-DISCRIMINATION CLAUSE: During the performance of this Agreement, Contractor and its subcontractors shall not deny the contract's benefits to any person on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status, nor shall they discriminate unlawfully against any employee or applicant for employment because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status. Contractor shall insure that the evaluation and treatment of employees and applicants for employment are free of such discrimination. Contractor and subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code §12900 et seq.), the regulations promulgated thereunder (Cal. Code Regs., tit. 2, §11000 et seq.), the provisions of Article 9.5, Chapter 1, Part 1, Division 3, Title 2 of the Government Code (Gov. Code §§11135-11139.5), and the regulations or standards adopted by the awarding state agency to implement such article. Contractor shall permit access by representatives of the Department of Fair Employment and Housing and the awarding state agency upon reasonable notice at any time during the normal business hours, but in no case less than 24 hours' notice, to such of its books, records, accounts, and all other sources of information and its facilities as said Department or Agency shall require to ascertain compliance with this clause. Contractor and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other agreement. (See Cal. Code Regs., tit. 2, §11105.)

Contractor shall include the nondiscrimination and compliance provisions of this clause in all subcontracts to perform work under the Agreement.

- 11. <u>CERTIFICATION CLAUSES</u>: The CONTRACTOR CERTIFICATION CLAUSES contained in the document CCC 04/2017 are hereby incorporated by reference and made a part of this Agreement by this reference as if attached hereto.
- 12. <u>TIMELINESS</u>: Time is of the essence in this Agreement.
- 13. <u>COMPENSATION</u>: The consideration to be paid Contractor, as provided herein, shall be in compensation for all of Contractor's expenses incurred in the performance hereof, including travel, per diem, and taxes, unless otherwise expressly so provided.
- 14. <u>GOVERNING LAW</u>: This contract is governed by and shall be interpreted in accordance with the laws of the State of California.

- 15. <u>ANTITRUST CLAIMS</u>: The Contractor by signing this agreement hereby certifies that if these services or goods are obtained by means of a competitive bid, the Contractor shall comply with the requirements of the Government Codes Sections set out below.
  - a. The Government Code Chapter on Antitrust claims contains the following definitions:
    - "Public purchase" means a purchase by means of competitive bids of goods, services, or materials by the State or any of its political subdivisions or public agencies on whose behalf the Attorney General may bring an action pursuant to subdivision (c) of Section 16750 of the Business and Professions Code.
    - 2) "Public purchasing body" means the State or the subdivision or agency making a public purchase. Government Code Section 4550.
  - b. In submitting a bid to a public purchasing body, the bidder offers and agrees that if the bid is accepted, it will assign to the purchasing body all rights, title, and interest in and to all causes of action it may have under Section 4 of the Clayton Act (15 U.S.C. Sec. 15) or under the Cartwright Act (Chapter 2 (commencing with Section 16700) of Part 2 of Division 7 of the Business and Professions Code), arising from purchases of goods, materials, or services by the bidder for sale to the purchasing body pursuant to the bid. Such assignment shall be made and become effective at the time the purchasing body tenders final payment to the bidder. Government Code Section 4552.
  - c. If an awarding body or public purchasing body receives, either through judgment or settlement, a monetary recovery for a cause of action assigned under this chapter, the assignor shall be entitled to receive reimbursement for actual legal costs incurred and may, upon demand, recover from the public body any portion of the recovery, including treble damages, attributable to overcharges that were paid by the assignor but were not paid by the public body as part of the bid price, less the expenses incurred in obtaining that portion of the recovery. Government Code Section 4553.
  - d. Upon demand in writing by the assignor, the assignee shall, within one year from such demand, reassign the cause of action assigned under this part if the assignor has been or may have been injured by the violation of law for which the cause of action arose and (a) the assignee has not been injured thereby, or (b) the assignee declines to file a court action for the cause of action. See Government Code Section 4554.
- 16. <u>CHILD SUPPORT COMPLIANCE ACT</u>: For any Agreement in excess of \$100,000, the contractor acknowledges in accordance with Public Contract Code 7110, that:
  - a. The contractor recognizes the importance of child and family support obligations and shall fully comply with all applicable state and federal laws relating to child and family support enforcement, including, but not limited to, disclosure of information and compliance with earnings assignment orders, as provided in Chapter 8 (commencing with section 5200) of Part 5 of Division 9 of the Family Code; and
  - b. The contractor, to the best of its knowledge is fully complying with the earnings assignment orders of all employees and is providing the names of all new employees to the New Hire Registry maintained by the California Employment Development Department.

- 17. <u>UNENFORCEABLE PROVISION</u>: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.
- PRIORITY HIRING CONSIDERATIONS: If this Contract includes services in excess of \$200,000, the Contractor shall give priority consideration in filling vacancies in positions funded by the Contract to qualified recipients of aid under Welfare and Institutions Code Section 11200 in accordance with Pub. Contract Code §10353.
- 19. <u>SMALL BUSINESS PARTICIPATION AND DVBE PARTICIPATION REPORTING</u> <u>REQUIREMENTS</u>:
  - a. If for this Contract Contractor made a commitment to achieve small business participation, then Contractor must within 60 days of receiving final payment under this Contract (or within such other time period as may be specified elsewhere in this Contract) report to the awarding department the actual percentage of small business participation that was achieved. (Govt. Code § 14841.)
  - b. If for this Contract Contractor made a commitment to achieve disabled veteran business enterprise (DVBE) participation, then Contractor must within 60 days of receiving final payment under this Contract (or within such other time period as may be specified elsewhere in this Contract) certify in a report to the awarding department: (1) the total amount the prime Contractor received under the Contract; (2) the name and address of the DVBE(s) that participated in the performance of the Contract; (3) the amount each DVBE received from the prime Contractor; (4) that all payments under the Contract have been made to the DVBE; and (5) the actual percentage of DVBE participation that was achieved. A person or entity that knowingly provides false information shall be subject to a civil penalty for each violation. (Mil. & Vets. Code § 999.5(d); Govt. Code § 14841.)
- 20. <u>LOSS LEADER</u>: If this contract involves the furnishing of equipment, materials, or supplies then the following statement is incorporated: It is unlawful for any person engaged in business within this state to sell or use any article or product as a "loss leader" as defined in Section 17030 of the Business and Professions Code. (PCC 10344(e).)

#### STATE OF CALIFORNIA STANDARD AGREEMENT

STD 213 (Rev 06/03)			AGREEMENT NUMBER	
		· · · · · · · · · · · · · · · · · · ·	TRATION NUMBER	
1.	This Agreement is entere	d into between the State Agency and the Contractor n	named below:	
	STATE AGENCY'S NAME Mental Health Service CONTRACTOR'S NAME	s Oversight and Accountability Commission		
2.	The term of this Agreement is:	Upon Execution through June 30, 2021		
3.	The maximum amount of this Agreement is:	\$19,489,116 NINTEEN MILLION FOUR HUNDRED EIGHTY NINE THOUSAND	ONE HUNDRED SIXTEEN DOLLARS & NO CENTS	
4.	The parties agree to comp part of the Agreement.	bly with the terms and conditions of the following exhib	its, which are by this reference made a	
	Exhibit B – Budget Deta Attachment B.1 Attachment B.2	ork - Program Implementation Plan Timeline il and Payment Provisions - Grant Award Claim Form - Budget Worksheet rms and Conditions (GTC)	4 pages 9 pages 2 pages 1 page 1 page	

RFA MHSOAC\_Triage\_003 and Grantee's application are hereby incorporated by reference and made part of this agreement

Items shown with an Asterisk (\*), are hereby incorporated by reference and made part of this agreement as if attached hereto. These documents can be viewed at www.ols.dgs.ca.gov/Standard+Language

#### IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		ertment of General s Use Only		
CONTRACTOR'S NAME (if other than an individual, state whether a corporation, part Los Angeles County Department of Mental Health				
BY (Authorized Signature)	DATE SIGNED(Do not type)	1		
×			·	
PRINTED NAME AND TITLE OF PERSON SIGNING				
Jonathan Sherin, M.D., Ph.D., Director of Mental Healt	h			
ADDRESS		1		
550 S. Vermont Avenue, Los Angeles, CA 90020				
STATE OF CALIFORNIA				
AGENCY NAME				
Mental Health Services Oversight and Accountability C				
BY (Authorized Signature)	DATE SIGNED (Do not type)	1		
PRINTED NAME AND TITLE OF PERSON SIGNING		Exempt per:	W & I 5897(f)	
Toby Ewing, Executive Director				
ADDRESS				
1325 J Street, Suite 1700, Sacramento, CA 95814				
MHSOAC USE ONLY				

State of CaliforniaLOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTHMental Health Services Oversight andAgreement # 17MHSOAC061Accountability Commission (Commission)Exhibit A, Scope of Work

#### Exhibit A

#### Scope of Work

 County of Los Angeles, Department of Mental Health, hereafter referred to as Grantee, agrees to hire mental health triage personnel to provide a range of triage services to persons with mental illness requiring crisis intervention. As indicated in the Mental Health Wellness Act of 2013 triage personnel may provide targeted case management services face to face, by telephone, or by tele-health. The scope of work for this contract is contained in the Grant Application submitted by Grantee in response to the MHSOAC's Request for Applications SB 82\_Triage\_003\_Addendum 2 (hereinafter, "RFA"). Grantee's Application is incorporated by reference and made part of this contract as if attached hereto.

#### 2. Grantee Implementation Plan

Grantee shall implement the triage program described in Grantee's Triage Grant Application Attachment 7 Program Implementation Plan which is attached to this Exhibit A as "Attachment A.1".

#### 3. Contacts

The representatives during the term of this agreement will be:

Direct all Triage Grant inquiries to:

State Agency: Mental Health Services Oversight & Accountability Commission	<b>Grantee:</b> County of Los Angeles, Department of Mental Health		
Name, Title: Cody Scott, Associate Governmental Program Analyst	Name, Title: Miriam A. Brown, LCSW, Deputy Director		
Phone (916) 445-8696	Phone: (213) 738-4924		
Fax: (916) 445-4927	Fax:		
Email: cody.scott@mhsoac.ca.gov	Email: mbrown@dmh.lacounty.gov		

Direct all administrative inquiries to:

State Agency: Mental Health Services Oversight & Accountability Commission	<b>Grantee:</b> County of Los Angeles, Department of Mental Health
Section/Unit: Administrative Services	Section/Unit:
Attention: Richard Thut	Attention: Miriam A. Brown, LCSW, Deputy Director
Address:1325 J Street, Suite 1700	Address: 550 S. Vermont Ave, 10th Floor
Sacramento, CA 95814	Los Angeles, CA 90020
Phone: (916) 445-8798	Phone: (213) 738-4924
Fax: (916) 445-4927	Fax:
Email: Richard.Thut@mhsoac.ca.gov	Email: mbrown@dmh.lacounty.gov

Project representatives may be changed by written notice to the other party. Such notice shall be given within 30 days of the change.

#### 4. Grant Cycle (See RFA, Section IV.C.)

This grant is approved for a three-year grant cycle, with funds allocated in quarterly installments.

Contract funding is based on the Grantee's compliance with the RFA requirements as submitted through Grantee's Application, which is incorporated by reference and made a part of this contract as if attached.

The Commission may withhold funds from Grantee if the Grantee fails to meet the reporting requirements, falls behind schedule, has unexpended funds, or modifies the scope of the program. If Grantee finds itself in this position, the Grantee shall immediately contact the Commission and provide a mitigation plan to address the contractual program deficiency. The Commission may withhold funds until an agreed upon mitigation plan is presented and accepted by the Commission.

#### **5.** Reporting (See *RFA*, Section *V.F.*)

Grantee shall provide information to the Commission on a quarterly basis within 30 days after the end of each reporting period. Quarterly reporting periods are hereby defined as July 1 – September 30, October 1 – December 31, January 1 – March 31, and April 1 – June 30.

The following reports are required to be submitted:

- a. Triage Hiring Report (See RFA, Section V.F.1.), quarterly.
- b. Statewide Evaluation Data (See RFA, Section V.F.2.)
  - i. Grantee shall provide data based on the specifications and timelines defined by and agreed to by the Statewide Evaluation Contractor and the Commission.
- c. Expenditure Information (See RFA, Section V.F.3.)
  - i. Grantee shall report all Grant expenditure information in the Annual Fiscal Report within 30 days of the end of the program year. Annually Grantee is required to remit unexpended grant funds back to the Commission.

#### 6. <u>Allowable Costs</u> (See RFA, Section IV.E.)

Grant funds must be used as proposed in the grant Application approved by the Commission as follows:

- a. Allowable costs include triage personnel and administration;
  - i. The amount budgeted for administration shall not exceed 15% of the total budget. This includes any administrative costs associated with contracted personnel.
- b. Grant funds may be used to supplement existing programs but may not be used to supplant existing financial and resource commitments of the grantee;
- c. Grant funds cannot be transferred to any other program account for specific purposes other than the stated purpose of this grant

#### 7. <u>County Triage Webpage (See RFA, Section V.C.4.b.)</u>

Grantee shall have a link on its home page that connects users to a County Triage Webpage. The link shall be named, "County Mental Health Triage Services". Information on the webpage shall include:

- a. The title of each triage grant program;
- b. A short description of each triage grant program;
- c. Direct contact information for each triage grant program, including phone number, email, and access point location addresses. If available, include walk-in assistance information.

#### 8. <u>Statewide Evaluation (See RFA, Section V.E.)</u>

Grantee shall fully cooperate with the Commission's statewide evaluation contractor (hereinafter, "Evaluation Contractor") and ensure Grantee's collaborative partners also cooperate. Grantee shall collect relevant individual-level data, including but not limited to, encounter data. Grantee shall grant the Evaluation Contractor access to all relevant individual-level data collected and maintained by Grantee. Grantee shall ensure that its collaborative partners grant access to the Evaluation Contractor to all relevant individual-level data.

#### 9. <u>Amendments</u>

# State of CaliforniaLOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTHMental Health Services Oversight andAgreement # 17MHSOAC061Accountability Commission (Commission)Exhibit A, Scope of Work

This contract may be amended upon mutual consent of the parties. All amendments must be in writing and fully executed by authorized representatives of each party.

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#### **ATTACHMENT A.1**

#### PROGRAM IMPLEMENTATION PLAN

				•.	Program Implementation Plan Timeline		
	mple	me	enta	itio	n Plan Timeline		
. C.1.1.					Program Implementation Plan Time	line	
	PI		am	Imp	Program Implementation Timeline for the requirementation Plan Narrative. The Timeline shou ontain activities and milestones to ensure such Implementation Plan	Id agree with	h the Narrativ
	a.	Re	crui	itme	nt strategy for triage staff		
		i.	Lis	t sp	ecific strategies, activities and milestones		
			1	Str	ategy: Conduct a hiring fair to recruit COTT	Beg Date:	End Date:
				1	Activity/Milestone:	06/29/2018	07/08/2018
					Meet with HR to discuss and schedule a hiring fair for the proposed teams.		
				2	Activity/Milestone:	06/29/2018	07/08/2018
					Establish the resources and supports to be available at the hiring fair, and the general process of flow of such an event (i.e. processing applications, establishing list eligibility, finger printing and initiating background checks, etc.).		
				3	Activity/Milestone:	07/09/2018	07/18/2018
					Identify and set a date and location for hiring fair. Confirm location date and time.		
				4	Activity/Milestone: Post announcement for hiring fair. Individuals to attend to interview and process	07/18/2018	08/06/2018
				5	Activity/Milestone:	07/18/2018	08/06/2018
					Advertise hiring fair		
				6	Activity/Milestone:	Ву	No later than
					Conduct hiring fair	06/1/2018	08/01/2018
			2	Str	ategy:	Beg Date:	End Date:
			2		rategy: entify candidates	Beg Date:	End Date:

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#### TIMELINE

	Activity/Milestone: Obtain candidate lists for all positions from HR, and have HR send out an opportunity for transfer announcement.		Until filled
	2 Activity/Milestone: Call all eligible candidates, set up interviews	06/18/2018	Until filled
	Activity/Milestone: Create interview questions for all positions	06/18/2018	07/15/2018
	Activity/Milestone: Identify interview panels	06/18/2018	07/15/2018
	5 Activity/Milestone: Conduct interviews	ASAP	Until filled
	Activity/Milestone: Contact references	Following Interview	Until filled
3	Strategy: Make conditional offer	Beg. Date	End Date
	Activity/Milestone: After a traditional interview and contacting references, a conditional offer may be made, pending their finger printing and background check results.		Until filled
	2 Activity/Milestone: Following the hiring fair, a conditional offer can be made pending the checking of references, finger printing and background check results.	F	Following hiring fair
	Activity/Milestone: Remain in ongoing contact with candidates to answer any questions they may have and to keep them engaged and interested in the COTT position.	1	To start date
	Activity/Milestone: If making a conditional offer to a Count employee for a transfer, first review pas two (2) performance evaluations, employee attendance the past year and the personne file.	ŧ	To start date
4	Strategy: Hire triage staff	Beg. Date	End Date

If more space is needed, or if this is a joint application, make a copy of this page and insert behind this one

		1	Activity/Milestone: Remain in contact with candidate regarding status of application/employment to inform them of anything needed to solidify employment.		Start date
		2	Activity/Milestone: Work with HR and candidate to establish start date and processing appointment for new employee.	Post interview/ offer	Start date
		3	Activity/Milestone: Set new employee orientation training dates	Post interview/ offer	Start date
		4	Activity/Milestone: Submit quarterly Attachment 14: Triage Hiring Report	10/31/2018	Quarterty thereafter
	5	Strategy: COTT Orientation		Beg. Date	End Date
		1	Activity/Milestone: COTT Orientation	07/16/2018	Start date
		2	Activity/Milestone: Complete employee training assessment, to determine which suggested trainings, for each COTT staff, are in need of completion.		First day of employment
		3	Activity/Milestone: Create an individualized training plan for each COTT staff, to be complete in total within the first year of employment. These plans will be prioritized for most needed trainings being taken first.		First 30 days o employment
		4	Activity/Milestone: Develop COTT Orientation	07/17/2018	10/01/2018
		5	Activity/Milestone: Conduct monthly COTT Orientation groups, until all COTT staff is hired.	10/15/2018	04/30/2019
II.			employee classifications individually. e estimated hiring dates	Est. Hire Date	Peer (Yes/No)
	1	Em	ployee classification: ntal Health Clinical Program Head II	08/01/2018	UTA/

		2	Employee classification: Mental Health Clinical Supervisor	09/04/2018	UTA/ encouraged
		3	Employee classification:	09/04/2018	UTA/
			Clinical Psychologist II		encouraged
		4	Employee classification:	09/04/2018	
			Supervising Psychologist		encouraged
		5	Employee classification:	09/04/2018	
			Mental Health Clinician II		encouraged
		6	Employee classification:	09/04/2018	UTA/
			Medical Caseworker II		encouraged
		7	Employee classification:	09/04/2018	UTA
			Secretary III		encouraged
		8	Employee classification:	09/04/2018	Yes
			Community Worker		
		9	Employee classification:	09/04/2018	UTA/
			Mental Health Psychiatrist		encouraged
		10	Employee classification:	09/04/2018	UTA/
			Health Program Analyst II		encouraged
		11	Employee classification:	09/04/2018	UTA/
			Staff Assistant I		encouraged
		12	Employee classification:	09/04/2018	UTA/
			Intermediate Typist Clerk		encouraged
		13			
	iii.		t all Contractor positions/classifications individually. lude estimated hiring dates	Est. Hire Date	Peer (Yes/No)
		1	Contractor position/classification:	Not applicable	Not applicable
b.	Re	tent	ion strategy for triage staff		
	i.	Lis	t specific strategies, activities and milestones		
		1	Strategy:	Beg. Date	End Date
			Part of the staff retention strategy will be the addition of weekly in-service trainings incorporated into the weekly team support meetings		

	<ol> <li>Activity/Milestone:</li> <li>Ability for staff to debrief on situations throughout the week and the ability to consult with other team members regarding self-care and others</li> </ol>	Start date	Weekly
	and finding the balance between doing both things well.		
	2 Activity/Milestone: In-service trainings will allow for didactic learning. The team will be comprised of diverse staffing: it will allow for cross training and multidisciplinary input and feedback.	Start date	Weekly
	3 Activity/Milestone: Team process of challenges and concerns ritual. Incorporate a process portion of the meeting each week for addressing challenges and successes with team.	Start date	Weekly
	4 Activity/Milestone: Team input into solutions will allow the program and team to come up with real time solutions to unforeseen challenges and address them. This will empower staff, having their opinions heard and thus feeling supported and valued.	Start date	Weekly
	5 Activity/Milestone: The team will be afforded the opportunity to be active participants in the implementation of changes necessary to the success of the program.	Start date	Weekly
	6 Activity/Milestone: Staff will rotate each month to introduce a small team bonding or burnout avoidance exercise, to keep team connected and appropriately focused.	Start date	As needed
2	Strategy: Team Duty Rotation will be supportive and staff and improve retention.	Beg. Date	End Date
	1 Activity/Milestone: The team will rotate going out into the field for initial assessment visits, each team should not go out on evaluations more than three (3) days in a row. This allows for staff to work with family and child/youth on other matters and decreases the level of stress from being out on crisis calls each day.	Start date	Ongoing
	2 Activity/Milestone: Teams shall be given the opportunity to follow up on necessary interventions and should be given	Start date	Ongoing

	the opportunity to be in the office at least weekly to assure resources are identified, appointments made and kept, etc.		
	3 Activity/Milestone: Staff will serve as bridging agents to services. Clients should feel connected to the team who evaluated them, as they will be their support until they are linked to services and seen for an appointment. This team will support them and assist with resources, appointments, etc., until they are linked to ongoing mental health services or other supports and services.		Ongoing
	4 Activity/Milestone: As teams serve as intensive care coordinators, they will also be making linkages to ongoing and needed services for children/youth and families They will make connection with the treatment teams to which they refer and have face to face meetings to transition COTT children/youth and families to ongoing services and supports.		Ongoing
	5 Activity/Milestone: Teams will need to assist with triage of calls and requests each day and intensive care coordination and/or intensive home based services.	Start date	Ongoing
	6 Activity/Milestone: Rotation of duties will offer a balance between the crisis nature of the work and the ability to sustain and establish meaningful relationships and connections to needed services. Allowing for fulfillment and small periods of time outside of a possibly chaotic and urgent crisis environment.		Ongoing
3	Strategy: Parent Partners will be paired as a team with clinical or medical casework staff, on an ongoing rotational basis.	Beg. Date	End Date
	1 Activity/Milestone: Periodic rotation of staff will provide a safe environment for developing strong work relationships, building self-confidence in less experienced staff and modeling and learning the necessary skills desired for COTT members to have.		Ongoing
	2 Activity/Milestone: With different staff pairing as teams and the diversity of staff disciplines, a level of mentoring and training will be realized each day. This		Ongoing

			ultimately will grow the team on both sides of this relationship to provide quality exceptional services.		
			3 Activity/Milestone:	Start date	Ongoing
			With staff pairing as the rotations will, there will be a considerable amount of didactic teaching/learning transpiring. The learning will benefit all members of the team. The ability to teach others as a Parent Partner and to share that perspective and have meaningful input will empower and grow these staff and the team immensely.		
The second			4 Activity/Milestone:	Start date	Ongoing
			The pairing of a clinical staff along with a Parent Partners with lived experience will encourage the team to reflect on the importance of these individuals being a integral part of a clinical team and therapeutic interventions. Not only will this empower the child/ youth or families but will make a dramatic impact on the families in which these Parent Partners work with. It is not easy for families to trust, especially during a crisis. Families are more likely to trust an individual who has walked in their shoes. This will give the team the opportunity to work with and help more children/youth and families.		
		4	Strategy:	Beg. Date	End Date
			Finally, consideration of a four day work week will be entertained, in order to stretch the hours of the team's availability each day, along with offering an extra day off each week for staff self- care.		
			<ol> <li>Activity/Milestone: Staff four-day work weeks, will allow for a great number of clients to be reached each day and for staff to have an additional day to rest and decompress.</li> </ol>		Ongoing
C.	Tra	ainin	g Plan Strategy		
	i.	Lis	specific strategies, activities and milestones		
		1	Strategy: COTT training with community partners	Beg. Date	End Date
Contraction and the second second					

	Activity/Milestone: Develop COTT Kick Off Training curriculum, in collaboration with community partners, in order to fully understand how programs will work together on this project.	07/16/2018	10/01/2018
	Activity/Milestone: 2 Schedule and initiate training, along with community partners, who will train staff on what they do and how programs will collaborate on this project.	September	September
	Activity/Milestone: 3 Ongoing community partner collaboration meetings will take place at the regional level and the SA level. PM Is and supervisors will meet with all partners on a monthly basis for administrative matters and program concerns or adjustments needed. SA partners will meet with their COTTs weekly for case conferencing and collaboration.		At Least Monthly
2	Strategy:	Beg. Date	End Date
	Parent Partners will be participate in the Parent Partner Academy training		
	Activity/Milestone: Complete Parent Partners specific training. They will have an opportunity to focus on training specifically geared toward providing services and supports to the mental health community. This will better help prepare them to work in the mental health field as well as on a field based team, addressing crises. This will provide a comprehensive background and improve the confidence level.		Within Year
3	Strategy:	Beg. Date	End Date
	COTT Training Assessment and training implementation.	non generation of a stational station	
	Activity/Milestone: The staff will all be assessed for being trained in following: Field Safety, Non-Violent Crisis Intervention Techniques, Working with the TAY population and in crisis, Mental Health 101 (non-clinicians),	Start Date	First 120 days

		LPS training (clinical staff), documentation,		
		billing,		1
		Suicide Assessment,		
		Threat Assessment,		
		Risk Assessment,		
		Tarasoff Requirements, Child/Elder Abuse reporting,		
		LPS Legislation,		
		Developmental Disabilities Special Population		
		Considerations,		
		Disaster Management,		
		Psychological First Aid,		
		Critical Incident Intervention, Homeless Outreach Best Practices and		
and the second second		Crisis Intervention.		
A CONTRACT OF				
	2	Activity/Milestone:	Start Data	Circlinat
	2	Supervisors will create a training plan for each	Start Date	First year
		staff member. It is expected supervisors and		1
		managers will schedule trainings and all staff should complete their training plan within their		
		first year with COTT.	(	
	3	Activity/Milestone:	Start Date	First year
		All trainings that can be delivered within the		
		weekly in-service team meeting, as to maximize		
		the efficiency of the team with the majority of their time being scheduled out in the field,		
		working with children/youth and families.		

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#### EXHIBIT B

#### BUDGET DETAIL AND PAYMENT PROVISIONS

#### 1. INVOICING AND PAYMENT

- A. The amount payable by the Commission to the Grantee is specified in Section 5, Payment Schedule.
- B. Grant Award Claim Form (Attachment B.1) shall be submitted no later than the first week after each quarterly reporting period and is subject to the Commission's review and approval before being paid.

#### 2. INSTRUCTION TO THE GRANTEE

A. To expedite the processing of the Grant Award Claim Form submitted to the Commission for fund distribution, Grantee shall submit one original and two copies of each Grant Award Claim Form to the Commission Grant Manager at the following address:

Mental Health Services Oversight and Accountability Commission 1325 J Street, Suite 1700 Sacramento, CA, 95814

#### 3. BUDGET CONTINGENCY CLAUSE

- A. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall no longer be in full force and effect. In this event, the State shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to perform any provisions of this Agreement.
- B. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, the State shall have the option to either cancel this Agreement with no liability occurring to the State, or offer an agreement amendment to Grantee to reflect the reduced amount.
- C. If this contract overlaps federal and State fiscal years, should funds not be appropriated by or approved by the Legislature for the fiscal year(s) following that during which this grant was executed, the State may exercise its option to cancel this grant.

D. In addition, this grant is subject to any additional restrictions, limitations, or conditions enacted by the Legislature which may affect the provisions or terms of funding of this grant in any manner.

#### 4. BUDGET DETAIL

Grantee's Application requested \$29,825,232.00, but due to limited grant funding Grantee was only awarded \$19,489,116. If additional grant funding becomes available during this grant period this Agreement may be amended to provide additional funding. The total amount of this Agreement shall not exceed \$19,489,116. Payment shall be made in accordance with the payment schedule below. The funds used for this Agreement may be used without regard to fiscal year.

#### 5. PAYMENT SCHEDULE

Grantee was approved for a grant cycle that covers three fiscal years (See Attachment B.2 – Budget Worksheet for approved funding amounts), however, only the first two years of the grant are funded. The funds are allocated at the beginning of each fiscal year and payments will be made quarterly. The total amount of payments made in any fiscal year is to not exceed the amounts stated below. For each grant year Grantee may not exceed the total funds allocated for that grant year.

Grant Year Disbursement	Grant Funding
Grant Year 1	\$6,134,286
Grant Year 2	\$7,409,309
Grant Year 3	\$5,945,521
Grant Total	\$19,489,116

#### ATTACHMENT B.1

Investment in Mental Health Wellness Act of 2013 (Children 0-21)
GRANT AWARD CLAIM FORM

Ove 132 Sac	To: Mental Health Services       Check One       Check One         Oversight and Accountability Commission       Year 1 □       Quarter 1 □         1325 J Street, Suite 1700       Year 2 □       Quarter 2 □         Sacramento, CA 95814       Year 3 □       Quarter 3 □         Attn: Accounting Office       Quarter 4 □								
	From: Contract No Mailing Address:								
	Conto	A	 	c	D				
	Costs	A Budget Amount	Beginning Balance	Adjustments		Ending Balance			
	Personnel	Budget Amount		Aujustments					
	Administration								
Tota	Total Allowable Costs \$								
		MHSOAC USE ONLY			R GRANTEE'S USE – Plea				
I hereby certify that all services and required reports have been received pursuant to the contract/grant. X					I CERTIFY that I am a duly appointed and acting officer of the herein named county/lead agency: that the costs being claimed are in all respects true, correct, and in accordance with the grant provisions, and that the funds were expended or obligated during the project year.				
Nam	ne of Signatory			Signature	Signature of Mental Health/Behavioral DATE Health Director or designee/Grant Lead				
Pho	ne			Name of Sig	Name of Signatory				
				Title	Title				
FOR MHSOAC ACCOUNTING USE ONLY			I	GRANTEE'S CONT	ACT INFORMATION				
SFY:         FY 2013-14         FY 20           Grant Title: MHSOAC Triage Grant         FY 2014-15         FY 20           MHSA Grant         FY 2016-17         FY 20			2018-19 🗆 2019-20 🗖	Contact Person (Print)					
		0 OBJECT CODE: 701			Phone				

#### **ATTACHMENT B.2**

MHSOAC Mental Health Triage Personnel Children RFA RFA SB82\_TRIAGE\_003 ATTACHMENT 11 - Budget Worksheet

		CHMENT 11 T WORKSHEE	ET		
County/Applicant: Los Angeles					
Hire Triage Staff (list individual e/classification) (add rows as needed)	(2) Hiring Month	(3) FY 1	(4) FY 2	(5) FY 3	(6) Total All Fi
MH Clinical Supervisor (8)	2	562,187	674,624	674,624	1,911,43
Mental Health Clinician I (18)	2	1,132,143	1,358,572	1,358,572	3,849,28
Medical Case Worker II (26)	2	1,186,926	1,424,311	1,424,311	4,035,54
Community Worker (18)	2	587,978	705,574	705,574	1,999,12
Clinical Psychologist II (11)	2	891,894	1,070,272	1,070,272	3,032,43
Mental Health Psychilatrist (2)	2	383,810	460,572	460,572	1,304,95
Supervising Psychologist (1)	2	84,758	101,710	101,710	288,17
MH Clinical Program Mgr II (2)	2	201,956	242,348	242,348	686,63
Secretary III (2)	2	78,360	94,032	94,032	266,43
Health Program Analyst II (1)	2	72,382	86,860	86,860	246,1
Intermediate Typist Clerk (8)	2	247,042	296,450	296,450	839,9
Training Coordinator (1)	2	70,273	84,328	84,328	238,9
Staff Assistant I (2)	2	79,917	95,900	95,900	271,7
	LI		I,,		
Subtotal - (7) Personal Services Salaries		5,579,626	6,695,553	6,695,553	18,970,73
Add: (B) Personal Services Benefits		2,287,646	2,745,177	2,745,177	7,778,00
(9) Total Personal Services		7,867,272	9,440,730	9,440,730	26,748,7
) Hire Triage Contractors (If applicable, list ividual role/classificaion) (Add rows as needed)	(2) Hiring Month	(11) FY1	(12) FY2	(13) FY3	(6) Total All F
-					
-					
100 Total Contracted Services	اــــــــــــــــــــــــــــــــــــ		- I		
14) Total Contracted Services			-		

#### State of California Mental Health Services Oversight and Accountability Commission (Commission)

MHSOAC Mental Health Triage Personnel Children RFA RFA SB82\_TRIAGE\_003 ATTACHMENT 11 - Budget Worksheet

	TTACHMENT 11 GET WORKSHEE	T		
County/Applicant: Los Angeles				
(16) Administration (includes indirect costs, overhead)	1,180,091	1,416,109	1,416,109	4,012,309
(17) Total Proposed Program Costs	9,047,363	10,856,839	10,856,839	30,761,04
(18) Reimbursements, Offsets, Other Funding Sources County Budget Funds				
Medi-Cal Reimbursements	2,913,077	3,447,530	3,447,530	9,808,13
Private Matching Funds				-
Other (list)				
19) Total Reimbursements, Offsets, Other Funding Sources	2,913,077	3,447,530	3,447,530	9,808,13
(20) Total Grant Funding Requested	6,134,286	7,409,309	7,409,309	20,952,904
(10) Foral draft Farlanding Reducated				
MHSOAC - Adjustment for Available Funds			(1,463,788)	{1,463,78

Page 2 of 2



Los Angeles County DEPARTMENT OF MENTAL HEALTH JONATHAN E. SHERIN, M.D., Ph.D. DIRECTOR

June 7, 2018

- TO: Supervisor Sheila Kuehl, Chair Supervisor Hilda L. Solis Supervisor Mark Ridley-Thomas Supervisor Janice Hahn Supervisor Kathryn Barger
- FROM: Jonathan E. Sherin, M.D. Ph.D. Director
- SUBJECT: GRANT MANAGEMENT STATEMENT FOR THE STATE OF CALIFORNIA, MENTAL HEALTH OVERSIGHT AND ACCOUNTABILITY COMMISSION AWARD FOR SB 82 INVESTMENT IN MENTAL HEALTH WELLNESS ACT OF 2013 ROUND 2 ADULT TRIAGE GRANT FOR FISCAL YEARS 2018-19 THROUGH 2020-21

Enclosed is the Grant Management Statement for the State of California (State), Mental Health Services Oversight and Accountability Commission (MHSOAC), Award for the Senate Bill (SB) 82 Investment in Mental Health Wellness Act of 2013 Round 2 Adult Triage Grant for Fiscal Years 2018-19 through 2020-21. The total MHSOAC Adult Triage Grant award is \$24,877,879 for a grant cycle that covers three fiscal years with funds allocated annually at the beginning of each fiscal year.

Los Angeles County Department of Mental Health accepted grant funds from the State MHSOAC to fund 96 Mental Health triage personnel to provide a range triage services to persons experiencing mental illness requiring crisis intervention. Triage personnel may provide targeted case management services face to face, by telephone, or by telehealth. The addition of these positions will allow DMH to enhance its current triage and targeted case management crisis intervention services.

Each Supervisor June 7, 2018 Page 2

The State MHSOAC Adult Triage Grant Agreement includes an indemnification clause requiring the County (Grantee) to hold the State harmless against any and all claims related to the award and in performance of the Agreement. This State indemnification provision is not uncommon and I have been advised by CEO Risk Management and County Counsel of the risks associated with this provision. I believe these risks are acceptable in light of the need for the services and the resulting benefit to public health.

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#### JES:GP:MB:SK:pd

Enclosure

c: Executive Office, Board of Supervisors Chief Executive Office County Counsel Gregory Polk Miriam Brown Stella Krikorian Kimberly Nall

ATTACHMENT III -A

# Los Angeles County Chief Executive Office

#### Grant Management Statement for Grants \$100,000 or More

Department: Mental Health

**Grant Project Title and Description:** STATE OF CALIFORNIA, MENTAL HEALTH OVERSIGHT AND ACCOUNTABILITY COMMISSION AWARD FOR SB 82 INVESTMENT IN MENTAL HEALTH WELLNESS ACT OF 2013 ROUND 2 ADULT TRIAGE GRANT FOR FISCAL YEARS 2018-19 TO 2020-21

The purpose of the State MHSOAC grant is to allow DMH to hire 96 FTE Mental Health staff to provide Adult Outreach and Triage services.

Funding Agency	Program (Fed. Grant #/State Bill o	r Code #)	Grant Accep	otance Dea	dline	
Initial Agency     MHSOAC Agreement No.       Initial Agency     Initial Agency       Initial Agency     Initial Agency			June 30, 2018			
<b>Total Amount of Grant</b> \$7,763,261, Fiscal Year \$8,557,309 FY 2019-20 \$8,557,309 FY 2020-21		County	Match:			
Grant Period: July 1, 20		ite: 07/1/2		ate: 06/30/	/2021	
Number of Personnel H	ired Under This Grant: Full Tin	ie: 96 FTI	E Part T	'ime: N/A		
<u>Ot</u>	ligations Imposed on the County	When the	e Grant Expire	<u>s</u>		
	or this program be informed this is a gr			Yes <u>X</u>	No	
Will all personnel hired for	or this program be placed on temporary	("N") item	ns?	Yes_X_	No	
Is the County obligated to	continue this program after the grant e	xpires?	- Y	Yes	No_X_	
Department will:	nted to continue this program after the g	grant expire	es, the			
a.) Absorb the program cost without reducing other services					No <u>X</u>	
b.) Identify other revenue The Department will explo funds available.	sources (describe below) ore all sources of potential or new fund	ng if there	are no existing	Yes_ <u>X</u> _	No	
c.) Eliminate or reduce, as	appropriate, positions/program costs f	unded by th	he grant.	Yes_X_	No	
Impact of additional p	ersonnel on existing space:					
96 FTE initially requested will be housed at existing facilities.						
Other requirements no	ot mentioned above:					
Department Hea Date:	d Signature:					



Los Angeles County DEPARTMENT OF MENTAL HEALTH JONATHAN E. SHERIN, M.D., Ph.D. DIRECTOR

June 7, 2018

TO: Supervisor Sheila Kuehl, Chair Supervisor Hilda L. Solis Supervisor Mark Ridley-Thomas Supervisor Janice Hahn Supervisor Kathryn Barger

Jonathan E. Sherin, M.D., Ph.D. FROM: Director

SUBJECT: GRANT MANAGEMENT STATEMENT FOR THE STATE OF CALIFORNIA, MENTAL HEALTH OVERSIGHT AND ACCOUNTABILITY COMMISSION AWARD FOR SB 82 INVESTMENT IN MENTAL HEALTH WELLNESS ACT OF 2013 ROUND 2 CHILD TRIAGE GRANT FOR FISCAL YEARS 2018-19 THROUGH 2020-21

Enclosed is the Grant Management Statement for the State of California (State), Mental Health Services Oversight and Accountability Commission (MHSOAC), Award for the Senate Bill (SB) 82 Investment in Mental Health Wellness Act of 2013 Round 2 Adult Child Grant for Fiscal Years 2018-19 through 2020-21. The total MHSOAC Child Triage Grant award is \$19,489,116 for a grant cycle that covers three fiscal years with funds allocated annually at the beginning of each fiscal year.

Los Angeles County Department of Mental Health accepted grant funds from the State MHSOAC to fund 100 Mental Health triage personnel to provide a range triage services to children and youth requiring crisis intervention. Triage personnel may provide targeted case management services face to face, by telephone, or by tele-health. The addition of these positions will allow DMH to enhance its current triage and targeted case management, crisis intervention services.

Each Supervisor June 7, 2018 Page 2

The State MHSOAC Child Triage Grant Agreement includes an indemnification clause requiring the County (Grantee) to hold the State harmless against any and all claims related to the award and in performance of the Agreement. This State indemnification provision is not uncommon and I have been advised by CEO Risk Management and County Counsel of the risks associated with this provision. I believe these risks are acceptable in light of the need for the services and the resulting benefit to public health.

#### JES:GP:MB:SK:pd

Enclosure

c: Executive Office, Board of Supervisors Chief Executive Office County Counsel Gregory Polk Miriam Brown Stella Krikorian Kimberly Nall

ATTACHMENT IV - A

# Los Angeles County Chief Executive Office

### Grant Management Statement for Grants \$100,000 or More

Department: Mental Health

**Grant Project Title and Description:** STATE OF CALIFORNIA, MENTAL HEALTH OVERSIGHT AND ACCOUNTABILITY COMMISSION AWARD FOR SB 82 INVESTMENT IN MENTAL HEALTH WELLNESS ACT OF 2013 ROUND 2 CHILD TRIAGE GRANT FOR FISCAL YEARS 2018-19 TO 2020-21

The purpose of the State MHSOAC grant is to allow DMH to hire 100 FTE Mental Health staff to provide Child Outreach and Triage services.

Funding Agency MHSOAC	Program (Fed. Grant # MHSOAC Agreeme 17MHSOAC061		Grant Acceptance Deadline June 30, 2018
<b>Total Amount of Gran</b> \$6,134,286, Fiscal Yea \$7,409,309 FY 2019-20 \$5,945,521 FY 2020-21	)	Cou	nty Match:
Grant Period: July 1.	2018-June 30, 2021	Begin Date: 07/	1/2018 End Date: 06/30/2021

Number of Personnel Hired Under This Grant:	Full Time: 100 FTE	Part Time: N/A

<b>Obligations Imposed on the County When the Grant Expire</b>	<u>'S</u>	
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 <u>X</u>
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 <u>X</u>	No
c.) Eliminate or reduce, as appropriate, positions/program costs funded by the grant.	Yes <u>X</u>	No
Impact of additional personnel on existing space:		
100 FTE initially requested will be housed at existing facilities.		
Other requirements not mentioned above:		

AS/

Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_